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

		ndar year 2012 or tax year beginning Of foundation	CT	1, 2012	, and ending		EP 30, 2013 Employer identification	
C.	me	EL VALLEY CHARITIES					34-1365357	,
		and street (or PO box number if mail is not delivered to s	treet :	address)	Room/suite		Telephone number	
		TWP HIGHWAY 266	ou oct i	addiessy	1,00,000	0	740-264-31	.13
		town, state, and ZIP code					If exemption application is p	
		OMINGDALE, OH 43910				ľ	it exemption approach is t	Softaning, Shash Hors
		k all that apply Initial return		Initial return of a fo	rmer nublic charity	\exists_{D}	1. Foreign organization	s, check here
		Final return		Amended return	mor paono onam,			•
		Address change		Name change			Foreign organizations me check here and attach or	eeting the 85% test, omputation
H C	hec		3) ex	empt private foundation		٦ _۶	If private foundation sta	itus was terminated
	_	ection 4947(a)(1) nonexempt charitable trust		Other taxable private founda	tron		under section 507(b)(1	
Fa				ng method X Cash	Accrual	F	If the foundation is in a	60-month termination
(fr	om	Part II, col. (c), line 16)	_	her (specify)		_ [under section 507(b)(1	
		1,667,318. (Part I, o	colui	mn (d) must be on cash b	asis.)			<u>,</u>
Pa	irt	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may n necessanly equal the amounts in column (a))	ot	(a) Revenue and expenses per books	(b) Net investment income		(c) Adjusted net income	(d) Disbursements for charitable purpose (cash basis only)
	1	Contributions, gifts, grants, etc., received		110,000.			N/A	11111
	2	Check If the foundation is not required to attach Sch E	В			_		
	3	Interest on savings and temporary cash investments		13,754.	13,754			STATEMENT
	4	Dividends and interest from securities		·				
		a Gross rents				\Box		
	t	Net rental income or (loss)						
	6	Net gain or (loss) from sale of assets not on line 10						
Revenue	ı	Gross sales price for all assets on line 6a	_					<u> </u>
ě		Capital gain net income (from Part IV, line 2)			0) •	·····	ļ
-	8	Net short-term capital gain		mashin-initi				
	9	Income modifications Gross sales less returns					-	
	10	and allowances					13.4 ,	
		Less Cost of goods sold					·····	
		Gross profit or (loss)						
		Other income		123,754.	13,754			
		Total. Add lines 1 through 11		0.) .		
	13 14	Compensation of officers, directors, trustees, etc Other employee salaries and wages		- 0.		•		-
	15	Pension plans, employee benefits	i				-	
es		Legal fees						
Operating and Administrative Expenses		Accounting fees STMT 2		825.	0).		
Ř		Other professional fees				7		
è	17							
rati	18	Taxes STMT 3		280.	C).		
ist	19	Depreciation and depletion		المستعددة المستعددة المستعددة				
Ξ	20	Occupancy	g==	でいるにこところ	101	_	 	
₹	21	Travel, conferences, and meetings	2		ĬĞ	\perp		
auc	22	Printing and publications	12,2%3	DEC 0 2 2013	1,5	_		
ng	23	· · · · · · · · · · · · · · · · · · ·	F-8	200.	lč. o) .	-	
rati	24	Total operating and administrative		Cielenial	1			
þe		expenses. Add lines 13 through 23	_ 1000	00 670	<u> </u>) .		20 6
-	ı	Contributions, gifts, grants paid		80,678.		-		80,6
	26	Total expenses and disbursements.		01 002	•	$\backslash \mid$		80,6
	_	Add lines 24 and 25		81,983.	<u> </u>) .		00,0
	l	Subtract line 26 from line 12		41,771.				
	l	Excess of revenue over expenses and disbursements		41,//1•	13,754			·
	l	Net investment income (if negative, enter -0-)			13,734		N/A	-
	L. (Adjusted net income (if negative, enter -0-) LHA For Paperwork Reduction Act Notice,		l		1_	74 / VJ	_t

Form **990-PF** (2012)

Г	-	Balance Sheets Attached schedules and amounts in the description column should be for motor-fiver amounts only	Beginning of year		End of year			
	OFI	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value			
	1	Cash - non-interest-bearing		1 164 507	1 464 505			
	2	Savings and temporary cash investments	1,422,755.	1,464,797.	1,464,797.			
	3	Accounts receivable		1				
		Less: allowance for doubtful accounts	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
	4	Pledges receivable		1				
		Less allowance for doubtful accounts						
	5	Grants receivable						
	6	Receivables due from officers, directors, trustees, and other						
		disqualified persons	ļ		······································			
	7	Other notes and loans receivable						
		Less: allowance for doubtful accounts						
ets	8	Inventories for sale or use	0.71					
Assets	9	Prepaid expenses and deferred charges	271.					
		Investments - U S and state government obligations						
		Investments - corporate stock						
		Investments - corporate bonds			· · · · · · · · · · · · · · · · · · ·			
	11	Investments - land, buildings, and equipment basis						
		Less accumulated depreciation						
	ł	Investments - mortgage loans	205 261	205 261	200 501			
	13	Investments - other STMT 5	205,361.	205,361.	202,521.			
	14	Land, buildings, and equipment basis						
		Less. accumulated depreciation						
	15	Other assets (describe						
			1 600 207	1 670 150	1 667 210			
		Total assets (to be completed by all filers)	1,628,387.	1,670,158.	1,667,318.			
		Accounts payable and accrued expenses						
	18	Grants payable						
es	19	Deferred revenue						
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons						
ē	21	Mortgages and other notes payable						
_	22	Other liabilities (describe						
		Total Makilinia () ()	0.	0.				
	23	Total llabilities (add lines 17 through 22)	U•					
		Foundations that follow SFAS 117, check here						
S	24	and complete lines 24 through 26 and lines 30 and 31.						
Š	I	Unrestricted .						
<u>Sala</u>	25	Temporarily restricted						
Ā	26	Permanently restricted Foundations that do not follow SFAS 117, check here						
Ē		·						
ō	27	and complete lines 27 through 31.	0.	0.				
ets	27	Capital stock, trust principal, or current funds	0.	0.				
Net Assets or Fund Balances	28	Paid-in or capital surplus, or land, bldg, and equipment fund	1,628,387.	1,670,158.				
et	29	Retained earnings, accumulated income, endowment, or other funds	1,628,387.	1,670,158.				
Ž	30	Total net assets or fund balances	1,020,307.	1,070,130.				
	31	Total liabilities and net assets/fund balances	1,628,387.	1,670,158.				
				1/0/0/1504				
P	art	Analysis of Changes in Net Assets or Fund B	alances					
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30					
	(mus	st agree with end-of-year figure reported on prior year's return)		1	<u>1,628,387.</u>			
2	Ente	r amount from Part I, line 27a		2	41,771.			
3	Othe	r increases not included in line 2 (itemize)		3	0.			
		lines 1, 2, and 3		4	1,670,158.			
5	Decr	eases not included in line 2 (itemize)	 	5	0.			
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	1,670,158.			

		nd(s) of property sold (e g or common stock, 200 shs			` P	How a - Purc - Don		(c) Date (mo , c	acquired lay, yr)	(d) Date (mo , day	
<u> </u>					ļ						
b NO:	NE									 	
<u>c</u>	-				 					 	
8							-			 	
(e) Gross sales price	(f)	Depreciation allowed (or allowable)	107	st or other basis expense of sale					iain or (loss s (f) minus		
<u>a</u>								-			
b											
<u>C</u>				<u></u>							
d e							 .				
Complete only for assets showing	ia aain in	column (h) and owned by t	he foundation	on 12/31/69				I) Gains ((Col (h) gain	minus	
		(j) Adjusted basis		cess of col (I)				ľ (k), buť	not less tha	n -0-) or	
(i) F.M V as of 12/31/69	'	as of 12/31/69		col (j), if any				Losses	(from col	(h))	
a											,
b											
C											
d											
<u>e</u>											
? Capital gain net income or (net ca	pital loss	If gain, also enter If (loss), enter -0-	in Part I, line in Part I, line	7 7	}	2					
Net short-term capital gain or (los	s) as defi	ned in sections 1222(5) and	d (6)		Ξ. Ι						
If gain, also enter in Part I, line 8,			. ,								
If (loss), enter -0- in Part I, line 8		:		- B.O. A	ال	3_					
Part V Qualification U							nent in	Come		·	
For optional use by domestic private	toundati	ons subject to the section 4	940(a) tax on	net investment ir	icome	•)					
f section 4940(d)(2) applies, leave th	ns part bl	ank									
Vas the foundation liable for the sect	tion 4942	tax on the distributable amo	ount of any ve	ear in the base per	riod?					Yes	X No
f "Yes," the foundation does not qual				•							
Enter the appropriate amount in e	each colu	mn for each year, see the in	structions be	fore making any e	ntries	3					
(a) Base period years		(b)			(c)				Distri	(d) bution ratio	
Calendar year (or tax year beginnii	ng in)	Adjusted qualifying dist		Net value of no					(col (b) di	vided by col (
2011			0,658.				2,650				9708
2010			5,491.				3,827				618
2009	+		8,914.				9,159				2540
2008			5,172.	·			7,51				4536
2007		3(6,865.			, 49	9,325	·		•03	792
Total of line 4 notices (d)										26	0904
! Total of line 1, column (d)	E waar ba	on nomed - duude the tetal o		as butte aumbar	of va	0.00		2	 -	.20	030.
Average distribution ratio for the the foundation has been in existen			m line 2 by 5,	or by the number	oi ye	ais		3		. 05	218
the roundation has been in exister	116 11 1622	tilali 5 years							 		
Enter the net value of noncharitab	le-use as	sets for 2012 from Part X II	ine 5					4		1,672,	012
Lines the net value of nemeriarilar	10 030 03	3013 101 20 12 110111 1 BIL X, II									
Multiply line 4 by line 3								5		87,	247
manapy and i by and c										<u>-</u>	
Enter 1% of net investment incom	ne (1% of	Part I, line 27b)						6			138
	, ,	,									
Add lines 5 and 6								7		<u>87,</u>	385
										<u>-</u> -	
Enter qualifying distributions from	n Part XII,	line 4						8		80,	678
If line 8 is equal to or greater than See the Part VI instructions	line 7, ch	eck the box in Part VI, line	1b, and comp	lete that part usin	g a 1	% tax	rate				

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Pa	rt VI Excise Tax Based on Investment Income (Section 494	0(a), 4	1940(b), 49	40(e), or 4	948 -	see in	stru	ctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and element operating foundations described in section 4940(d)(2), check here	nter "N/A	\" on line 1)					
	Date of ruling or determination letter (attach copy of letter if nec	essary-	see instruction	ıs)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	• 🔲 i	and enter 1%)	1			2	<u>75.</u>
	of Part I, line 27b								•
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%	of Part	I, line 12, col	(b) J					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Of	hers ent	ter -0-)	:	2				0.
3	Add lines 1 and 2				3			2	75.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only O	thers en	ter -0-)		4	_			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-				5			2	75.
6	Credits/Payments:								
а	2012 estimated tax payments and 2011 overpayment credited to 2012	6a							
	Exempt foreign organizations - tax withheld at source	6b							
	Tax paid with application for extension of time to file (Form 8868)	6c							
	Backup withholding erroneously withheld	6d							
	Total credits and payments Add lines 6a through 6d		***************************************		7				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	ched			8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			•	9			2	75.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			>	10				
	Enter the amount of line 10 to be Credited to 2013 estimated tax			Refunded >	11				
_	rt VII-A Statements Regarding Activities		•						
	During the tax year, did the foundation attempt to influence any national, state, or local legis	lation or	r did it participa	te or intervene	ın			Yes	No
	any political campaign?					Ī	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpor	ses (see	instructions fo	r definition)?			1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities an			-	ed or				-
	distributed by the foundation in connection with the activities.						:		
C	Did the foundation file Form 1120-POL for this year?						1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	vear					•••••		
	(1) On the foundation > \$ 0 • (2) On foundation managers			0.					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expendi		-	undation	•				
	managers ▶ \$ 0.								
2	Has the foundation engaged in any activities that have not previously been reported to the II	RS?					2		X
	If "Yes," attach a detailed description of the activities.	_		•					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing i	nstrume	ent, articles of i	ncorporation, o)r				
·	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change		,			ĺ	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year				•		4a		Х
	If "Yes," has it filed a tax return on Form 990-T for this year?				N,	/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	•				Ī	5		Х
-	If "Yes," attach the statement required by General Instruction T.					Ī			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied el	ther							
•	By language in the governing instrument, or					i			
	By state legislation that effectively amends the governing instrument so that no mandator	v direction	ons that conflic	t with the state	law				
	remain in the governing instrument?	,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			6		x
7	Did the foundation have at least \$5,000 in assets at any time during the year?					ŀ	7	Х	
•	If "Yes," complete Part II, col. (c), and Part XV.					Ī			
Яa	Enter the states to which the foundation reports or with which it is registered (see instruction	ns\ ►							
Ja	OH	, -				— I			
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	ttorney (General /or des	unate)		— I			1
U	•	atomey (General (Di UES	igirate)		İ	8b	х	1
n	of each state as required by General Instruction G? If "No," attach explanation is the foundation claiming status as a private operating foundation within the meaning of se	ction An	M2/i\/3\ or 40/	19/1\/5\ for onlo	ndar	}	<u> </u>	- 	-
9				(1)(3) IUI GAIG	iiuai		9	Ì	х
10	year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," o					}	10		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedu	ile listing (tneir names and a	garesses				Ц	>

N/A

3b

4a

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X

b If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 4720, to determine if the foundation had excess business holdings in 2012.)

had not been removed from jeopardy before the first day of the tax year beginning in 2012?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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Part VII-B Statements Regarding Activities for Which	Form 4720 May Be I	Required (continu	ued)		
5a During the year did the foundation pay or incur any amount to					
(1) Carry on propaganda, or otherwise attempt to influence legislation (sect	ıon 4945(e))?	Ye	es X No		
(2) Influence the outcome of any specific public election (see section 4955)	, or to carry on, directly or indir	ectly,			
any voter registration drive?			s X No		
(3) Provide a grant to an individual for travel, study, or other similar purpos	es?	Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	tion described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?		Y6	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literal	ry, or educational purposes, or	for			
the prevention of cruelty to children or animals?		Y6	es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify u	inder the exceptions described	ın Regulations	/-		
section 53 4945 or in a current notice regarding disaster assistance (see inst	tructions)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check	k here				
c if the answer is "Yes" to question 5a(4), does the foundation claim exemption					
expenditure responsibility for the grant?	N	I/A 🔲 Ye	es L No		
If "Yes," attach the statement required by Regulations section 53.49	945-5(d).				
6a Did the foundation, during the year, receive any funds, directly or indirectly, t	to pay premiums on				
a personal benefit contract?		Y6	es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	a personal benefit contract?		<u> </u> _	6b	X
If "Yes" to 6b, file Form 8870.					
7a At any time during the tax year, was the foundation a party to a prohibited tax		Ye	s X No		
b If "Yes," did the foundation receive any proceeds or have any net income attri	ibutable to the transaction?		N/A	7b	
Part VIII Information About Officers, Directors, Trus	stees, Foundation Ma	anagers, Highly	/		
Faid Employees, and Contractors	• · · · · · · · · · · · · · · · · · · ·				
1 List all officers, directors, trustees, foundation managers and the	1	(c) Compensation	(d) Contributions to	(=) [·unanaa
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	accou	xpense int, other
	to position	enter -0-)	compensation	allov	wances
CHRISTINE DAVIS	TRUSTEE				
702 TWP HIGHWAY 266		0.	0.		0.
BLOOMINGDALE, OH 43910	TRUSTEE	0.	<u> </u>		
SAM DAVIS 702 TWP HIGHWAY 266	TRUSTEE				
	0.00	0.	0.		0.
BLOOMINGDALE, OH 43910	0.00	0.			<u> </u>
	\dashv				
	\dashv				
	\dashv	İ			
	\dashv				
2 Compensation of five highest-paid employees (other than those in	ncluded on line 1). If none.	enter "NONE."			
	(b) Title, and average		(d) Contributions to employee benefit plans	(e) E	xpense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation		int, other wances
NONE	devoted to position		Compensation		
NONE	-				
	 	 	 		
	\dashv				
					•
	╡				
	-				
	-	 			
	-				
Total number of other employees paid over \$50,000	<u>, l</u>	1	• T	I	0
Total manual or other employees pare and wooden				000 D	F (0046)

Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Paid Employees, and Contractors (continued) 3 Five highest-paid independent contractors for professional services. If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service NONE Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 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 and 2 Amount N/A All other program-related investments. See instructions

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Total. Add lines 1 through 3

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes-1,618,143. 1a a Average monthly fair market value of securities 79,331. 1b b Average of monthly cash balances 10 c Fair market value of all other assets 1,697,474. 1d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0. 18 1c (attach detailed explanation) 2 Acquisition indebtedness applicable to line 1 assets 3 Subtract line 2 from line 1d 4 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions) 1,672,012 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. Minimum investment return. Enter 5% of line 5 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain Part XI foreign organizations check here and do not complete this part) 83,601. Minimum investment return from Part X, line 6 275 Tax on investment income for 2012 from Part VI, line 5 2a Income tax for 2012 (This does not include the tax from Part VI) Add lines 2a and 2b 2c C 3 3 Distributable amount before adjustments. Subtract line 2c from line 1 Recoveries of amounts treated as qualifying distributions 4 5 Add lines 3 and 4 Deduction from distributable amount (see instructions) 6 7 326 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 80,678. a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1a b Program-related investments - total from Part IX-B 1b 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes Amounts set aside for specific charitable projects that satisfy the 3 Suitability test (prior IRS approval required) За Cash distribution test (attach the required schedule) 3b 80,678. 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b 5 Adjusted qualifying distributions. Subtract line 5 from line 4 6 Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI,				
line 7				83,326.
2 Undistributed income, if any, as of the end of 2012			_	
a Enter amount for 2011 only			0.	
b Total for prior years		_		
,,		0.	***	······································
3 Excess distributions carryover, if any, to 2012				
a From 2007				
b From 2008				
c From 2009 16,113. d From 2010 26,306.				
e From 2011	42,419.			
f Total of lines 3a through e	42,419.			
4 Qualifying distributions for 2012 from Part XII, line 4 ▶\$ 80,678.				
· · · · · · · · · · · · · · · · · · ·			0.	
a Applied to 2011, but not more than line 2a	·		1.1 1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions) c Treated as distributions out of corpus		,	***,**!	
· · · · · · · · · · · · · · · · · · ·	0.			
(Election required - see instructions) d Applied to 2012 distributable amount		##• • • • • • • • • • • • • • • • • • •		80,678.
e Remaining amount distributed out of corpus	0.	······································		
5 Excess distributions carryover applied to 2012	2,648.	····		2,648.
(If an amount appears in column (d), the same amount must be shown in column (a))				•
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	39,771.			
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		0		
amount - see instructions		0.		
e Undistributed income for 2011 Subtract line			0.	
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2012 Subtract				
lines 4d and 5 from line 1. This amount must				0.
be distributed in 2013				
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	0.			
section 170(b)(1)(F) or 4942(g)(3)				
8 Excess distributions carryover from 2007	0.			
not applied on line 5 or line 7				
9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a	39,771.			
10 Analysis of line 9	3,7,7,1.			
a Excess from 2008				
b Excess from 2009 13, 465.				
E Excess from 2010 26, 306.				
d Excess from 2011				
e Excess from 2012				
		<u> </u>		Form 990-PF (2012)

Part XIV Private Operating F	oundations (see ins	structions and Part VII	-A, question 9)	N/A	
1 a If the foundation has received a ruling of	r determination letter that	it is a private operating			
foundation, and the ruling is effective fo	r 2012, enter the date of t	he ruling	>		
b Check box to indicate whether the found	lation is a private operatin	g foundation described i	n section	4942(j)(3) or 49)42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
Income from Part I or the minimum	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII.					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of			l		
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					·········
alternative test relied upon					
a "Assets" alternative test - enter (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter			· · · · · · · · · · · · · · · · · · ·		
2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in					
section 4942(j)(3)(B)(III)				· · · · · · · · · · · · · · · · · · ·	
(3) Largest amount of support from					
an exempt organization (4) Gross investment income					<u> </u>
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5 000 or me	nre in assets
at any time during t			ii tile todiladdol	1112G 40,000 01 111	010 111 00000
1 Information Regarding Foundation			·		
a List any managers of the foundation wh	-	than 2% of the total cont	ributions received by the	foundation before the clo	se of any tay
year (but only if they have contributed r			illuations received by the	Toditaation before the ele-	oo or arry tax
SAM DAVIS	, , , , , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·			
b List any managers of the foundation wh	a own 10% or more of the	e stock of a cornoration	or an equally large portu	on of the ownership of a n	artnership or
Other entity) of which the foundation ha			or an educin in the holds	on or the omneroup or a p	araioranip vi
NONE	•				
2 Information Regarding Contribut	ion Grant Gift Loon	Sabalambin etc. De	'Agrame'		
Check here X if the foundation of				not accept uncollected requi	agete for funde. If
the foundation makes gifts, grants, etc					
a The name, address, and telephone num	·				
a rue name, audiess, and telephone hull	por or o-mail or the hetsol	n to whom applications s			
b The form in which applications should t	a cubmitted and informat	on and materials they sh	nould include		
a the form in which applications should t	o suvimuou anu iiiiviiTial	ion and materials they Si	ioulu moluut		
c Any submission deadlines			···· <u>·</u>		 -
• Any Submission deadines					
d Any restrictions or limitations on award	s, such as by geographica	l areas, charitable fields.	kinds of institutions, or	other factors	
,	,	,			

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual. Recipient Purpose of grant or contribution show any relationship to Foundation Amount any foundation manager status of Name and address (home or business) or substantial contributor recipient a Paid during the year MISCELLANEOUS 836. CHARITABLE AIM WOMEN'S CENTER 248 NORTH FIFTH STREET 2,500. STEUBENVILLE, OH 43952 AMERICAN BIBLE SOCIETY 1865 BROADWAY 100. NEW YORK, NY 10023-7505 AMERICAN CANCER SOCIETY P.O. BOX 1346 STEUBENVILLE, OH 43952 300. AMERICAN CENTER FOR LAW & JUSTICE P.O. BOX 65000 750. VIRGINIA BEACH, VA 23467-5000 SEE CONTINUATION SHEET(S) ➤ 3a 80,678. Total b Approved for future payment NONE Total

Unrelated b (a) Business code	usiness income (b) Amount	Exclusion code	y section 512, 513, or 514 (d) Amount	(e) Related or exempt function income
Business	• •	sion code	· ·	•
code	Amount	code	Amount	
			1	
		14	13,754.	
ļ <u>-</u>		14	13,734.	
		 	· · · · · · · · · · · · · · · · · · ·	
				
				
	-	<u> </u>		
				
 			-	
				
		1 1		
		-		
	C).	13,754.	
<u> </u>			13	13,7
a tha Assar	polichment of	Everent D	urnosas	
O tile Accom	ipiisiiiiieiit oi	Exempt F		
		I-A contributed	importantly to the accomp	lishment of
by providing funds	for such purposes)			
			<u>-</u>	
				<u>.</u>
				
	 			
_	me is reported in c	o the Accomplishment of	me is reported in column (e) of Part XVI-A contributed	o the Accomplishment of Exempt Purposes me is reported in column (e) of Part XVI-A contributed importantly to the accomp

Form 990)-PF (2(012) STEEL	VALLEY C	CHARITI	ES			34-	1365357	Pa	ige 13
Part 2		Information Re Exempt Organ	egarding Tran			ons ar	nd Relations				<u> </u>
1 Did	the org	janization directly or indi		of the followin	g with any other org	anızatıor	n described in secti	on 501(c) of		Yes	No
		other than section 501(c)									
a Tra	nsfers 1	rom the reporting founda	ation to a noncharita	able exempt or	ganization of						
(1)	Cash								1a(1)		X
(2)	Other	assets							1a(2)		X
b Oth	er trans	sactions									
(1)	Sales	of assets to a noncharital	ble exempt organiza	ition					1b(1)		X
(2)	Purch	ases of assets from a noi	ncharitable exempt	organization					1b(2)		X
(3)	Rental	of facilities, equipment,	or other assets						1b(3)		X
		oursement arrangements							1b(4)		X
		or loan guarantees							1b(5)		X
		mance of services or me	•	•					1b(6)		X
	•	facilities, equipment, ma	-		· •				1 <u>1</u>	L	
		er to any of the above is								ets,	
		given by the reporting for			eo iess man iair mar	Ket value	e iii any transaction	or Shanny arrange	illelit, Silow III		
(a) Line n		the value of the goods, (b) Amount involved	· · · · · · · · · · · · · · · · · · ·		e exempt organizatio	n	(d) Description	of transfers, transaction	one and sharing ar	rangeme	ents
(d) Line ii		(b) / iiiioani iiivoivoa	(b) Harrio o	N/A	o oxompt organizatio		(a) occompany	101 041101010, 041100010	mo, and one mg		
				И/ И			+				
	+				<u> </u>						
	+						<u> </u>				
					· · · · · · · · · · · · · · · · · · ·						
										_	
									<u> </u>		
											_
		dation directly or indirect 501(c) of the Code (other	= :			organiz	ations described		Yes	X	☐ No
b If "	es, co	mplete the following school			(h) Turn of sure of	-otion		(a) Decomption of	alationehie		
		(a) Name of org	janization		(b) Type of organi	zation		(c) Description of re	siationsiiih		
	-	N/A				-					
					-						
		 									
			:								
	Under	penalties of perjury, I declare	that I have examined th	nis return, includir	I ng accompanying sched	ules and s	statements, and to the	best of my knowledge			
Sign Here		lief, it is true correct, and con							May the IRS return with the shown below X Yes	e prepa (see ins	rer
	Sign	ture of officer or trustee			D ate		Title				
		Print/Type preparer's na	nme	Preparer's s	ignature		Date	Check If	PTIN		
		THOMAS A		70	a Jak			self- employed			
Paid		D'ANNIBALL		<u> </u>			11/18/13		P00062		<u> </u>
Prepa	arer	Firm's name ► D'A	NNIBALLE	AND CO	MPANY INC			Firm's EIN ► 3	4-16873	12	

Firm's address ▶ CERTIFIED PUBLIC ACCOUNTANTS

STEUBENVILLE, OH 43952

Form **990-PF** (2012)

740-264-7173



Phone no

Preparer **Use Only**

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

Schedule of Contributors

OMB No 1545-0047

2012

Department of the Treasury Internal Revenue Service

Name of the organization

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

STEEL VALLEY CHARITIES

Employer identification number

34-13653<u>57</u>

Organization type (check one): Filers of: Section: Form 990 or 990-EZ							
Filers of	f:	Section:					
Form 99	0 or 990-EZ	501(c)() (enter number) organization					
		4947(a)(1) nonexempt charitable trust not treated as a private foundation					
		527 political organization					
Form 99	0-PF	X 501(c)(3) exempt private foundation					
		4947(a)(1) nonexempt charitable trust treated as a private foundation					
		501(c)(3) taxable private foundation					
		s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.					
General	Rule						
X	For an organization contributor. Compl	n filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one lete Parts I and II.					
Special	Rules						
	509(a)(1) and 170(t	c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 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% i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.					
	total contributions	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or cruelty to children or animals. Complete Parts I, II, and III.					
	ontributions for use If this box is check purpose. Do not co	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, se exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. Red, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., omplete any of the parts unless the General Rule applies to this organization because it received nonexclusively e, etc., contributions of \$5,000 or more during the year					
but it m	ust answer "No" on	hat is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).					

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Name of organization

Employer identification number

STEEL VALLEY CHARITIES

34-1365357

Part I	Contributors (see instructions). Use duplicate copies of Part I	if additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	SAM DAVIS 702 TWP HIGHWAY 266 BLOOMINGDALE, OH 43910	\$110,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		s	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II of there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Traine, address, and all T-Y	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll

(b)

Name, address, and ZIP + 4

(c)

Total contributions

Noncash

Person Payroll Noncash

(Complete Part II if there is a noncash contribution.)

(d)

Type of contribution

(Complete Part II if there is a noncash contribution.)

(a)

No.

Employer Identification number

STEEL VALLEY CHARITIES

34-1365357

Part II	Noncash Property (see instructions). Use duplicate copies of P	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Schedulè	В	(Form 99	90.	990-EZ.	or !	990-PI	Ð ((2012)

Page 4

Name of org	anization		Employer identification number
STEEL Part III	VALLEY CHARITIES Exclusively religious, charitable, etc., individ	ual contributions to section 501(c	34-1365357 c)(7), (8), or (10) organizations that total more than \$1,000 for the
	year. Complete columns (a) through (e) and the the total of exclusively religious, charitable, etc., Use duplicate copies of Part III if additional	Tollowing line entry. For organization contributions of \$1,000 or less for space is needed.	ons completing Part III, enter r the year (Enter this information once)
(a) No.		(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gif	ft
,	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	Transferee's name, address, and		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of git	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of git	ft
	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee

Part XV Supplementary Information			<u> </u>	
3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
AMERICAN FAMILY ASSOCIATION				
P.O. BOX 2440				
TUPELO, MS 38803				200.
AMERICAN LUNG ASSOCIATION				
P.O. BOX 7000				300
ALBERT LEA, MN 56007-8000		 .		300.
AUTISM SPEAKS				
P.O. BOX 26401				
LEHIGH VALLEY, PA 18002-6401		<u>-</u>		250.
BOB & SHEILA MONDRAGON				
1027 COTTAGE STREET ASHLAND, OH 44805				393.
ASHLAND, OR 44005		 ,		333.
CAMPUS CRUSADE FOR CHRIST				
100 SUNPORT LANE				
ORLANDO, FL 32809				3,500.
CANCER DIETARY INIATIVE				
3204 JOHNSON ROAD				
STEUBENVILLE, OH 43952		· · · · · · · · · · · · · · · · · · ·		100.
CAPITOL MINISTRIES				
P.O. BOX 30994 PHOENIX, AZ 85046				300.
CHARITY HOSPICE				
P.O. BOX 2483 WINTERSVILLE, OH 43953				750
WINTERSVILLE, Oh 43533				750,
CHILD FUND INTERNATIONAL				
P.O. BOX 26507				
RICHMOND, VA 23261-6507				1,380.
CHILDREN'S BEREAVEMENT FUND				
CHILDREN S BEREAVEMENT FUND 108 ALICELAND DRIVE				
WINTERSVILLE, OH 43953				100.
Total from continuation sheets				76,192.

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
CHURCH OF THE CROSS				
P. O. BOX 6				
EAST SPRINGFIELD, OH 43925				800.
COMMUNITY FOUNDATION FOR THE UPPER				
OHIO VALLEY - TEAR				
P.O. BOX 670 WHEELING, WV 26003				100.
,				
CROSSROADS UNITED METHODIST CHURCH				
110 SPRINGDALE				
WINTERSVILLE, OH 43953				75.
EARL BAILEY MINISTRIES				
P.O. BOX 135				
CANTON, OH 44707-0135				900.
EAST SPRINGFIELD VFD				
P.O. BOX 146				
EAST SPRINGFIELD, OH 43925				300.
PIRST PRESBYTERIAN 650 MCLISTER AVENUE				
MINGO JUNCTION, OH 43938				100.
FIRST UNITED METHODIST CHURCH				
201 ST CLAIR AVENUE				100.
MINGO JUNCTION, OH 43938				100.
			:	
FRIENDS OF WIDOWS & ORPHANS				
BOX 4145				
STEUBENVILLE, OH 43952				300.
GUIDEPOSTS FOUNDATION				
P.O. BOX 5823				
HARLAN, IA 51593-5334				150.
HADMONY INTERP MEMBORISM COURSE				
HARMONY UNITED METHODIST CHURCH 2119 COMMERCIAL STREET				
MINGO JUNCTION, OH 43938				2,450.
Total from continuation sheets				

Part XV Supplementary Informatio 3 Grants and Contributions Paid During the				
	If recipient is an individual,			
Recipient Name and address (home or business)	show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
<u> </u>	or śubstantial contributor	recipient		
HIS HANDS EXTENDED				
1009 NORTH 4TH STREET				
CORONTO, OH 43964				2,30
HOUSE OF THE CARPENTER				
200 S FRONT STREET				
WHEELING, WV 26003				1,80
INDEPENDENT BAPTSIST MISSION FOR				
ASIANS				
P.O. BOX 912 MARIETTA, OH 45780				500
JEFFERSON COUNTY 4TH STREET HEALTH				
CENTER				
701 NORTH 4TH STREET				
STEUBENVILLE, OH 43952				1,00
JEFFERSON COUNTY CHRISTIAN SCHOOL				
2501 COMMERCIAL AVENUE				
MINGO JUNCTION, OH 43938				28,61
JEFFERSON COUNTY HUMANE SOCIETY				
P. O. BOX 233				20
STEUBENVILLE, OH 43952				
JESUS ONLINE MINISTRIES				
P.O. BOX 1373				
MURILTEO, WA 98275				10
				ii
KEVIN MOFFO				
102 MONTGOMERY				
MINGO JUNCTION, OH 43938				3,50
MINGO SOCIAL SERVICES				
501 COMMERCIAL AVENUE				
MINGO JUNCTION, OH 43938				40
NATIONAL DAY OF PRAYER TASK FORCE				
P.O. BOX 64225				
COLORADO SPRINGS, CO 80962-4225				20
Total from continuation sheets		<u> </u>		<u> </u>

Part XV | Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor NORTHERN OHIO VALLEY SEARCH & RESCUE P.O. BOX 468 75. WHEELING, WV 26003 OHIO RIGHT TO LIFE EDUCATION FUND 88 EAST BROAD STREET, SUITE 620 COLUMBUS, OH 43215 200. OHIO VALLEY DOWN SYNDROME SUPPORT P.O. BOX 16 300. RICHMOND, OH 43944 PRISON FELLOWSHIP MINISTRIES P.O. BOX 544 4,016. NORTH OLMSTEAD, OH 44070 RAY LAMAN CHILDREN'S FUND 60 PIONEER DRIVE 150. WINTERSVILLE, OH 43953 SALVATION ARMY P.O. BOX 15150 300. CLEVELAND, OH 44115-0150 SAVANNAH UNITED METHODIST CHURCH STATE ROUTE 545 100. SAVANNAH, OH 44874 SCOTTISH RITE BENEVOLENT FUND P. O. BOX 970021 100. BOSTON, MA 02297-0021 SILVER RING THING 544 MOON CLINTON ROAD 1,000. MOON TWP, PA 15108-9834 SPECIAL OLYMPICS P. O. BOX 18324 600. COLUMBUS, OH 43218-0324 Total from continuation sheets

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
ST AGNES CATHOLIC CHURCH				
204 SAINT CLAIR AVENUE				
MINGO JUNCTION, OH 43938				100
ST JUDE CHILDREN'S HOSPITAL				
501 ST JUDE PLACE				
MEMPHIS, TN 38105				600
ST MARK LUTHERAN CHURCH				
133 LOVERS LANE				
STEUBENVILLE, OH 43952				335
STEUBENVILLE SHRINE CLUB				
KENWOOD ROAD				30
WINTERSVILLE, OH 43953	-			300
THE JUDY MAPLE FOUNDATION				
4499 FABEL STREET				
NEW ALBANY, OH 43054				100
THE NAVIGATORS				
P.O. BOX 6000				
COLORADO SPRINGS, CO 80934-6000				1,10
TRUTH IN ACTION MINISTRIES				
P. O. BOX 7009				
ALBERT LEA, MN 56007-8000				60
UNITED WAY				
P.O. BOX 1463				
STEUBENVILLE, OH 43952				30
JPPER OHIO VALLEY FOP 97 SHOP WITH A				
COP				1
500 LURAY DRIVE			1	70
WINTERSVILLE, OH 43953				1
URBAN MISSION MINISTRIES				
301 NORTH FIFTH STREET				
STEUBENVILLE, OH 43952				7,20
Total from continuation sheets				

3 Grants and Contributions Paid During the				
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	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
YCLIFFE ASSOCIATES				
P.O. BOX 620143				
ORLANDO, FL 32862				250
OUTH FOR CHRIST				
5314 LIBRARY ROAD				
SOUTH PARK, PA 15129				100
COUTH WITH A PURPOSE BOYS HOME				
36128 HAZEL RUN ROAD SALINEVILLE, OH 43945				6,50
MALINATED AND ASSESSMENT OF THE PROPERTY OF TH				
				:
		 .		
		. <u> </u>		

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY CASH IN	IVESTMENTS	STATEMENT 1
SOURCE				AMOUNT
HILLIARD LYONS HUNTINGTON NATIONAL BANK			_	13,746.
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	LUMN A	_	13,754.
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
ACCOUNTING	825.	0.		0.
TO FORM 990-PF, PG 1, LN 16B	825.	0.		0.
FORM 990-PF	TAX	ES		STATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
EXCISE TAX	280.	0.		0 .
TO FORM 990-PF, PG 1, LN 18	280.	0.		0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLI PURPOSES
OHIO FILING FEE	200.	0.		0

FORM 990-PF OTH	ER INVESTMENTS		STATEMENT 5
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
HILLIARD LYONS	COST	205,361.	202,521.
TOTAL TO FORM 990-PF, PART II, LIN	E 13	205,361.	202,521.