EXTENDED TO APRIL 17, 2018
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.

<u>n</u>	epar terna	tmea al Rev	t of the Treasury venue Service		► Informati	on about Fon	m 990-F	F and its se	parate	instructions	s at www. <i>ir</i> s	.gov/fo	orm990p	f.	Open to Public	Inspection
F	or c	alen	dar year 2016 o	r tax yea	r beginning	JUN	1,	2016		, and e	nding	MAY	31,	2017		
_	Nan	ne of	foundation									A Emp	oloyer ide	ntification	number	
			T. KES	T OL	D NEWS	BOYS G	OODI	FELLOW	7			,	,			
			ORIAL SO						-			3	4-16	68082		
-			nd street (or P O be				address)				Room/suite	1	phone nu		·	
			7 APPLE										19 -5		22 350-4	1048
_			own, state or pro				octal co					 			75 0	
'			EDO, OH		615	r oi ioreigii p	usiai cu	ue				U II exe	emption ap	plication is pe	ending, check here	
_			all that apply:	4.5				l Instal catur			haub.				about boro	
u	U	IECK	an mat appry.		」Initial returi		-	•		ormer public c	панц	ייטן	oreign or	yanızatıons	, check here	
					J Final return			Amended i				2 F	oreign orga	nızatıons med	eting the 85% test reputation	
-				<u>-</u>	Address ch			Name char			-7-	C	heck here a	nd attach cor	nputation	
H	U	٦.	type of organiza			1 501(c)(3) ex					0 1				us was termina	ted
_1	_		ction 4947(a)(1)					xable private				und	er section	507(b)(1)	(A), check here	
- 1			rket value of all		end of year	_	-		Cash	Accr	ual				0-month termin	nation
	•		Part II, col (c),				her (spe					und	er sectior	507(b)(1)	(B), check here	
г	<u> </u>	_				(Part I, colu	mn (a) .	must be or	casn i	oasis)						
L	Рa	rt I	The total of amou	unts in coli	umns (b), (c), an	d (d) may not	(a) Revenue ai ienses per b	nd ooks	(b) Net in		(0	c) Adjuste		(d) Disburs for charitable	purposes
_			necessarily equal			· · · · · · · · · · · · · · · · · · · 	exp			inco	iiie		incom	t	(cash basis	s only)
1/3	,	1	Contributions, o					63,4	10.							
V.	2	2	Check I			attach Sch B										
U.		3	Interest on savings cash investments	s and temp	oorary											
		4	Dividends and i	nterest fr	om securities	i	ļ	1,9	00.		1,900.		1	,900.		
	1	5a	Gross rents													<u>-</u>
	-	b	Net rental income	or (loss)												
~	0	6a	Net gain or (loss) fr					5,6	69.							
5	릵	b	Gross sales price t assets on line 6a	for all	5	,669.										
1 4 2017	Revenue	7	Capital gain net in	come (from	n Part IV, line 2)						<u>5,669.</u>					
₹.	Œ	8	Net short-term	capital ga	ain									0.		
	ł	9	Income modific													
WAY	i	10a	Gross sales less re and allowances	eturns						1						
¥	I	b	Less Cost of good	ds sold												
1		C	Gross profit or ((loss)												
٠,		11	Other income													
·		12	Total Add lines	s 1 throug	gh_11			70,9	79.		<u>7,569.</u>		1	,900.		
جي _		13	Compensation of	office(s. of	ectors invertees	, etc			0.		0.			0.		0.
हेर्न		14	Other employee	-salaries	and wages	78										
		15	Pension plans.	emplovee	a benefits 18	191										
	şe	16a	Legal fees	MAR A	Z 7 2010	RS-(
	ë	b	Legal fees Accounting fees	3	ST	MT=1		1,3	00.		0.			650.		650.
	Operating and Administrative Expenses	C	Other profession	na (fees)	EN, U											
	9	17	Interest	202												
	a	18	Taxes		ST	MT 2		1	.00.		0.			100.		0.
	힣	19	Depreciation an	d depleti							_					
	틹		Occupancy	•												
	₽		Travel, conferer	nces, and	l meetinas											
	밀		Printing and pul		•											
	ga		Other expenses			MT 3		2	69.		0.			269.		0.
	틝		Total operating													<u></u> _
	<u>e</u>		expenses Add					1 6	69.		0.		1	,019.		650.
	ဝီ	25	Contributions, g					47,3				 		,	47	,359.
	- 1		Total expenses				· · · ·	<u> </u>							<u> </u>	, , , , , ,
		20	Add lines 24 an		vui aciii Cii Lă			49,0	128		0.		1	,019.	ЛΩ	,009.
_	\dashv	27	Subtract line 26		n 12·			43,0	20.		<u> </u>		<u>_</u>	, , , , , ,	40	,003.
								21,9	51							
			Excess of revenue					41,3	<u> </u>		7,569.	 				
			Net investment					. <u>. </u>			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		 -	881.		
	ı	G	Adjusted net in	CUITE (IT F	negative, enter -	U-)	i		i			i		OOT		,

623501 11-23-16 LHA For Paperwork Reduction Act Notice, see instructions

<u>Fo</u>	rm 99	0-PF (2016) MEMORIAL SCHOLARSHIP FUN	34-1	34-1668082 Page :			
F	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of			
_			(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bearing	42 164		55 550		
	1	Savings and temporary cash investments	43,164.	57,553.	57,553.		
	3	Accounts receivable					
	١,	Less: allowance for doubtful accounts ► Pledges receivable ►					
	4	Less: allowance for doubtful accounts	}				
	5	Grants receivable					
	1 -	Receivables due from officers, directors, trustees, and other					
	"	disqualified persons					
	7	Other notes and loans receivable					
	'	Less: allowance for doubtful accounts					
(C)	8	Inventories for sale or use	·	·			
ssets	l	Prepaid expenses and deferred charges					
As		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					
	12	Investments - mortgage loans					
	13	Investments - other STMT 4	191,351.	198,913.	233,037.		
	14	Land, buildings, and equipment: basis ▶					
		Less accumulated depreciation					
	15	Other assets (describe)					
	16	Total assets (to be completed by all filers - see the					
_	_	instructions. Also, see page 1, item I)	234,515.	256,466.	<u>290,590.</u>		
		Accounts payable and accrued expenses					
	18	Grants payable					
ies	19	Deferred revenue					
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons					
Lial	21	Mortgages and other notes payable					
_	22	Other liabilities (describe)					
		Table 1985 - (add base 47 Abressah 00)	0.	_			
_	23	Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here		0.			
		•					
es	24	and complete lines 24 through 26 and lines 30 and 31. Unrestricted	133,307.	143,874.			
anc	24 25	Temporarily restricted	101,208.	112,592.			
3ak	26	Permanently restricted	101,200.	114,554.			
힏	20	Foundations that do not follow SFAS 117, check here					
Ī		and complete lines 27 through 31.]			
ğ	27	Capital stock, trust principal, or current funds					
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund					
As	29	Retained earnings, accumulated income, endowment, or other funds					
Net Assets or Fund Balances	30	Total net assets or fund balances	234,515.	256,466.			
_							
_	31	Total liabilities and net assets/fund balances	234,515.	256,466.			
Г	art	Analysis of Changes in Net Assets or Fund Ba	lances				
_							
1		net assets or fund balances at beginning of year - Part II, column (a), line 3	0		004 515		
_	•	t agree with end-of-year figure reported on prior year's return)		1	234,515.		
		amount from Part I, line 27a		2	21,951.		
		increases not included in line 2 (itemize)		3	256 466		
		ines 1, 2, and 3		4	<u>256,466.</u>		
		eases not included in line 2 (itemize) net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	uma (h) line 30	5	<u>0.</u> 256,466.		
<u>.</u>	ivial	net assets of fund balances at end of year time 4 fillings line 5) - Part II, col	טט אווו אָען וווויט טע		Enrm 990-PF (2016)		

Part IV Capital Gains	and Losses for Tax on In	vestmen	t Income					
	ribe the kind(s) of property sold (e.g. rehouse; or common stock, 200 shs			(b)	low acquire - Purchase - Donation	d (c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a CAPITAL GAINS	DIVIDENDS							
b								
_ c				<u> </u>				ļ
d				-				-
<u>e</u>	(A) Decrease allowed	4-> 0		1		l	(h) Cara as (lass	
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				(h) Gain or (loss (e) plus (f) minus	(9)
<u>a</u> 5,669.	-							5,669.
<u>b</u>			•					
d								
e								
	g gain in column (h) and owned by t	the foundation	on 12/31/69	\neg		(n) (Gains (Col. (h) gair	n minus
	(j) Adjusted basis		cess of col. (1)			còl. (k), but not less tha	n -0-) or
(i) F.M.V. as of 12/31/69	as of 12/31/69		col. (j), if any				Losses (from col.	(n))
a								5,669.
b								
С								
<u>d</u>								
<u>e</u>								
2 Capital gain net income or (net ca	pital loss) $ \begin{cases} If gain, also enter \\ If (loss), enter -0 \end{cases} $			}	2		·	5,669.
3 Net short-term capital gain or (los	s) as defined in sections 1222(5) an	nd (6):						
If gain, also enter in Part I, line 8,	column (c).							•
If (loss), enter -0- in Part I, line 8 Part V Qualification U	nder Section 1010(a) for	Poduoos	L Tay on Not	Inv	3 octmoni	Inco	mo	0.
						IIICO	VIII E	N/A
(For optional use by domestic private	toundations subject to the section 4	1940(a) tax or	i net investment in	icome	9)			N/A
If section 4940(d)(2) applies, leave th	ns part blank.							
Was the foundation liable for the sect	tion 4942 tax on the distributable am	nount of any v	ear in the hase ner	rınd?				Yes No
If "Yes," the foundation does not qual		, ,						
	each column for each year; see the ir			ntries	i			
(a) Base period years	(b)			(c)			Distri	(d) bution ratio
Calendar year (or tax year beginning	ng in) Adjusted qualifying dis	tributions	Net value of no	nchai	ritable-use a	ssets	(col. (b) di	vided by col. (c))
2015								
2014								
2013								
2012 2011					-			
2011							1 1	
2 Total of line 1, column (d)							2	
3 Average distribution ratio for the 5	5-year base period - divide the total o	on line 2 by 5.	or by the number	of ve	ars		- - - - -	
the foundation has been in exister			•	•			3	
4 Enter the net value of noncharitab	le-use assets for 2016 from Part X,	line 5					4	
5 Multiply line 4 by line 3							5	
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)						6	
7 Add Imag 5 40								
7 Add lines 5 and 6							7	
8 Enter qualifying distributions from	Part XII, line 4						8	
If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in Part VI, line	1b, and comp	olete that part usin	g a 1º	% tax rate.			

_	TATION COUNTY OF THE PROPERTY	- 4				_
	n 990-PF (2016) MEMORIAL SCHOLARSHIP FUND art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	<u>34-</u> 948 ·	1668 - see ir	<u>082</u> Istru	ctio	Page 4 ns)
	Exèmpt operating foundations described in section 4940(d)(2), check here X and enter "N/A" on line 1.		1			
	Date of ruling or determination letter: 06/01/93 (attach copy of letter if necessary-see instructions)					
t	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).					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				
3	Add lines 1 and 2	3				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5				0.
6						
	2016 estimated tax payments and 2015 overpayment credited to 2016					
	Exempt foreign organizations - tax withheld at source					
	: Tax paid with application for extension of time to file (Form 8868)					
	Backup withholding erroneously withhold 6d	_				^
	Total credits and payments. Add lines 6a through 6d	7				0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Fator the amount of line 10 to be Cardinated 2017 estimated to 1	10				
	Enter the amount of line 10 to be: Credited to 2017 estimated tax ► Refunded ► art VII-A Statements Regarding Activities	_11_				
_	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene			-	Yes	No
	any political campaign?		ŀ	1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	Ì	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish	•	Ì			
	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. ▶ \$ 0 . (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. ► \$ 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	ır				
	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_		7.7
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		ŀ	5		X
_	If "Yes," attach the statement required by General Instruction T.		1	İ		
D	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				
	remain in the governing instrument?	Idv	Ī	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV		ļ	7	X	
•	big the foundation have at least \$6,000 in assets at any time during the year. It is estimated in at 11, col. (c), and i are No		Ì			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)		}			
Ja	OH					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
•	of each state as required by General Instruction G? If "No," attach explanation			8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	ndar	Ì			
	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV			9	Х	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10		X

MEMORIAL SCHOLARSHIP FUND 34-1668082 Form 990-PF (2016) Page 5 Part VII-A Statements Regarding Activities (continued) Yes No 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 disgualified person had advisory privileges? If "Yes." attach statement (see instructions) 12 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 Website address ► N/A 350-4048 Telephone no. $\triangleright 419-259$ 14 The books are in care of ► CATHY MELMS Located at ▶ 2257 APPLEWOOD DR., TOLEDO, OH ZIP+4 ▶43615 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here N/A and enter the amount of tax-exempt interest received or accrued during the year **▶** 15 No 16 At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, Yes X securities, or other financial account in a foreign country? 16 See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country Part 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. 1a During the year did the foundation (either directly or indirectly): Yes X No (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) Yes X No a disqualified person? Yes X No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available Yes X No for the benefit or use of a disqualified person)? (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 Yes X No termination of government service, if terminating within 90 days.) b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A 1b Organizations relying on a current notice regarding disaster assistance check here c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected X before the first day of the tax year beginning in 2016? 1c 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)): a At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016? Yes X No If "Yes," list the years b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach N/A statement - see instructions.) 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. 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time Yes X No during the year? b If "Yes," did it have excess business holdings in 2016 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, N/A Form 4720, to determine if the foundation had excess business holdings in 2016) 3b X 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4a b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?

orm 990-PF (2016) MEMORIAL SCHOLARSHIP FUN			<u>34-16680</u>	182	Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:				- 1	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	es 🗶 No 📗	-	
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indire		[i	
any voter registration drive?			es 🔀 No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	s X No	1	Ì
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				
4945(d)(4)(A)? (see instructions)		Ye	es 🗓 No	1	ł
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	for			
the prevention of cruelty to children or animals?		Yo	es X No	- 1	ŀ
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described i	ın Regulations		ı	
section 53.4945 or in a current notice regarding disaster assistance (see instru	uctions)?		N/A	5b	j
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?		. —	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	• •			1	Ì
a personal benefit contract?	, ., , ,		es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			6b	x
If "Yes" to 6b. file Form 8870					
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?		es X No	1	
b If "Yes," did the foundation receive any proceeds or have any net income attrib			N/A	7b	
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors		nagers, Highl			
List all officers, directors, trustees, foundation managers and their	compensation				
Est di omocis, di colors, a datees, fodradam monagero and titel	T	(c) Compensation	(d) Contributions to	16	-) Expense
(a) Name and address	(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	acc	e) Expense count, other illowances
RON SHNIDER	CHAIRMAN				
3752 FAIRWOOD DRIVE			ļ		
SYLVANIA, OH 43560	1.00	0.	0.		0.
DAVE WILLIAMS	SECRETARY				
2362 SOUTH AVE]				
roledo, oh 43609	1.00	0.	0.		<u> </u>
CATHY MELMS	TREASURER				
2257 APPLEWOOD DR.	_				
FOLEDO, OH 43615	1.00	0.	0.	<u>.L_</u>	0.
		<u></u>		<u> </u>	
2 Compensation of five highest-paid employees (other than those inc	 	enter "NONE."	1 (2)		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	1 400	e) Expense count, other illowances
NONE		1			
	1				
	1				
	_				
	1				
		1			
	1				
	1				
Cotal number of other employees paid over \$50,000	<u> </u>		•		

Form 990-PF (2016) MEMORIAL SCHOLARSHIP FUND		668082 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NOI	NE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		▶ 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 number of organizations and other beneficiaries served, conferences convened, research papers produced,	ormation such as the etc.	Expenses
112 STUDENTS IN THE TOLEDO AREA WERE GRANTED SCH	OLARSHIPS TO	
ASSIST THEM IN THEIR PURSUIT OF HIGHER EDUCATION	N	48,009.
2		40,009.
3		
3		
		<u>.</u>
4		
Det IV Die		
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 N/A		
2		
All other program-related investments. See instructions.		
3		
Total Addition of the control of the		

Form 990-PF (2016) MEMORIAL SCHOLARSHIP FUND

34-1668082

Page 8

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndatior	ns, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	219,009.
b	Average of monthly cash balances	1b	66,884.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	285,893.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	285,893.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	4,288.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	281,605.
6	Minimum investment return Enter 5% of line 5	6	14,080.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here ► X and do not complete this part.)	nd certa	
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2016 from Part VI, line 5		
b	Income tax for 2016. (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	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	48,009.
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:		
a	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	48,009.
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	48,009.
	Note: The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the foundation of	ualifies	

Form **990-PF** (2016)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (s	see instructions)	N/A		ر
	(a)	(b)	(c)	(d) /
	Corpus	Years prior to 2015	2015	2016
1 Distributable amount for 2016 from Part XI, line 7				,
2 Undistributed income, if any, as of the end of 2018	,			
a Enter amount for 2015 only				, <i>'</i>
b Total for prior years:		-		•
				<i>;</i>
3 Excess distributions carryover, if any, to 2016:			/	
a From 2011			/	
b From 2012			/	
c From 2013			/	
d From 2014			/	
e From 2015				
f Total of lines 3a through e			/	
4 Qualifying distributions for 2016 from			/	
Part XII, line 4: ► \$			/	
a Applied to 2015, 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 2016 distributable amount		 		
e Remaining amount distributed out of corpus	<u>. </u>	/		
_		/		
5 Excess distributions carryover applied to 2016 (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		<i>f</i>		
b Prior years' undistributed income. Subtract		/		
line 4b from line 2b		1		
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		ĺ		
amount - see instructions	,	ľ		
e Undistributed income for 2015. Subtract line	ĺ			
4a from line 2a. Taxable amount - see instr.	/			
f Undistributed income for 2016. Subtract				
lines 4d and 5 from line 1. This amount must	/			
be distributed in 2017	/			
7 Amounts treated as distributions out of	1			
corpus to satisfy requirements imposed by	<i>f</i>			
section 170(b)(1)(F) or 4942(g)(3) (Election	j			
may be required - see instructions)	/			
8 Excess distributions carryover from 2011				
not applied on line 5 or line 7	,			
9 Excess distributions carryover to 2017.	j i			
Subtract lines 7 and 8 from line 6a	J			
10 Analysis of line 9:	1			
a Excess from 2012	į			
b Excess from 2013	<i>,</i> "			
c Excess from 2014				
d Excess from 2015				
e Excess from 2016	<u> </u>			

623581 11-23-16

2	4 –	1	c	c	0	Λ	0	•
J	4-	т	O	0	О	υ	О	4

Page 10

Part XIV Private Operating F	oundations (see instr	uctions 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	•	•		1/93	
b Check box to indicate whether the found		foundation described in		942(j)(3) or 4942	2(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	# 1 0045	Prior 3 years		
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for					
each year listed	881.	0.	1,091.	1,143.	3,115.
b 85% of line 2a	749.	0.	927.	972.	2,648.
c Qualifying distributions from Part XII,	40.000	25 120	26 122	05 545	125 225
line 4 for each year listed	48,009.	25,138.	36,133.	25,745.	135,025.
d Amounts included in line 2c not					
used directly for active conduct of	0.	^			0
exempt activities	0.	0.	0.	0.	0.
 e Qualifying distributions made directly for active conduct of exempt activities. 					
Subtract line 2d from line 2c	48,009.	25,138.	36,133.	25,745.	135,025.
3 Complete 3a, b, or c for the alternative test relied upon:	40,009.	25,136.	36,133.	25,745.	135,025.
a "Assets" alternative test - enter: (1) Value of all assets	1				N_0 .
` '					1,70.
(2) Value of assets qualifying 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	0 207	7 004	6 007	F 770	20 040
listed	9,387.	7,804.	6,887.	5,770.	29,848.
c "Support" alternative test - enter: (1) Total support other than gross					
investment income (interest, dividends, rents, payments on securities loans (section					•
512(a)(5)), or royalties)					0.
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					0.
(3) Largest amount of support from					<u> </u>
an exempt organization					0.
(4) Gross investment income					0.
Part XV Supplementary Info	rmation (Complete	this part only if	the foundation h	ad \$5,000 or mor	
at any time during t				•	
1 Information Regarding Foundatio	n Managers:				
a List any managers of the foundation wheyear (but only if they have contributed m	o have contributed more tha		butions received by the fo	undation before the close	of any tax
NONE	1010 than 40,000). (000 000.				
b List any managers of the foundation who other entity) of which the foundation has		tock of a corporation (c	or an equally large portion	of the ownership of a part	nership or
NONE	9				
2 Information Regarding Contributi	on Grant Gift Loan S	cholarchin etc. Pro	arame:		
Check here In the foundation of the foundation makes gifts, grants, etc.	nly makes contributions to p	oreselected charitable o	rganizations and does not		
a The name, address, and telephone numl					<u> </u>
RON SHNIDER 3752 FAIRWOOD DR., S	YLVANIA, OH	43560			
b The form in which applications should b APPLICATION FORM PRO		n and materials they sho	ould include:		
c Any submission deadlines: APPLICATIONS MUST BE		V 0070BFD 1	የ1 ርጥ		
d Any restrictions or limitations on awards				er factors:	
SCHOLARSHIPS GRANTED					

3 Grants and Contributions Paid During th	If recipient is an individual,	r dynnent	1	
Recipient Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient	 	
a Paid during the year				
		l		
AYLEE HENDERSON	NONE	N/A	EDUCATION	
OLEDO, OH		ļ <u>.</u>		3,47
HYANNE CRAWFORD	NONE	N/A	EDUCATION	
TANKE CRAWFORD	NONE	N/A	EDUCATION	
OLEDO, OH				2.59
				!
ACOB STEWART	NONE	N/A	EDUCATION	
OLEDO, OH		 		2,50
				ł
ABRIELLE SKIBINSKI	NONE	N/A	EDUCATION	
OLEDO, OH				3 99
TRACTON CUTTON				
ESSICA GUICE	NONE	N/A	EDUCATION	
OLEDO OH				87
	ONTINUATION SHEE	ET(S)	▶ 3a	47 35
b Approved for future payment				
)		
AITLYN STRUCK	NONE	N/A	EDUCATION	
OLEDO OH				5,00
JUEDO, OR		 	 	3,00
OURTNEY ROBERTS	NONE	N/A	EDUCATION	
DLEDO, OH			 	5.00
ACZMANI DIIMI ED	NONE	ht / 2	POLICATION	
ASZMAN BUTLER	NOME	N/A	EDUCATION	
OLEDO OH				5,00
	ONTINUATION SHEE	1m / C)	▶ 3b	55.00

Form 990-PF (2016) MEMORIAL SCHO				34-1	L668082 Page
Part XVI-A Analysis of Income-Prod					
Enter gross amounts unless otherwise indicated.	(a) Business	usiness income (b) Amount	(C) Exclu- sion	(d)	(e) Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
b	_		1		
c	1 1				
d	1 1				
e	_				
Ease and contracts from government agencies			1		
g Fees and contracts from government agencies Membership dues and assessments					
Interest on savings and temporary cash			+		
investments					
Dividends and interest from securities			14	1,900.	
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			18	5,669.	
Net income or (loss) from special events			1 1		
Gross profit or (loss) from sales of inventory					
Other revenue:					
a					
b	_		 		
·					
d	-		+		
e	- 	0	+	7,569.	(
Total Add line 12, columns (b), (d), and (e)	L		•		7,569
See worksheet in line 13 instructions to verify calculations.	.)			,,,	7,502
Part XVI-B Relationship of Activities		plishment of E	xempt Pu	ırposes	
ine No. Explain below how each activity for which in			A contributed	importantly to the accomp	olishment of
▼ the foundation's exempt purposes (other th	an by providing funds	for such purposes).			
					
		· · · ·			
		 			
		·			
		·			

RAY T. KEST OLD NEWSBOYS GOODFELLOW Form 990-PF (2016) MEMORIAL SCHOLARSHIP FUND 34-1668082 Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of Yes No the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash 1a(1) (2) Other assets Х 1a(2) b Other transactions: (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization X 1b(2) (3) Rental of facilities, equipment, or other assets Х (4) Reimbursement arrangements X 1b(4) (5) Loans or loan guarantees 1b(5) Х (6) Performance of services or membership or fundraising solicitations 1b(6) X c Sharing of facilities, equipment, mailing lists, other assets, or paid employees 1c d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X Yes in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship SEE STATEMENT 5

OLD NEWSBOYS GOODFELLOW ASSOCIATION 501(C)(3)

Sign Here	Under penalties of perjury, I declare that I have examined it and belief, it strue, correct, and complete Declaration of Signature of officer or trustee			r has any knowledge	May the IRS discuss this return with the preparer shown below (see instr.) X Yes
Paid	Print/Type preparer's name WILLIAM M. SCOTT	Preparer's signature	Date 3/1/18	Check if self- employed	PTIN P01537115
Prepa	rer Fumic come N CT TETONT A D CA	OKINITEN IID		Completion > A1	0746740

Use Only

Firm's address ➤ ONE SEAGATE, SUITE 2650 TOLEDO, OH 43604-1558

(419)244-3711

Schedule B

(Form 990, 990-FZ. 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.lrs.gov/form990

Name of the organization

RAY T. KEST OLD NEWSBOYS GOODFELLOW MEMORIAL SCHOLARSHIP FUND

Employer identification number

34-1668082

OMB No 1545-0047

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 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 Don't 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 isn't covered by the General Rule and/or the Special Rules doesn't 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) (2016)

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 doesn't 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 additional space is needed.

	Contributors (declinational) and applicate copies of Fart in addition		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	OLD NEWSBOYS GOODFELLOW ASSOCIATION P.O. BOX 2032 TOLEDO, OH 43603	\$50,000.	Person X Payroll
(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) <u>No.</u>	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$	Person Payroll 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
623452 10-1		\$Schedule R /Form	Person Payroll Noncash (Complete Part II for noncash contributions.) 990, 990-EZ, or 990-PF) (2016)

Name of organization

Employer identification number

RAY T. KEST OLD NEWSBOYS GOODFELLOW MEMORIAL SCHOLARSHIP FUND

34-1668082

art II	Noncash Property (See instructions). Use duplicate copies of P	art II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No.	(b) Description of noncash property given	(c) FMV (or estimate)	(d) Date received
art I	Description of Honeasti property given	(See instructions)	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	(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
_ .			
53 10-18-1		Sabadula B/Carr	990, 990-EZ, or 990-PF) (2

Name of orga	anizàtion		Employer identification number			
RAY T.	KEST OLD NEWSBOYS GOO	DFELLOW				
MEMORI	AL SCHOLARSHIP FUND		34-1668082			
Part III	Exclusively religious, charitable, etc., cont the year from any one contributor. Complete c	ributions to organizations described	d in section 501(c)(7), (8), or (10) that total more than \$1,000 for			
	completing Part III, enter the total of exclusively religiou	s, charitable, etc., contributions of \$1,000	or less for the year (Enter this info once) \$			
	Use duplicate copies of Part III if addition	al space is needed				
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
Part I	(5) 1 5 5 5 5 9 11	(0) 030 01 girt	(a) Description of now gift is field			
_						
		(e) Transfer of gi	ft			
<u> </u>	Transferee's name, address, ar	nd 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						
-		(a) Turn day of all				
	(e) Transfer of gift					
	Transferenta nama address as	ad 71D + 4	Deletionship of transferor to transferor			
}-	Transferee's name, address, ar	10 ZIP + 4	Relationship of transferor to transferee			
	-					
(a) No.		I				
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	•					
	-					
		(e) Transfer of gi	ft			
		,,				
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee			
1.						
(a) No. from	(h) Dumasa of wife	(a) 11aa as aist	(d) Decembles of heavy side in head			
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
<u></u>						
		(e) Transfer of gi	ft			
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee			
1.						
[

MEMORIAL SCHOLARSHIP FUND
Supplementary Information 34-1668082

Part XV Supplementary Information				<u>r</u>
3 Grants and Contributions Paid During the		1	<u> </u>	
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
HANNAH HARTFORD	NONE	N/A	EDUCATION	
TOLEDO, OH				5,000,
				3,000,
JOVAN SANSON	NONE	AT / 3	EDUCATION	
OVAN SANSON	NONE	N/A	EDUCATION	
TOLEDO, OH				906.
JUAN CASTILLO	NONE	N/A	EDUCATION	
TOLEDO, OH				2,716,
				2,710,
AMBER CRIGGER	YOYF		DDUGAMTON	
AMBER CRIGGER	NONE	N/A	EDUCATION	
TOLEDO, OH				927.
JADAH BRYANT	NONE	N/A	EDUCATION	
TOLEDO, OH				5,000,
				,
SELENA PICKETT	NONE	N/A	EDUCATION	
DEBLINA FICKBII	HOME	N/A	BOUCATION	
TOLEDO, OH				5,000.
EMALEIGH SCHULTZ	NONE	N/A	EDUCATION	
TOLEDO, OH				4,361,
CALEB FOUTS	NONE	N/A	EDUCATION	
		,,,		
TOLEDO, OH				5,000.
MELISSA DAVIS	NONE	N/A	EDUCATION	
TOLEDO OH				5,000.
Total from continuation sheets				22 010
TOTAL HOLD VORUMBERION SHEETS				33,910.

MEMORIAL SCHOLARSHIP FUND

34-1668082

3 Grants and Contributions Approved for Fu)		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	3311113311311	
SERENITY PEGISH	NONE	N/A	EDUCATION	
TOLEDO, OH			_	5,00
				:
AVA WHITSON	NONE	N/A	EDUCATION	
TOLEDO, OH				5,00
COBEDO, On				3,000
MADELYN MCCRAY	NONE	N/A	EDUCATION	
		,,,,		
TOLEDO, OH				5,00
MACKENZIE FORBES	NONE	N/A	EDUCATION	
POLEDO, OH				5,00
ALICIA GUERRA	NONE	N/A	EDUCATION	
POLEDO, OH				5,000
JAYMIE WILLIAMS	NONE	N/A	EDUCATION	
TOLEDO, OH				5,000
TOLEDO, OR				3,000
CHARAE FIN	NONE	N/A	EDUCATION	
7. Marie 11. Mar	NON D	,,,,	DOGNITON	
COLEDO, OH				5,000
ELIZABETH STARR	NONE	N/A	EDUCATION	
POLEDO, OH				5,000
Total from continuation sheets		1	l	40,000

FORM 990-PF	ACCOUNTING FEES			STATEMENT 1		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM)) TABLE
	1,300.		0.	65	0.	650.
TO FORM 990-PF, PG 1, LN 16B	1,300.		0.	65	0.	650.
FORM 990-PF	TAX	ES			STATEMEN	IT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM				TABLE
OHIO CHARITABLE REGISTRATION	100.		0.	10	0.	0.
TO FORM 990-PF, PG 1, LN 18 =	100.		0.	10	0.	0.
FORM 990-PF	OTHER E	XPENSES			STATEMEN	т 3
DESCRIPTION	(A) EXPENSES PER BOOKS			(C) ADJUSTED NET INCOM		
BANK FEES STAMPS MISCELLANEOUS	150. 61. 58.		0. 0. 0.		0. 1. 8.	0. 0. 0.
TO FORM 990-PF, PG 1, LN 23	269.		0.	269		0.
FORM 990-PF	OTHER INV	ESTMENTS	<u> </u>		STATEMEN	T 4
DESCRIPTION		LUATION ETHOD	воо	K VALUE	FAIR MAR	
AMERICAN FUNDS NEW PERSPECTIVE CLASS C		COST		16,489.	21	,809.
AMERICAN FUNDS GROWTH FUND OF AMERICA CLASS C AMERICAN FUNDS CAPITAL WORLD		COST		30,389.	36	,998.
& INCOME FUND CLASS C				14,993.	20	,188.

RAY T. KEST OLD NEWSBOYS GOODFELLOW	MEMO		34-1668082
AMERICAN FUNDS AMCAP FUND CLASS C AMERICAN FUNDS WASHINGTON MUTUAL	COST COST	29,955.	35,500.
INVESTORS FD CL C		28,125.	34,701.
AMERICAN FUNDS BOND FUND OF AMERICA CLASS C	COST	47,021.	47,558.
AMERICAN FUNDS INCOME FUND OF AMERICA CLASS C	COST	31,941.	36,283.
TOTAL TO FORM 990-PF, PART II, LINE 13		198,913.	233,037.

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

STATEMENT

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NAME OF AFFILIATED OR RELATED ORGANIZATION

OLD NEWSBOYS GOODFELLOW ASSOCIATION

DESCRIPTION OF RELATIONSHIP WITH AFFILIATED OR RELATED ORGANIZATION

THE ASSOCIATION FUNDS THE SCHOLARSHIP FUND THROUGH ANNUAL DONATIONS.