

TAX RETURN FILING INSTRUCTIONS

FORM 990

FOR THE YEAR ENDING
DECEMBER 31, 2008

Prepared for	THE OHIO STATE BAR FOUNDATION 1700 LAKE SHORE DR., P.O. BOX 16562 COLUMBUS, OH 43216-6562
Prepared by	REA & ASSOCIATES INC, CPA'S 5775 PERIMETER DRIVE - SUITE 200 DUBLIN, OHIO 43017-3224
Amount due or refund	NOT APPLICABLE
Make check payable to	NOT APPLICABLE
Mail tax return and check (if applicable) to	NOT APPLICABLE
Return must be mailed on or before	NOT APPLICABLE
Special Instructions	THIS RETURN HAS QUALIFIED FOR ELECTRONIC FILING. AFTER YOU HAVE REVIEWED THE RETURN FOR COMPLETENESS AND ACCURACY, PLEASE SIGN FORM 8879-EO AND CONTACT OUR OFFICE TO CONFIRM THAT THIS RETURN CAN BE FILED ELECTRONICALLY. DO NOT MAIL A PAPER COPY OF THE RETURN TO THE IRS.

Return of Organization Exempt From Income Tax
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Department of the Treasury
 Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2008 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization THE OHIO STATE BAR FOUNDATION Doing Business As		D Employer identification number 31-6054093
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite 1700 LAKE SHORE DR., P.O. BOX 16562		E Telephone number 614-487-4444
		City or town, state or country, and ZIP + 4 COLUMBUS, OH 43216-6562		G Gross receipts \$ 11,978,226.
		F Name and address of principal officer: STEPHEN E. CHAPPELEAR 1700 LAKE SHORE DRIVE, COLUMBUS, OH 43204		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶

I Tax-exempt status: 501(c) (3) (insert no.) 4947(a)(1) or 527

J Website: ▶ WWW.OSBF.NET

K Type of organization: Corporation Trust Association Other ▶

L Year of formation: 1951 **M State of legal domicile:** OH

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: PROMOTING PUBLIC UNDERSTANDING OF THE LAW AND IMPROVEMENTS IN THE JUSTICE SYSTEM THROUGHOUT OHIO.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	18
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	18
	5 Total number of employees (Part V, line 2a)	5	7
	6 Total number of volunteers (estimate if necessary)	6	94
	7a Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	0.
b Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	176,660.	92,756.
	9 Program service revenue (Part VIII, line 2g)	8,318.	3,500.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,056,340.	1,773,260.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,241,318.	1,869,516.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	398,684.	257,172.
	14 Benefits paid to or for members (Part IX, column (A), line 4)		
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	391,847.	389,078.
	16a Professional fundraising fees (Part IX, column (A), line 11e)		
	b Total fundraising expenses (Part IX, column (D), line 25) ▶		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	206,592.	597,066.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	997,123.	1,243,316.
19 Revenue less expenses. Subtract line 18 from line 12	1,244,195.	626,200.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Year 31,835,886.	End of Year 26,604,380.
	21 Total liabilities (Part X, line 26)	486,862.	293,592.
	22 Net assets or fund balances. Subtract line 21 from line 20	31,349,024.	26,310,788.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here ▶ Signature of officer _____ Date _____
 ▶ **STEPHEN E. CHAPPELEAR, PRESIDENT**
 Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶	Date	Check if self-employed <input type="checkbox"/>	Preparer's identifying number (see instructions)
Firm's name (or yours if self-employed), address, and ZIP + 4 ▶	EIN ▶		Phone no. ▶ (614) 889-8725

REA & ASSOCIATES INC, CPA'S
 5775 PERIMETER DRIVE - SUITE 200
 DUBLIN, OHIO 43017-3224

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission: SEE SCHEDULE O FOR CONTINUATION THE OHIO STATE BAR FOUNDATION IS A MEMBERSHIP ORGANIZATION OF ATTORNEYS AND JUDGES, DEDICATED TO THE MISSION OF PROMOTING PUBLIC UNDERSTANDING OF THE LAW AND IMPROVEMENTS IN THE JUSTICE SYSTEM THROUGHOUT OHIO. THE OHIO STATE BAR FOUNDATION IS A NOT-FOR-PROFIT

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No If "Yes", describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No If "Yes", describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

SEE SCHEDULE O FOR CONTINUATION(S)

4a (Code:) (Expenses \$ 525,377. including grants of \$ 257,172.) (Revenue \$) THE OHIO STATE BAR FOUNDATION FULFILLS ITS MISSION OF PROMOTING PUBLIC UNDERSTANDING OF THE LAW AND IMPROVEMENTS IN THE JUSTICE SYSTEM THROUGHOUT OHIO THROUGH GRANTS TO ORGANIZATIONS AND PROGRAMS THAT ADVANCE THAT MISSION; THROUGH PROGRAMS DEVELOPED BY ITS VOLUNTEERS INCLUDING THE CREATION AND DISTRIBUTION OF A CURRICULUM FOR COLLEGE JOURNALISM STUDENTS TO TEACH THE BASICS OF REPORTING ON THE LEGAL SYSTEM; AN ONLINE LEGAL INFORMATION SOURCE (OLIS) THAT CATALOGUES RESOURCES IN OHIO THAT CONTRIBUTE TO OUR MISSION; A BOOK FOR ELEMENTARY STUDENTS TEACHING THE BASICS OF THE LEGAL SYSTEM; A PUBLIC SERVICE CAMPAIGN DESIGNED TO INCREASE AWARENESS AND UTILIZATION OF ADVANCE DIRECTIVES FOR HEALTH CARE; A MENTORING TOOL TO ASSIST INDIVIDUALS WORKING WITH YOUTH IN AN EFFORT TO MITIGATE BEHAVIORS LIKELY TO RESULT

4b (Code:) (Expenses \$ 400,234. including grants of \$ 0.) (Revenue \$) THE FOUNDATION DEVELOPS AND PRESENTS PROGRAMS DESIGNED TO PROMOTE PUBLIC UNDERSTANDING OF THE LAW AND IMPROVEMENT IN THE JUSTICE SYSTEM THROUGHOUT OHIO. FOUNDATION VOLUNTEERS PROVIDE A SIGNIFICANT PORTION OF THE HUMAN RESOURCES FOR THIS PROCESS. IN 2008, THE FOUNDATION COMPLETED, CONTINUED, AND LAUNCHED SEVERAL DIFFERENT PROJECTS. THESE PROJECTS INCLUDED THE COMPLETION OF THE FELLOWS CLASS OF 2006 PROJECT, "KEYS TO THE COURTROOM" AND CONTINUATION OF THE FELLOWS CLASS OF 2007 PROJECT, "KNOWLEDGE IS POWER: MAGNIFYING RIGHTS, RESPONSIBILITIES, AND RESOURCES FOR FOSTER YOUTH." THE "KEYS TO THE COURTROOM" HELPED CREATE A RESOURCE NOT ONLY FOR INDIVIDUALS WHO CHOOSE TO REPRESENT THEMSELVES IN THE COURT SYSTEM, BUT ALSO A RESOURCE FOR JUDGES AND LAWYERS TO DEAL MORE EFFECTIVELY WITH THOSE WHO REPRESENT THEMSELVES. THE "KNOWLEDGE

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses \$ 925,611. (Must equal Part IX, Line 25, column (B).)

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	<input checked="" type="checkbox"/>	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	<input checked="" type="checkbox"/>	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		<input checked="" type="checkbox"/>
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>		<input checked="" type="checkbox"/>
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>		
6 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		<input checked="" type="checkbox"/>
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		<input checked="" type="checkbox"/>
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		<input checked="" type="checkbox"/>
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		<input checked="" type="checkbox"/>
10 Did the organization hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	<input checked="" type="checkbox"/>	
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? <i>If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	<input checked="" type="checkbox"/>	
12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	<input checked="" type="checkbox"/>	
13 Is the organization a school as described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		<input checked="" type="checkbox"/>
14a Did the organization maintain an office, employees, or agents outside of the U.S.?		<input checked="" type="checkbox"/>
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? <i>If "Yes," complete Schedule F, Part I</i>		<input checked="" type="checkbox"/>
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>		<input checked="" type="checkbox"/>
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>		<input checked="" type="checkbox"/>
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I</i>		<input checked="" type="checkbox"/>
18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		<input checked="" type="checkbox"/>
19 Did the organization report more than \$15,000 on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		<input checked="" type="checkbox"/>
20 Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		<input checked="" type="checkbox"/>
21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	<input checked="" type="checkbox"/>	
22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		<input checked="" type="checkbox"/>
23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? <i>If "Yes," complete Schedule J</i>	<input checked="" type="checkbox"/>	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25</i>		<input checked="" type="checkbox"/>
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		<input checked="" type="checkbox"/>
b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? <i>If "Yes," complete Schedule L, Part I</i>		<input checked="" type="checkbox"/>
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>		<input checked="" type="checkbox"/>
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>		<input checked="" type="checkbox"/>

Part IV Checklist of Required Schedules (continued)

		Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		
a	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If "Yes," complete Schedule L, Part IV</i>		X
b	Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i>		X
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If "Yes," complete Schedule L, Part IV</i>		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	X	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	X	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X

Form 990 (2008)

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		
	1a	1	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
	1b	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a	7	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
5c			
6a	Did the organization solicit any contributions that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
6b			
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7c			
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7e			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7f			
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		X
7g			
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		X
7h			
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
8			
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		
9a			
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
9b			
10	Section 501(c)(7) organizations. Enter: N/A		
a	Initiation fees and capital contributions included on Part VIII, line 12		
10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
10b			
11	Section 501(c)(12) organizations. Enter: N/A		
a	Gross income from members or shareholders		
11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A		
12b			

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

		Yes	No
1a	Enter the number of voting members of the governing body		
1b	Enter the number of voting members that are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?		X
6	Does the organization have members or stockholders?	X	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	X	
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	The governing body?	X	
8b	Each committee with authority to act on behalf of the governing body?	X	
9a	Does the organization have local chapters, branches, or affiliates?		X
9b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	X	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

Section B. Policies

		Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
12b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
13	Does the organization have a written whistleblower policy?	X	
14	Does the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:		
15a	The organization's CEO, Executive Director, or top management official?	X	
15b	Other officers or key employees of the organization?		X
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
16b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed ► OH
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
 Own website Another's website Upon request
- 19** Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ►
THE ORGANIZATION - 614-487-4444
1700 LAKE SHORE DRIVE, COLUMBUS, OH 43204

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if the organization did not compensate any officer, director, trustee, or key employee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
REGINALD S. JACKSON JR. PRESIDENT	2.00	X		X			0.	0.	0.	
STEPHEN E. CHAPPELEAR PRESIDENT-ELECT	2.00	X		X			0.	0.	0.	
PAULA L. BROOKS IMMEDIATE PAST PRESIDENT	2.00	X		X			0.	0.	0.	
ROBERT F. WARE OFFICER'S SERVING EX-OFF	1.00	X					0.	0.	0.	
GARY J. LEPPLA OFFICER'S SERVING EX-OFF	1.00	X					0.	0.	0.	
JOHN C. MERCHANT TRUSTEE	1.00	X					0.	0.	0.	
STEPHEN F. TILSON TRUSTEE	1.00	X					0.	0.	0.	
E. JANE TAYLOR TRUSTEE	1.00	X					0.	0.	0.	
DAVID B. BENNETT TRUSTEE	1.00	X					0.	0.	0.	
KEITH A. ASHMUS TRUSTEE	1.00	X					0.	0.	0.	
HEATHER G. SOWALD TRUSTEE	1.00	X					0.	0.	0.	
PROF. JOSEPH P. TOMAIN TRUSTEE	1.00	X					0.	0.	0.	
SANDRA J. ANDERSON TRUSTEE	1.00	X					0.	0.	0.	
THOMAS D. LAMMERS TRUSTEE	1.00	X					0.	0.	0.	
FREDERICK L. OREMUS TRUSTEE	1.00	X					0.	0.	0.	
JOHN S. STITH TRUSTEE	1.00	X					0.	0.	0.	
RET. HON. SUMNER E. WALT TRUSTEE	1.00	X					0.	0.	0.	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
WILLIAM K. WIESENBERG TRUSTEE	1.00	X					0.	211,190.	39,265.	
LINDA L. THOMPSON KOHLI EXECUTIVE DIRECTOR/CORPO	40.00			X			123,951.	0.	23,662.	
DENNY L. RAMEY TREASURER	2.00			X			0.	467,863.	18,429.	
1b Total							123,951.	679,053.	81,356.	

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization 1

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. **NONE**

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization 0

Part VIII		Statement of Revenue		(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1 a	Federated campaigns	1a					
	b	Membership dues	1b	44,214.				
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	48,542.				
	g	Noncash contributions included in lines 1a-1f: \$						
	h	Total. Add lines 1a-1f		92,756.				
	Program Service Revenue	2 a	ANNUAL DINNER	Business Code	900099	3,500.	3,500.	
b								
c								
d								
e								
f		All other program service revenue						
g		Total. Add lines 2a-2f			3,500.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)			969,598.		969,598.	
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties						
	6 a			(i) Real				
				(ii) Personal				
		Gross Rents						
		Less: rental expenses						
	c	Rental income or (loss)						
	d	Net rental income or (loss)						
	7 a			(i) Securities				
				(ii) Other				
		Gross amount from sales of assets other than inventory			10,912,372.			
		Less: cost or other basis and sales expenses			10,108,710.			
	c	Gain or (loss)			803,662.			
	d	Net gain or (loss)			803,662.	803,662.		
	8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18		a				
	b	Less: direct expenses		b				
c	Net income or (loss) from fundraising events							
9 a	Gross income from gaming activities. See Part IV, line 19		a					
	Less: direct expenses		b					
	Net income or (loss) from gaming activities							
10 a	Gross sales of inventory, less returns and allowances		a					
	Less: cost of goods sold		b					
	Net income or (loss) from sales of inventory							
Miscellaneous Revenue			Business Code					
11 a								
b								
c								
d	All other revenue							
e	Total. Add lines 11a-11d							
12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e			1869516.	807,162.	0.	969,598.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	257,172.	257,172.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	147,613.	115,876.	31,737.	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	188,583.	156,624.	31,959.	
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	21,500.	17,984.	3,516.	
9 Other employee benefits	9,549.	7,892.	1,657.	
10 Payroll taxes	21,833.	17,739.	4,094.	
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	13,950.	11,334.	2,616.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	106,510.		106,510.	
g Other	36,816.	29,912.	6,904.	
12 Advertising and promotion	80,712.	40,356.	40,356.	
13 Office expenses	61,525.	49,987.	11,538.	
14 Information technology	5,351.	4,347.	1,004.	
15 Royalties				
16 Occupancy	6,854.	5,569.	1,285.	
17 Travel	17,001.	13,813.	3,188.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	6,633.		6,633.	
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a MARKET RESEARCH PLAN	115,926.	57,963.	57,963.	0.
b CLASS PROJECTS	57,942.	57,942.	0.	0.
c TRUSTEE EXPENSES	32,157.	26,127.	6,030.	0.
d MISSION OPPORTUNITIES F	13,613.	13,613.	0.	0.
e TERM, RESIGN. & DECEASE	11,325.	11,325.	0.	0.
f All other expenses	30,751.	30,036.	715.	
25 Total functional expenses. Add lines 1 through 24f	1,243,316.	925,611.	317,705.	0.
26 Joint Costs. Check here <input checked="" type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation ...				

Part X Balance Sheet

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash - non-interest-bearing	10,636.	1	179,330.
	2 Savings and temporary cash investments	1,443,382.	2	1,072,351.
	3 Pledges and grants receivable, net	342,867.	3	283,881.
	4 Accounts receivable, net		4	
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	13,553.	8	13,553.
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost basis ...	10a		
	b Less: accumulated depreciation. Complete Part VI of Schedule D	10b	10c	
	11 Investments - publicly traded securities	29,831,759.	11	24,893,281.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	193,689.	15	161,984.
16 Total assets. Add lines 1 through 15 (must equal line 34)	31,835,886.	16	26,604,380.	
Liabilities	17 Accounts payable and accrued expenses	8,463.	17	26,946.
	18 Grants payable	378,399.	18	266,646.
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable		24	
	25 Other liabilities. Complete Part X of Schedule D	100,000.	25	0.
	26 Total liabilities. Add lines 17 through 25	486,862.	26	293,592.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	31,298,010.	27	26,258,840.
	28 Temporarily restricted net assets	38,464.	28	38,898.
	29 Permanently restricted net assets	12,550.	29	13,050.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	31,349,024.	33	26,310,788.	
34 Total liabilities and net assets/fund balances	31,835,886.	34	26,604,380.	

Part XI Financial Statements and Reporting

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		X
b Were the organization's financial statements audited by an independent accountant?	X	
c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	X	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
b If "Yes," did the organization undergo the required audit or audits?		

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Name of the organization **THE OHIO STATE BAR FOUNDATION** Employer identification number **31-6054093**

Part I Reason for Public Charity Status (All organizations must complete this part.) (see instructions)

The organization is not a private foundation because it is: (Please check only **one** organization.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**. (Attach Schedule H.)
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete the Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**. (see instructions)
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III - Functionally integrated d Type III - Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?		<input checked="" type="checkbox"/>
(ii) A family member of a person described in (i) above?		<input checked="" type="checkbox"/>
(iii) A 35% controlled entity of a person described in (i) or (ii) above?		<input checked="" type="checkbox"/>
- h Provide the following information about the organizations the organization supports.

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
OHIO STATE BAR ASSOCIATION	31-4271520	501(C)(6)	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		161,435.
Total									161,435.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule A (Form 990 or 990-EZ) 2008

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge ...						
4 Total. Add lines 1 - 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public Support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources ...						
9 Net income from unrelated business activities, whether or not the business is regularly carried on ...						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14		%
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15		%
16a 33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>	
b 33 1/3% support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>	
17a 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>	
b 10% -facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>	

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge ...						
6 Total. Add lines 1 - 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources ...						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	%

19a 33 1/3% support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule B
(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, 990-EZ, and 990-PF.

OMB No. 1545-0047

2008

Name of the organization

THE OHIO STATE BAR FOUNDATION

Employer identification number

31-6054093

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. (Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.)

General Rule

For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on Form 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.) ▶ \$ _____

Caution. Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** answer "No" on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. These instructions will be issued separately.

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

Name of organization THE OHIO STATE BAR FOUNDATION	Employer identification number 31-6054093
--	---

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	THE GEORGE W. & MARY F. RITTER CHARITABLE TRUST THREE SEAGATE TOLEDO, OH 43699	\$ 35,492.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	_____ _____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	_____ _____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	_____ _____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	_____ _____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	_____ _____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	_____ _____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Schedule D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ **Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.**

OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization

THE OHIO STATE BAR FOUNDATION

Employer identification number

31-6054093

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <input type="checkbox"/> Yes <input type="checkbox"/> No		
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area
 Protection of natural habitat Preservation of certified historic structure
 Preservation of open space

2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Yes No

6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.
- b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- (i) Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____
- (ii) Assets included in Form 990, Part X ▶ \$ _____
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:
- a Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____
- b Assets included in Form 990, Part X ▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other _____
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIV and complete the following table:
- | | Amount |
|--|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a** Did the organization include an amount on Form 990, Part X, line 21? Yes No
- b** If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	276,211.				
b Contributions	63,707.				
c Investment earnings or losses	2,840.				
d Grants or scholarships					
e Other expenditures for facilities and programs	21,003.				
f Administrative expenses					
g End of year balance	321,755.				

- 2** Provide the estimated percentage of the year end balance held as:
- a** Board designated or quasi-endowment **▶ 95.94 %**
 - b** Permanent endowment **▶ 4.06 %**
 - c** Term endowment **▶ _____ %**
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|------------------------------------|--------------------------|-------------------------------------|
| (i) unrelated organizations | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (ii) related organizations | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
- b** If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? Yes No
- 4** Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				
Total. Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				0.

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

Table with 3 columns: (a) Description of security or category, (b) Book value, (c) Method of valuation. Rows include Financial derivatives and other financial products, Closely-held equity interests, and Other.

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

Table with 3 columns: (a) Description of investment type, (b) Book value, (c) Method of valuation. Includes a Total row at the bottom.

Part IX Other Assets. See Form 990, Part X, line 15.

Table with 2 columns: (a) Description, (b) Book value. Includes a Total row at the bottom.

Part X Other Liabilities. See Form 990, Part X, line 25.

Table with 2 columns: (a) Description of liability, (b) Amount. Includes a Total row at the bottom.

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,869,516.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,243,316.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	626,200.
4	Net unrealized gains (losses) on investments	4	-5,664,436.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net). Add lines 4-8	9	-5,664,436.
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-5,038,236.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	-3,672,529.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	-5,664,436.
b	Donated services and use of facilities	2b	228,900.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	-5,435,536.
3	Subtract line 2e from line 1	3	1,763,007.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	106,509.
c	Add lines 4a and 4b	4c	106,509.
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	5	1,869,516.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	1,365,706.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	228,900.
b	Prior year adjustments	2b	
c	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	228,900.
3	Subtract line 2e from line 1	3	1,136,806.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	106,510.
c	Add lines 4a and 4b	4c	106,510.
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	5	1,243,316.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.

PART V, LINE 4: THE ORGANIZATION HAS TWO BOARD DESIGNATED FUNDS, THREE

TEMPORARILY RESTRICTED FUNDS, AND ONE PERMANENTLY RESTRICTED FUND. THE

BOARD DESIGNATED FUNDS INCLUDE THE FUND DESIGNATED FOR THE MISSION

OPPORTUNITIES FUND AND THE FUND DESIGNATED FOR RENT. THE TEMPORARILY

RESTRICTED FUNDS INCLUDE THE BRADLEY J. SCHAEFFER MEMORIAL FUND,

CONTINUING LEGAL EDUCATION (CLE) FUND, AND THE HURRICANE KATRINA LEGAL

RELIEF FUND. THE PERMANENTLY RESTRICTED FUND IS COMPRISED OF THE FRIENDS

AND NEIGHBORS ENDOWMENT (FANE) FUND.

Part XIV Supplemental Information (continued)

DESIGNATED FOR THE MISSION OPPORTUNITIES FUND: IN 2005, THE BOARD OF TRUSTEES ESTABLISHED THE MISSION OPPORTUNITIES FUND. THE BOARD RECOGNIZES THAT FROM TIME TO TIME, MARKET CONDITIONS MAY BE SUCH THAT IT IS FEASIBLE TO CONSIDER A PORTION OF CAPITAL APPRECIATION OF THE INVESTMENT FUND AS AVAILABLE MONIES FOR MISSION RELATED PURPOSES. THEREFORE, THE FUND WAS DEVELOPED IN ORDER TO PROVIDE A PREDICTABLE FORMULA TO CALCULATE A PORTION OF ANNUAL CAPITAL APPRECIATION TO BE UTILIZED TO ADVANCE THE MISSION, THROUGH ADDITIONAL SUPPORT FOR GRANTS AND PROGRAMS.

DESIGNATED FOR RENT: UNDER A THREE PARTY AGREEMENT AMONG THE OHIO STATE BAR FOUNDATION, THE OHIO STATE BAR ASSOCIATION, AND THE OHIO STATE UNIVERSITY, THE FOUNDATION OWNED A PORTION OF THE FEE IN THE OHIO LEGAL CENTER BUILDING. THE FOUNDATION RAISED A PORTION OF THE FUNDS FOR THE CONSTRUCTION OF THAT BUILDING. AS COMPENSATION FOR ITS RIGHT OF POSSESSION OF THE OHIO LEGAL CENTER, THE FOUNDATION RECEIVED \$153,000 FROM THE OHIO STATE UNIVERSITY AND THE RIGHT TO OCCUPY A PORTION OF THE NEW OHIO STATE BAR ASSOCIATION BUILDING FOR AS LONG AS THE OHIO STATE BAR ASSOCIATION OCCUPIES SUCH BUILDING. THE AMOUNT RECEIVED FROM THE OHIO STATE UNIVERSITY WAS DEPOSITED IN AN INTEREST BEARING ACCOUNT, THE INTEREST OF WHICH IS TO BE PAID TO THE OHIO STATE BAR ASSOCIATION IN CONSIDERATION OF THE FOUNDATION'S RIGHT TO OCCUPY SPACE.

BRADLEY J. SCHAEFFER MEMORIAL FUND: THE BRADLEY J. SCHAEFFER MEMORIAL FUND WAS ESTABLISHED TO PERPETUATE THE MEMORY OF BRADLEY J. SCHAEFFER, A LAUREATE OF THE FOUNDATION, BECAUSE OF THE SIGNIFICANT CONTRIBUTIONS HE MADE IN REAL PROPERTY LAW PRACTICE IN THE STATE OF OHIO. IN 2001, THE BOARD RESOLVED TO CONTINUE TO MAINTAIN THE FUND, MAKING AN APPROPRIATE

Part XIV Supplemental Information (continued)

PORTION OF THE FUND AVAILABLE TO THE REAL PROPERTY SECTION OF THE OHIO STATE BAR ASSOCIATION FOR THE PURPOSE OF ASSISTING THAT SECTION IN SPONSORING AND PRESENTING AN ANNUAL PROGRAM, TO BE KNOWN AS "THE BRADLEY J. SCHAEFFER REAL PROPERTY INSTITUTE."

CONTINUING LEGAL EDUCATION (CLE) FUND: THE CLE FUND IS RESTRICTED FOR SPECIAL CONTINUING LEGAL EDUCATION ACTIVITIES, AND IS INTENDED TO BE DISPERSED WITHIN 15 YEARS OF THE ESTABLISHMENT OF THE FUND, WHICH OCCURRED IN 1999. IF ANY MONIES REMAIN IN THE FUND AS OF FEBRUARY 2014, THE OHIO STATE BAR FOUNDATION AND THE OHIO STATE BAR ASSOCIATION MAY DETERMINE TO EITHER CONTINUE THE FUND, OR TO TERMINATE THE FUND WITH THE REMAINING BALANCE CONVERTING TO AN UNRESTRICTED ASSET OF THE FOUNDATION.

HURRICANE KATRINA LEGAL RELIEF FUND: ON SEPTEMBER 8, 2005, THE BOARD OF TRUSTEES OF THE OHIO STATE BAR FOUNDATION ESTABLISHED THE HURRICANE KATRINA LEGAL RELIEF FUND, TO HELP RE-ESTABLISH THE LEGAL INFRASTRUCTURES OF ALABAMA, LOUISIANA, AND MISSISSIPPI, AND TO HELP MEET THE LEGAL NEEDS OF CITIZENS AFFECTED BY THIS TRAGEDY.

FRIENDS AND NEIGHBORS ENDOWMENT (FANE) FUND: THE FANE FUND WAS ESTABLISHED IN 2005 BY THE FAMILY OF LINDA THOMPSON KOHLI, IN RECOGNITION OF HER 10 YEARS AS EXECUTIVE DIRECTOR OF THE FOUNDATION. THE INVESTMENT INCOME EARNED ON THIS FUND WILL BE USED TO FUND FOUNDATION PROGRAMS.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

INVESTMENT FEES NETTED AGAINST INVESTMENT INCOME ON FINANCIAL STATEMENTS: 106509.

Part XIV Supplemental Information (continued)

PART XIII, LINE 4B - OTHER ADJUSTMENTS:

INVESTMENT FEES NETTED AGAINST INVESTMENT INCOME ON FINANCIAL STATEMENTS: 106510.

FIN 48 ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES:

THE FINANCIAL ACCOUNTING STANDARDS BOARD HAS ISSUED FSP FIN 48-3, EFFECTIVE DATE OF FASB INTERPRETATION NO. 48 FOR CERTAIN NONPUBLIC ENTERPRISES. THIS FSP DEFERS THE EFFECTIVE DATE OF FIN 48, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, FOR CERTAIN NONPUBLIC ENTERPRISES, INCLUDING NONPUBLIC NOT-FOR-PROFIT ORGANIZATIONS, UNTIL ANNUAL FINANCIAL STATEMENTS FOR FISCAL YEARS BEGINNING AFTER DECEMBER 15, 2008. THE DELAYED EFFECTIVE DATE IS INTENDED TO GIVE THE FASB ADDITIONAL TIME TO AMEND THE DISCLOSURE REQUIREMENTS OF FIN 48 FOR NONPUBLIC ENTERPRISES AND NON-PROFIT ORGANIZATIONS TO DEVELOP GUIDANCE ON THE APPLICATION OF FIN 48. THE FOUNDATION HAS ELECTED TO DEFER ADOPTION OF FIN 48 UNTIL JANUARY 1, 2009. MANAGEMENT IS CURRENTLY ASSESSING THE IMPACT OF FIN 48 ADOPTION.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the U.S.**

▶ **Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.**
▶ **Attach to Form 990.**

OMB No. 1545-0047

2008

**Open to Public
Inspection**

Name of the organization

THE OHIO STATE BAR FOUNDATION

Employer identification number

31-6054093

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ...

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OHIO STATE BAR ASSOCIATION 1700 LAKE SHORE DRIVE COLUMBUS, OH 43216	31-4271520	501(C)(6)	161,435.	0.			THE ORGANIZATION PROVIDED SEVERAL DIFFERENT GRANTS TO THE OHIO STATE BAR ASSOCIATION, EACH WITH A
OHIO CENTER FOR LAW-RELATED EDUCATION - 1700 LAKE SHORE DRIVE - COLUMBUS, OH 43216	31-1124428	501(C)(3)	29,650.	0.			THE OHIO STATE BAR FOUNDATION PROVIDED TWO SEPARATE GRANTS TO THE OHIO CENTER FOR
OHIO JUSTICE AND POLICY CENTER 215 E. 9TH STREET, FLOOR 6 CINCINNATI, OH 45202	31-1319172	501(C)(3)	22,850.	0.			THE OHIO STATE BAR FOUNDATION PROVIDING FUNDING TO THE OHIO JUSTICE AND POLICY CENTER
ADVOCATES FOR BASIC LEGAL EQUALITY 520 MADISON AVE, STE 740 TOLEDO, OH 43604	23-7376131	501(C)(3)	50,000.	0.			THE OHIO STATE BARD FOUNDATION PROVIDED FUNDING TO THE ADVOCATES FOR BASIC LEGAL EQUALITY
OHIO JURY MANAGEMENT ASSOCIATION 88 E. BROAD STREET, STE 1250 COLUMBUS, OH 43215	91-2085650	501(C)(3)	16,752.	0.			THE OHIO STATE BAR FOUNDATION AWARDED A GRANT TO THE OHIO JURY MANAGEMENT ASSOCIATION
OHIO LEGAL RIGHTS SERVICE 50 WEST BROAD STREET, SUITE 1400 COLUMBUS, OH 43215	31-6402047	GOVERNMENT ORG.	29,700.	0.			THE OHIO STATE BAR FOUNDATION AWARDED A GRANT TO THE OHIO LEGAL RIGHTS SERVICE TO HELP

- 2** Enter total number of section 501(c)(3) and government organizations **9.**
- 3** Enter total number of other organizations **1.**

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2008

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Use Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

SCHEDULE I, PART I, LINE 2: THE GENERAL GRANT PROCESS BEGINS WITH THE APPLICANT COMPLETING AND SIGNING THE APPLICATION FORM FOUND ON THE FOUNDATION'S WEBSITE BY THE DEADLINE DATE WITH THE REQUIRED BACKUP INFORMATION. THE FOUNDATION ALLOWS THE APPLICANTS TO FAX THE APPLICATION IF THERE IS A PAPER COPY IN THE MAIL. THE EXECUTIVE DIRECTOR PERFORMS A QUICK REVIEW OF THE APPLICATION FOR COMPLETENESS. THE EXECUTIVE DIRECTOR ALSO PERFORMS A QUICK REVIEW OF A COPY OF THE MOST RECENT 990, AUDITED FINANCIAL STATEMENTS (IF APPLICABLE) AND A LIST OF THE BOARD OF DIRECTORS. THE EXECUTIVE DIRECTOR DOES NOT HAVE THE AUTHORITY TO WEED OUT ANY

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)
▲ Attach to Form 990 to list additional information for
Part II and Part III, Schedule I (Form 990).**

OMB No. 1545-0047

2008

**Open to Public
Inspection**

Name of the organization

THE OHIO STATE BAR FOUNDATION

Employer identification number

31-6054093

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OHIO LEGAL ASSISTANCE FOUNDATION 10 WEST BROAD STREET, STE 950 COLUMBUS, OH 43215	31-1287915	501(C)(3)	9,580.	0.			THE OHIO STATE BAR FOUNDATION AWARDED A GRANT TO THE OHIO LEGAL ASSICSTANCE FOUNDATION TO
OHIO STATE LEGAL SERVICES ASSOCIATION - 555 BUTTLES AVENUE - COLUMBUS, OH 43215	31-0718185	501(C)(3)	10,000.	0.			PROJECT TO LINK LEGAL SERVICES WITH SOCIAL SERVICE ORGANIZATIONS SERVING THE HOMELESS.
LEGAL SOCIETY AID OF CLEVELAND 1223 WEST 6TH STREET CLEVELAND, OH 44113	34-0866026	501(C)(3)	5,000.	0.			JUSTICE PROJECT TO EDUCATE STUDENTS REGARDING THEIR RIGHTS, RESPONSIBILITIES AND
THE SUPREME COURT OF OHIO 65 SOUTH FRONT STREET COLUMBUS, OH 43215	31-6402047	GOVERNMENT ORG.	41,250.	0.			TRANSLATION OF THE KEY LEGAL FORMS INTO THE FIVE MOST COMMONLY USED LANGUAGES FOR OHIO

2 Enter total number of Section 501(c)(3) and government organizations **3** Enter total number of other organizations

Part IV Supplemental Information

APPLICANTS, BUT SIMPLY TO ENSURE THAT THE APPLICATIONS ARE COMPLETE AND ALL OF THE REQUIRED INFORMATION HAS BEEN PROVIDED. THE EXECUTIVE DIRECTOR FOLLOWS UP WITH THE APPLICANT IF NECESSARY FOR CLARIFICATION, ESPECIALLY IF THERE ARE DETAILS THAT THE EXECUTIVE DIRECTOR KNOWS THE GRANT COMMITTEE WITH REQUIRE. THE EXECUTIVE DIRECTOR THEN PREPARES BINDERS FOR THE GRANTS AND PROGRAMS COMMITTEE, INCLUDING YTD BUDGET, PRIOR MINUTES, PRIOR HISTORY WITH GRANTEE, GRANT INFORMATION ON THE WEBSITE, THE CRITERIA AND THE FULL APPLICATION. THE OHIO STATE BAR FOUNDATION'S GRANTS AND PROGRAMS COMMITTEE EITHER RECOMMENDS APPROVAL, DENIES OR TABLES (RECONSIDER AFTER REVISIONS) THE GRANT APPLICATION. THEN THE FOUNDATION'S FULL BOARD OF TRUSTEES APPROVES OR DENIES THE GRANT REQUEST. AFTER BOARD APPROVAL, THE EXECUTIVE DIRECTOR CALLS THE CONTACT PERSON OF THE GRANTEE TO INFORM THEM THAT THE GRANT AGREEMENT IS IN ROUTE, INCLUDING CONDITIONS, AND THE AGREEMENT IS EXECUTED. BASED ON THE TERMS OF PAYMENT, THE EXECUTIVE DIRECTOR AUTHORIZES THE PAYMENT AND A CHECK IS WRITTEN TO THE GRANTEE. THE GRANTEE IS THEN REQUIRED TO MAINTAIN RECORDS AND ACCOUNTS OR THE PROJECT/GRANT FOR A PERIOD OF NOT LESS THAN FOUR YEARS. THE GRANTEE ALSO PROVIDES ANY INTERIM STATUS REPORTS AS REQUESTED BY THE FOUNDATION. THE GRANTEE THEN WILL PROVIDE A FINAL REPORT TO THE FOUNDATION WITHIN 30 DAYS OF ANY OF THE FOLLOWING: THE COMPLETION OF THE PROJECT, THE CONCLUSION OF THE GRANT PERIOD, OR RECEIPT OF WRITTEN NOTICE FROM THE FOUNDATION THAT THE FOUNDATION CONSIDERS THE GRANT OR PROJECT TO BE COMPLETE. WITHIN 60 DAYS OF ISSUING A FINAL REPORT, THE GRANTEE THEN MUST PROVIDE A COMPREHENSIVE VERSION OF THE FINAL REPORT WHICH INCLUDES STATISTICAL, FINANCIAL, AND NARRATIVE INFORMATION NECESSARY TO EVALUATE THE PROJECT/GRANT.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: OHIO STATE BAR ASSOCIATION

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: THE ORGANIZATION PROVIDED SEVERAL DIFFERENT GRANTS TO THE OHIO STATE BAR ASSOCIATION, EACH WITH A SPECIFIC PURPOSE. THE OHIO STATE BAR FOUNDATION PROVIDED THE OHIO STATE BAR ASSOCIATION WITH \$2,196 FOR NEW LAWYER TRAINING, \$6,000 FOR THE OSBA LEGAL BASICS COURSE, \$45,000 FOR LAW FACTS VIDEOS, \$35,000 FOR OSBA ONN PUBLIC AWARENESS, AND \$60,000 FOR OSBA ONN ADVERTISEMENT.

NAME OF ORGANIZATION OR GOVERNMENT:

OHIO CENTER FOR LAW-RELATED EDUCATION

(H) PURPOSE OF GRANT OR ASSISTANCE: THE OHIO STATE BAR FOUNDATION PROVIDED TWO SEPARATE GRANTS TO THE OHIO CENTER FOR LAW-RELATED EDUCATION. ONE GRANT WAS FOR \$15,000 TO FUND THE STATEWIDE MOCK TRIAL PROGRAM AND THE SECOND GRANT WAS FOR \$14,650 TO FUND THE YOUTH JUSTICE PROGRAM.

NAME OF ORGANIZATION OR GOVERNMENT: OHIO JUSTICE AND POLICY CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: THE OHIO STATE BAR FOUNDATION PROVIDING FUNDING TO THE OHIO JUSTICE AND POLICY CENTER FOR FUNDING OF THE WORKBOOK PUBLICATIONS FOR THE OHIO CENTER FOR LAW-RELATED EDUCATION.

NAME OF ORGANIZATION OR GOVERNMENT: ADVOCATES FOR BASIC LEGAL EQUALITY

(H) PURPOSE OF GRANT OR ASSISTANCE: THE OHIO STATE BAR FOUNDATION PROVIDED FUNDING TO THE ADVOCATES FOR BASIC LEGAL EQUALITY FOR STRATEGIC PLANNING AND POSITIONING FOR THE NEXT PHASE.

NAME OF ORGANIZATION OR GOVERNMENT: OHIO JURY MANAGEMENT ASSOCIATION

(H) PURPOSE OF GRANT OR ASSISTANCE: THE OHIO STATE BAR FOUNDATION AWARDED A GRANT TO THE OHIO JURY MANAGEMENT ASSOCIATION FOR FUNDING OF

Part IV Supplemental Information

THE 2008 OHIO JURY SERVICE CONFERENCE.

NAME OF ORGANIZATION OR GOVERNMENT: OHIO LEGAL RIGHTS SERVICE

(H) PURPOSE OF GRANT OR ASSISTANCE: THE OHIO STATE BAR FOUNDATION

AWARDED A GRANT TO THE OHIO LEGAL RIGHTS SERVICE TO HELP FUND GENERAL PROGRAMS.

NAME OF ORGANIZATION OR GOVERNMENT: OHIO LEGAL ASSISTANCE FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: THE OHIO STATE BAR FOUNDATION

AWARDED A GRANT TO THE OHIO LEGAL ASSICSTANCE FOUNDATION TO FUND GENERAL PROGRAMS.

NAME OF ORGANIZATION OR GOVERNMENT: LEGAL SOCIETY AID OF CLEVELAND

(H) PURPOSE OF GRANT OR ASSISTANCE: JUSTICE PROJECT TO EDUCATE STUDENTS REGARDING THEIR RIGHTS, RESPONSIBILITIES AND REALITIES

NAME OF ORGANIZATION OR GOVERNMENT: THE SUPREME COURT OF OHIO

(H) PURPOSE OF GRANT OR ASSISTANCE: TRANSLATION OF THE KEY LEGAL FORMS INTO THE FIVE MOST COMMONLY USED LANGUAGES FOR OHIO COURTROOMS.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

Name of the organization THE OHIO STATE BAR FOUNDATION	Employer identification number 31-6054093
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Part I Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account <input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input checked="" type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
b If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	X	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	X	
3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply. <input type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations <input checked="" type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee		
4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a: a Receive a severance payment or change of control payment?		X
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?		X
c Participate in, or receive payment from, an equity-based compensation arrangement?		X
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.		
5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization?		X
b Any related organization?		X
If "Yes," to line 5a or 5b, describe in Part III.		
6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization?		X
b Any related organization?		X
If "Yes" to line 6a or 6b, describe in Part III.		
7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III		X
8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III		X

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2008

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
WILLIAM K. WIESENBERG	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	211,190.	0.	0.	0.	0.	211,190.	0.
DENNY L. RAMEY	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	285,000.	15,000.	167,863.	0.	0.	467,863.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

PART I, LINE 1A: THE ORGANIZATION PROVIDED A \$1,000 GOLF MEMBERSHIP FOR THE EXECUTIVE DIRECTOR, LINDA L. THOMPSON. THE GOLF MEMBERSHIP WAS RECOGNIZED AS INCOME AS INCOME BY THE EXECUTIVE DIRECTOR.

DENNY L. RAMEY SERVES AS TREASURER OF THE OHIO STATE BAR FOUNDATION, BY VIRTUE OF HIS POSITION AS EXECUTIVE DIRECTOR OF THE OHIO STATE BAR ASSOCIATION. MR. RAMEY IS NOT A TRUSTEE OF THE FOUNDATION, HAS NO VOTING RIGHTS AND RECEIVES NO COMPENSATION FROM THE FOUNDATION. HE IS COMPENSATED BY THE OHIO STATE BAR ASSOCIATION (EIN# 31-4271520). HIS COMPENSATION IS INCLUDED ON THE 990 FILED BY THE OHIO STATE BAR ASSOCIATION.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization

THE OHIO STATE BAR FOUNDATION

Employer identification number

31-6054093

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

501(C)(3) PUBLIC CHARITY, ORGANIZED UNDER OHIO LAW, FOR EDUCATIONAL, LITERARY, SCIENTIFIC AND CHARITABLE PURPOSES.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS

IN CONTACT WITH THE LEGAL SYSTEM; A WEBSITE (LINCOHIO.ORG) DESIGNED TO ASSIST EMERGING NONPROFITS AS THEY NAVIGATE REGULATORY, LEGAL AND DEVELOPMENTAL ISSUES; A DVD FOR SOMALI REFUGEES TO HELP THEM UNDERSTAND HOW LAWS IMPACT THEIR LIVES DAILY; THE CREATION OF WEB BASED INFORMATION TO ASSIST INDIVIDUALS WHO MUST REPRESENT THEMSELVES IN COURT AND COMPANION MATERIALS FOR USE BY COURTS, LIBRARIES AND OTHERS SERVING THOSE INDIVIDUALS; ANTI-RACISM EDUCATIONAL MATERIALS TO RAISE AWARENESS WITHIN THE JUSTICE SYSTEM; PILOT PROGRAMS DESIGNED TO IMPROVE THE ACCESS AND EXPERIENCE OF INDIVIDUALS WITH THE COURTS AND TO IMPACT THE ROLE OF THE COURT AS AN INSTITUTION OF LAST RESORT IN THE COMMUNITY; THE DEVELOPMENT OF A MODEL DISCIPLINARY POLICY FOR COURT INTERPRETERS, TRANSLITERATORS AND TRANSLATORS; PUBLICATIONS TO AID UNDERSTANDING OF ASPECTS OF THE LAW AND THE LEGAL SYSTEM; AND RECOGNITION OF INDIVIDUALS AND PROGRAMS OR ORGANIZATIONS WHOSE WORK PROMOTES PUBLIC UNDERSTANDING OF THE LAW OR IMPROVEMENTS IN THE JUSTICE SYSTEM.

THE FOUNDATION PROVIDES GRANTS FROM ITS GENERAL GRANT FUND TO ORGANIZATIONS AND PROGRAMS THAT FURTHER THE FOUNDATION'S MISSION OF PROMOTING PUBLIC UNDERSTANDING OF THE LAW AND IMPROVEMENTS IN THE JUSTICE SYSTEM THROUGHOUT OHIO.

THE FOUNDATION ALSO PROVIDES GRANTS FROM ITS CONTINUING LEGAL EDUCATION

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule O (Form 990) 2008

832211
12-18-08

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

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OMB No. 1545-0047

2008

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Name of the organization

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31-6054093

FUND TO ORGANIZATIONS AND PROGRAMS FOR THE CHARITABLE PURPOSES INCLUDED
IN THE PURPOSE OF THAT FUND.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS
IS POWER: MAGNIFYING RIGHTS, RESPONSIBILITIES, AND RESOURCES FOR FOSTER
YOUTH" WAS A PROGRAM DEVELOPED TO HELP YOUNG ADULTS REALIZE THEIR
RIGHTS AND RESPONSIBILITIES AS THEY AGE OUT OF THE FOSTER CARE SYSTEM,
WHILE ALSO DIRECTING THEM TO HELPFUL RESOURCES. THE FELLOWS CLASS OF
2008 LAUNCHED A NEW PROJECT, "REPAIRING RECIDIVISM: HELPING
EX-OFFENDERS SUCCESSFULLY REENTER SOCIETY." THIS PROGRAM WAS DESIGNED
TO PROVIDE A RESOURCE AND HELP RAISE AWARENESS OF OPTIONS AND
OPPORTUNITIES FOR LOCAL REENTRY SUCCESS.

THE FOUNDATION ALSO CONTINUED A MULTI-YEAR PROGRAM IN TWO OHIO COUNTIES
DESIGNED TO BRING PRIVATE CITIZENS, SERVICE PROVIDERS AND COURT
PERSONNEL TOGETHER TO DEVELOP PILOT PROGRAMS TO IMPROVE THE ACCESS AND
EXPERIENCE OF INDIVIDUALS WITH THE COURT AND TO ADDRESS THE ROLE THE
COURTS PLAY AS AN INSTITUTION OF LAST RESORT IN THE COMMUNITY. THE
FOUNDATION PROVIDED SUPPORT FOR THE PILOT PROJECT FOCUSING ON PRISONER
REENTRY IN CONJUNCTION WITH THE WORK OF ONE OF THESE WORKING COMMUNITY
GROUPS. THE FOUNDATION DESIGNED A SYSTEM FOR STATEWIDE DISTRIBUTION OF
MATERIALS DEVELOPED BY THE COMMUNITY GROUP TO THE OTHER COUNTY. THESE
MATERIALS ARE DESIGNED TO PROVIDE CITIZENS WITH THE BASIC UNDERSTANDING
OF LOCAL COURTS, THEIR JURISDICTIONS AND TERMS AND PROCEDURES. THE
FOUNDATION PROVIDED SUPPORT FOR THE DEVELOPMENT OF MODEL CODE OF ETHICS
AND CONDUCT FOR JUDICIARY INTERPRETERS, TRANSLITERATORS, AND

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization

THE OHIO STATE BAR FOUNDATION

Employer identification number

31-6054093

TRANSLATORS. THE FOUNDATION DISTRIBUTES PUBLICATION DESIGNED TO EDUCATE THE PUBLIC ABOUT VARIOUS ASPECTS OF THE LAW. THE FOUNDATION ALSO PRESENTS AWARDS TO INDIVIDUALS AND ORGANIZATIONS THROUGHOUT THE STATE FOR THEIR WORK TOWARD EXPANDING THE ABILITY OF THE PUBLIC TO UNDERSTAND THE LAW OR FOR IMPROVEMENTS TO THE ADMINISTRATION OF JUSTICE.

FORM 990, PART VI, SECTION A, LINE 6: MEMBERSHIP IN THE OHIO STATE BAR FOUNDATION CONSISTS OF TWO DIFFERENT LEVELS OF MEMBERSHIP, VOTING AND NON-VOTING. VOTING MEMBERS INCLUDE CHARTER FELLOWS, LIFE FELLOWS, AND DISTINGUISHED LIFE FELLOWS. NON-VOTING MEMBERS INCLUDE SUPPORTING MEMBERS AND CONTRIBUTING MEMBERS.

CHARTER FELLOWS - CHARTER FELLOWS MEMBERSHIP IN THE FOUNDATION IS A PROFESSIONAL HONOR. FELLOWS SHALL BE SELECTED BY THE BOARD OF TRUSTEES FROM THOSE MEMBERS OF THE OHIO STATE BAR ASSOCIATION WHOSE PROFESSIONAL, PUBLIC AND PRIVATE CAREERS DEMONSTRATE OUTSTANDING DEDICATION TO THE WELFARE OF THE COMMUNITY AND THE MAINTENANCE AND SUPPORT OF THE MAJOR OBJECTIVES OF THE FOUNDATION. ALL FELLOWS SELECTED BY THE BOARD OF TRUSTEES ARE REQUIRED TO PAY DUES. IN ADDITION TO THE FELLOWS SELECTED BY THE BOARD OF TRUSTEES OF THE FOUNDATION, THE FOLLOWING SHALL BE ELIGIBLE TO BE NOMINATED AS NON-DUE PAYING FELLOWS DURING THEIR TERMS OF OFFICE: OFFICERS AND MEMBERS OF THE BOARD OF GOVERNORS OF THE OHIO STATE BAR ASSOCIATION, DEANS OF AMERICAN BAR ASSOCIATION ACCREDITED LAW SCHOOLS, AND THE JUSTICES OF THE SUPREME COURT OF OHIO. ALL FELLOWS ARE VOTING MEMBERS OF THE OHIO STATE BAR FOUNDATION

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Schedule O (Form 990) 2008

832211
12-18-08

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization

THE OHIO STATE BAR FOUNDATION

Employer identification number

31-6054093

LIFE FELLOWS - FELLOWS WHO HAVE COMPLETED THE MINIMUM FELLOWS PLEDGE IN EFFECT AT THE TIME OF THEIR ACCEPTANCE AS A FELLOW IN ACCORDANCE WITH THE ANNUAL RATE ARE ELIGIBLE TO BE LIFE FELLOWS. EACH YEAR'S SERVICE AS A JUSTICE OF THE SUPREME COURT OF OHIO, OR AS A STAFF MEMBER OF THE OHIO STATE BAR ASSOCIATION OR THE FOUNDATION SHALL CONSTITUTE ONE YEAR'S MINIMUM ANNUAL CONTRIBUTION IN COMPUTING THE MINIMUM ANNUAL CONTRIBUTION REFERENCED ABOVE. THE BOARD OF TRUSTEES MAY ALSO NAME HONORARY LIFE FELLOWS. ALL LIFE FELLOWS ARE VOTING MEMBERS OF THE OHIO STATE BAR FOUNDATION.

DISTINGUISHED LIFE FELLOWS - DISTINGUISHED LIFE FELLOWS ARE LEADERS AMONG LEADERS IN THE FOUNDATION. DISTINGUISHED LIFE FELLOWS ARE FELLOWS THAT HAVE COMPLETED THEIR INITIAL FELLOWS PLEDGE TO THE FOUNDATION AND HAVE CONTINUED THEIR FINANCIAL SUPPORT OF THE FOUNDATION THROUGH CONTRIBUTIONS TOTALING AT LEAST \$2,500. ALL DISTINGUISHED LIFE FELLOWS ARE VOTING MEMBERS OF THE OHIO STATE BAR FOUNDATION.

SUPPORTING MEMBERS - OHIO STATE BAR ASSOCIATION MEMBERS WHO CONTRIBUTE AN AMOUNT DETERMINED BY THE BOARD OF TRUSTEES OF THE FOUNDATION, BUT IN NO EVENT LESS THAN \$100, TO THE FOUNDATION DURING A CALENDAR YEAR ARE DESIGNATED AS SUPPORTING MEMBERS OF THE FOUNDATION. SUPPORTING MEMBERS OF THE FOUNDATION HAVE NO VOTING RIGHTS AND ARE NOT VOTING MEMBERS OF THE OHIO STATE BAR FOUNDATION.

CONTRIBUTING MEMBERS - OHIO STATE BAR ASSOCIATION MEMBERS WHO CONTRIBUTE AN AMOUNT DETERMINED BY THE BOARD OF TRUSTEES OF THE FOUNDATION, BUT IN NO

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Schedule O (Form 990) 2008

832211
12-18-08

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization

THE OHIO STATE BAR FOUNDATION

Employer identification number

31-6054093

EVENT LESS THAN \$50, TO THE FOUNDATION DURING A CALENDAR YEAR ARE DESIGNATED AS CONTRIBUTING MEMBERS OF THE FOUNDATION. CONTRIBUTING MEMBERS OF THE FOUNDATION HAVE NO VOTING RIGHTS AND ARE NOT VOTING MEMBERS OF THE OHIO STATE BAR FOUNDATION.

FORM 990, PART VI, SECTION A, LINE 7A: THE OHIO STATE BAR FOUNDATION HOLDS AN ANNUAL MEETING OF FELLOWS IN THE FALL OF EACH YEAR IN CONJUNCTION WITH THE FALL MEETING OF THE COUNCIL OF DELEGATES OF THE OHIO STATE BAR ASSOCIATION. AT THE ANNUAL MEETING THE FELLOWS (CHARTER FELLOWS, LIFE FELLOWS, AND DESIGNATED LIFE FELLOWS) ELECT TWO TRUSTEES TO SERVE FIVE-YEAR TERMS BEGINNING ON THE FIRST DAY OF THE CALENDAR YEAR FOLLOWING THEIR ELECTION. THE BOARD OF TRUSTEES THEN CONSISTS OF THE FOLLOWING: TEN TRUSTEES WHO HAVE BEEN ELECTED BY THE FELLOWS; THE PRESIDENT, PRESIDENT-ELECT, AND IMMEDIATE PAST PRESIDENT OF THE FOUNDATION; THE PRESIDENT-ELECT OF THE OHIO STATE BAR ASSOCIATION; AND THREE FELLOWS DESIGNATED BY THE BOARD OF GOVERNORS OF THE OHIO STATE BAR ASSOCIATION.

NOMINATION FOR THE TRUSTEES ELECTED BY THE FELLOWS IS COMPLETED BY THE NOMINATING COMMITTEE FOR TRUSTEES. THE NOMINATING COMMITTEE FOR TRUSTEES IS COMPRISED OF FOUR FELLOWS, TWO APPOINTED BY THE PRESIDENT OF THE OHIO STATE BAR FOUNDATION AND TWO APPOINTED BY THE PRESIDENT OF THE OHIO STATE BAR ASSOCIATION. THE NOMINATING COMMITTEE THEN PREPARES A SLATE OF NOMINEES, ONE FOR EACH VACANCY THAT WILL EXIST AMONG THE ELECTED MEMBERS OF THE BOARD OF TRUSTEES.

FORM 990, PART VI, SECTION A, LINE 7B: THE CODE OF REGULATION MAY BE

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Schedule O (Form 990) 2008

832211
12-18-08

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization

THE OHIO STATE BAR FOUNDATION

Employer identification number

31-6054093

ALTERED, AMENDED, OR REPEALED AND A NEW CODE OF REGULATIONS MAY BE ADOPTED, BY A VOTE OF A MAJORITY OF THE FELLOWS PRESENT AT ANY MEETING OF THE FELLOWS, PROVIDED THAT NOTICE OF THE PROPOSED ALTERATION, AMENDMENT, REPEAL, OR NEW CODE OF REGULATIONS IS CONTAINED IN THE NOTICE OF SUCH MEETING.

FORM 990, PART VI, SECTION A, LINE 10: THE FORM 990 IS PREPARED BY AN OUTSIDE ACCOUNTING FIRM. THE FORM 990 IS THEN REVIEWED BY UPPER MANAGEMENT AND THE BOARD OF TRUSTEES PRIOR TO BEING FILED.

FORM 990, PART VI, SECTION B, LINE 12C: THE OHIO STATE BAR FOUNDATION REGULARLY AND CONSISTENTLY MONITORS AND ENFORCES COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY THROUGH ANNUALLY DISTRIBUTING A COPY OF THE CONFLICT OF INTEREST POLICY TO ALL OFFICERS, TRUSTEES, AND KEY EMPLOYEES. THESE INDIVIDUALS ARE THEN REQUIRED TO ANNUALLY SIGN A CONFLICT OF INTEREST STATEMENT.

FORM 990, PART VI, SECTION B, LINE 15: THE OHIO STATE BAR FOUNDATION CONTRACTED TO HAVE AN EXTERNAL COMPENSATION STUDY COMPLETED FOR THE FOUNDATION. THIS COMPENSATION STUDY IS THEN USED BY THE ORGANIZATION IN THE PROCESS TO HELP DETERMINE THE COMPENSATION PACKAGE FOR THE EXECUTIVE DIRECTOR. THE BOARD OF TRUSTEES THEN APPROVES THE COMPENSATION PACKAGE OF THE EXECUTIVE DIRECTOR.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS

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Schedule O (Form 990) 2008

832211
12-18-08

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

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OMB No. 1545-0047

2008

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Name of the organization

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Employer identification number

31-6054093

AVAILABLE TO THE PUBLIC.

FORM 990, PART XI, LINE 2C

AUDIT COMMITTEE

THE ORGANIZATION HAS AN AUDIT COMMITTEE THAT ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT AND SELECTION OF AN INDEPENDENT ACCOUNTANT. THE PROCESS FOR OVERSEEING THE AUDIT AND SELECTING AN INDEPENDENT ACCOUNTANT HAS NOT CHANGED FROM PRIOR YEARS.

Part V Transactions With Related Organizations

Note. Complete line 1 if any entity is listed in Parts II, III, or IV.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to other organization(s)	X	
c Gift, grant, or capital contribution from other organization(s)		X
d Loans or loan guarantees to or for other organization(s)		X
e Loans or loan guarantees by other organization(s)		X
f Sale of assets to other organization(s)		X
g Purchase of assets from other organization(s)		X
h Exchange of assets		X
i Lease of facilities, equipment, or other assets to other organization(s)		X
j Lease of facilities, equipment, or other assets from other organization(s)	X	
k Performance of services or membership or fundraising solicitations for other organization(s)		X
l Performance of services or membership or fundraising solicitations by other organization(s)	X	
m Sharing of facilities, equipment, mailing lists, or other assets		X
n Sharing of paid employees		X
o Reimbursement paid to other organization for expenses		X
p Reimbursement paid by other organization for expenses		X
q Other transfer of cash or property to other organization(s)		X
r Other transfer of cash or property from other organization(s)		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(A) Name of other organization(s)	(B) Transaction type (a-r)	(C) Amount involved
(1) OHIO STATE BAR ASSOCIATION	J	6,855.
(2) OHIO STATE BAR ASSOCIATION	B	161,435.
(3) OHIO STATE BAR ASSOCIATION	L	1,145.
(4)		
(5)		
(6)		

**IRS e-file Signature Authorization
for an Exempt Organization**

For calendar year 2008, or fiscal year beginning _____, 2008, and ending _____, 20____

2008

Department of the Treasury
Internal Revenue Service

▶ **Do not send to the IRS. Keep for your records.**
▶ **See instructions.**

Name of exempt organization

Employer identification number

THE OHIO STATE BAR FOUNDATION

31-6054093

Name and title of officer

**STEPHEN E. CHAPPELEAR
PRESIDENT**

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount from the return if any. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return for which you are filing this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than 1 line in Part I.

1a Form 990 check here ▶ <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, line 12)	1b <u>1869516</u>
2a Form 990-EZ check here ▶ <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b _____
3a Form 1120-POL check here ▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b _____
4a Form 990-PF check here ▶ <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b _____
5a Form 8868 check here ▶ <input type="checkbox"/>	b Balance Due (Form 8868, line 3c)	5b _____

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2008 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) an indication of any refund offset, (c) the reason for any delay in processing the return or refund, and (d) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize REA & ASSOCIATES INC, CPA'S to enter my PIN 54093
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the organization's tax year 2008 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2008 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶ _____ Date ▶ _____

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 31310554093
do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2008 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ _____ Date ▶ _____

**ERO Must Retain This Form - See Instructions
Do Not Submit This Form To the IRS Unless Requested To Do So**