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Department of the Treasury Internal Revenue Service

Return of Private Foundation
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 at www.lrs.gov/form990pf.

For	cale	ndar year 2014 or tax year beginning	<u>JUN</u>	<u> 1, 2014 </u>	, and ending	MAY 31, 2015	
		f foundation				A Employer identification	number
		T. KEST OLD NEWSBO		OODFELLOW			
_ <u>N</u>	EM	<u> ORIAL SCHOLARSHIP F</u>	'UND			34-1668082	
Nu	mber a	and street (or P O box number if mail is not delivere	ed to street	address)	Room/suite	B Telephone number	250 110110
_2	25	7 APPLEWOOD DRIVE				419- 536-08	73 350-4048
Cıt	y or t	town, state or province, country, and ZIP or	foreign p	ostal code		C If exemption application is p	ending, check here
_1	'OL	EDO, OH 43615					
G (Check	k all that apply: Initial return		Initial return of a fo	rmer public charity	D 1. Foreign organizations	, check here
		Final return		Amended return		2 Foreign organizations ma	oting the 85% test
		Address change		Name change		2 Foreign organizations me check here and attach co	mputation
H_(\neg			empt private foundation		E If private foundation state	tus was terminated
<u>L</u> _		ection 4947(a)(1) nonexempt charitable trus		Other taxable private founda		under section 507(b)(1)	(A), check here
		· · · · · · · · · · · · · · · · · · ·		ng method: X Cash	Accrual	F If the foundation is in a 6	
-		Part II, col. (c), line 16)	<u></u>	her (specify)		under section 507(b)(1)	(B), check here
	-\$		rt I, colu	mn (d) must be on cash b			(4) -
Pa	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) in necessarily equal the amounts in column (a))	may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net	(d) Disbursements for charitable purposes
				 _ 		Miconie	(cash basis only)
	1	Contributions, gifts, grants, etc., received		57,235.			
	2	Check Interest on savings and temporary	h Sch B				
	3	cash investments		1 001	1 001	1 001	<u> </u>
	4	Dividends and interest from securities		1,091.	1,091.	1,091.	
	i .	Gross rents		- · · · ·	· · · · · · · · · · · · · · · · · · ·		
	b	Net rental income or (loss)	_	F 600	 _		
ē	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all		5,688.			
Revenue	b	assets on line 6a	88.		<u> </u>		
ş	7	Capital gain net income (from Part IV, line 2)			5,688.		
_	8	Net short-term capital gain				0.	
	9	Income modifications Gross sales less returns				20.00	- 11
	1 .	and allowances			k ,		
		Gross profit or (loss)			· · · · · · · · · · · · · · · · · · ·		
	11	Other income					
	12	Total. Add lines 1 through 11		64,014.	6,779.	1,091.	-24
	13	Compensation of officers, directors, trustees, etc		0.	0.	0.	0.
	14	Other employee salaries and wages		· · · · · · · · · · · · · · · · · · ·		<u></u>	
		Pension plans, employee benefits		-			
ses		Legal fees			· · · · · · · · · · · · · · · · · · ·		
Expens		Accounting fees					
ă		Other professional fees		-			
ē.		Interest				~	
ativ	18	Taxes STMT	1	100.	0.	0.	100.
istr	19	Depreciation and depletion					
nju	20	Occupancy	l				
Adr	21	Travel, conferences, and meetings					
19	22	Printing and publications	ĺ	-			
. g	23	Other expenses STMT	2	210.	0.	0.	210.
tiĥ	24	Total operating and administrative	_				
Operating and Administrative	-·	expenses. Add lines 13 through 23		310.	0.	0.	310.
Ō.	25	Contributions, gifts, grants paid		35,823.			310. 35,823.
<u> </u>	-	Total expenses and disbursements.	ĺ				
		Add lines 24 and 25		36,133.	0.	0.	36,133.
=	27	Subtract line 26 from line 12:					
-]		Excess of revenue over expenses and disburseme	nts	27,881.			
	~	Net investment income (if negative, enter -0-)			6,779.		
		Adjusted net income (if negative, enter -0-)			1	_ 1,091.	——————————————————————————————————————
12350							Form 000 PE (0)14

Fo	rm 9	90-PF (2014) MEMORIAL SCHOLARSHIP FUN		34-:	1668082 Page 2
T E	Part	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
_	T		(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	,	Savings and temporary cash investments	54,034.	75,139.	75,139.
	3	Accounts receivable ►			
		Less: allowance for doubtful accounts ►			
	4	Pledges receivable			
		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			
		Less: allowance for doubtful accounts			
ssets	i	Inventories for sale or use			
Ass	1	Prepaid expenses and deferred charges			
_	1	Investments - U.S. and state government obligations			
	1	Investments - corporate stock			
	1	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	1	Investments - mortgage loans	107,204.	113,980.	138,700.
	13	Investments - other STMT 3	107,204.	113,300.	130,700.
	14	Land, buildings, and equipment: basis			
	1.5	Less accumulated depreciation			
	1	Other assets (describe ►) Total assets (to be completed by all filers - see the			
	10	· · · · · · · · · · · · · · · · · · ·	161,238.	189,119.	213,839.
	17	Instructions. Also, see page 1, item I) Accounts payable and accrued expenses	101,230.	109,119.	213,033.
	18	Grants payable			
,n	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ipi	21	Mortgages and other notes payable			
Ë		Other liabilities (describe)			
		Cition map made (docornos)			
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
	ŀ	and complete lines 24 through 26 and lines 30 and 31.			
ces	24	Unrestricted	89,023.	115,019.	
Net Assets or Fund Balances	25	Temporarily restricted	72,215.	74,100.	
Ва	26	Permanently restricted			
'n	l	Foundations that do not follow SFAS 117, check here			
Ę		and complete lines 27 through 31.			
ts o	27	Capital stock, trust principal, or current funds			
SSe	i .	Paid-in or capital surplus, or land, bldg., and equipment fund			
ţ	29	Retained earnings, accumulated income, endowment, or other funds			
Š	30	Total net assets or fund balances	161,238.	189,119.	
			161 020	100 110	
_		Total liabilities and net assets/fund balances	161,238.	189,119.	
P	art	Analysis of Changes in Net Assets or Fund Ba	lances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line 30	0		
		t agree with end-of-year figure reported on prior year's return)		1	161,238.
	•	amount from Part I, line 27a		2	27,881.
		increases not included in line 2 (itemize)		3	0.
		nes 1, 2, and 3		4	189,119.
		ases 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, colu	ımn (b), line 30	6	189,119.
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MEMORIAL SCHOLARSHIP FUND

	oate sold day, yr.)
1a CAPITAL GAINS DIVIDENDS	
b	
<u>c</u>	
<u>d</u>	
e (a) Gross sales price (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss)	
(e) Gross sales price (i) Depreciation allowed (g) Cost of other basis (ii) dail of (loss) (loss of sale (e) plus (f) minus (g)	
a 5,688.	5,688.
<u>b</u>	
C	
d e	
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col. (h) gain minus	
(i) F.M.V. as of 12/31/69 (j) Adjusted basis (k) Excess of col. (i) col. (k), but not less than -0-) or Losses (from col. (h))	
as 01 12/3 1/09	
	5,688.
<u>b</u>	
C d	
e	
∫ If gain, also enter in Part I, line 7	
2 Capital gain net income or (net capital loss) If (loss), enter -0- in Part I, line 7	<u>5,688.</u>
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):	
If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8	_0.
Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income	
(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) N/A	Ā
If section 4940(d)(2) applies, leave this part blank.	
Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? L Ye If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.	s L No
1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.	
(a) (b) (c) Distribution rate)
Calendar year (or tax year beginning in) Adjusted qualifying distributions Net value of noncharitable-use assets (col. (b) divided by columns.	ıl. (c))
2013	
2012	
2010	
2009	
2 Total of line 1, column (d)	
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years	
the foundation has been in existence if less than 5 years	
4 Enter the net value of noncharitable-use assets for 2014 from Part X, line 5	
5 Multiply line 4 by line 3	
l l	
6 Enter 1% of net investment income (1% of Part I, line 27b)	
	<u> </u>
6 Enter 1% of net investment income (1% of Part I, line 27b) 7 Add lines 5 and 6	

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_	irt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948	- see	nstru	ıctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here X and enter "N/A" on line 1.				-	
	Date of ruling or determination letter: 06/01/93 (attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	_1		N/	A_	
	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			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2			_	
-	Add lines 1 and 2	3				
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5				0.
6	Credits/Payments:					
	2014 estimated tax payments and 2013 overpayment credited to 2014					
	Exempt foreign organizations - tax withheld at source		ı			
	Tax paid with application for extension of time to file (Form 8868) 6c					
	Backup withholding erroneously withheld 6d	_				Λ
_	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 attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	<u>8</u> 9				0.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				<u> </u>
10	Enter the amount of line 10 to be; Credited to 2015 estimated tax	11				
	rt VII-A Statements Regarding Activities					
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın			Yes	No
	any political campaign?			1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition	?		1 b	_	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.					
C	Did the foundation file Form 1120-POL for this year?			1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. \blacktriangleright \$ 0 • (2) On foundation managers. \blacktriangleright \$ 0 •					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. ► \$0.			,		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			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 instrument, articles of incorporation, or	r				-
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
	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		X
	If "Yes," attach the statement required by General Instruction T.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state 	law			37	
_	remain in the governing instrument?			6	X	
′	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			7_		
0.	Enter the states to which the foundation reports or with which it is registered (see instructions)					
oa	OH	-				
,	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
U	of each state as required by General Instruction G? If "No," attach explanation			8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	ndar		- 55		
,	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV			9	X	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10		X
· ·	in too, undort a control to the manual and addresses				DE	(2014)

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Pa	art VII-A Statements Regarding Activities (continued)				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of				
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	· · · · · · · · · · · · · · · · · · ·	11		_X_
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory	privileges?			
	If "Yes," attach statement (see instructions)		12	Ì	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	Ī	13	X	
	Website address ► N/A	₹.	0-1		10
14		.►419 -25	8:	239	-
•	Located at ▶ 2257 APPLEWOOD DR., TOLEDO, OH	ZIP+4 ▶43			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			_	\prod
	and enter the amount of tax-exempt interest received or accrued during the year	- 15	N,	/A	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,	L		Yes	No
	securities, or other financial account in a foreign country?	1	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the nar	na of tha	10 ;		_ _
		iic Oi tiise			
P	foreign country art VII-B Statements Regarding Activities for Which Form 4720 May Be Required				
			—-	Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	}		165	140
1a	During the year did the foundation (either directly or indirectly):	. 📆	1	- 1	
		res X No	1	ĺ	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				
	· · ·	res X No	ļ		
		res X No	- 1	j	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	res X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available	}		ļ	
	for the benefit or use of a disqualified person)?	es X No	1	1	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"				
	if 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.)	es X No	1	1	
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		ŀ	İ	
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	N/A	1b	1	
	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		1	1	
Ī	before the first day of the tax year beginning in 2014?		1c	J	Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation				
	defined in section 4942(j)(3) or 4942(j)(5)):		j	}	
а	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	na		1	
_		es X No	ł		
		03 (22) 110		1	
.	If "Yes," list the years \(\)		ľ	ł	
Ü		i i			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attac				
	statement - see instructions.)	N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
_	<u> </u>	j		- }	
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time				
	 ·	es X No			
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons a	•			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to		Ì		
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule of				
	Form 4720, to determine if the foundation had excess business holdings in 2014.)	N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	L	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpos	e that		ľ	
	had not been removed from jeopardy before the first day of the tax year beginning in 2014?		4b		<u>X</u> _
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Total number of other employees paid over \$50,000

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)	у	_
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 serv	/ice	(c) Compensation
NONE		
		
Total number of others receiving over \$50,000 for professional services	<u> </u>	0
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		Expenses
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		
1 STUDENTS IN THE TOLEDO AREA ARE GRANTED SCHOLARSHIPS TO ASSIST THEM IN THEIR PURSUIT OF HIGHER EDUCATION		
		0.
2		
3		
		
4	——	
	—	
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1 <u>N/A</u>		
_ 		
2		
		
All other program-related investments. See instructions.		
3		
	\neg	
Total. Add lines 1 through 3	>	0.

MEMORIAL SCHOLARSHIP FUND

	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ındations, se	e instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	134,322.
	Average of monthly cash balances	1b	75,423.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	209,745.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	.	
2	Acquisition indebtedness applicable to line 1 assets	7 2	0.
3	Subtract line 2 from line 1d	3	209,745.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	3,146.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	206,599.
6	Minimum investment return. Enter 5% of line 5	6	10,330.
_	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a foreign organizations check here X and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2014 from Part VI, line 5		
b	Income tax for 2014. (This does not include the tax from Part VI.)]	
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5 _	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	
P	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	36,133.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	36,133.
5	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	0.
6	Adjusted qualifying distributions, Subtract line 5 from line 4	6	36,133.

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4940(e) reduction of tax in those years.

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

Part XIII Undistributed Income (see	instructions)	N/A		
	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2013	2013	2014
1 Distributable amount for 2014 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only				
b Total for prior years:				
3 Excess distributions carryover, if any, to 2014:				
a From 2009				
b From 2010				
c From 2011				
d From 2012				
e From 2013			}	
f Total of lines 3a through e				
4 Qualifying distributions for 2014 from				
Part XII, line 4: ► \$				
a Applied to 2013, but not more than line 2a				
b Applied to undistributed income of prior				
years (Election required - see instructions)				
c Treated as distributions out of corpus				
(Election required - see instructions)				
d Applied to 2014 distributable amount				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2014		<u> </u>		
(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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income. Subtract				
line 4b from line 2b				
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				
d Subtract line 6c from line 6b. Taxable				
amount - see instructions]		
e Undistributed income for 2013. Subtract line				
4a from line 2a. Taxable amount - see instr.				
f Undistributed income for 2014. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2015				
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)				
8 Excess distributions carryover from 2009				
not applied on line 5 or line 7				
9 Excess distributions carryover to 2015.				
Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9:	-			
a Excess from 2010				
b Excess from 2011			1	
c Excess from 2012				
d Excess from 2013				
e Excess from 2014				
423581 11-24-14			h.	Form 990-PF (2014

Form 990-PF (2014) MEMORIAL SCI

MEMORIAL SCHOLARSHIP FUND

Part XIV Private Operating F	oundations (see ins	structions and Part VII	A, question 9)		
1 a If the foundation has received a ruling o	r determination letter that	it is a private operating			
foundation, and the ruling is effective fo	r 2014, enter the date of t	he ruling	▶ 06/	01/93	
b Check box to indicate whether the found	dation is a private operatin	g foundation described ii			2(1)(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	1,091.	1,143.	826.	12,735.	15,795.
b 85% of line 2a	927.	972.	702.	10,825.	13,426.
c Qualifying distributions from Part XII,			J		
line 4 for each year listed	36,133.	25,745.	48,011.	52,986.	162,875.
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities	0.	0.	0.	0.	0.
e Qualifying distributions made directly					
for active conduct of exempt activities.		ľ	İ	ľ	
Subtract line 2d from line 2c	36,133.	25,745.	48,011.	52,986.	162,875.
3 Complete 3a, b, or c for the alternative test relied upon:		ĺ	[ĺ	
a "Assets" alternative test - enter:					
(1) Value of all assets					0.
(2) Value of assets qualifying				1	
under section 4942(j)(3)(B)(i)					0.
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year					
listed	6,887.	5,770.	4,533.	19,084.	36,274.
c "Support" alternative test - enter:				ļ	
(1) Total support other than gross					
investment income (interest, dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)					0.
(2) Support from general public					
and 5 or more exempt organizations as provided in	1				
section 4942(j)(3)(B)(iii)					0.
(3) Largest amount of support from		}			
an exempt organization					0.
(4) Gross investment income				- 1 45 222	0.
Part XV Supplementary Info			t the foundation f	ad \$5,000 or mor	e in assets
at any time during the	ne year-see instri	ictions.)			
1 Information Regarding Foundation	•				
a List any managers of the foundation who			butions received by the fo	undation before the close	of any tax
year (but only if they have contributed m	ore man 45,000). (See Se	ction 507(u)(z).)			
NONE					
b List any managers of the foundation who			or an equally large portion	of the ownership of a part	nership or
other entity) of which the foundation has	a 10% of greater interest	•			
NONE					
2 Information Regarding Contribution			-		
	-	•	rganizations and does not		
the foundation makes gifts, grants, etc. (.
a The name, address, and telephone numb	er or e-mail address of th	e person to whom applic	ations should be addresse	d:	
RON SHNIDER		42560			
3752 FAIRWOOD DR., S					
b The form in which applications should be		on and materials they sho	ould include:		
APPLICATION FORM PROV	A T D E D				
c Any submission deadlines:	OHDMINGS -	NA VAMODED () 1 cm		
APPLICATIONS MUST BE					
d Any restrictions or limitations on awards,					
SCHOLARSHIPS GRANTED	DWORD ON NE	PUD AND ACE	TOURTC BEKEC	KMANCE	

34-1668082 MEMORIAL SCHOLARSHIP FUND Page 11 Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient a Paid during the year EDUCATION TAMMY BOYD NONE N/A 5,000. TOLEDO OH ANTHONY LOCKETT NONE N/A EDUCATION TOLEDO, OH 5,000, ARMOND WIMBERLY NONE N/A EDUCATION 5,000. TOLEDO OH NONE EDUCATION ALISON MITCHELL N/A 5,000. TOLEDO, OH N/A EDUCATION ALISON THOMPSON NONE 3 944. TOLEDO OH CONTINUATION SHEET(S) SEE ➤ 3a 35.823. Total b Approved for future payment ALISON THOMPSON NONE N/A EDUCATION TOLEDO, OH 1,056. N/A EDUCATION ANTHONY NEFF NONE TOLEDO, OH 2,748. ARIELLE WHITE NONE N/A EDUCATION TOLEDO OH

423611 11-24-14

Total

▶ 3b

3,757,

74 100.

Form 990-PF (2014)

SEE CONTINUATION SHEET(S)

MEMORIAL SCHOLARSHIP FUND

	Unrelated b	usiness income		y section 512, 513, or 514	(e)
ter gross amounts unless otherwise indicated.	(a) Business	(b)	(c) Exclu-	(d)	Related or exemp
Program service revenue:	Business	Amount	sion code	Amount	function income
a					
b					
C	1 1				
d					
e	1 1		<u> </u>		<u>-</u>
f			 		
g Fees and contracts from government agencies			 		
Membership dues and assessments					
Interest on savings and temporary cash					
investments			1 1	1 001	
Dividends and interest from securities	 	 	14	1,091.	
Net rental income or (loss) from real estate:					
a Debt-financed property			 		
b 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			14	5,688.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory	-				
Other revenue:			1 -		
a					
b					
С					<u> </u>
d					
e					
Subtotal. Add columns (b), (d), and (e)		0.		6,779.	
				13	6,7
	s.)				
e worksheet in line 13 instructions to verify calculation		plishment of E	xempt Ρι	ırposes	
e worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activities	income is reported in co	olumn (e) of Part XVI-A		<u> </u>	lishment of
e worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activities the No. Explain below how each activity for which	income is reported in co	olumn (e) of Part XVI-A		<u> </u>	lishment of
e worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activities the No. Explain below how each activity for which	income is reported in co	olumn (e) of Part XVI-A		<u> </u>	lishment of
e worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activities the No. Explain below how each activity for which	income is reported in co	olumn (e) of Part XVI-A		<u> </u>	lishment of
e worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activities Relationship of Activities Relationship of Activities Relationship of Activities	income is reported in co	olumn (e) of Part XVI-A		<u> </u>	lishment of
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e worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activities e No. Explain below how each activity for which	income is reported in co	olumn (e) of Part XVI-A		<u> </u>	lishment of
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e worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activities e No. Explain below how each activity for which	income is reported in co	olumn (e) of Part XVI-A		<u> </u>	lishment of
e worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activities the No. Explain below how each activity for which	income is reported in co	olumn (e) of Part XVI-A		<u> </u>	lishment of
ne No. Explain below how each activity for which	income is reported in co	olumn (e) of Part XVI-A		<u> </u>	lishment of
e worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activities ne No. Explain below how each activity for which	income is reported in co	olumn (e) of Part XVI-A		<u> </u>	lishment of
e worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activities the No. Explain below how each activity for which	income is reported in co	olumn (e) of Part XVI-A		<u> </u>	lishment of

34-1668082 Page 13

Part	XVII		Regarding Trai	nefere To	and Transactions	and Relation		charitahl		iye 13
	7,011	Exempt Organ		1131613 10	and mansactions		isinps with Non	Charlasi		
1 D:	d the or			v of the follow	ing with any other organizat	tion described in se	ection 501(c) of		Yes	No
					527, relating to political orga					
		from the reporting found								
) Cash	. •						1a(1)		Х
(2) Other	assets						1a(2)		Х
		isactions:								
(1) Sales	of assets to a noncharit	able exempt organiza	ation				1b(1)		х
(2) Purcl	hases of assets from a no	oncharitable exempt	organization				1b(2)		Х
•		al of facilities, equipment,		•				1b(3)		X_
(4	Reim	bursement arrangements	S					15(4)	ļ —	Х
-		s or loan guarantees						1b(5)		Х
•	•	rmance of services or m	embership or fundra	usıng solicitati	ions			1b(6)		X
•		f facilities, equipment, ma						1c		Х
	-		•		nedule. Column (b) should a	lways show the fai	ir market value of the go	ods, other ass	sets,	
					ved less than fair market va					
) the value of the goods,								
(a) Line i	10	(b) Amount involved	(c) Name o	of noncharitab	le exempt organization	(d) Descript	tion of transfers, transaction	s, and sharing ar	rangeme	nts
				N/A						
								,_		
							<u> · · · · · · · · · · · · · · · · · ·</u>			
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		· ·	-		e or more tax-exempt organ	nzations described		X Yes		٦,,,
		501(c) of the Code (othe	•	(3)) or in sec	ction 52/7			LA_1 Yes	<u> </u>	No
<u>D 11</u>	res, co	mplete the following sch (a) Name of org			(b) Type of organization	1	(c) Description of rela	tionship		
OT.D	NT ETAT	SBOYS GOODF			(b) Type of organization	SEE STA	TEMENT 4	.iioiioiiip		
		TION	BULLOW		501(C)(3)	DEE SIE	AIRWRWI 4	****		
ADDC.	CIN	IION			301(0/(3/	 				
	_									
	Under	penalties of perjury, I declare	that I have examined th	ıs return, ıncludı	ng accompanying schedules and	statements, and to the	he best of my knowledge	May the IDC		
Sign	and be	lief, it is true, correct, and cor	nplete Declaration of p	reparer (other tha	an taxpayer) is based on all inform	mation of which prepa	rer has any knowledge	May the IRS of return with the shown below	e prepare	er i
Here		Ca Murinie	A Malus		1414/16	TREAS	SURER	X Yes		No No
	Sign	ature of officer or trustee)		Date	Title				
	<u>' </u>	Print/Type preparer's na	ame	Preparer's s		Date	Check if P	TIN		
		RODERICK J	•			2/18/6	self- employed			
Paid		MACLACHLAN		Moderni	1 Mules	V113116		P00332	<u>50</u> 3	
Prepa		Firm's name ► CLI		NALLEN	LLP		Firm's EIN ► 41	-07467	49	
Use (Only									
		Firm's address > ON	E SEAGATE	E. SUIT	E 2650					

TOLEDO, OH 43604-1558

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

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.lrs.gov/form990.

OMB No 1545-0047

Employer identification number

2014

RAY T. KEST OLD NEWSBOYS GOODFELLOW MEMORIAL SCHOLARSHIP FUND 34-1668082 Organization type (check one): Filers of: Section: ___ 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990 PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II 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 Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file 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)

but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization RAY T. KEST OLD NEWSBOYS GOODFELLOW

MEMORIAL SCHOLARSHIP FUND

Employer identification number

34-1668082

Part I Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.
------------------------------------------------------------------------------------	----------------------

(b) Ime, address, and ZIP + 4 GOODFELLOW ASSOCIATION 603 (b) Ime, address, and ZIP + 4	(c) Total contributions \$ 50,000. (c) Total contributions	(d) Type of contribution Person X Payroll
603 (b)	- (c)	Payroll Noncash (Complete Part II for noncash contributions)
	,	
		1
	- \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(b) me, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	- - \$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(b) me, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		Person Payroll Oncash Complete Part II for noncash contributions.)
(b) me, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	- - \$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(b) me, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	\$	Person Payroll Onncash (Complete Part II for noncash contributions)
	(b) Ime, address, and ZIP + 4 (b) Ime, address, and ZIP + 4 (b) Ime, address, and ZIP + 4	(b) (c) Total contributions (b) (c) Total contributions (c) Total contributions (d) Total contributions (e) Total contributions (f) Total contributions (g) Total contributions (h) (c) Total contributions (h) (c) Total contributions (h) (c) Total contributions

Name of organization

Employer identification number

RAY T. KEST OLD NEWSBOYS GOODFELLOW MEMORIAL SCHOLARSHIP FUND

34-1668082

Part II Noncash Property (see instructions). Use duplicate copies of Part 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. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Name of organization Employer identification number RAY T. KEST OLD NEWSBOYS GOODFELLOW MEMORIAL SCHOLARSHIP FUND 34-1668082 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations Part III completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info once.) Use duplicate copies of Part III if additional space is needed (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (d) Description of how gift is held (b) Purpose of gift (c) Use of gift **Part** (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4

FORM 990-PF	TAXES			STATEMENT 1				
DESCRIPTION	(A) EXPENS: PER BO		(B) NET INVE MENT INC		(C) ADJUSTE NET INCO		(D) CHARITA PURPOSI	
OHIO CHARITABLE REGISTRATION		100.		0.		0.	10	00.
TO FORM 990-PF, PG 1, LN 18	:	100.		0.		0.	10	00.
FORM 990-PF	ОТН	ER E	XPENSES			Sī	ATEMENT	2
DESCRIPTION	(A) EXPENSI PER BOO		(B) NET INVE MENT INC		(C) ADJUSTE NET INCO		(D) CHARITAI PURPOSI	
BANK FEES STAMPS		150. 60.		0.		0.		50. 60.
TO FORM 990-PF, PG 1, LN 23		210.		0.		0.	2:	10.
FORM 990-PF	OTHER	INV	ESTMENTS			sī	ATEMENT	3
DESCRIPTION			LUATION ETHOD	вос	OK VALUE	FA	IR MARKET	r
AMERICAN FUNDS NEW PERSPECTIV CLASS C AMERICAN FUNDS GROWTH FUND OF			COST		14,932.		19,11	
AMERICA CLASS C AMERICAN FUNDS CAPITAL WORLD & INCOME FUND CLASS C AMERICAN FUNDS AMCAP FUND CLA			COST		15,928. 13,656. 16,354.		20,83 18,43 21,33	39.
AMERICAN FUNDS WASHINGTON MUT INVESTORS FD CL C AMERICAN FUNDS BOND FUND OF A	'UAL	(COST		14,884.		19,29	96.
CLASS C AMERICAN FUNDS INCOME FUND OF AMERICA CLASS C		(COST		31,138. 7,088.		31,04 8,62	
TOTAL TO FORM 990-PF, PART II	, LINE 1	L3			113,980.		138,70	00.

990-PF AFFILIATION WITH TAX-EXEMPT ORGANIZATIONS PART XVII, LINE 2, COLUMN (C)

STATEMENT 4

NAME OF AFFILIATED OR RELATED ORGANIZATION

OLD NEWSBOYS GOODFELLOW ASSOCIATION

DESCRIPTION OF RELATIONSHIP WITH AFFILIATED OR RELATED ORGANIZATION

TRANSFERRED FUNDS WHICH ARE THE INVESTMENTS OF THE ORGANIZATION.

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient NONE N/A EDUCATION CHANTAL CRANE TOLEDO, OH 3,745. N/A EDUCATION SANA SHARPER NONE 2,500. TOLEDO, OH ARIELLE WHITE NONE N/A EDUCATION 1,243, TOLEDO OH KELSEY GROWDEN NONE N/A EDUCATION TOLEDO OH 1.047. CAITLIN SHADLER N/A NONE EDUCATION TOLEDO OH 599<u>.</u> LEIGH KEOGH NONE N/A EDUCATION 493. TOLEDO OH ANTHONY NEFF NONE N/A EDUCATION 2,252, TOLEDO, OH Total from continuation sheets 11.879.

Part XV Supplementary Information Grants and Contributions Approved for Future Payment (Continuation) If recipient is an individual, Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient NONE BAYLEE HENDERSON N/A EDUCATION TOLEDO, OH 5.000. CAITLIN SHADLER NONE N/A EDUCATION 1,062, TOLEDO OH LEIGH KEOGH NONE N/A EDUCATION 477. TOLEDO, OH STEVEN KINSEL NONE EDUCATION N/A 5,000. TOLEDO, OH SHYANNE CRAWFORD NONE N/A EDUCATION 5,000. TOLEDO, OH EDUCATION JACOB STEWART NONE N/A 5,000. TOLEDO OH NONE N/A EDUCATION GABRIELLE SKIBINSKI TOLEDO, OH 5,000. NOGC LEIN MAI NONE N/A EDUCATION 5,000. TOLEDO, OH JESSICA GUICE NONE N/A EDUCATION 5,000. TOLEDO OH HANNAH HARTFORD NONE N/A EDUCATION 5,000. TOLEDO OH Total from continuation sheets 66 539

MEMORIAL SCHOLARSHIP FUND 34-1668082

Part XV Supplementary Information

3 Grants and Contributions Approved for Fu	ture Payment (Continuation			
Recipient	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	CONTRIBUTION	74HOUR
TANEVA BUSH	NONE	N/A	EDUCATION	
TOLEDO, OH				5,00
BRIAN UTTER	NONE	N/A	EDUCATION	
TOLEDO, OH		-		5,000
JOVAN SANSON	NONE	N/A	EDUCATION	
COLEDO, OH				5,000
JESSICA SLAWSKI	NONE	N/A	EDUCATION	
COLEDO, OH				5,000
JUAN CASTILLO	NONE	N/A	EDUCATION	
POLEDO, OH				5,000
Total from continuation sheets				