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OMB No 1545-0052

Department	of the	Tracous
Department	OI WIE	i ii easui y
1-1		~ ·· ·

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.irs.gov/form990pf.

For	caler	ndar year 2014 or tax year beginning JU	<u> L 1, 2014</u>	, and ending	<u>JUN 30, 2015</u>	
Na	me of	f foundation			A Employer identification	number
M	AR	GARET E. & STEPHEN E.	DIEBOLD			
	HA	RITABLE FOUNDATION, IN	C		91-2107857	
Nur	nber a	and street (or P O box number if mail is not delivered to stre	et address)	Room/suite	B Telephone number	
_2	10	PEPPERBUSH ROAD			502-893-94	92
City	or to	own, state or province, country, and ZIP or foreign	postal code		C If exemption application is p	ending, check here
L	UO	ISVILLE, KY 40207				
G	heck	all that apply: Initial return	Initial return of a fe	ormer public charity	D 1. Foreign organizations	s, check here
		Final return	Amended return			
		Address change	Name change		Foreign organizations me check here and attach co	eting the 85% test, imputation
H (Check	type of organization: X Section 501(c)(3)	exempt private foundation		 E If private foundation sta	tus was terminated
] Se	ction 4947(a)(1) nonexempt charitable trust	Other taxable private found	ation	under section 507(b)(1)	
I Fa	ır ma	arket value of all assets at end of year J Accour	iting method: X Cash	Accrual	 F= If the foundation is in a	60-month termination
(fi	om l	Part II, col (c), line 16)	Other (specify)		under section 507(b)(1)	
	\$	2,200,048. (Part I, co	lumn (d) must be on cash	basis.)		<u> </u>
Pa	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
		necessarily equal the amounts in column (a)	expenses per books	income	income	(cash basis only)
	1	Contributions, gifts, grants, etc., received	92,203.		N/A	
	2	Check In the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	55,739.	55,739.		STATEMENT 1
	5a	Gross rents				
	b	Net rental income or (loss)				
	6a	Net gain or (loss) from sale of assets not on line 10	380,594.			
Š	b	Gross sales price for all assets on line 6a 634,918.				
Revenue	7	Capital gain net income (from Part IV, line 2)		380,594.		
Œ	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
10	l	Less Cost of goods sold				
2015	l	Gross profit or (loss)				
ರಾ	11	Other income	<1,384.		>	STATEMENT 2
-	12	Total Add lines 1 through 11	527,152.	434,949.		
>	13	Compensation of officers, directors, trustees, etc	0.	0.		0.
₹	14	Other employee salaries and wages			RECEIVED	
es		Pension plans, employee benefits				
, §	l .	Legal fees			1 1/01/ 1	
per	ı	Accounting fees STMT 3	1,500.	90	NOV 1 6 2015	ර් 1,500.
ũ		Other professional fees				Ø (°
Operating and Administrative Expens		Interest	005	104	OGDEN, U	9 3
itra		Taxes STMT 4	925.	101-		0.
inis	ı	Depreciation and depletion				
ᄩ	ı	Occupancy				
٧p		Travel, conferences, and meetings		<u> </u>		
an	1	Printing and publications	1 5 4 4 77	15 445		
ing		Other expenses STMT 5	15,447.	15,445.		2.
erat.	24	Total operating and administrative	17 070	15 546		1 500
Ö		expenses. Add lines 13 through 23	17,872.	15,546.		1,502. 301,000.
_		Contributions, gifts, grants paid	301,000.			301,000.
	26	Total expenses and disbursements.	210 070	15 546		202 502
	-	Add lines 24 and 25	318,872.	15,546.	<u> </u>	302,502.
		Subtract line 26 from line 12:	200 200	į į		
	l	Excess of revenue over expenses and disbursements	208,280.	410 403		
		Net investment income (if negative, enter -0-)		419,403.	NT / N	
	C	Adjusted net income (if negative, enter -0-)	_l	<u> </u>	N/A	<u> </u>

423501 11-24-14 LHA For Paperwork Reduction Act Notice, see instructions.

MARGARET E. & STEPHEN E. DIEBOLD
CHARITABLE FOUNDATION, INC.

βOI	rm 9	90-PF (2014) CHARITABLE FOUNDATION,	INC.	91-	21 07857 Page 2
P	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	f year
		column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	52.	50.	50.
	2	Savings and temporary cash investments	34,584.	37,718.	37,718.
	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	<u> </u>		
		Less: allowance for doubtful accounts	ļ		
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
⋖	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock STMT 6	1,463,839.	1,668,611.	2,162,280.
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment; basis			
		Less accumulated deprecation			
	15	Other assets (describe STATEMENT 7)	1,848.	2,224.	0.
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	1,500,323.	1,708,603.	2,200,048.
	l	,		·	
	18	Grants payable			
ies	19	Deferred revenue			
Liabilities		Loans from officers, directors, trustees, and other disqualified persons			
Lia					
	22	Other liabilities (describe)			
	22	Total liabilities (add lines 17 through 22)	0.	0.	
	23	Foundations that follow SFAS 117, check here	0.		
		and complete lines 24 through 26 and lines 30 and 31.			
es	24	Unrestricted			
auc	l	Temporarily restricted			
Fund Balances	l			/ N	
ם		Foundations that do not follow SFAS 117, check here			
ᆲ		and complete lines 27 through 31.			
Assets or	27	Capital stock, trust principal, or current funds	0.	0.	
set	28		0.	0.	
¥8	29	Retained earnings, accumulated income, endowment, or other funds	1,500,323.	1,708,603.	
ğ	30	Total net assets or fund balances	1,500,323.	1,708,603.	
.]	31	Total liabilities and net assets/fund balances	1,500,323.	1,708,603.	
P	art	III Analysis of Changes in Net Assets or Fund B	alances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30		
1	(mus	st agree with end-of-year figure reported on prior year's return)		1	1,500,323.
2 1	Enter	amount from Part I, line 27a		2	208,280.
3	Othe	r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		. 4	1,708,603.
		eases not included in line 2 (itemize)		5	0.
ß.	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	nlumn (h) line 30	6	1 708 603

423511 11-24-14

(a) List and descrit	nd Losses for Tax on Ir be the kind(s) of property sold (e.g ehouse; or common stock, 200 sha	., real estate,	t Income	` P	How acc	ase '	(c) Date	acquired lay, yr.)	(d) Date sold (mo., day, yr.)
	PNC SECURITIES SALES - VARIOUS			ט	- Donat E		(1110., 0		(1110., day, y1.)
b PNC SECURITIES			-						
c CAPITAL GAINS D				i					
d				 					
e				1					
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				(h) G (e) plu:	ain or (loss s (f) minus) (g)
a 277,144.			172,92	21.					104,223
b 352,812.			81,40	3.					271,409
c 4,962.									4,962.
d									
_e		<u> </u>							
Complete only for assets showing								Col. (h) gain	
(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				Losses	not less that (from col. (h))
<u>a</u>								<u> </u>	104,223
b									271,409.
C									4,962.
d									
<u>e</u>				_					
2 Capital gain net income or (net capi	tal loss) $ \begin{cases} & \text{If gain, also enter} \\ & \text{If (loss), enter -0} \end{cases} $	r in Part I, line - in Part I, line	7 7	}	2				380,594
3 Net short-term capital gain or (loss)) as defined in sections 1222(5) an	nd (6):		_					
If gain, also enter in Part I, line 8, co	olumn (c).			\downarrow					
If (loss), enter -0- in Part I, line 8 Part V Qualification Un	der Section 4940(e) for	Dadwaad	Tow on Not	<u> </u>	3			N/A	·
If section 4940(d)(2) applies, leave this Was the foundation liable for the section If "Yes," the foundation does not qualify	on 4942 tax on the distributable amy under section 4940(e). Do not co	mplete this pa	rt.						Yes X No
1 Enter the appropriate amount in ea	ch column for each year; see the ir	nstructions bei	fore making any e	ntries.					70
(a) Base period years Calendar year (or tax year beginning			Net value of no					Distrit (col. (b) div	(d) oution ratio vided by col. (c))
2013		4,590.				,118.			.105235
2012		8,231.				,860.			.118357
2011		3,676.				,763.			.127397
2010		7,256.				,747.			.108297
2009		2,453.			,149	,115.	· · · · · · · · ·		.097861
2 Total of line 1, column (d)		h Ob. 5	- h				2		.557147
3 Average distribution ratio for the 5-y the foundation has been in existence		JII IIIIe Z Dy 5,	or by the number	oi yea	115		3		.111429
4 Enter the net value of noncharitable	-use assets for 2014 from Part X,	tine 5					4		2,130,987.
5 Multiply line 4 by line 3							5	-	237,454
6 Enter 1% of net investment income	(1% of Part I, line 27b)						6		4,194
7 Add lines 5 and 6							7		241,648
8 Enter qualifying distributions from F	Part XII, line 4						8		302,502
If line 8 is equal to or greater than li See the Part VI instructions.	ne 7, check the box in Part VI, line	1b, and comp	lete that part using	g a 19	6 tax ra	te.			
									Form 990-PF (201

MARGARET E. & STEPHEN E. DIEBOLD Form 990-PF (2014) CHARITABLE FOUNDATION, INC. 91-2107857 Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) 1a Exempt operating foundations described in section 4940(d)(2), check here \(\bigs \) and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1% 4,194. 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). 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 3 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4 5 5 Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-6 Credits/Payments: 800. a 2014 estimated tax payments and 2013 overpayment credited to 2014 6a b Exempt foreign organizations - tax withheld at source 6b c Tax paid with application for extension of time to file (Form 8868) 60 d Backup withholding erroneously withheld 6d 7 Total credits and payments. Add lines 6a through 6d 800. 8 Enter any penalty for underpayment of estimated tax. Check here _____ if Form 2220 is attached 8 3,394. 9 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 Enter the amount of line 10 to be: Credited to 2015 estimated tax Part VII-A Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in 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)? X 16 If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities c Did the foundation file Form 1120-POL for this year? X 1c d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. > \$ ____ _____ O . (2) On foundation managers. > \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. 🕨 💲 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? Х 2 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 bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes X 3 X 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a N/A b If "Yes," has it filed a tax return on Form 990-T for this year? 4b X 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 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 Х remain in the governing instrument? 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 X 8a Enter the states to which the foundation reports or with which it is registered (see instructions) b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation 8ь 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses 10

423541

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

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

Form 4720, to determine if the foundation had excess business holdings in 2014.)

had not been removed from jeopardy before the first day of the tax year beginning in 2014?

b 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 lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C.

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

Yes 🗶 No

N/A

3b

4a

Form **990-PF** (2014)

X

during the year?

MARGARET E. & STEPHEN E. Grm 990-PF (2014) CHARITABLE FOUNDATION, 1			01 21070	057	D 0
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be I	Required (contro	91-21078	55.7	Page 6
	Offit 4720 May be i	required (contin	iuea)		T
5a During the year did the foundation pay or incur any amount to:	- 4045(-)\0		[32]		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section)			es X No		İ
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indir				
any voter registration drive?			es X No		1
(3) Provide a grant to an individual for travel, study, or other similar purposes		Y	es X No		ŀ
(4) Provide a grant to an organization other than a charitable, etc., organization	in described in section				
4945(d)(4)(A)? (see instructions)		Y	es 🗶 No		
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or i				
the prevention of cruelty to children or animals?		Y	es X No	1	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described	ın Regulations		ŀ	
section 53.4945 or in a current notice regarding disaster assistance (see instru	ıctıons)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check t	nere		▶□ □		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	rom the tax because it mainta	ined			
expenditure responsibility for the grant?	N	I/A 🔲 Y	es 🔲 No		
If "Yes," attach the statement required by Regulations section 53.494		.,			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to					
a personal benefit contract?	pay promisino on		es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	parconal hanafit contract?	I(6b	- V
If "Yes" to 6b, file Form 8870.	rei sonai beneni conii acti		 	00	<u> </u>
•	.halta- t-a-at0	\Box_{V}	es X No		
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y6	. –		
b If 'Yes,' did the foundation receive any proceeds or have any net income attributed by the state of the sta				7b	Ь
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, roundation Ma	inagers, Higni	y		
List all officers, directors, trustees, foundation managers and their	componenties				
List an officers, an ectors, a astees, foundation managers and then		(c) Compensation	(d) Contributions to	4.3.54	
(a) Name and address	(b) Title, and average hours per week devoted		(d) Contributions to employee benefit plans and deferred	(e) Ex accoun allowa	pense t. other
	to position	(If not paid, enter -0-)	compensation	allowa	ances
	PRESIDENT				
210 PEPPERBUSH ROAD					
LOUISVILLE, KY 40207	1.00	0.	0.		0.
	SECRETARY				
210 PEPPERBUSH ROAD					
OUISVILLE, KY 40207	0.00	0.	0.		_0.
PAUL G. FRANZ	DIRECTOR			-	
9204 WOODHURST					
OUISVILLE, KY 40222	0.00	0.	0.		0.
		į			
Compensation of five highest-paid employees (other than those inc	luded on line 1). If none.	enter "NONE."			
	(b) Title, and average		(d) Contributions to	(e) Ex	pense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Exp account allowa	i, other
NONE	devoted to position		compensation	alluwa	inces
NONE					
		-		_	
			İ		

Total number of other employees paid over \$50,000

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0.

All other program-related investments. See instructions.

Total. Add lines 1 through 3

CHARITABLE FOUNDATION, INC. Page 8 Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: Average monthly fair market value of securities 2,082,063. 1a 81,376. b Average of monthly cash balances 1b c Fair market value of all other assets 1c 2,163,439. d Total (add lines 1a, b, and c) 1d e Reduction claimed for blockage or other factors reported on lines 1a and 0 1c (attach detailed explanation) 2 Acquisition indebtedness applicable to line 1 assets 0. 2,163,439. 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 32,452. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 2,130,987. Minimum investment return. Enter 5% of line 5 106,549. 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 6 106,549. 4,194 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 4,194. 3 Distributable amount before adjustments. Subtract line 2c from line 1 3 102,355. Recoveries of amounts treated as qualifying distributions 5 Add lines 3 and 4 5 355. 6 Deduction from distributable amount (see instructions) 6 0. 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: Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 302,502. 1a b 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 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3Ь 302,502. 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 4,194.

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

Form **990-PF** (2014)

6

298,308.

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 prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7				102,355.
2 Undistributed income, if any, as of the end of 2014				102,333.
a Enter amount for 2013 only			0.	
b Total for prior years:	·			
		0.		
3 Excess distributions carryover, if any, to 2014:	"		 	
a From 2009 55, 451.				
b From 2010 79,765.	1			
c From 2011 112,866.	j			
d From 2012 116,008.				
e From 2013 108, 168.				
f Total of lines 3a through e	472,258.			
4 Qualifying distributions for 2014 from				
Part XII, line 4: ►\$ 302,502.				
a Applied to 2013, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount				102,355.
e Remaining amount distributed out of corpus	200,147.		· · · · · · · · ·	
5 Excess distributions carryover applied to 2014	0.			0.
(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:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	672,405.			
b Prior years' undistributed income. Subtract				· · · · · · · · · · · · · · · · · · ·
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2013. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2014. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2015				0.
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)	0.			
8 Excess distributions carryover from 2009				
not applied on line 5 or line 7	55,451.			
9 Excess distributions carryover to 2015.				
Subtract lines 7 and 8 from line 6a	616,954.			
0 Analysis of line 9:				
a Excess from 2010 79,765.				
b Excess from 2011 112,866.				
c Excess from 2012 116,008.				
d Excess from 2013 108,168.				
e Excess from 2014 200, 147.				
23581				

SEE STATEMENT 8

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or

NONE

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here \(\subseteq \text{ \lambda} \) If the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

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Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation show any relationship to Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year AMERICAN RED CROSS GENERAL FUND 10,000, BOYS & GIRLS HAVEN GENERAL FUND 10,000, BOYS & GIRLS CLUBS OF KENTUCKIANA GENERAL FUND 5,000. CATHOLIC EDUCATION FOUNDATION GENERAL FUND 5,000. CATHOLIC SERVICES APPEAL GENERAL FUND 7.500. SEE CONTINUATION SHEET(S) Total **▶** 3a 301,000. b Approved for future payment NONE Total

Part XVI-A	Analysis of	Income-Producing	Activities

nter gross amounts unless otherwise indicated.	Unrelated	business income		y section 5 12, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt
Program service revenue:	code	Amount	code	Amount	function income
b	-				
d	I I				
ef	-				
g Fees and contracts from government agencies					
Membership dues and assessments Interest on savings and temporary cash investments		·			
Dividends and interest from securities			14	55,739.	
Net rental income or (loss) from real estate:			_		
a Debt-financed propertyb Not debt-financed property			- 		
Net rental income or (loss) from personal property					·- <u>-</u>
Other investment income			14	<1,384.>	
Gain or (loss) from sales of assets other than inventory			18	380,594.	
Net income or (loss) from special events			1-19	300,334.	
Gross profit or (loss) from sales of inventory					
Other revenue:					
a b	-				
c	1	· -			
d	l l				
e	_		. - -	434,949.	
• Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.)	·		-: <u> </u>	13	

Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).						
-							
-							
423621							
11-24-14	Form 990-PF (20						

91-2107857

Page 13

Part >	(VII	Information Re Exempt Organ		sfers To	and Transactions a	and Relations	hips With Noncl	haritabl	е	
1 Did	the Or			of the following	ng with any other organization	nn described in secti	on 501(c) of	<u> </u>	Yes	No
					27, relating to political organ		501 501(0) 01			
		from the reporting founda								
	Cash	on the reporting realist	ation to a monomania		garrization on			1a(1)		X
		assets					-	1a(2)		X
		sactions:					-	15(2)		
	-	of assets to a noncharital	ble exempt organiza	tion				16(1)		X
		ases of assets from a not						1b(2)		Х
		l of facilities, equipment,						1b(3)		Х
(4)	Reiml	oursement arrangements						1b(4)		Х
(5)	Loans	or loan guarantees					4.5	1b(5)		X
(6)	Perfo	mance of services or me	mbership or fundrai	sing solicitatio	ons		•	1b(6)		_X_
c Sha	rıng of	facilities, equipment, ma	iling lists, other asse	ets, or paid em	ployees			1c		X
					edule. Column (b) should alv ed less than fair market valu				sets,	
	<u>-</u>	the value of the goods,								
(a) Line no	4	(b) Amount involved	(c) Name of		e exempt organization	(d) Description	of transfers, transactions, a	and sharing ar	rangeme	nts
				N/A	·	<u> </u>	 			
	+-									
	+-					 				
	+-									
	 	····								
	+-			~			· <u> </u>	· 		
					···					
	+-				· · · · · · · · · · · · · · · · · · ·			<u> </u>		
	+-			_						
	T^-		,-							
	 									
										•
	T^-									
	\top									
ın se	ection	dation directly or indirect 501(c) of the Code (other mplete the following sche	than section 501(c)		or more tax-exempt organi tion 527?	zations described		Yes	X] No
		(a) Name of org		·	(b) Type of organization		c) Description of relation	nship		
		N/A	<u></u>				_ 			
				·				·		
										_
Sign Here	and be	lief, it is tryler correct, and com			ng accompanying schedules and in taxpayer) is based on all inform		has any knowledge	May the IRS return with the shown below Yes	e prepare (see <u>inst</u>	er l
	Sign	ature of officer or trustee		, <u> </u>	Date	Title	<u> </u>			
		Print/Type preparer's na	me	Preparer's s		Date	Check if PTI	N		
Paid		AMY S MILE	S	Oney	s.mils	11/3/15	self- employed P	01217	935	
Prepa Use C		Firm's name ► LOU		н & Со	., PLLC		Firm's EIN ► 61-			
220 0	ا و	Firm's address ▶ 21					/ = 00	\450	01.0	
			<u>UISVILLE,</u>	<u> KY 40</u>	403		Phone no. (502	<u> 1459</u> -	QTO	U

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

2014

Name of the organization

MARGARET E. & STEPHEN E. DIEBOLD CHARITABLE FOUNDATION, INC.

Employer identification number

91-2107857

Organization type (check one) Filers of: 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 990-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 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),

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
MARGARET E. & STEPHEN E. DIEBOLD
CHARITABLE FOUNDATION, INC.

Employer identification number

91-2107857

Part I	Contributors (see instructions). Use duplicate copies of Part I if	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MARGARET & STEPHEN DIEBOLD 210 PEPPERBUSH ROAD LOUISVILLE, KY 40207	\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	MARGARET & STEPHEN DIEBOLD 210 PEPPERBUSH ROAD LOUISVILLE, KY 40207	\$\$\$	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	MARGARET & STEPHEN DIEBOLD 210 PEPPERBUSH ROAD LOUISVILLE, KY 40207	\$ <u>12,073.</u>	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	MARGARET & STEPHEN DIEBOLD 210 PEPPERBUSH ROAD LOUISVILLE, KY 40207	\$15,011.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	MARGARET & STEPHEN DIEBOLD 210 PEPPERBUSH ROAD LOUISVILLE, KY 40207	ss	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
423452 11-03	MARGARET & STEPHEN DIEBOLD 210 PEPPERBUSH ROAD LOUISVILLE, KY 40207	\$ 9,355.	Person Payroll Noncash (Complete Part II for noncash contributions) 990, 990-EZ, or 990-PF) (2014)

Name of organization

MARGARET E. & STEPHEN E. DIEBOLD

CHARLEARIE FOUNDAMION INC.

Employer identification number

<u>CHARI</u>	TABLE FOUNDATION, INC.	9:	<u>l-2107857</u>
Part I	Contributors (see instructions). Use duplicate copies of Part I	f additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	MARGARET & STEPHEN DIEBOLD 210 PEPPERBUSH ROAD LOUISVILLE, KY 40207	\$\$	Person Payroll Noncash X (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.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash

423452 11-05-14

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

(Complete Part II for noncash contributions.)

MARGARET E. & STEPHEN E. DIEBOLD CHARITABLE FOUNDATION, INC.

Employer identification number

91-2107857

	Technicasii Property (see instructions), ose duplicate copies of i	art ii ii auditional space is fleeded.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions) (d) Date received
1	850 SHS UNION PACIFIC	
		\$ 96,901. 12/09/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions) (d) Date received
2	525 SHS HOME DEPOT	
		\$\$ <u>52,125.</u> <u>12/09/14</u>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions) (d) Date received
3	75 SHS AUTOZONE	
		\$ 45,172. 12/09/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions) (d) Date received
4	750 SHS BRISTOL MYERS	
		\$ 44,674. 12/09/14
(a) No. from Part I	(b) Description of noncash property given	(c) (d) FMV (or estimate) Date received
5	600 SHS AMPHENOL	
		\$ 32,064. 12/09/14
(a) No. from Part I	(b) Description of noncash property given	(c) (d) FMV (or estimate) Date received
6	135 SHS PPG	
		\$ 30,159. 12/09/14
423453 11-0	o- 1 4	Schedule B (Form 990, 990-EZ, or 990-PF) (20

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization

MARGARET E. & STEPHEN E. DIEBOLD

Employer identification number

CHARITABLE FOUNDATION, INC.

91-2107857

Part li	Noncash Property (see instructions). Use duplicate copies of F	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
7	740 SHS DOLLAR TREE		
7			
		\$ 50,165.	12/09/14
(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
		s	
(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
423453 11-05	-14	Schedule B (Form 99	0, 990-EZ, or 990-PF) (2014)

Name of organization

MARGARET E. & STEPHEN E. DIEBOLI	ARGARET	RET E. 8	STEPHEN	Ε.	DIEBOL
----------------------------------	---------	----------	---------	----	--------

01	21	Λ	7	O	7

Employer identification number

<u>HARIT</u>	ABLE FOUNDATION, INC.	- 		<u>91-210</u> 7857			
Part III	the year from any one contributor. Complete completing Part III, enter the total of exclusively religion	COlumns (a) through (e) and thus, charitable, etc., contributions of \$	s described in section 501(c)(7), (8), or (10) that total more than \$1,000 fo nd the following line entry. For organizations				
	Use duplicate copies of Part III if addition	nal space is needed					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	1	(d) Description of how gift is held			
-		(e) Transfer	of aift				
	Transferee's name, address, a			elationship of transferor to transferee			
(a) No. from	(b) Purpose of gift (c) Use of			(d) Description of how gift is held			
(a) No.	(6). 4-page 3-3-1	(0,000 0. g					
		(e) Transfer	ifer of gift				
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
-							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
-							
_	(e) Transfer of gift						
	Transferee's name, address, a	nd ZIP + 4	Re	elationship of transferor to transferee			
-							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
-		/ \					
	Transferee's name, address, a	(e) Transfer					
-	mansieree s name, address, a	- IIU ZIF + 4	Ke	elationship of transferor to transferee			
-							

CHARITABLE FOUNDATION, INC. 91-2107857 Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager or substantial contributor Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient THE CENTER FOR WOMEN & FAMILIES GENERAL FUND 5,000. CHILDRENS HOSPITAL FOUNDATION GENERAL FUND 10,000. DESALES HIGH SCHOOL GENERAL FUND 64,000. FOOD FOR THE POOR GENERAL FUND 3,500. FRIAR WORKS GENERAL FUND 1,500. HAND IN HAND MINISTRIES GENERAL FUND 7,000. HARBOR HOUSE GENERAL FUND 3,000. HABITAT FOR HUMANITY GENERAL FUND 5,000. HOSPARUS GENERAL FUND 7,000. JEWISH HOSPITAL FOUNDATION GENERAL FUND

Total from continuation sheets

5,000.

263 500

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation status of Purpose of grant or contribution show any relationship to **Amount** any foundation manager Name and address (home or business) recipient or substantial contributor JUNIOR ACHIEVEMENT GENERAL FUND 750. LITTLE SISTERS OF THE POOR GENERAL FUND 5,000. METRO UNITED WAY GENERAL FUND 15,000. NATIVITY ACADEMY AT ST BONIFACE GENERAL FUND 10,000. PRESENTATION ACADEMY GENERAL FUND <u>750.</u> SCHOOL CHOICE SCHOLARSHIPS GENERAL FUND 6,000. ST. JOHN CENTER GENERAL FUND 6,000. ST. JUDE CHILDREN'S RESEARCH GENERAL FUND 10,000. ST. LOUIS UNIVERSITY GENERAL FUND 500. ST. THOMAS BY THE SEA GENERAL FUND 500, Total from continuation sheets

CHARITABLE FOUNDATION, INC.

Part XV Supplementary Information

ST. XAVIER HIGH SCHOOL 20. ST. XAVIER HS DIEBOLD FAM ENDWMT SENERAL FUND 3. THE DEPAUL SCHOOL SENERAL FUND 10. THE HEALING PLACE SENERAL FUND 5. THE MARY BYRON PROJECT SENERAL FUND 2. THE SALVATION ARMY SENERAL FUND 3. UNIVERSITY OF NOTRE DAME SENERAL FUND SENERAL FUND 3.	Part XV	Supplementary Information				
ST. MARY'S UNIVERSITY OF MN SEMERAL FUND ST. XAVIER HIGH SCHOOL ST. XAVIER HS DIEBOLD FAM ENDWMT SEMERAL FUND 3. THE DEPAUL SCHOOL THE HEALING PLACE SEMERAL FUND 5. THE MARY EYRON PROJECT SEMERAL FUND 3. UNIVERSITY OF NOTRE DAME SEMERAL FUND 3. 3 Grants a						
ST. MARY'S UNIVERSITY OF MN SEMERAL FUND ST. XAVIER HIGH SCHOOL ST. XAVIER HS DIEBOLD FAM ENDWMT SEMERAL FUND 3. THE DEPAUL SCHOOL THE HEALING PLACE SEMERAL FUND 5. THE MARY EYRON PROJECT SEMERAL FUND 3. UNIVERSITY OF NOTRE DAME SEMERAL FUND 3. Nama	· · · · · · · · · · · · · · · · · · ·	If recipient is an individual, show any relationship to any foundation manager		Purpose of grant or contribution	Amount	
ST, XAVIER HIGH SCHOOL ST, XAVIER HS DIEBOLD FAM ENDWAT SENERAL FUND 3. THE DEPAUL SCHOOL SENERAL FUND 10. THE HEALING PLACE SENERAL FUND 5. THE MARY BYRON PROJECT SENERAL FUND 3. UNIVERSITY OF NOTRE DAME DENERAL FUND SENERAL FUND 3.	Name	and address (nome or business)	or substantial contributor	recipient	GOMINGUION.	
ST. XAVIER HS DIEBOLD FAM ENDWIT SENERAL FUND 3. THE DEPAUL SCHOOL SENERAL FUND 10. THE HEALING PLACE SENERAL FUND 5. THE MARY BYRON PROJECT SENERAL FUND 2. THE SALVATION ARMY SENERAL FUND 3. UNIVERSITY OF NOTRE DAME SENERAL FUND 10.	ST. MARY'S	UNIVERSITY OF MN		<u>-</u>	GENERAL FUND	8,000
THE DEPAUL SCHOOL GENERAL FUND 10. THE HEALING PLACE GENERAL FUND 5. THE MARY BYRON PROJECT GENERAL FUND 2. THE SALVATION ARMY GENERAL FUND 3. UNIVERSITY OF NOTRE DAME GENERAL FUND 10.	ST. XAVIER	HIGH SCHOOL			GENERAL FUND	20,000
THE HEALING PLACE SENERAL FUND 5. THE MARY BYRON PROJECT SENERAL FUND 2. THE SALVATION ARMY SENERAL FUND 3. UNIVERSITY OF NOTRE DAME SENERAL FUND 10.	ST. XAVIER	HS DIEBOLD FAM ENDWMT			GENERAL FUND	3,000
THE MARY BYRON PROJECT SENERAL FUND 2. THE SALVATION ARMY SENERAL FUND 3. UNIVERSITY OF NOTRE DAME SENERAL FUND 10.	THE DEPAUL	SCHOOL			GENERAL FUND	10,000
THE SALVATION ARMY GENERAL FUND 3. UNIVERSITY OF NOTRE DAME GENERAL FUND 10.	THE HEALING	PLACE			GENERAL FUND	5,000
UNIVERSITY OF NOTRE DAME GENERAL FUND 10. FUND FOR U OF L	THE MARY BY	RON PROJECT			GENERAL FUND	2,000
FUND FOR U OF L GENERAL FUND	THE SALVATIO	ON ARMY			GENERAL FUND	3,000
	UNIVERSITY (OF NOTRE DAME			GENERAL FUND	10,000
	FUND FOR U (DF L			GENERAL FUND	1,000
SACRED HEART ACADEMY GENERAL FUND 10	SACRED HEAR	T ACADEMY			GENERAL FUND	10,000

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to any foundation manager or substantial contributor Amount status of Name and address (home or business) recipient WAYSIDE CHRISTIAN MISSION GENERAL FUND 10,000. WEST END SCHOOL GENERAL FUND 5,000. XAVERIAN BROTHERS GENERALATE GENERAL FUND 5,000. YMCA SAFE PLACE SERVICES GENERAL FUND 6,000. Total from continuation sheets

					
FORM 990-PF	DIVIDENDS	AND INTER	REST FROM SEC	URITIES S'	TATEMENT
SOURCE	GROSS AMOUNT	CAPITAI GAINS DIVIDENI	REVENUE		
PNC BANK	60,701.	4,96	52. 55,73	9. 55,739.	
TO PART I, LINE 4	60,701.	4,96	55,73	9. 55,739.	
FORM 990-PF		OTHER I	NCOME	S'	PATEMENT
DESCRIPTION			(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
ENTERPRISE PRODUCTS P	ARTNERS		<1,384.:	<1,384.>	
TOTAL TO FORM 990-PF,	PART I,	LINE 11	<1,384.	<1,384.>	
FORM 990-PF		ACCOUNTI	NG FEES	S'	TATEMENT
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABL PURPOSES
ACCOUNTING		1,500.	0	•	1,500
TO FORM 990-PF, PG 1,	LN 16B	1,500.	0	•	1,500
FORM 990-PF		ТАХ	ŒS	S'	TATEMENT
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABL PURPOSES
EXCISE TAX PAYMENTS FOREIGN TAX		824. 101.			0
TO FORM 990-PF, PG 1,	LN 18	925.	101	•	0

FORM 990-PF	OTHER E	XPENSES			STATEMENT	
	(A) EXPENSES PER BOOKS	(B) NET INV MENT IN	EST-	(C) ADJUSTEI NET INCOM		
INVESTMENT MANAGEMENT EXPENSE BANK CHARGES	15, 44 5.	15	,445. 0.			0 .
TO FORM 990-PF, PG 1, LN 23	15,447.	15	,445.			2.
FORM 990-PF	CORPORAT	E STOCK			STATEMENT	ε
DESCRIPTION			вос	OK VALUE	FAIR MARKE VALUE	ET
CORPORATE STOCKS			1	,668,611.	2,162,2	280.
TOTAL TO FORM 990-PF, PART II,	LINE 10B		1	,668,611.	2,162,2	280.
FORM 990-PF	OTHER A	ASSETS			STATEMENT	7
DESCRIPTION		NING OF K VALUE		OF YEAR OK VALUE	FAIR MARKE VALUE	ET
MEGATIVE BASIS ADJUSTMENT-INGERSOLL-RAND NEGATIVE BASIS ADJUSTMENT-HEALT		608.		608.		0.
CARE REIT INC	. 11	1,240.		1,616.		0.
TO FORM 990-PF, PART II, LINE 1	15	1,848.		2,224.		0.
		_				

NAME OF MANAGER

STEPHEN E. DIEBOLD MARGARET E. DIEBOLD