

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)

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

2004 Open to Public Inspection

Department of the Treasury Internal Revenue Service

A For the 2004 calendar year, or tax year beginning 07/01, 2004, and ending 06/30/2005

B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending. C Name of organization: OHIO LIONS FOUNDATION. D Employer identification number: 31-1162338. E Telephone number: (614) 459-5200. F Accounting method: Accrual.

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

H and I are not applicable to section 527 organizations.

G Website: WWW.OHIOLIONSFOUNDATION.ORG

J Organization type (check only one) [X] 501(c) (3) (insert no.) 4947(a)(1) or 527

K Check here [ ] if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

H(a) Is this a group return for affiliates? [ ] Yes [X] No

H(b) If "Yes," enter number of affiliates

H(c) Are all affiliates included? [ ] Yes [ ] No (If "No," attach a list. See instructions.)

H(d) Is this a separate return filed by an organization covered by a group ruling? [ ] Yes [X] No

I Group Exemption Number

M Check [X] if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 126,043.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 18 of the instructions.)

Table with 21 rows and 4 columns. Rows 1-12 are Revenue, 13-17 are Expenses, 18-21 are Net Assets. Total revenue is 126,043. Total expenses is 109,083. Net assets at end of year is 289,618.

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2004)

• If you are filing for an Additional (not automatic) 3-Month Extension, complete only Part II and check this box. 
Notes: • If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).
Part II Additional (not automatic) 3-Month Extension of Time - Must File Original and One Copy.

Name of Exempt Organization: OHIO LIONS FOUNDATION
Number, street, and room or suite no. If a P.O. box, see instructions: P.O. BOX 21016
City, town or post office, state, and ZIP code. For a foreign address, see instructions: COLUMBUS, OH 43221-0016
Employer identification number: 31-1162338
For IRS use only

Check type of return to be filed (File a separate application for each return):
[X] Form 990
Form 990-BL
Form 990-EZ
Form 990-PF
Form 990-T(sec. 401(a) or 408(a) trust)
Form 990-T (trust other than above)
Form 1041-A
Form 4720
Form 5227
Form 6069
Form 8870

STOP: Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.
• The books are in the care of JEFFREY W. BRANTNER, SECY. Telephone No. 614 459-5200 FAX No. 614 459-1151
• If the organization does not have an office or place of business in the United States, check this box.
• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN). If this is for the whole group, check this box. If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.
4 I request an additional 3-month extension of time until 05/15/2006
5 For calendar year, or other tax year beginning 07/01/2004 and ending 06/30/2005
6 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period
7 State in detail why you need the extension: SEE STATEMENT ATTACHED.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.

Under penalty of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.
Signature and Verification

Signature: [Handwritten Signature] Title: Secy Date: 2/15/06
Notice to Applicant - To Be Completed by the IRS

- We have approved this application. Please attach this form to the organization's return.
We have not approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to the organization's return.
We have not approved this application. After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file. We are not granting a 10-day grace period.
We cannot consider this application because it was filed after the extended due date of the return for which an extension was requested.
Other

Director: By:
Alternate Mailing Address - Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above. Date:

Name: OHIO LIONS FOUNDATION
c/o RANCE, PRITCHETT, BRANTNER, KELLER
Number and street (include suite, room, or apt. no.) or a P.O. box number: & ELY CO., L.P.A. 1720 ZOLLINGER RD
City or town, province or state, and country (including postal or ZIP code): COLUMBUS, OH 43221
EXTENSION APPROVED
MAR 7 2006