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### Form **990-PF**

## **Return of Private Foundation**

#### or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

2010

OMB No 1545-0052

			1 1 0010								
Ford	alen	dar year 2010, or tax year beginning AUG		, and ending	<u>JUL 31</u>	<u>, 2011</u>	·	<del></del>			
G C	heck	all that apply: Initial return		ormer public charity	Nome chance	」Fınal returr	)				
N-	Amended return Address change Name change  Name of foundation A Employer identification number										
Nan	ne ot	Toundation			A Employer	Identification	number				
		LANCASTER LENS, INC.			31-6	023927	Ì				
Nurr	ber a	and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone						
		37 W BROAD STREET		530		224-21	64				
City	or to	own, state, and ZIP code		17.7.			ending, check h	ere 🕨			
		COLUMBUS, OH 43215			D 1. Foreign	organization	s, check here	ightharpoons			
H C	heck	type of organization: X Section 501(c)(3) ex	xempt private foundation		2. Foreign o	rganizations me	eting the 85% to	est,			
	] <u>Se</u>	ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ation			tus was termii				
1 Fa	r ma	arket value of all assets at end of year   J   Account	ing method: X Cash	Accrual	under sect	ion 507(b)(1	(A), check he	re 🕨			
			ther (specify)		F If the foun	dation is in a	60-month tern	nination			
	\$	9,202,603. (Part I, colu	ımn (d) must be on cash l	basis.)	under sect	ion 507(b)(1	(B), check her	re 🕨			
Pa	<u>rt l</u>	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income		sted net	(d) Disbu	ursements le purposes			
			exhelizes hel nonge	micome	<u> </u>	ome	(cash ba	asis only)			
	1	Contributions, gifts, grants, etc., received		<del>,</del>	N/	<u>A</u>	<del></del>	<del></del>			
	2	Check X if the foundation is not required to attach Sch. 8 Interest on savings and temporary cash investments		<u> </u>	<del> </del>	,	<del> </del>	<del></del>			
	3	cash investments Dividends and interest from securities	205,944.	205,944.	<del> </del>		STATEM	ENTO 1			
	4 5 n	Gross rents	203,344.	203,344.			DIVIEW	EMI I			
	b						<u> </u>				
		Net gain or (loss) from sale of assets not on line 10		· · · · · · · · · · · · · · · · · · ·	<del></del>	DEO	IVED	<del></del>			
Ę	b	Gross sales price for all			ļ .	- KEU	HAFR				
Revenue	7	Capital gain net income (from Part IV, line 2)		0.			,	S			
æ.	8	Net short-term capital gain	,		2	DEC 0	9 2011	191-			
	9	Income modifications		22				S			
	10a	Gross sales less returns and allowances	,			OGDE	NI LIT	===			
	b	Less Cost of goods sold		,							
	C	Gross profit or (loss)									
	11	Other income									
	12	Total. Add lines 1 through 11	205,944.	205,944.	<b>}</b>		<del>  `</del>	1 000			
	13	Compensation of officers, directors, trustees, etc	9,000.	7,200.			<del> </del>	1,800.			
	14	Other employee salaries and wages					<del> </del>				
ses		Pension plans, employee benefits		·			<del>                                     </del>				
Š	108	Legal fees STMT 2	5,500.	4,400.			<del> </del>	1,100.			
Expens	r	Other professional fees	3,300.	2,200.	<del> </del>		<del> </del>	1,100.			
ē	17	Interest	<del></del>		<u> </u>		·				
aţį	18	Taxes STMT 3	4,533.	551.				138.			
ist	19	Depreciation and depletion		,	<u> </u>		<i>;</i> ,				
Ę	20	Occupancy									
P	21	Travel, conferences, and meetings									
	22	Printing and publications									
<b>7</b> gu	23	Other expenses STMT 4	3,144.	1,278.				319.			
20.E	24	Total operating and administrative									
		expenses. Add lines 13 through 23	22,177.	13,429.	ļ		ļ	<u>3,357.</u>			
CANNED DECT 9 2011	25	Contributions, gifts, grants paid	412,488.	•	<del> </del>	, <u>.</u>	41	2,488.			
د ــــ پهرموم	26	Total expenses and disbursements.	134 665	40.400	Į.						
		Add lines 24 and 25	434,665.	13,429.	<del> </del>		1	<u>5,845.</u>			
Z	27	Subtract line 26 from line 12:	220 721								
Z	a	Excess of revenue over expenses and disbursements	-228,721.	192,515.		<u>, , , , , , , , , , , , , , , , , , , </u>	P				
	0	Net investment income (if negative, enter -0-)	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	194,313.	_ N/			·····			
0235		Adjusted net income (if negative, enter -0-)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	, ,,	171/	Δ		DE (0040)			

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722,661. Form **990-PF** (2010)

Decreases not included in line 2 (itemize)

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)						How ac - Purc - Dona	quired hase ation	(c) Date (mo., d	acquired lay, yr.)	(d) Date sold (mo., day, yr.)
<u>1a</u>										
b NO	NE	·			├-					
d d				<del></del>	├				<del></del>	
е			<del></del>		<del> </del>				<del></del>	
(e) Gross sales price		preciation allowed or allowable)		st or other basis expense of sale				(h) G (e) plus	ain or (loss s (f) minus (	(g)
8			<del> </del>							
<u>b</u>			<del> </del>							
d d			<del> </del>							<del></del>
е			<del> </del>							<del></del>
Complete only for assets showing	g gain in co	lumn (h) and owned by	the foundation	on 12/31/69			(	) Gains (C	ol. (h) gaın	minus
(i) F.M.V. as of 12/31/69		Adjusted basis s of 12/31/69		cess of col. (1) col. (1), if any			CO	l. (k), but i Losses	not less that (from col. (	n -0-) <b>or</b> h))
8			ļ							
<u>b</u>			<u> </u>							
<u>C</u>	<del></del>		-					<del></del>	<del></del>	
d e			<del> </del>						<del></del>	
<u> </u>		( If gain, also ente	r in Dart I line	7	7					
2 Capital gain net income or (net ca	pital loss)	If gain, also ente	)- ın Part I, line	7	-  -	2				
3 Net short-term capital gain or (los	s) as define	•								
If gain, also enter in Part I, line 8,			(0).		]					
If (loss), enter -0- in Part I, line 8  Part V   Qualification U	- do- C-	ction 4940(e) for	- Dadwaa	Tau in Na		3				<del> </del>
f section 4940(d)(2) applies, leave the Nas the foundation liable for the sec fres, the foundation does not qual Enter the appropriate amount in	tion 4942 ta	x on the distributable ar	omplete this pa	rt.						Yes X No
(a)	Dacir Coldin	(b)	dollollo bololo	making any chin	(c)	· <u>-</u>	<del></del>	1	D1-1	(d) ution ratio
Base periód years Calendar year (or tax year beginni	ng in)	Adjusted qualifying dis	stributions	Net value of no			use assets	: ]		ution ratio ided by col. (c))
2009		22	28,707.		8	,15	1,328	3.		.028058
2008			30,778.				2,049			.061396
2007			9,078.	L			8,649			.056382
2006	<del>-  </del>		70,421.	<del></del>			4,265			.04890
2005		36	66,490.	<u> </u>		, 44	5,065	<del>)  </del>		.05058
2 Total of line 1, column (d)								2		.245326
3 Average distribution ratio for the the foundation has been in existe			on line 2 by 5,	or by the number	of ye	ars		3		.049069
4 Enter the net value of noncharitat	ole-use asse	ts for 2010 from Part X,	, line 5					4		8,634,438
5 Multiply line 4 by line 3								5		423,649
6 Enter 1% of net investment incon	ne (1% of P	art I, line 27b)						6		1,925
7 Add lines 5 and 6								7		425,574
B Enter qualifying distributions from								_8_		415,845
If line 8 is equal to or greater than See the Part VI instructions.	line 7, che	ck the box in Part VI, lini	e 1b, and comp	lete that part usir	ıg a 1'	% tax r	ate.			·

_	990-PF (2010) LANCASTER LENS, INC. rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4		6023			Page 4		
_	Exempt operating foundations described in section 4940(d)(2), check here \( \bigcup \) and enter "N/A" on line 1.	100		. ,	,	7 ( ,		
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	.,	F	· . ·	5	_ ′.		
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%							
	of Part I, line 27b		1 1114	,	,	· · ·		
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	35-7	1,4,	* +-	*			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.		
3	Add lines 1 and 2	3_			3,8	<u>50.</u>		
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.		
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	_5			3,8	50.		
6	Credits/Payments:			, ,	,	10		
a	2010 estimated tax payments and 2009 overpayment credited to 2010 6a 3,516.	·		,	14,	; <b>`</b> , ,		
b	Exempt foreign organizations - tax withheld at source	خ ۱۹ کې		, ,	· · · · ·			
C	Tax paid with application for extension of time to file (Form 8868)	<u>.</u>			7			
đ	Backup withholding erroneously withheld 6d		1/2		٠			
7	Total credits and payments. Add lines 6a through 6d	7			3,5	<u> 16.</u>		
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached	8						
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			3	34.		
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10						
11	Enter the amount of line 10 to be: Credited to 2011 estimated tax	11						
Pa	rt VII-A Statements Regarding Activities							
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın		#\\ *\>	Yes	No		
	any political campaign?			1a		X		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		Ţ	1b		X		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publishe	d or	ĺ	· .				
	distributed by the foundation in connection with the activities.				l			
C	Did the foundation file Form 1120-POL for this year?			1c		X		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		[	;	~ <sub>}</sub>	-		
	(1) On the foundation. $\blacktriangleright$ \$ 0 . (2) On foundation managers. $\blacktriangleright$ \$ 0 .			2, 1		-		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation							
	managers. ► \$ 0 .		ĺ	,				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		Į	_2		X		
	If "Yes," attach a detailed description of the activities.		ſ	,				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, of	r		٠,	٠ . ا			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		i	3		<u>X</u> _		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X		
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N	[/A	4b				
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		]	5	i	X		
	If "Yes," attach the statement required by General Instruction T.			· · ' `	ادر به مرد است به مرد	•		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		ſ		.	-		
	● By language in the governing instrument, or			, 1	4 2	•		
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	law		٠,	· `[	,		
	remain in the governing instrument?		J	6	X			
7	Did the foundation have at least \$5,000 in assets at any time during the year?		į	7	X			
	If "Yes," complete Part II, col. (c), and Part XV		ĺ	·*	] - ; · ·]	٠.		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				` ,;,			
	OH							
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				3 7 -	•		
	of each state as required by General Instruction G? If "No," attach explanation		]	8b	X			
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	ndar		-	9.5			
	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV		]	9		<u>X</u>		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10		<u> X</u>		
			Form	n <b>990</b>	-PF (	2010)		

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Form 990-PF (2010)

Pert VII-B   Statements Regarding Activities for Which Form 472 May Be Required (continued)	Form 990-PF (2010) LANCASTER LENS, INC.			31-60239	27 Page 6
(1) Carry on propagands, or otherway attempt to influence legislation (section 4955); or to carry on, deedly or indirectly, any voter registration drive?  (2) Influence the outcome of any specific public election (sees section 4955); or to carry on, deedly or indirectly, any voter registration drive?  (3) Provide a grant to an organization other than a chanticible, etc., organization described in section \$505(4); 1, (2), or (3), or section 495(6); (2)?  (3) Provide a grant to an organization other than a chanticible, etc., organization described in section \$505(4); 1, (2), or (3), or section 495(6); (2)?  (4) Provide a grant to an organization other than elegious, chanticible, scientific, literary, or educational purposes, or for the prevention of cruely to children or animals?  (5) If vote of carry purpose other than religious, chanticible, scientific, literary, or educational purposes, or for the prevention of cruely to children or animals?  (6) If vote of carry purpose other than religious, chanticible, scientific, literary, or educational purposes, or for the prevention of cruely to children or animals?  (7) If we will are surposed to control of the formation section 53.4945 for in a current notice reparring of seasons section 53.4945 for in a current notice reparring of seasons religious to the section of the secti	Part VII-B   Statements Regarding Activities for Which I	Form 4720 May Be I	Required (contin	ued)	
2  Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any other repisitation driver?    3  Provide a grant to an individual for twent, study, or other similar purposes?	5a During the year did the foundation pay or incur any amount to:		_		
any voter registration drive?  (3) Provide a grant to an origination of the ravel, study, or other similar purposes?  (4) Provide a grant to an origination of the ravel, study, or other similar purposes?  (5) Provide a grant to an origination of the ravel study (2) Provide a grant to an origination of the ravel provided in section \$50(a)(1), (2), or (3), or section 494(0)(2)?  (5) Provide for any purpose other than religious, charatable, scientific, literary, or educational purposes, or for the prevention of cruely to children or animals?  If year is very to 55(1)(5) did any of the transactions fall to quality under the exceptions described in Regulations section 53.4945 or in a current notice regarding desaster assistance (see instructions)?  Originations religious expenditure religious expenditure responsibility for the grant?  Originations religious expensions responsible for the grant?  Originations of the formation of the formation of the sameware travelies of the grant?  Originations of the formation of the formation of the formation of the formation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Origination of the formation o	(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	s X No	
(3) Provide a grant to an engranziation offer than a charilable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)?  (5) Provide for any purpose other than reliqueus, charitable, scentific, filterary, or educational purposes, or for the prevention of crustly to holdren or animals?  10 It any answer is "Yes" to \$(1), (5), (did any of the transactions fall to qualify under the exceptions described in Regulations section 53.494 or an current incide regarding dissaster assetance (see instructions)?  Organizations relying on a current notice regarding dissaster assetance (see instructions)?  Organizations relying on a current notice regarding dissaster assetance check here  If the answer is "Yes" to question \$54,4 does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If "Yes," attach the statement required by Regulations section 53.4945-5(c).  So that the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes" to 60, the Form 8370.  If "Ye	(2) Influence the outcome of any specific public election (see section 4955); of	r to carry on, directly or indir	ectly,		
(3) Provide a grant to an engranziation offer than a charilable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)?  (5) Provide for any purpose other than reliqueus, charitable, scentific, filterary, or educational purposes, or for the prevention of crustly to holdren or animals?  10 It any answer is "Yes" to \$(1), (5), (did any of the transactions fall to qualify under the exceptions described in Regulations section 53.494 or an current incide regarding dissaster assetance (see instructions)?  Organizations relying on a current notice regarding dissaster assetance (see instructions)?  Organizations relying on a current notice regarding dissaster assetance check here  If the answer is "Yes" to question \$54,4 does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If "Yes," attach the statement required by Regulations section 53.4945-5(c).  So that the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes" to 60, the Form 8370.  If "Ye	any voter registration drive?		Ye	s X No	製 1 1 "
(e) Provide a grant to an organization offer than a charitable, etc., organization described in section  509(a)(1), (2), or (3), or section 4940(d)(2)?  (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruely to children or animals?  It any answers it's's to 561/50, did any of the transactions fall to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance desi instructions;?  Organization religious and surrent notice regarding disaster assistance check here  It is answer is 'yes' to question 54(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If 'Yes, 'attach the statement required by Regulations section 53.4945-5(d).  8a Did the foundation, dump the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If 'Yes, 'attach the statement required by Regulations section 73.4945-5(d).  8b It's any time during the tax year, was the foundation a party to a prohabited tax sheller transaction?  If 'Yes, 'attach the statement required by Regulations and their compensation.  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  Information	(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye		
Solicity 1, (2), or (3), or section 4940(d)(2)?					1 1
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  b It any answer is "Yes" to Set, 1)-(5), did any of the transactions fall to qualify under the exceptions described in Regulations section \$3.4945 or in a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance (see instructions)?  It has assistance (see instructions)?  N/A  Ves			☐ Ye	s X No	, j
the prevention of curelly to children or animals?  b If any answer is "Yes" to \$5(1)-(5), did any of the transactions fall to qualify under the exceptions described in Regulations section \$3.4945 or in a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance check here  of If the answers is "Yes" to question \$4(1), does the foundation claim exemption from the lax because it maintained expenditure responsibility for the grant?  If "Yes," attach the statement required by Regulations section 53.4945-5(a).  8e Did the foundation, during the year, receive any funds, directly or indirectly, to pay primitions on a personal benefit contract?  If "Yes" to 8b, the Form 8870.  If "Yes" to 10b, the foundation receive any proceeds or have any net income attributable to the transaction?  If "Yes and the statement required by Regulations aparty to a prohibited tax shelter transaction?  If "Yes and the statement required by Regulations aparty to a prohibited tax shelter transaction?  If "Yes and the statement required by Regulations and the statement responsibility the statement responsibility to the statement responsibility the		or educational nurnoses, or t		,	.
b It any answer is "es" to 5a(1)-(5), did eny of the transactions fail to qualify under the exceptions described in Regulations section S3.495 or an acurrent notice regarding dissater assistance (see instructions)?  Organizations relying on a current notice regarding dissater assistance check here  of It the answer is "es" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If "Yes" at titue the statement required by Regulations section 53.4945-5(d).  8e Dot the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes" to be, the Form 870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  It shall officers, directors, trustees, foundation managers and their compensation.  (a) Name and address  (b) Title, and average for every every devotion of the state of the	• •	or oddoundrian purpossty or		e X No	· 1
section 53.4945 or an aurrent notice regarding desister assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance check here  of if the answer is Yes' to question 54(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If Yes, Yes that this statement required by Regulations section 53.4945-5(d).  85 Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If Yes' to 66, the Form 8570.  If Yes' to 67, the form 8570.		der the exceptions described		. ا ۱۰۰ لیما ه	
Compensations relying on a current notice regarding diseater assistance check here  c if the answer is "Yes" to question 53(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If "Yes", "attach the statement required by Regulations section 53.4945-5(d).  8			ni riegulations	NT / N	<b>5</b> h
e if the answer is Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If Yes, attach the statement required by Regulations section 53.4945-5(d).  8a Dot the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contact?  b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contact?  If Yes' to 6b, file Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  b If Yes' to 6b, file Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  b If Yes' to 6b, file Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  b If Yes' to 6b, file Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Pert VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation.  (a) Name and address foundation managers and their compensation.  (b) Title, and average hours per week devoted on position (If not paid, enter 0-)  PRESIDENT  PRESIDENT  PRESIDENT  2 . 0 0 0 . 0 . 0 . 0 . 0 . 0 . 0 . 0 .		*			30
expenditure responsibility for the grant?  If "Yes," attach the statement required by Regulations section 53.4945-5(d).  8a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes" to 6b, file Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  8a It "Yes" to 6b, file Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  9a It "Yes" to 6b, file Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  9a It "Yes" to 6b, file Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  9a It "Yes" to 6b, file Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  9a It "Yes" to 6b, file Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  9a It "Yes" to 6b, file Form 8870.  1 List all officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and			!d	I	.
If Yes, * attach the statement required by Regulations section 53.4945-5(d).   So Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?   b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?   If Yes' to 6b, life Form 8870.	·				
6s Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes" to 6b, life Form 8870.  7s At any time during the lax year, was the foundation a party to a prohibited tax shelter transaction?  If "Yes" to 6b, life Form 8870.  7s At any time during the lax year, was the foundation a party to a prohibited tax shelter transaction?  If "Yes" to 6b, life Form 8870.  7s At any time during the lax year, was the foundation a party to a prohibited tax shelter transaction?  If yes IX No  If			I/A	98 L  No  .	
a personal benefit contract?  b) bit the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  b) bit the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  b) bit Yes' to 6b, file Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  b) it Yes' do the foundation receive any proceeds or have any net income attributable to the transaction?  b) it Yes' to do the foundation receive any proceeds or have any net income attributable to the transaction?  b) it Yes' do the foundation receive any proceeds or have any net income attributable to the transaction?  b) it Yes' do the foundation receive any proceeds or have any net income attributable to the transaction?  b) it Yes' to 6b, file Form 8870.  To all any time during the tax year, was the foundation a party to a prohibited tax sheller transaction?  b) it Yes' to 6b, file Form 8870.  To all any time during the tax year, was the foundation a party to a prohibited tax sheller transaction?  c) it Yes' to do the foundation, during the transaction?  c) it Yes' to the foundation receive any proceeds or have any net income attributable to the transaction?  c) it Yes' to the foundation receive any proceeds or have any net income attributable to the transaction?  c) it Yes' to the foundation receive any proceeds or have any net income attributable to the transaction?  c) it Yes' to the foundation receive any proceeds or have any net income attributable to the transaction?  c) it Yes' to the foundation receive any proceeds or have any net income attributable to the transaction?  c) it Yes' to the foundation receive any proceeds or have any net income attributable to the transaction?  c) it foundation receive any proceeds or have any net income attributable to the transaction?  c) it foundation receive any proceeds or highly and average hours provided to position of the foundation received any network and the received an	· · · · · · · · · · · · · · · · · · ·	* *		j	. ,,   1
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If "Yes" to 6b, life Form 870.  7 At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  If it "Yes" to 6b, life Form 870.  N/A 7b  If "Yes" to 6b, life Form 870.  It is a did the foundation receive any proceeds or have any net income attributable to the transaction?  Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation.  (a) Name and address  (b) Title, and average hours per week devoted to position (if not paid, enter "0-)  EBRUCE L. ROSA  PRESIDENT  37 W. BROAD ST., STE 500  COLUMBUS, OH 43215  1.00  0.0.  CLARENCE CLAPHAM  SECRETARY  37 W. BROAD ST., STE 530  COLUMBUS, OH 43215  2.00  9,000.  0.0.  COLUMBUS, OH 43215  2.00  9,000.  O.0.  COLUMBUS, OH 43215  2.00  9,000.  O.0.  COLUMBUS, OH 43215  Difficers, Directors, Trustees, Foundation Managers, Highly Information Managers		pay premiums on	<del></del>		· 1′ 1
If "Yes" to 6b, file Form 8870.   Tax any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?   Yes   X   No   To   No   No   No   No   No   No	a personal benefit contract?		Ye	8 X No	` [
7s At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  A if Yes, "did the foundation receive any proceeds or have any net income attributable to the transaction?  Part VIII Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation.  (a) Name and address  (a) Name and address  (a) Name and address  (b) Title, and average hours per week devoted complete the fine of the proposition of the proposit	<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		<u>                                     </u>	6b X
Bruce L. Rosa   President   Street	If "Yes" to 6b, file Form 8870.				
Part VIII	7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Ye	8 X No	. 1
1 List all officers, directors, trustees, foundation managers and their compensation.  (a) Name and address (b) Title, and average hours per week devoted in position (in not paid, enter 0-)  BRUCE L. ROSA  PRESIDENT 37 W. BROAD ST., STE 500  COLUMBUS, OH 43215  1.00  0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.	b If "Yes," did the foundation receive any proceeds or have any net income attribu	utable to the transaction?		N/A	7b
1 List all officers, directors, trustees, foundation managers and their compensation.  (a) Name and address (a) Name and address (b) Title, and average hours per week devoted to position (If not paid, enter 0-) (If not pai	Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highly	/	
(a) Name and address   (b) Title, and average hours per week devoted to position (If not paid, enter -0-)   (if not paid, enter -	Faid Employees, and Contractors				
BRUCE L. ROSA  37 W. BROAD ST., STE 500  COLUMBUS, OH 43215  1.00  COLUMBUS, STE 530  COLUMBUS, OH 43215  2.00  9,000.  0.  COLUMBUS, OH 43215  2.00  9,000.  0.  COLUMBUS, OH 43215  2.00  9,000.  (c) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  (c) Compensation  (d) Combutions to thing price based plants and address of each employee paid more than \$50,000  (c) Compensation  (d) Compensation of thing price based plants and address of each employee paid more than \$50,000  (c) Compensation  (d) Compensation of thing price based plants and price based plant	1 List all officers, directors, trustees, foundation managers and their	compensation.			
BRUCE L. ROSA  37 W. BROAD ST., STE 500  COLUMBUS, OH 43215  1.00  COLUMBUS, STE 530  COLUMBUS, OH 43215  2.00  9,000.  0.  COLUMBUS, OH 43215  2.00  9,000.  0.  COLUMBUS, OH 43215  2.00  9,000.  (c) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  (c) Compensation  (d) Combutions to thing price based plants and address of each employee paid more than \$50,000  (c) Compensation  (d) Compensation of thing price based plants and address of each employee paid more than \$50,000  (c) Compensation  (d) Compensation of thing price based plants and price based plant		(b) Title, and average		(d) Contributions to	(e) Expense
BRUCE L. ROSA 37 W. BROAD ST., STE 500  COLUMBUS, OH 43215  1.00  0.0.0.  CLARENCE CLAPHAM 37 W. BROAD ST., STE 530  COLUMBUS, OH 43215  2.00  9,000.0.0.  2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  (c) Compensation  (d) Combuston temployees to the plant adverage hours per week devoted to position  (e) Compensation  (f) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (e) Compensation  (f) Compensation of the plant adverage to the plant adverage of the plant and editing and defendent employees (other than those included on line 1). If none, enter "NONE."  (g) Translation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (g) Compensation (d) Compensation (e) Compen	(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
37 W. BROAD ST., STE 500  COLUMBUS, OH 43215  COLUMBUS, OH 3215  COLUMBUS, OH 43215  COLUMBUS, OH 43215  2.00  9,000.  0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0	BRUCE L. ROSA			<u> </u>	
COLUMBUS, OH 43215  CLARENCE CLAPHAM  37 W. BROAD ST., STE 530  COLUMBUS, OH 43215  2.00  9,000.  0.  0.  0.  0.  0.  0.  0.  0.  0					•
CLARENCE CLAPHAM 37 W. BROAD ST., STE 530  COLUMBUS, OH 43215  2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  NONE  (c) Compensation deferred compensation allowances  Total number of other employees paid over \$50,000		1.00	0.1	a	n
2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  (c) Compensation  (d) Combutions to deferred compensation deferred compensation  (e) Expense account, other allowances  Total number of other employees paid over \$50,000					
COLUMBUS, OH 43215  2.00  9,000.  0.  0.  2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  (c) Compensation  (d) Combusions to employees and deferred compensation  (e) Expense account, other allowances  account, other allowances  Total number of other employees paid over \$50,000					
2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  (c) Compensation (d) Control understand deferred compensation allowances  (c) Compensation (c) Compen		2 00	9 000	n	0
(a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Combibutions to employee benefit plans account, other allowances  (e) Expense account, other allowances  Total number of other employees paid over \$50,000	COHOMBOD, OR 43213	2.00	9,000.	U •	<u> </u>
(a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Combibutions to employee benefit plans account, other allowances  (e) Expense account, other allowances  Total number of other employees paid over \$50,000					
(a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Combibutions to employee benefit plans account, other allowances  (e) Expense account, other allowances  Total number of other employees paid over \$50,000					
(a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Combibutions to employee benefit plans account, other allowances  (e) Expense account, other allowances  Total number of other employees paid over \$50,000	<del></del>		<del></del>	<del></del>	<del></del>
(a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Combibutions to employee benefit plans account, other allowances  (e) Expense account, other allowances  Total number of other employees paid over \$50,000					
(a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Combibutions to employee benefit plans account, other allowances  (e) Expense account, other allowances  Total number of other employees paid over \$50,000				İ	
(a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Combibutions to employee benefit plans account, other allowances  (e) Expense account, other allowances  Total number of other employees paid over \$50,000	2. Comparation of five highest paid ampleyage (ather than those inc	luded on line 1) If name	enter IINONE II		
(a) Name and address of each employee paid more than \$50,000  NONE  C) Compensation employee entiplass and deferred compensation account, other allowances  Total number of other employees paid over \$50,000	2 Compensation of the highest-paid employees (other than those inc		enter NONE.	(d) Contributions to	(a) Evpance
NONE    Compensation	(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans	account, other
Total number of other employees paid over \$50,000   ■ 0		devoted to position		compensation	allowances
	NONE		İ		
			<u>                                      </u>		
		1	[	ı	
	Total number of other employees paid over \$50,000	<del></del>		<b></b>	<u>n</u>
				Form	

Form 990-PF (2010) LANCASTER LENS, INC.	31 –	6023927	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation N Paid Employees, and Contractors (continued)	lanagers, Highly	0023727	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE	: n		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) (	Compensation
NONE			
Total number of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities		<b>&gt;</b>	0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical infor number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	mation such as the	Ехрег	nses
1 THE FOUNDATION'S CHARITABLE ACTIVITIES CONSIST OF DONATIONS TO OTHER CHARITABLE ORGANIZATIONS. SE ATTACHED LIST OF CONTRIBUTIONS PAID FOR PART XV.	E THE	41	.5,845.
3		<del></del>	
4			
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 air			
1 N/A	10 2.	Amo	ш
2			
All other program-related investments. See instructions.			

Total. Add lines 1 through 3

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Form **990-PF** (2010)

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, s	see instructions.)
1 1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	- 1	
a /	Average monthly fair market value of securities	1a	8,657,389
b /	Average of monthly cash balances	1b	108,538
c l	Fair market value of all other assets	10	0
d ·	Total (add lines 1a, b, and c)	1d	8,765,927
e I	Reduction claimed for blockage or other factors reported on lines 1a and	.;	
	1c (attach detailed explanation) 1e 0.	` '	
2 /	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	8,765,927
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	131,489
5 1	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	8,634,438
6	Minimum investment return. Enter 5% of line 5	6	431,722
Pa	<b>PISTIBLE AMOUNT</b> (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	431,722
2a '	Tax on investment income for 2010 from Part VI, line 5	-	
b	Income tax for 2010. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	3,850
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	427,872.
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	427,872.
6	Deduction from distributable amount (see instructions)	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	427,872
	Irt XII Qualifying Distributions (see instructions)		
	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	40	A1E 0AE
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	415,845.
	Program-related investments - total from Part IX-B  Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	1b 2	
	Amounts set aside for specific charitable projects that satisfy the:		
	Suitability test (prior IRS approval required)	3a	
	Cash distribution test (attach the required schedule)	3b	<del></del>
	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	415,845.
	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		413,043
	income. Enter 1% of Part I, line 27b	5	n
	Adjusted qualifying distributions. Subtract line 5 from line 4	6	415,845
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of		
	4940(e) reduction of tax in those years.		

Form **990-PF** (2010)

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI, line 7				427,872.
2 Undistributed income, if any, as of the end of 2010			r Coursilla Alla	The state of the s
a Enter amount for 2009 only		min who are	398,903.	S. C. Sandar
<b>b</b> Total for prior years:	, I	0.		N WATER
3 Excess distributions carryover, if any, to 2010:			, , , , ,	3 1, 1, 1
a From 2005	1 20 1 1 1			
<b>b</b> From 2006				
c From 2007				
d From 2008				
e From 2009				
f Total of lines 3a through e	i o.		1 10 10 10 10 10 10 10 10 10 10 10 10 10	
4 Qualifying distributions for 2010 from	, , ,	2 1 2 1 3 7 4 6 6	7	44 to 184 to 18 5
Part XII, line 4: ►\$415,845.				
a Applied to 2009, but not more than line 2a	1	, , ,	398,903.	Si Silve
<b>b</b> Applied to undistributed income of prior				6
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus			76 32 78 1	<b>的情况</b>
(Election required - see instructions)	0.			
d Applied to 2010 distributable amount		<i>(</i> -1)		16,942.
e Remaining amount distributed out of corpus	0.	, ,		,
-	0.	-,	1,	0.
5 Excess distributions carryover applied to 2010 (It an amount appears in column (d), the same amount must be shown in column (a))			1 1 1	
6 Enter the net total of each column as indicated below:		, , , ,		
8 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.		3,	
<b>b</b> Prior years' undistributed income. Subtract	,		,	÷
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions	The state of the	0.	1.7 为动族泰人	100
e Undistributed income for 2009. Subtract line		a		4 (1)
4a from line 2a. Taxable amount - see instr.	· · · · · · · · · · · · · · · · · · ·		0.	<u> </u>
f Undistributed income for 2010. Subtract	6 , , , ,			
lines 4d and 5 from line 1. This amount must		and the good fine	S. J. Langer (1969) 114	
be distributed in 2011	,		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	410,930.
7 Amounts treated as distributions out of		,	1、10分的激烈	14.15 19.16 18.16 18.16 18.16 18.16 18.16 18.16 18.16 18.16 18.16 18.16 18.16 18.16 18.16 18.16 18.16 18.16 18
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.		4.4	3, 11, 1, 1, 1, 1
8 Excess distributions carryover from 2005		in the state of th	1. 1911年 新海	The state of the s
not applied on line 5 or line 7	0.	· · · · · · · · · · · · · · · · · · ·	是一个进行的特殊的	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
9 Excess distributions carryover to 2011.		, , ,		
Subtract lines 7 and 8 from line 6a	0.		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
10 Analysis of line 9:	· .		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 m
a Excess from 2006	<u> </u>	, ,		
b Excess from 2007	1 1			
c Excess from 2008	-	,		
d Excess from 2009	4		Market Williams	B. Walter State of the Control of th
e Excess from 2010	<u> </u>		P5 1255 127 13.25 1965	Form <b>900</b> DE (0010)

	Year or Approved for Future	Payment	<del></del>	<del> </del>
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid dunng the year PLEASE SEE ATTACHED STATEMENT	NONE	PUBLIC CHARITY	UNRESTRICTED	412,488
			•	
				410 400
Total b Approved for future payment			, ▶ 3a	412,488.
• Approved for future payment				
NONE				
			į	

Part XVI-A Analysis of Income-Producing Activities
--

Enter gross amounts unless otherwise indicated.	Unrelate	d business income	Exclude	ed by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
8	_	·	1		
b	-				
C	_	<del></del>			
d					
e	_		11		<del></del>
f					
g Fees and contracts from government agencies		·			
2 Membership dues and assessments		<del></del>			
3 Interest on savings and temporary cash	1 1		1 1	İ	
investments					
4 Dividends and interest from securities		<del></del>	14	205,944.	
5 Net rental income or (loss) from real estate:	\		$\bot$	```	
a Debt-financed property					<del></del>
b Not debt-financed property			$\perp$		
6 Net rental income or (loss) from personal					
property					
7 Other investment income			$\bot$		
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a	-				
b	_		$\perp$		
c	-				
d	-				
e	_		<del>  -</del>		<del></del>
12 Subtotal. Add columns (b), (d), and (e)	<u> </u>	0	<u>.ll</u>	205,944.	
13 Total. Add line 12, columns (b), (d), and (e)				13	205,944.
(See worksheet in line 13 instructions to verify calculations.)		<del></del>			
Part XVI-B Relationship of Activities	to the Acco	mplishment of E	xempt	Purposes	
Line No Explain below how each activity for which inc	ome is reported i	n column (e) of Part XVI-	A contribu	ted importantly to the accomi	Dishment of
the foundation's exempt purposes (other tha				, , , , , , , , , , , , , , , , , , ,	
N/A					
		<u></u>			
		·			
023621 12-07-10		·			Form <b>990-PF</b> (2010)

# Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of								<i>"</i> , •	Yes	No
t	he Code (	(other than section 501(c)	(3) organizations) o	r in section 52	7, relating to political organ	uzations?			3 4	
a T	<b>Fransfers</b>	from the reporting founda	ation to a noncharital	ble exempt orç	janization of:				. 4	
(	1) Cash							1a(1)		X
(	2) Other	assets						1a(2)		X
<b>b</b> (	Other tran	sactions:								1,
•	•	of assets to a noncharital	, ,					1b(1)	L	X
•		hases of assets from a nor		organization				1b(2)		X
	•	al of facilities, equipment,	or other assets					1b(3)		X
-	-	bursement arrangements					•	1b(4)		X
-	-	s or loan guarantees	mahawahin as fundsale	oine ealiastatsa				1b(5)		X
•	•	rmance of services or me	•	_				1b(6)	$\vdash$	X
	_	f facilities, equipment, mai	•			wave show the fa	air market value of the goods, o		ente	
		•			• •		tion or sharing arrangement, s		, icio,	
		i) the value of the goods,					non or onaring arrangement, o			
(a) Lin		(b) Amount involved			exempt organization	(d) Descrip	otion of transfers, transactions, and	sharing an	rangeme	nts
				N/A						
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					<del></del>		_ <del></del>			
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	$\neg$				<del></del>					
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2a !	s the four	ndation directly or indirect	tly affiliated with, or r	related to, one	or more tax-exempt organ	zations describe	d			
ı	n section	501(c) of the Code (other	r than section 501(c)	)(3)) or in sect	ion 527?			Yes	X	No
<u>b</u> 1	f "Yes," co	omplete the following sch								
		(a) Name of org	anization		(b) Type of organization		(c) Description of relations	np		
		N/A			<u> </u>					
			<del></del>		<u> </u>	<del> </del>				
—		<del></del>				<del> </del>				
						<del>                                     </del>				
	Unde	er penalties of perjury, I declare	e that I have examined the	nis return, includi	ng accompanying schedules an	d statements, and t	o the best of my knowledge and bel	ef, it is tru	ie, corre	ct.
Sig	land				ased on all information of which			•	•	•
Hei	re	1	SUL	>	12/5	111				
		Signature of officer or tru	ıstee		Date	·	Title			
		Print/Type preparer's na	ame	Preparer's si	gnature	Date	Check If PTIN			
		}		1511	MARIANI	111/11	self- employed	<u> </u>	ا بر م	,11
Pai		T.J. CONGE	R, CPA	90/1	BILLI	10-17/	100	<u> 100</u>	28/	40
Preparer   Firm's name ► JOHN GERLACH & COMPANY LLP   Firm's EIN ►							<del></del>			
Use	Only			<i>L</i>						
		Firm's address ► 37								
		CO	LUMBUS, O	H 4321	5		Phone no. 614 – 2			
							Fo	rm <b>990</b>	-PF (	2010)

023622 04-26-11

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FORM 990-PF DIVIDENT	S AND	INTER	EST FROM	SECUE	RITIES	STATEMENT 1
SOURCE		GROSS	AMOUNT		ITAL GAINS	COLUMN (A) AMOUNT
DIVIDENDS & INTEREST FROM SECURITIES			205,944.		0.	205,944.
TOTAL TO FM 990-PF, PART I, I	.N 4		205,944.		0.	205,944.
FORM 990-PF	AC	COUNTI	NG FEES			STATEMENT 2
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVI MENT INC		(C) ADJUSTED NET INCOM	
ACCOUNTING FEES		5,500.	4	,400.		1,100.
TO FORM 990-PF, PG 1, LN 16B		5,500.	4	,400.		1,100.
FORM 990-PF	<del></del>	TAX	ES			STATEMENT 3
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVI MENT INC		(C) ADJUSTED NET INCOM	
EXCISE TAXES PAYROLL TAXES		3,8 <b>44.</b> 689.		0. 551.		0. 138.
TO FORM 990-PF, PG 1, LN 18 =		4,533.	-	551.		138.
FORM 990-PF	0	THER E	XPENSES	<del></del>		STATEMENT 4
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVI MENT INC		(C) ADJUSTED NET INCOM	(D) CHARITABLE E PURPOSES
BANK CHARGES FILING FEES- STATE OF OHIO		1,372. 225. 1,547.		,098. 180. 0.		274. 45. 0.
TO FORM 990-PF, PG 1, LN 23		3,144.	1	,278.		319.

FORM 990-PF OTHER INCREASES IN NET	r Asset	S OR F	FUND BALANCES	STATEMENT 5
DESCRIPTION				AMOUNT
FMV IN EXCESS OF BASIS OF STOCK CONT PRIOR PERIOD ADJUSTMENT	TRIBUTI	ON		212,874.
TOTAL TO FORM 990-PF, PART III, LINE	E 3			213,774.
FORM 990-PF U.S. AND STATE/CI	ITY GOV	ERNMEN	NT OBLIGATIONS	STATEMENT 6
DESCRIPTION	U.S. GOV'T	OTHER GOV'I		FAIR MARKET VALUE
			_	<del></del>
U.S. TREASURY - 6% DUE 02/15/26	X		8,704.	13,097.
TOTAL U.S. GOVERNMENT OBLIGATIONS			8,704.	13,097.
TOTAL STATE AND MUNICIPAL GOVERNMENT	r OBLIG	ATIONS	3	
TOTAL TO FORM 990-PF, PART II, LINE	10A		8,704.	13,097.
FORM 990-PF CORE	PORATE	STOCK		STATEMENT 7
DESCRIPTION			BOOK VALUE	FAIR MARKET VALUE
ABERCROMBIE & FITCH			137.	877.
J.P. MORGAN CHASE			32,385.	127,418.
BRISTOL MYERS			11,476.	22,928.
DPL, INC. DARDEN RESTAURANTS			7,302. 981.	20,419. 11,373.
FIRST ENERGY CORP.			4,940.	8,930.
FORTUNE BRANDS			11,872.	30,105.
GENERAL MILLS			4,672.	29,880.
HUNTINGTON BANCSHARES			45,229.	38,938.
LANCASTER COLONY CORPORATION			486,813.	8,697,744.
LIMITED, INC. PEPSICO			7, <b>441.</b> 6,849.	37,860. 29,458.
ROYAL DUTCH PETROLEUM			10,222.	29,424.
VERIZON			23,015.	30,138.
WORTHINGTON INDUSTRIES				
			4,193.	4,194.
ZIMMER HOLDINGS, INC.			581.	4,802.
ZIMMER HOLDINGS, INC. ACCO BRANDS CORP. DUKE ENERGY				

LANCESTER LENS, INC.		31-6023927
SPECTRA ENÈRGY FAIRPOINT COMMUNICATIONS DRESS BARN FRONTIER COMMUNICATIONS	3,080. 87. 467. 365.	6,323. 114. 1,079. 1,535.
TOTAL TO FORM 990-PF, PART II, LINE 10B	668,026.	9,143,247.