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Form **990-PF**

Department of the Treasury Internal Revenue Service

or Section 4947(a)(1) Trust Treated as Private Foundation
| Do not enter social security numbers on this form as it may be made public.
| Information about Form 990-PF and its separate instructions is atwww.irs.gov/form990pf.

1	-or c	aieni	dar year 2014 or lax year beginning			, and ending			
Name of foundation							A Employer identification number		
	A	R–I	HALE FAMILY FOUNDA'	TION,	INC.		34-1644337		
-	Num	ber ar	nd street (or P O box number if mail is not delive	red to street	address)	Room/suite	B Telephone number		
	P	.0.	. BOX 210				(419)331-1	040	
-		_	own, state or province, country, and ZIP of	r foreign n	ostal code	l .	C If exemption application is pe		
2	•		A, OH 45802	, ioioigii p			i exemption application is pe	ending, check here	
201			all that apply Initial return		Initial return of a fo	ormer public charity	D 1. Foreign organizations	. check here	
69			Final return		Amended return	,			
e 2			Address change	ıe.	Name change		Foreign organizations me check here and attach co	eting the 85% test,	
-		heck			kempt private foundation	0.1			
زي		-	ction 4947(a)(1) nonexempt charitable tri		Other taxable private found		E If private foundation stat under section 507(b)(1)		
<u>ر</u>	l Fa				ng method X Cash	Accrual	, , ,	• •	
L L	1		Part II, col. (c), line 16)		ther (specify)	7.00144	F If the foundation is in a 6 under section 507(b)(1)	_	
N	; (<i>i</i> ''				mn (d) must be on cash	basis.)		(b), check here	
3	Da	-			Ĭ		(a) Adjusted set	(d) Disbursements	
3	<u> </u>		Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (c necessarily equal the amounts in column (a))) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for chantable purposes (cash basis only)	
Ğ		_			999,117.	, , ,	N/A	(cash basis only)	
		1	Contributions, gifts, grants, etc., received		777,117.	14.37 / / /	N/ A		
	4	_2	Check fitte foundation is not required to att Interest on savings and temporary cash investments	UII OCH B		www.titu.www.ti.www.ti.co.ww	<u> </u>	^	
		3			30,699.	30,699.		STATEMENT 1	
3		4	Dividends and interest from securities		30,099.	30,099.		DIMIEMENI T	
_		_	Gross rents						
		_	Net rental income or (loss)		12,513.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
¥	P	6a	Net gain or (loss) from sale of assets not on line Gross sales price for all 172		12,313.	<u> </u>		· · · · · · · · · · · · · · · · · · ·	
•	eni	b	assets on line 6a			10 510		6	
	Revenue	7	Capital gain net income (from Part IV, line 2)	-		12,513.		·····	
		8	Net short-term capital gain						
		9	Income modification RECEIVE Gross sales less returns		<u> </u>	<u> </u>		34, 4, 1	
		10a	and allowances					***************************************	
			Less Cost of doods sold			, , , , , , , , , , , , , , , , , , ,			
		C	Gross profit Paloss) QCT 2 0 20	is to				 	
		11	Other income	<u>E</u>	·	40.010			
		12	Total. Add lines 1 through TIEN L	<u> </u>	1,042,329.	43,212.			
		13	Compensation of officers, directors, trustees, e	c	13,050.	0.		0.	
		14	Other employee salaries and wages						
	Ø	15	Pension plans, employee benefits		000		ļ		
	rses		Legal fees STM	•	880.	0.		0.	
	and Administrative Expen	b	Accounting fees STM		6,725.	0.		0.	
	ŭ	C	Other professional fees STM	Г 4	10,960.	10,960.		0.	
	ive	17	Interest						
0	tra	18	Taxes STM	Т 5	3,391.	237.		0.	
qin7	nis	19	Depreciation and depletion						
	Ē	20	Occupancy						
PF.	Ĭ	21	Travel, conferences, and meetings		1,213.	0.		0.	
2	auc	22	Printing and publications						
FEB	g	23	Other expenses STM	Ţ 6	1,854.	0.		0.	
	Operating	24	Total operating and administrative						
\supset	ğ		expenses. Add lines 13 through 23		38,073.	11,197.		0.	
뿕	O	25	Contributions, gifts, grants paid		413,800.	7.75	1.7	413,800.	
Z		26	Total expenses and disbursements.						
SCANNED			Add lines 24 and 25		451,873.	11,197.		413,800.	
Š		27	Subtract line 26 from line 12		Welliam .	11.75	3 7 7	W 14 11 11	
		a	Excess of revenue over expenses and disburse	ments .	590,456.	2 11 2 11 13 13			
		b	Net investment income (if negative, enter	0-)	1. 7.09 . 12.00	32,015.	1 4 /37 / //	17 / 27/2/	
			Adjusted net income (if negative, enter -0-		Carley Car	3 14 17 19 19/10	N/A	1 133 1 1 3 3 3 7 3	
	4235	01	IIIA For Bonomical Deal 11 A 14		1 - 4 - 41	-		F 000 DE (0044)	

$\overline{}$	90-PF (2014) AR-HALE FAMILY FOUNDATIO				164433/ Page 2
Part	Balance Sheets Attached schedules and armounts in the description column should be for end-of-year amounts only	Beginning of year	(b) Dealistate	End o	of year
		(a) Book Value	(b) Book Value		(c) Fair Market Value
1	. ,	1 200 052	1 560 6	11	1 560 611
2		1,389,853.	1,362,6) <u> </u>	1,562,611.
3		Halling Charles (19	Same to take	Mila	1 12 1 LANG 11 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Less allowance for doubtful accounts ▶	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	**************************************
4	Pledges receivable -	aa Madhiri i ah di	e e e e estra Can	11 X.	
	Less allowance for doubtful accounts ▶				
5	Grants receivable				-
6	Receivables due from officers, directors, trustees, and other				
	disqualified persons				
7	Other notes and loans receivable			<i>"</i> ,	
ĺ	Less allowance for doubtful accounts				
र्छ । 8	Inventories for sale or use	· · · · · · · · · · · · · · · · · · ·			
Assets 6 6 6	Prepaid expenses and deferred charges	2,564.	2,1	59.	2,159.
Ž 10:	a Investments - U.S and state government obligations				
	b Investments - corporate stock				·-
	c Investments - corporate bonds	-			
	Investments - land, buildings, and equipment basis	4		······································	
Ì	Less accumulated depreciation	~ , , , , , , , ,	, ,,, ,,	•	1 ' ' ' ' ' ' ' ' ' '
12	•				
13	Investments - other STMT 7	764,568.	1,182,6	71.	1,346,843.
14				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ters come on mer
' '	Less accumulated depreciation	, ., ., ., ., .,			
15					
I -	Total assets (to be completed by all filers - see the				
."	instructions Also, see page 1, item I)	2,156,985.	2,747,4	41.	2,911,613.
17		2/100/3000	2,,1,,		2/311/013.
18	· · · · · · · · · · · · · · · · · · ·				
	Deferred revenue				
Liabilities 51 20 21 20 21	•				
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	· · · · · · · · · · · · · · · · · · ·				
를 21 22	Mortgages and other notes payable				
22	Other liabilities (describe				
23	Total liabilities (add lines 17 through 22)	0.		0.	
- 20	Foundations that follow SFAS 117, check here			•	
	and complete lines 24 through 26 and lines 30 and 31.				
8 24					
Net Assets or Fund Balances 30 52 62 63 64 65 65 65 65 65 65 65 65 65 65 65 65 65	· · · · · · · · · · · · · · · · · · ·				
29 20	Temporarily restricted				
四 26 四					
<u>.</u>	, —				
<u> </u>	and complete lines 27 through 31.	0.		^	
S 27		0.		0.	
9SS 28			2 747 4		
¥ 29	Retained earnings, accumulated income, endowment, or other funds	2,156,985.	2,747,4	41.	
₹ 30	Total net assets or fund balances	2,156,985.	2,747,4	41.	1 3 6 3 m 1 2 m 1 3 m
		2 156 005	2 747 4		Burgar Comment
31	Total liabilities and net assets/fund balances	2,156,985.	2,747,4	41.	
Par	Analysis of Changes in Net Assets or Fund B	alances			
1 Tot	al net assets or fund balances at beginning of year - Part II, column (a), line	30			<u> </u>
	ar net assets or futto balances at beginning or year - Part II, column (a), line ust agree with end-of-year figure reported on prior year's return)	JU		4	2,156,985.
	er amount from Part I, line 27a		- •	1	590,456.
	er amount from Part 1, line 27a er increases not included in line 2 (itemize)	-		2	390,430.
	I lines 1, 2, and 3			_ 3	2,747,441.
	creases not included in line 2 (itemize)		-	4	0 0
	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	nlumn /h\ line 20	<u></u>	- <u>5</u>	2,747,441.
<u></u>	a access of ratio balances at one of your time 4 millios line of - Falt II, be	John Loff and Oo .	<u> </u>	. 1 0	Form 990-PF (2014)

Part IV Capital Gains	and Losses for Tax on	<u>Investment</u>	Income					
(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) (b) How acquired P - Purchase D - Donation						(c) Date acqu (mo , day,)	uired yr)	(d) Date sold (mo , day, yr)
1a WELLS FARGO 77					P	VARIOU	JS	12/31/14
b WELLS FARGO 94						VARIOU	JS	12/31/14
						VARIOU		12/31/14
d FIFTH THIRD					P	VARIOU	JS	12/31/14
e CAPITAL GAINS DIVIDENDS								
(e) Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale						(h) Gain (e) plus (f)		
a 7,442.			4,29					3,146.
b 26,965.			26,82					143.
t 15,127.			13,43					1,696.
d 112,653.			115,60	8.				<2,955.
e 10,483.								10,483.
Complete only for assets showing	ng gain in column (h) and owned b		• •=		(I)	Gains (Col (k), but not I	(h) gain	minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (i) col (j), if any		COI	Losses (fro	m col (h))
_a								3,146.
b		_						143.
C								1,696.
d								<2,955.
e					1			10,483.
2 Capital gain net income or (net ca	apital loss) { If gain, also ent If (loss), enter	ter in Part I, line 7 -0- in Part I, line	7 7	} 2				12,513.
3 Net short-term capital gain or (los	ss) as defined in sections 1222(5)	and (6)						
If gain, also enter in Part I, line 8, If (loss), enter -0- in Part I, line 8		. ,	_	} 3			N/A	
Part V Qualification U		or Reduced	Tax on Net	Investr	nent Inc	ome		
(For optional use by domestic private	e foundations subject to the section	n 4940(a) tax on	net investment inc	come)				
				•				
If section 4940(d)(2) applies, leave t	nis part biank							
Was the foundation liable for the sec	tion 4942 tax on the distributable a	amount of any ye	ar in the base peri	iod?				Yes X No
If "Yes," the foundation does not qua								
	each column for each year, see the	instructions bef	fore making any er	ntries				
(a) Base period years Calendar year (or tax year beginni			Net value of nor			(d) Distribution ratio (col (b) divided by col (c))		
2013		67,561.			8,215			.207049
2012		69,848.		<u> </u>	4,790			.244158
2011		30,747.			7,342			.266039
2010		34,092.			33,697			.553903
2009	6	21,387.		68	<u>30,083</u>	•		.913693
2 Total of line 1, column (d)						2		2.184842
3 Average distribution ratio for the the foundation has been in existe	•	al on line 2 by 5,	or by the number	of years		3		.436968
4 Enter the net value of noncharital	ble-use assets for 2014 from Part)	X. line 5				4		2,537,170.
		,						
5 Multiply line 4 by line 3						5		1,108,662.
6 Enter 1% of net investment incor	me (1% of Part I, line 27b)					6		320.
7 Add lines 5 and 6		-				7		1,108,982.
8 Enter qualifying distributions from	m Part XII, line 4					8		413,800.
	n line 7, check the box in Part VI, li	ne 1b, and comp	lete that part using	g a 1% tax	rate			
See the Part VI instructions								
423521 11-24-14							- 1	Form 990-PF (2014)

Form	990-PF(2014) AR-HALE FAMILY FOUNDATION, INC.	84_	1644	337		Page 4		
	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49							
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	7	19 77	74,44	1.71	149		
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)	79		erzia		742		
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%								
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)	- %		1. May 2	17	Wale.		
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)								
3								
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			64	40.		
6	Credits/Payments	381	1. 1	(M)	M	11.0		
a	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 2,159.		14/11		72.7	22		
b	Exempt foreign organizations - tax withheld at source	27	4.90 1			11		
C	Tax paid with application for extension of time to file (Form 8868) .		9.8787	1	11	,		
	Backup withholding erroneously withheld <u>6d</u>		Gu enni	74 o z	٠			
	Total credits and payments Add lines 6a through 6d	7		2	, 15	<u> </u>		
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8						
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				10		
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			, 5.	<u> 19.</u>		
1777	Enter the amount of line 10 to be Credited to 2015 estimated tax ► 1,519 . Refunded ► [**VII-A Statements Regarding Activities	11				<u>0.</u>		
<u></u>	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene i				/es	No		
	any political campaign?	"		1a	63	X		
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)	,		1b		X		
	If the answer is "Yes" to $1a$ or $1b$, attach a detailed description of the activities and copies of any materials published				,			
	distributed by the foundation in connection with the activities.					4/4		
	Did the foundation file Form 1120-POL for this year?			1 _c 1	' [X		
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year							
	(1) On the foundation ▶ \$ 0 • (2) On foundation managers ▶ \$ 0 •			1.	/ /}	1/3		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			1.4	1	30%		
	managers. > \$0 .			K/ 1	1			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		<u>X</u>		
	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 instrument, articles of incorporation, or			÷		dage.		
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		<u>X</u>		
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X		
	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		Χ		
_	If "Yes," attach the statement required by General Instruction T.			1:4	- 1	5 / 3		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				. 1			
	By language in the governing instrument, or			F 1.				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	iaw		1 1	- 💖	v		
7	remain in the governing instrument?			7	X	<u>X</u>		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV			ļ -	^-	·········		
Ra.	Enter the states to which the foundation reports or with which it is registered (see instructions)				1	100		
Oa	OH	-				11/2		
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)							
J	of each state as required by General Instruction G? If "No," attach explanation			8b	\mathbf{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 caler	ıdar		- J		7.7		
-	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV			g	~~	X		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10		X		
			For	m 990-	PF (2014)		

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	990-PF (2014) AR-HALE FAMILY FOUNDATION, INC. 34-1644	337		Page 5
_				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			,
10	section 512(b)(13)? If "Yes," attach schedule (see instructions) Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	11		<u>X</u>
12	If "Yes," attach statement (see instructions)	12		х
12	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
13	Website address ► N/A		Λ	L
14	The books are in care of ► THE FOUNDATION Telephone no ► (419) 3	131_	104	<u></u>
'-	Located at ▶ PO BOX 210, LIMA, OH		101	-
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	7002	_	T
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	ш
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16	. 03	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22 1) If "Yes," enter the name of the	20.00	177 1	930
	foreign country	19 03		100
Pe	irt VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<u></u>	<u>Guaraine</u>	<u> </u>
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	73	Yes	No
1a	During the year did the foundation (either directly or indirectly)	7		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	[/ 1	ĺ	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	13 44	,	1 1
	a disqualified person?	100		<i>'</i>
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			4.
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		<u></u>	1111
	(5) Transfer any income or assets to a disqualified person (or make any of either available		,	<i>["/,</i>
	for the benefit or use of a disqualified person)?	1 3.4	1	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		1,	
	rf the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)	1/2	1,	
t	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		*	2
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here	[/]		
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	11	,	
	before the first day of the tax year beginning in 2014?	10		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation		1	22
	defined in section 4942(j)(3) or 4942(j)(5))	100	4	3
8	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning		1	- 5
	before 2014? Yes X No	1 4	11	9
	If "Yes," list the years , , , , , , , , , , , , , , , , , , ,		,	11
ľ	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			1 ,
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) N/A	. .	1	
_	·	2b		,
(If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	[,	, -	ľ
٠.	Did the foundation held more than a 20% divisation individual interest in any hydrogen extensions at any time.	12, 3	*	3
58	I Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No		8	
	• •		1.11	'
ı	1 If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lance of the 5-year period (or longer period approved by the Commissioner under section 4943(c)/7)) to dispose		1617	
	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,			<i>"</i> .
	Form 4720, to determine if the foundation had excess business holdings in 2014.) N/A	3b	7 47	1
4:	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	_	X
	Did the foundation invest during the year any amount in a mainter that would people by charitable purposes that Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	2		777
•	had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b	· ′′ '	χ̈́

Total. Add lines 1 through 3

1a

1b

1c

10

a Average monthly fair market value of securities

b Average of monthly cash balances

c Fair market value of all other assets

d Total (add lines 1a, b, and c)

Part X

Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes

337	Page 8
uctions.)	
,099,	<u>575.</u>
,099, ,476,	
, 575 ,	807.
,575, 38, ,537, 126,	
126,	859.
126,	859.
	640.
126,	219.
126,	$\frac{0.}{219.}$

Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets Subtract line 2 from line 1d 3 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 5 Minimum investment return. Enter 5% of line 5 Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here
and do not complete this part) Minimum investment return from Part X, line 6 640 Tax on investment income for 2014 from Part VI, line 5 Income tax for 2014 (This does not include the tax from Part VI) Add lines 2a and 2b 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) 6 126,219. Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Qualifying Distributions (see Instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 413,800. Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1a Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 2 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required) За Cash distribution test (attach the required schedule) 3b 413,800. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 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

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

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instr

Form **990-PF** (2014)

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Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years pnor to 2013	(c) 2013	(d) 2014
Distributable amount for 2014 from Part XI,	777 77 77 77 77 77 77 77 77 77 77 77 77	16413 pilot to 2013	2010	2014
line 7				126,219.
2 Undistributed income, if any, as of the end of 2014	- 13.466.446.444.444.444.444	\$		7.78
a Enter amount for 2013 only			0.	1444
b Total for prior years:				anyigaanäinnianninnamassi j
B rotal for prior yours		0.		
3 Excess distributions carryover, if any, to 2014		* * * * * * * * * * * * * * * * * * * *	// // // .	27.77 3.74 · · · · · · ·
a From 2009 587,659				
b From 2010 394,998				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
c From 2011 187,545				
d From 2012 295, 150			,	
e From 2013 355, 055				11 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
f Total of lines 3a through e	1,820,407.	14 1 10 1 1 1 1 1 1 1 1 1 1 1 1 1		2.16.20
4 Qualifying distributions for 2014 from			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Part XII, line 4 ►\$ 413,800	. 1946 M. 18 18 18 18 18 18 18 18 18 18 18 18 18			
a Applied to 2013, but not more than line 2a		¥93% ()2222	0.	
b Applied to undistributed income of prior	3 7 7 37 17	- .	,	,
years (Election required - see instructions)		0.	,,	
c Treated as distributions out of corpus		1 . 7 . 4 5/3 .	1 11/11	
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount	19 14 1 1			126,219.
e Remaining amount distributed out of corpus	287,581.		• • • • • • • • • • • • • • • • • • •	
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount	0.		12 1 20 2 2 1 1 1 2	0.
must be shown in column (a))	The said of the said			
6 Enter the net total of each column as	North Comment		,	
indicated below:	2 107 000			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,107,988.	College Car Car Car		
b Prior years' undistributed income Subtract			1	
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of	174			Later 3
deficiency has been issued, or on which		1		
the section 4942(a) tax has been previously		0.		
assessed		•		
d Subtract line 6c from line 6b Taxable	1997 18	0.		
amount - see instructions		77.7%		
e Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount - see instr		Burn Jack Garage	0.	
f Undistributed income for 2014 Subtract			Ŭ.	
lines 4d and 5 from line 1. This amount must		1		
be distributed in 2015	Burgani Calif	F 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		0.
7 Amounts treated as distributions out of			 	(4 / 4 / 2 / 2
corpus to satisfy requirements imposed by			Phillips and	
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2009	1-11		<i>V</i> (1)	
not applied on line 5 or line 7	587,659		, ,	1 1 4
9 Excess distributions carryover to 2015.		11/1/1/1/1/		1433 1
Subtract lines 7 and 8 from line 6a	1,520,329		1	1/2/////
10 Analysis of line 9	Chille 12 to lead	19: 1 / 19:49 / 1		
a Excess from 2010 394,998			Pagaran da da ka	
b Excess from 2011 187,545		P 2563 1 1206	1, 200 100, 40	
c Excess from 2012 295, 150				
d Excess from 2013 355,055			Tara a a a a a a a a a a a a a a a a a a	
e Excess from 2014 287,581 423581 11-24-14	· L	W. W. K.	<u> </u>	5 000 PF (00:0)
11-24-14				Form 990-PF (2014)

		NDATION, IN			544337 Page 10
Part XIV Private Operating Fo	oundations (see ins	structions and Part VII-	A, question 9)	N/A	
1 a If the foundation has received a ruling or	determination letter that	rt is a private operating			
foundation, and the ruling is effective for	2014, enter the date of t	he ruling	▶ ∟		
b Check box to indicate whether the found	ation is a private operatin	ig foundation described in	n section	4942(j)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
		, ,		· · · · ·	· · · / ·
investment return from Part X for					
each year listed .			<u> </u>	_	
b 85% of line 2a					
c Qualifying distributions from Part XII,					1
line 4 for each year listed		_		<u> </u>	<u></u>
d Amounts included in line 2c not					
used directly for active conduct of	ı			/	
exempt activities				,,	
e Qualifying distributions made directly				//	
for active conduct of exempt activities				\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
				7	
Subtract line 2d from line 2c Complete 3a, b, or c for the			7	···	
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			<i>i</i> *		
2/3 of minimum investment return		l l			
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		İ			
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundatio	n had \$5,000 or m	ore in assets
at any time during t	he year-see inst	ructions.)		, ,	
		<u> </u>			
1 Information Regarding Foundation a List any managers of the foundation wh	-	than 90/ of the total cont	ributions received by th	so foundation hotors the ol	one of any toy
year (but only if they have contributed r			ilibutions received by ti	ie iouiluation before the ci	use of any tax
	1010 111411 40,0007 (000 (,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
NONE			 		· · · · · · · · · · · · · · · · · · ·
b List any managers of the foundation wh			(or an equally large poi	tion of the ownership of a	partnership or
other entity) of which the foundation ha	S a 10% of greater intere	SI.			
NONE					
2 Information Regarding Contribut	ion, Grant, Gift, Loan	, Scholarship, etc., Pr	rograms:		
Check here ▶ ☐ If the foundation of	only makes contributions	to preselected charitable	organizations and does	s not accept unsolicited red	quests for funds If
the foundation makes gifts, grants, etc	(see instructions) to indi	viduals or organizations u	inder other conditions,	complete items 2a, b, c, ai	nd d
a The name, address, and telephone num	ber of e-mail address of	the person to whom appl	cations should be add	ressed.	,
,,	/				
SEE STATEMENT 9	-				
b The form in which applications should	he cubmitted and informs	ation and materials they s	hould include		
b the form in which applications should be					
c Any submission deadlines					<u>.</u>
d Any restrictions or limitations on award	s, such as by geographic	cal areas, charitable fields	, kinds of institutions, o	r other factors	<u>-</u>

Form 990-PF (2014) AR-HALE FAMILY FOUNDATION, INC.

nter gross amounts unless otherwise indicated	<u>Unrelate</u>	d business income		ed by section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
Program service revenue:	code				
·	-		+		
	_		+ +		
	_ _		+ +		
			+		
e	_		+++		
	_		+ +		
Fees and contracts from government agencies					
Membership dues and assessments			+++		
nterest on savings and temporary cash	ŀ				
investments			1 1	20 600	
Dividends and interest from securities	2	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	14	30,699.	<u> </u>
Net rental income or (loss) from real estate		<u> </u>			<u> </u>
Debt-financed property					_
Not debt-financed property					
Net rental income or (loss) from personal					
property					
Other investment income					
Gain or (loss) from sales of assets other					
than inventory			18	12,513.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue					
a					
b					
C					
d	1				
•					
e		C)	43,212.	
B				43,212.	
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which	es to the Acco	omplishment of	Exempt I-A contribu	Purposes Ited importantly to the accord	43,21
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations Relationship of Activitie	es to the Acco	omplishment of	Exempt I-A contribu	Purposes Ited importantly to the accord	43,21
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which	es to the Acco	omplishment of	Exempt I-A contribu	Purposes Ited importantly to the accord	43,21
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations Felationship of Activitie Explain below how each activity for which	es to the Acco	omplishment of	Exempt I-A contribu	Purposes Ited importantly to the accord	43,21
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Eworksheet in line 13 instructions to verify calculations The No. Explain below how each activity for which its columns (b), (d), and (e) Explain below how each activity for which its columns (b), (d), and (e) Explain below how each activity for which its columns (b), (d), and (e)	es to the Acco	omplishment of	Exempt I-A contribu	Purposes Ited importantly to the accord	43,21
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Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations For XVI-B Relationship of Activitie Revo. Explain below how each activity for which	es to the Acco	omplishment of	Exempt I-A contribu	Purposes Ited importantly to the accord	43,21
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Eworksheet in line 13 instructions to verify calculations The No. Explain below how each activity for which its columns (b), (d), and (e) Explain below how each activity for which its columns (b), (d), and (e) Explain below how each activity for which its columns (b), (d), and (e)	es to the Acco	omplishment of	Exempt I-A contribu	Purposes Ited importantly to the accord	43,21
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Eworksheet in line 13 instructions to verify calculations The No. Explain below how each activity for which its columns (b), (d), and (e) Explain below how each activity for which its columns (b), (d), and (e) Explain below how each activity for which its columns (b), (d), and (e)	es to the Acco	omplishment of	Exempt I-A contribu	Purposes Ited importantly to the accord	43,21
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Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations Felationship of Activitie Explain below how each activity for which	es to the Acco	omplishment of	Exempt I-A contribu	Purposes Ited importantly to the accord	43,21
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Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which	es to the Acco	omplishment of	Exempt I-A contribu	Purposes Ited importantly to the accord	43,21
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which	es to the Acco	omplishment of	Exempt I-A contribu	Purposes Ited importantly to the accord	43,21
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which	es to the Acco	omplishment of	Exempt I-A contribu	Purposes Ited importantly to the accord	43,21
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Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie line No. Explain below how each activity for which	es to the Acco	omplishment of	Exempt I-A contribu	Purposes Ited importantly to the accord	43,21
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TT - TT				ATION, INC.		34-16		Page 13
Part X	Information Research		nsfers To a	ind Transactions a	nd Relations	ships With Nonch	aritable	l
1 Did t	he organization directly or ind	rectly engage in any	y of the following	g with any other organization	n described in sect	tion 501(c) of		Yes No
the C	Code (other than section 501(c	(3) organizations)	or in section 52	7, relating to political organi	zations?			- A - A - A - A - A - A - A - A - A - A
a Tran	sfers from the reporting found	lation to a noncharit	able exempt org	janization of				
(1)	Cash .						1a(1)	X
(2)	Other assets						1a(2)	X
b Othe	r transactions							11/2 1/48
(1)	Sales of assets to a noncharita	able exempt organiz	ation				1b(1)	X
(2)	Purchases of assets from a no	oncharitable exempt	organization				1b(2)	X
(3)	Rental of facilities, equipment,	, or other assets					1b(3)	X
(4)	Reimbursement arrangements	\$					1b(4)	X
(5)	Loans or loan guarantees						1b(5)	X
(6)	Performance of services or me	embership or fundra	aising solicitatio	ns			1b(6)	X
c Shar	ring of facilities, equipment, ma	ailing lists, other ass	sets, or paid em	ployees			10	X
d If the	e answer to any of the above is	s "Yes," complete the	e following sche	dule Column (b) should alw	vays show the fair	market value of the good:	s, other asse	ets,
	ervices given by the reporting			ed less than fair market valu	e in any transaction	n or sharing arrangement	t, show in	
	mn (d) the value of the goods,							
(a) Line no	(b) Amount involved	(c) Name (exempt organization	(d) Descriptio	n of transfers, transactions, a	nd shanng am	angements
			N/A	· 				
		 			-			
		+						
	<u> </u>	+						
								
								
		-						
		 	· · · · · · · · · · · · · · · · · · ·					
		 			 			
								
								
		 			 			
		 						_
On loth	n faundation discattly as indisa	ath affiliated with a	r rolated to one	ar mara tay ayamat araani	rations described			
	ne foundation directly or indire ection 501(c) of the Code (othe	•		· -	zations described		Yes	X No
	es," complete the following sci		(0)(3)) 01 111 3601		•	•	163	_ <u></u>
יוו ט	(a) Name of or		•	(b) Type of organization	•	(c) Description of relatio	nship	
	N/A	<u></u>		(-) .,,,-		(-,		
								
			·					
	\mathcal{L}							
	Under penalties of penjury, I declar						May the IDC	lection thin
Sign	and belief, his true, correct, and of	implete Declaration of	preparer (other tha	n taxpayer) is based on all inform	nation of which prepare	er has any knowledge	May the IRS of return with the shown below	preparer
Here	1001	Hawk/	believe Al	awl 10-7-15	PRESI	DENT	X Yes	
	Signature of officer or truste	ie /		Date	Trtle			
	Print/Type preparer's r		Preparer's s	ignature /	Date	Check if PTI	N	-
	MARK J. MO	CKINLEY,	Mar	1/Med Val	M	self- employed		
Paid	CPA	<u>.</u>	MARK J	MCKINLEY,	04/16/15	_ P	00099	200
Prepa		A & ASSOC	IATES,	INC.		Firm's EIN ► 34-	13101	24
Use C			•					

33421

Phone no 419-331-1040

Firm's address ▶ 2579 SHAWNEE ROAD

LIMA, OH 45806

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990

OMB No 1545-0047

Name of the organization

Employer identification number

	A	R-HALE FAMILY FOUNDATION, INC.	34-1644337				
Organiz	ation type (check	one):					
Filers of	f:	Section:					
Form 990 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					
		is covered by the General Rule or a Special Rule . c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	le. See instructions.				
Genera	l Rule						
X		on filing Form 990, 990·EZ, or 990·PF that received, during the year, contributions totaling y one contributor. Complete Parts I and II. See instructions for determining a contributor?					
Special	Rules						
	sections 509(a)(1 any one contribu	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, tor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amour Z, line 1. Complete Parts I and II.	or 16b, and that received from				
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.						
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year						
but it m	ust answer "No" o	that is not covered by the General Rule and/or the Special Rules does not file Schedule E on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Fo et 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) (2014)

Name of organization

Employer Identification number

AR-HALE FAMILY FOUNDATION, INC.

34-1644337

Part 1	Contributors (see instructions). Use duplicate copies of Part I if additional	l space is needed.	-
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	AMERICAN TRIM 1005 WEST GRAND AVENUE LIMA, OH 45801	\$996,667.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Occash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

AR-HALE FAMILY FOUNDATION, INC.

34-1644337

art II	Noncash Property (see instructions). Use duplicate copies of Pa	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

33421

Employer identification number

HALE	FAMILY FOUNDATION, IN	NC .	34-1644337 In section 501(c)(7), (8), or (10) that total more than \$1,000 fo				
Ed in	the year from any one contributor. Complete co	olumns (a) through (e) and the follo	WING line entry For organizations				
	completing Part III, enter the total of exclusively religious. Use duplicate copies of Part III if additional		r less for the year (Enter this info once.)				
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		(e) Transfer of gif	ft				
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Part XV Supplementary Informatio 3 Grants and Contributions Paid During the				
Recipient Recipient	If recipient is an individual.	T		
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
CAMPUS CRUSADE	or substantial contributor	school	FUND OPERATIONS	8,000.
CATHOLIC LEAGUE		NON PROFIT	FUND OPERATIONS	500.
ASSUMPTION HIGH SCHOOL		school	FUND OPERATIONS	10,000.
CHATFIELD COLLEGE		COLLEGE	FUND OPERATIONS	5,000.
COVENANT HOUSE		сниксн	fund operations	500.
DIOCESE OF TOLEDO		сниксн	FUND OPERATIONS	1,250.
EQUESTRIAN THERAPY		NON PROFIT	FUND OPERATIONS	6,500.
LIMA LIFE TEEN		NON PROFIT	FUND OPERATIONS	300.
ALLEN CTY FAIR FOUNDATION INC		NON PROFIT	FUND OPERATIONS	20,000.
FOCUS ON THE FAMILY		NON PROFIT	FUND OPERATIONS	500.
Total from continuation sheets				400,375.

3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
OOD FOR THE POOR		NON PROFIT	FUND OPERATIONS	1,0
RIEDMAN FOUNDATION		NON PROFIT	FUND OPERATIONS	1,0
ABITAT FOR HUMANITY		NON PROFIT	FUND OPERATIONS	2!
EARTBEAT OF LIMA		NON PROFIT	FUND OPERATIONS	7!
OPE RURAL SCHOOL		SCHOOL	FUND OPERATIONS	
				1,50
NTERFAITH WORKER JUSTICE		NON PROFIT	FUND OPERATIONS	50
BTM GIFTING		NON PROFIT	FUND OPERATIONS	36,00
IMA COLLEGE ACCESS PROGRAM		NON PROFIT	FUND OPERATIONS	5,00
MCA OF GREATER LOUISVILLE		NON PROFIT	WARD ORBITATIONS	
ACT OF GRANDER BOOLSVILLE		NON PROFIT	FUND OPERATIONS	8,00
IMA SYMPHONY		NON PROFIT	FUND OPERATIONS	
Total from continuation sheets				5,00

Part XV Supplementary Information 3 Grants and Contributions Paid During the You				
Recipient	If recipient is an individual,	 		
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
LITTLE SISTERS OF THE POOR		NON PROFIT	FUND OPERATIONS	1,500.
MARIANISTS		NON PROFIT	FUND OPERATIONS	250.
MERCY UNLIMITED, INC.		NON PROFIT	FUND OPERATIONS	30,000.
MISSION TEACHING FOUNDATION		NON PROFIT	FUND OPERATIONS	1,000.
ST. CHARLES PARISH		сниксн	FUND OPERATIONS	1,000.
PARENTS TELEVISION COUNCIL		NON PROFIT	FUND OPERATIONS	1,000.
SALVATION ARMY		NON PROFIT	FUND OPERATIONS	750.
SERRA INTERNATIONAL		NON PROFIT	FUND OPERATIONS	500.
SERVANT LEADERSHIP		NON PROFIT	FUND OPERATIONS	500.
SISTERS OF NOTRE DAME		NON PROFIT	FUND OPERATIONS	1,250
Total from continuation sheets				1,250

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Ye			- 1	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
UNIVERSITY OF DAYTON		UNIVERSITY	FUND OPERATIONS	50,000.
SOCIETY FOR PROPAGATION OF FAITH		NON PROFIT	FUND OPERATIONS	275
			-	275.
ST. FRANCIS SCHOOL		SCHOOL	FUND OPERATIONS	36,200.
ST. ANN SCHOOL		SCHOOL	FUND OPERATIONS	2,500.
CATHOLIC CAMPUS MINISTRY		NON PROFIT	FUND OPERATIONS	250.
STAGE ONE FAMILY THEATER		NON PROFIT	FUND OPERATIONS	10,000.
THE SMILE TRAIN		NON PROFIT	FUND OPERATIONS	750.
THOMAS MORE LAW		NON PROFIT	FUND OPERATIONS	2,500.
UC - CUMBERLAND COLLEGE		UNIVERSITY	FUND OPERATIONS	1,000.
UNIVERSITY OF LOUISVILLE VOICE CARE		UNIVERSITY	FUND OPERATIONS	50,000.
Total from continuation sheets				

Part XV Supplementary Information				
Grants and Contributions Paid During the Y		1		
Recipient Name of hydrogon	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	- Community	
UNIVERSITY OF NOTRE DAME		UNIVERSITY	FUND OPERATIONS	55,000.
VATICAN OBSERVATORY		NON PROFIT	FUND OPERATIONS	1,000.
WEST OHIO FOOD BANK		NON PROFIT	FUND OPERATIONS	500.
WTLW		NON PROFIT	FUND OPERATIONS	5,250.
HENRI NOUWEN SOCIETY		NON PROFIT	FUND OPERATIONS	250.
LEADERSHIP INSTITUTE		NON PROFIT	FUND OPERATIONS	1,000.
LIMA RESCUE MISSION		NON PROFIT	FUND OPERATIONS	600.
SOCIETY OF THE PRECIOUS BLOOD		NON PROFIT	FUND OPERATIONS	500.
UNITED WAY		NON PROFIT	FUND OPERATIONS	10,000.
INDIA PARISH		NON PROFIT	FUND OPERATIONS	2,000.
Total from continuation sheets				

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	Amount
IEUSER HEARING AND LAN. ACADEMY		NON PROFIT	FUND OPERATIONS	1,50
IMA MEMORIAL FOUNDATION		NON PROFIT	FUND OPERATIONS	5,00
IM RILEY FOUNDATION		NON PROFIT	FUND OPERATIONS	10,00
BIG BROTHERS BIG SISTERS OF OK		NON PROFIT	FUND OPERATIONS	5,00

FORM 990-PF DIVIDEND	S AND INTER	EST FROM SECUR	ITIES ST	CATEMENT 1
GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE S PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
FIFTH THIRD 5,817 WELLS FARGO 35,365				
TO PART I, LINE 4 41,182	10,48	30,699.	30,699.	
FORM 990-PF	LEGAL	FEES	rs.	CATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES	880.	0.		0.
-				·
TO FM 990-PF, PG 1, LN 16A =	880.	0.		0.
TO FM 990-PF, PG 1, LN 16A =	ACCOUNTI		Si	O. PATEMENT 3
-	<u> </u>		(C) ADJUSTED NET INCOME	
FORM 990-PF	ACCOUNTII (A) EXPENSES	NG FEES (B) NET INVEST-	(C) ADJUSTED	CHARITABLE
FORM 990-PF DESCRIPTION	ACCOUNTII (A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED	(D) CHARITABLE PURPOSES
FORM 990-PF DESCRIPTION ACCOUNTING FEES TO FORM 990-PF, PG 1, LN 16B	(A) EXPENSES PER BOOKS 6,725.	(B) NET INVEST- MENT INCOME 0.	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES 0.
FORM 990-PF DESCRIPTION ACCOUNTING FEES TO FORM 990-PF, PG 1, LN 16B	ACCOUNTII (A) EXPENSES PER BOOKS 6,725.	(B) NET INVEST- MENT INCOME 0.	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES 0.
FORM 990-PF DESCRIPTION ACCOUNTING FEES TO FORM 990-PF, PG 1, LN 16B FORM 990-PF	ACCOUNTII (A) EXPENSES PER BOOKS 6,725. 6,725. OTHER PROFES (A) EXPENSES	(B) NET INVEST- MENT INCOME 0. 0. SIONAL FEES (B) NET INVEST-	(C) ADJUSTED NET INCOME ST (C) ADJUSTED	(D) CHARITABLE PURPOSES 0. 0. TATEMENT 4 (D) CHARITABLE

FORM 990-PF	XAT	ES			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOM		
REAL ESTATE TAXES	2,749.		0.			0.
EXCISE TAX BASED ON INVESTMENT INCOME FOREIGN TAXES	405. 237.	2	0. 237.			0. 0.
TO FORM 990-PF, PG 1, LN 18	3,391.	2	237.			
FORM 990-PF	OTHER E	XPENSES	====		STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOM		
POSTAGE & DELIVERY OFFICE SUPPLIES INSURANCE FILING FEES MISCELLANEOUS EXPENSES	1,066. 285. 234. 200. 69.		0. 0. 0. 0.			0. 0. 0.
TO FORM 990-PF, PG 1, LN 23	1,854.	· ————	0.			0.
FORM 990-PF	OTHER INV	ESTMENTS			STATEMENT	7
DESCRIPTION		LUATION ETHOD	вос	OK VALUE	FAIR MARKE VALUE	T.
SECURITIES		FMV		1,182,671.	1,346,8	843.
TOTAL TO FORM 990-PF, PART I	I, LINE 13	-		1,182,671.	1,346,8	343.

FORM 990-PF		PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS			
NAME AND ADDRESS		TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
ARLENE F. HAWK		PRESIDENT 1.00	0.	0.	0.
TIM HAWK		VICE PRESIDENT	0.	0.	0.
BRYAN HAWK		CHAIRMAN 1.00	0.	0.	0.
MARK MCKINLEY		TREASURER 1.00	0.	0.	0.
BEVERLY PRUETER		SECRETARY 1.00	13,050.	0.	0.
MICHELLE HEIT		DIRECTOR 1.00	0.	0.	0.
JEFFREY HAWK		DIRECTOR 1.00	0.	0.	0.
JANET HAWK		DIRECTOR 1.00	0.	0.	0.
LEO HAWK		DIRECTOR 1.00	0.	0.	0.
MATTHEW HAWK		DIRECTOR 1.00	0.	0.	0.
TOTALS INCLUDED O	ON 990-PF, PAGE 6,	PART VIII	13,050.	0.	0.

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FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

MRS. BEVERLY PRUETER, AR-HALE FAMILY FOUNDATION P.O. BOX 210 LIMA, OH 45802

TELEPHONE NUMBER

(419) 331-1040

FORM AND CONTENT OF APPLICATIONS

ALL APPLICATIONS THAT MEET THE FOUNDATION MISSION AND GEOGRAPHIC PREFERENCES WILL BE ACCEPTED FOR CONSIDERATION, IF USING THE FOUNDATION APPLICATION. THE MISSION STATEMENT AND GEOGRAPHIC PREFERENCES ARE INCLUDED ON APPLICATION FORM, WHICH SHOULD BE REQUESTED FROM THE ORGANIZATION.

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

ONLY RESTRICTIONS ARE THOSE IMPOSED BY INTERNAL REVENUE CODE IN ORDER TO MAINTAIN EXEMPT STATUS OF THE FOUNDATION.