

EXTENDED TO NOVEMBER 15, 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.

Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No 1545-0052

2017

Open to Public Inspection

Form 990-PF

Department of the Treasury  
Internal Revenue Service

For calendar year 2017 or tax year beginning

, and ending

Name of foundation

A Employer identification number

THE GESSNER FAMILY FOUNDATION

27-0609120

Number and street (or P.O. box number if mail is not delivered to street address)

Room/suite

B Telephone number

P.O. BOX 1000

330-833-5509

City or town, state or province, country, and ZIP or foreign postal code

C If exemption application is pending, check here ☐

MASSILLON, OH 44648-1000

G Check all that apply:

☐ Initial return☐ Initial return of a former public charity☐ Final return☐ Amended return☐ Address change☐ Name changeD 1. Foreign organizations, check here ☐2. Foreign organizations meeting the 85% test, check here and attach computation ☐

H Check type of organization:

☒ Section 501(c)(3) exempt private foundation☐ Section 4947(a)(1) nonexempt charitable trust☐ Other taxable private foundationE If private foundation status was terminated under section 507(b)(1)(A), check here ☐

I Fair market value of all assets at end of year

J Accounting method:

☒ Cash☐ AccrualF If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐

(from Part II, col. (c), line 16)

☐ Other (specify)

\$ 7,514,424. (Part I, column (d) must be on cash basis.)

## Part I Analysis of Revenue and Expenses

(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)

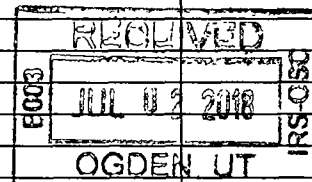
(a) Revenue and expenses per books

(b) Net investment income

(c) Adjusted net income

(d) Disbursements for charitable purposes (cash basis only)

Revenue	1 Contributions, gifts, grants, etc., received	2,523,252.		N/A	
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	131,105.	131,105.		STATEMENT 2
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	23,547.			STATEMENT 1
	b Gross sales price for all assets on line 6a	2,556,488.			
	7 Capital gain net income (from Part IV, line 2)		1,651,860.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less Cost of goods sold					
c Gross profit or (loss)					
11 Other income	-1,045.	-1,045.		STATEMENT 3	
12 Total. Add lines 1 through 11	2,676,859.	1,781,920.			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	0.	0.		0.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees				
	b Accounting fees	STMT 4	1,850.	925.	925.
	c Other professional fees	STMT 5	19,383.	9,692.	9,691.
	17 Interest				
	18 Taxes	STMT 6	3,829.	3,629.	200.
	19 Depreciation and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses				
	24 Total operating and administrative expenses. Add lines 13 through 23	25,062.	14,246.		10,816.
	25 Contributions, gifts, grants paid	365,160.			365,160.
26 Total expenses and disbursements. Add lines 24 and 25	390,222.	14,246.		375,976.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	2,286,637.				
b Net investment income (if negative, enter -0-)		1,767,674.			
c Adjusted net income (if negative, enter -0-)			N/A		



Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only		Beginning of year	End of year	
				(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash - non-interest-bearing				
	2	Savings and temporary cash investments		20,230.	28,800.	28,800.
	3	Accounts receivable ▶				
		Less: allowance for doubtful accounts ▶				
	4	Pledges receivable ▶				
		Less: allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons				
	7	Other notes and loans receivable ▶				
		Less: allowance for doubtful accounts ▶				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges				
	10a	Investments - U.S. and state government obligations				
	b	Investments - corporate stock	STMT 8	2,686,080.	4,309,962.	5,064,984.
	c	Investments - corporate bonds	STMT 9	1,269,783.	2,164,696.	2,171,920.
	11	Investments - land, buildings, and equipment basis ▶				
	Less: accumulated depreciation ▶					
12	Investments - mortgage loans					
13	Investments - other	STMT 10	249,766.	248,720.	248,720.	
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)		4,225,859.	6,752,178.	7,514,424.	
Liabilities	17	Accounts payable and accrued expenses				
	18	Grants payable				
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, and other disqualified persons				
	21	Mortgages and other notes payable				
	22	Other liabilities (describe ▶)				
	23	Total liabilities (add lines 17 through 22)		0.	0.	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/>					
	and complete lines 24 through 26, and lines 30 and 31.					
	24	Unrestricted				
	25	Temporarily restricted				
	26	Permanently restricted				
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/>					
	and complete lines 27 through 31.					
	27	Capital stock, trust principal, or current funds		0.	0.	
	28	Paid-in or capital surplus, or land, bldg., and equipment fund		0.	0.	
	29	Retained earnings, accumulated income, endowment, or other funds		4,225,859.	6,752,178.	
30	Total net assets or fund balances		4,225,859.	6,752,178.		
31	Total liabilities and net assets/fund balances		4,225,859.	6,752,178.		

## Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	4,225,859.
2	Enter amount from Part I, line 27a	2	2,286,637.
3	Other increases not included in line 2 (itemize) ▶ SEE STATEMENT 7	3	239,682.
4	Add lines 1, 2, and 3	4	6,752,178.
5	Decreases not included in line 2 (itemize) ▶	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	6,752,178.

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1a PUBLICLY TRADED SECURITIES</b>	<b>P</b>	<b>VARIOUS</b>	<b>12/31/17</b>
<b>b CAPITAL GAINS DIVIDENDS</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))
<b>a 2,532,299.</b>		<b>904,628.</b>	<b>1,627,671.</b>
<b>b 24,189.</b>			<b>24,189.</b>
<b>c</b>			
<b>d</b>			
<b>e</b>			
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.			(i) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
<b>a</b>			<b>1,627,671.</b>
<b>b</b>			<b>24,189.</b>
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	<b>2</b>	<b>1,651,860.</b>
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8 }	<b>3</b>	<b>N/A</b>

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part.

**1** Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2016	329,844.	3,769,449.	.087505
2015	97,250.	1,929,682.	.050397
2014	34,811.	600,080.	.058011
2013	28,908.	544,687.	.053073
2012	39,493.	517,889.	.076258

<b>2</b> Total of line 1, column (d)	<b>2</b>	<b>.325244</b>
<b>3</b> Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	<b>3</b>	<b>.065049</b>
<b>4</b> Enter the net value of noncharitable-use assets for 2017 from Part X, line 5	<b>4</b>	<b>5,409,848.</b>
<b>5</b> Multiply line 4 by line 3	<b>5</b>	<b>351,905.</b>
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	<b>6</b>	<b>17,677.</b>
<b>7</b> Add lines 5 and 6	<b>7</b>	<b>369,582.</b>
<b>8</b> Enter qualifying distributions from Part XII, line 4	<b>8</b>	<b>375,976.</b>

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.  
See the Part VI instructions.

**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 <input type="checkbox"/> 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 <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		1	17,677.
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	0.
3 Add lines 1 and 2		3	17,677.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	17,677.
6 Credits/Payments:			
a 2017 estimated tax payments and 2016 overpayment credited to 2017	6a	8,823.	
b Exempt foreign organizations - tax withheld at source	6b	0.	
c Tax paid with application for extension of time to file (Form 8868)	6c	13,500.	
d Backup withholding erroneously withheld	6d	0.	
7 Total credits and payments. Add lines 6a through 6d	7	22,323.	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	0.	
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	4,646.	
11 Enter the amount of line 10 to be: Credited to 2018 estimated tax <input checked="" type="checkbox"/> 4,646. Refunded <input type="checkbox"/>	11	0.	

**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?		X
1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition. 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.		X
1c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. <input checked="" type="checkbox"/> \$ 0. (2) On foundation managers. <input checked="" type="checkbox"/> \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input checked="" type="checkbox"/> \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		X
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
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.		X
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 remain in the governing instrument?	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	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. <input checked="" type="checkbox"/> 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	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 calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

N/A

**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		X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A	X	
14 The books are in care of ► ROBERT GESSNER Telephone no. ► 330-833-5509 Located at ► P.O. BOX 1000, MASSILLON, OH ZIP+4 ► 44648-1000		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here ... and enter the amount of tax-exempt interest received or accrued during the year ...	15	N/A
16 At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ►	16	X

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year, did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
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 Organizations relying on a current notice regarding disaster assistance, check here N/A	1b	
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 before the first day of the tax year beginning in 2017?	1c	X
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 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 statement - see instructions.) N/A	2b	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ►		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If "Yes," did it have excess business holdings in 2017 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, Form 4720, to determine if the foundation had excess business holdings in 2017.) N/A	3b	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
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 2017?	4b	X

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**Part VII-B** Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year, did the foundation pay or incur any amount to:

- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No
- (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions ☐ Yes ☒ No
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions

N/A

Organizations relying on a current notice regarding disaster assistance, check here

▶ ☐

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A

☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If "Yes" to 6b, file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

☐ Yes ☒ No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1** List all officers, directors, trustees, and foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 11		0.	0.	0.

**2** Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(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	(e) Expense account, other allowances
NONE				

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

0

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**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)***3** Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(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 such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 N/A	
2	
3	
4	

**Part IX-B** Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	0.

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**Part X** Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b>	Average monthly fair market value of securities	<b>1a</b>	5,402,529.
<b>b</b>	Average of monthly cash balances	<b>1b</b>	89,702.
<b>c</b>	Fair market value of all other assets	<b>1c</b>	
<b>d</b>	Total (add lines 1a, b, and c)	<b>1d</b>	5,492,231.
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	<b>1e</b>	0.
<b>2</b>	Acquisition indebtedness applicable to line 1 assets	<b>2</b>	0.
<b>3</b>	Subtract line 2 from line 1d	<b>3</b>	5,492,231.
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	<b>4</b>	82,383.
<b>5</b>	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	5,409,848.
<b>6</b>	Minimum investment return. Enter 5% of line 5	<b>6</b>	270,492.

**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.)

<b>1</b>	Minimum investment return from Part X, line 6	<b>1</b>	270,492.
<b>2a</b>	Tax on investment income for 2017 from Part VI, line 5	<b>2a</b>	17,677.
<b>b</b>	Income tax for 2017. (This does not include the tax from Part VI.)	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b	<b>2c</b>	17,677.
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1	<b>3</b>	252,815.
<b>4</b>	Recoveries of amounts treated as qualifying distributions	<b>4</b>	0.
<b>5</b>	Add lines 3 and 4	<b>5</b>	252,815.
<b>6</b>	Deduction from distributable amount (see instructions)	<b>6</b>	0.
<b>7</b>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	<b>7</b>	252,815.

**Part XII** Qualifying Distributions (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	<b>1a</b>	375,976.
<b>b</b>	Program-related investments - total from Part IX-B	<b>1b</b>	0.
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required)	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule)	<b>3b</b>	
<b>4</b>	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	<b>4</b>	375,976.
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	<b>5</b>	17,677.
<b>6</b>	Adjusted qualifying distributions. Subtract line 5 from line 4	<b>6</b>	358,299.

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

**Part XIII** Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				252,815.
2 Undistributed income, if any, as of the end of 2017:				
a Enter amount for 2016 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2017:				
a From 2012	2,354.			
b From 2013	1,856.			
c From 2014	15,555.			
d From 2015	26,818.			
e From 2016	151,726.			
f Total of lines 3a through e	198,309.			
4 Qualifying distributions for 2017 from Part XII, line 4: ▶ \$	375,976.			
a Applied to 2016, 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 2017 distributable amount				252,815.
e Remaining amount distributed out of corpus	123,161.			
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	321,470.			
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 2016. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2017. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018				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 2012 not applied on line 5 or line 7	2,354.			
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	319,116.			
10 Analysis of line 9:				
a Excess from 2013	1,856.			
b Excess from 2014	15,555.			
c Excess from 2015	26,818.			
d Excess from 2016	151,726.			
e Excess from 2017	123,161.			



**Part XV** Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
A PLACE TO BE 8 NORTH JAY STREET BOX 1472 MIDDLEBURG, VA 20118	NONE	PC	GENERAL OPERATIONS	5,000.
AKRON CANTON REGIONAL FOOD BANK 350 OPPORTUNITY PARKWAY AKRON, OH 44307	NONE	PC	GENERAL OPERATIONS	20,000.
BOYS' & GIRLS' CLUB OF MASSILLON 730 DUNCAN STREET SW MASSILLON, OH 44647	NONE	PC	HELPING LOCAL KIDS OF MASSILLON, OH	3,000.
BOYS' & GIRLS' CLUB OF MASSILLON 730 DUNCAN STREET SW MASSILLON, OH 44647	NONE	PC	REDUCE ANY OUTSTANDING LETTER OF CREDIT BALANCE	2,000.
FRIENDS OF MASSILLON PUBLIC LIBRARY 208 LINCOLN WAY E MASSILLON, OH 44646	ROBERT'S DAUGHTER KATHERINE	PC	GENERAL OPERATIONS	10,000.
Total			SEE CONTINUATION SHEET(S)	3a 365,160.
b Approved for future payment				
NONE				
Total			3b	0.





**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.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No 1545-0047

**2017**

Name of the organization

Employer identification number

**THE GESSNER FAMILY FOUNDATION**

**27-0609120**

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

☒

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. 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), 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).

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) (2017)

Name of organization

Employer identification number

**THE GESSNER FAMILY FOUNDATION****27-0609120****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
<b>1</b>	<b>RICHARD W. GESSNER REV TR 2014</b> <b>1705 11TH ST NE</b> <b>MASSILLON, OH 44646</b>	\$ <b>1,613,440.</b>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
<b>2</b>	<b>SUSAN R GESSNER REV TR 2014</b> <b>1705 11TH ST NE</b> <b>MASSILLON, OH 44646</b>	\$ <b>909,812.</b>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

**THE GESSNER FAMILY FOUNDATION****27-0609120****Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>1</u>	<u>43 SHARES 3M COMPANY</u>	\$ <u>8,629.</u>	<u>05/26/17</u>
<u>1</u>	<u>20 SHARES AMAZON.COM INC</u>	\$ <u>19,916.</u>	<u>05/26/17</u>
<u>1</u>	<u>23 SHARES AMERICAN TOWER CORPORATION</u>	\$ <u>3,016.</u>	<u>05/26/17</u>
<u>1</u>	<u>109 SHARES AMGEN INC</u>	\$ <u>16,896.</u>	<u>05/26/17</u>
<u>1</u>	<u>182 SHARES AMGEN INC</u>	\$ <u>32,234.</u>	<u>12/20/17</u>
<u>1</u>	<u>11 SHARES AUTOMATIC DATA PROCESS</u>	\$ <u>1,115.</u>	<u>05/26/17</u>

Name of organization

Employer identification number

**THE GESSNER FAMILY FOUNDATION****27-0609120****Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>1</u>	<u>553 SHARES CDK GLOBAL INC</u>	\$ <u>33,445.</u>	<u>05/26/17</u>
<u>1</u>	<u>1156 SHARES COMCAST CORP CL A</u>	\$ <u>47,292.</u>	<u>05/26/17</u>
<u>1</u>	<u>92 SHARES DU PONT E I DE NEMOURS</u>	\$ <u>7,162.</u>	<u>05/26/17</u>
<u>1</u>	<u>111 SHARES DXC TECHNOLOGY CO</u>	\$ <u>8,731.</u>	<u>05/26/17</u>
<u>1</u>	<u>595 SHARES ENBRIDGE INC</u>	\$ <u>23,181.</u>	<u>05/26/17</u>
<u>1</u>	<u>1353 SHARES ENBRIDGE INC</u>	\$ <u>52,131.</u>	<u>12/20/17</u>

Name of organization

Employer identification number

THE GESSNER FAMILY FOUNDATION

27-0609120

**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	54 SHARES EXXON MOBIL CORP	\$ 4,404.	05/26/17
1	34 SHARES HALYARD HEALTH INC	\$ 1,229.	05/26/17
1	22 SHARES HARTFORD FINANCIAL SRVCS GROUP	\$ 1,083.	05/26/17
1	319 SHARES HOST HOTELS & RESORTS INC	\$ 6,396.	12/20/17
1	1295 SHARES HP INC	\$ 23,919.	05/26/17
1	74 SHARES ILG INC	\$ 2,067.	12/20/17

Name of organization

Employer identification number

**THE GESSNER FAMILY FOUNDATION****27-0609120****Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>1</u>	<u>796 SHARES INTERNATIONAL PAPER CO</u> _____ _____ _____	\$ <u>46,144.</u>	<u>12/20/17</u>
<u>1</u>	<u>3230 SHARES ISHARES RUSSELL MID CAP GROWTH</u> _____ _____ _____	\$ <u>334,014.</u>	<u>03/10/17</u>
<u>1</u>	<u>2030 SHARES ISHARES TR RUSSEL MCP VL</u> _____ _____ _____	\$ <u>168,003.</u>	<u>03/10/17</u>
<u>1</u>	<u>150 SHARES JOHNSON &amp; JOHNSON</u> _____ _____ _____	\$ <u>19,038.</u>	<u>05/26/17</u>
<u>1</u>	<u>102 SHARES JOHNSON &amp; JOHNSON</u> _____ _____ _____	\$ <u>14,398.</u>	<u>12/20/17</u>
<u>1</u>	<u>594 SHARES JPMORGAN CHASE &amp; CO</u> _____ _____ _____	\$ <u>50,619.</u>	<u>05/26/17</u>

Name of organization

Employer identification number

THE GESSNER FAMILY FOUNDATION

27-0609120

**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	536 SHARES JPMORGAN CHASE & CO	\$ 56,891.	12/20/17
1	275 SHARES KIMBERLY CLARK CORP	\$ 35,615.	05/26/17
1	29 SHARES MERCK & CO INC	\$ 1,883.	05/26/17
1	289 SHARES MICROSOFT CORPORATION	\$ 20,218.	05/26/17
1	516 SHARES MICROSOFT CORPORATION	\$ 44,128.	12/20/17
1	186 SHARES MORGAN STANLEY	\$ 9,767.	12/20/17

Name of organization	Employer identification number
THE GESSNER FAMILY FOUNDATION	27-0609120

**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	382 SHARES NETFLIX.COM INC	\$ 72,129.	12/20/17
1	40 SHARES NEXTERA ENERGY INC	\$ 5,628.	05/26/17
1	79 SHARES NEXTERA ENERGY INC	\$ 12,138.	12/20/17
1	216 SHARES ONEOK INC	\$ 11,165.	05/26/17
1	435 SHARES PHILIP MORRIS INTERNATIONAL	\$ 45,401.	12/20/17
1	314 SHARES PPG INDUSTRIES INC	\$ 36,474.	12/20/17

Name of organization

Employer identification number

**THE GESSNER FAMILY FOUNDATION****27-0609120****Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>1</u>	<u>187 SHARES SUNTRUST BANKS INC \$1.00</u> <u>PAR</u>	\$ <u>12,239.</u>	<u>12/20/17</u>
<u>1</u>	<u>124 SHARES TEXAS INSTRUMENTS INC</u>	\$ <u>10,059.</u>	<u>05/26/17</u>
<u>1</u>	<u>1081 SHARES TEXAS INSTRUMENTS INC</u>	\$ <u>113,289.</u>	<u>12/20/17</u>
<u>1</u>	<u>215 SHARES THE HOME DEPOT INC</u>	\$ <u>33,304.</u>	<u>05/26/17</u>
<u>1</u>	<u>609 SHARES THE TRAVELERS COMPANIES INC</u>	\$ <u>75,309.</u>	<u>05/26/17</u>
<u>1</u>	<u>66 SHARES UNITED TECHNOLOGIES CORP</u>	\$ <u>8,042.</u>	<u>05/26/17</u>

Name of organization

Employer identification number

**THE GESSNER FAMILY FOUNDATION****27-0609120****Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>1</u>	<u>156 SHARES UNITEDHEALTH GROUP</u>	\$ <u>27,690.</u>	<u>05/26/17</u>
<u>1</u>	<u>158 SHARES UNITEDHEALTH GROUP INC</u>	\$ <u>35,136.</u>	<u>12/20/17</u>
<u>1</u>	<u>74 SHARES WASTE MANAGEMENT INC</u>	\$ <u>5,316.</u>	<u>05/26/17</u>
<u>1</u>	<u>193 SHARES WASTE MANAGEMENT INC</u>	\$ <u>16,557.</u>	<u>12/20/17</u>
<u>2</u>	<u>63 SHARES 3M COMPANY</u>	\$ <u>12,824.</u>	<u>09/01/17</u>
<u>2</u>	<u>15 SHARES ALPHABET INC CAP STK</u>	\$ <u>14,060.</u>	<u>09/01/17</u>

Name of organization

Employer identification number

**THE GESSNER FAMILY FOUNDATION****27-0609120****Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>2</u>	<u>844 SHARES COMCAST CORP CL A</u> _____ _____ _____	\$ <u>34,655.</u>	<u>09/01/17</u>
<u>2</u>	<u>300 SHARES DANAHER CORPORATION</u> _____ _____ _____	\$ <u>24,969.</u>	<u>09/01/17</u>
<u>2</u>	<u>170 SHARES DUKE ENERGY CORPORATION</u> _____ _____ _____	\$ <u>14,805.</u>	<u>09/01/17</u>
<u>2</u>	<u>250 SHARES ECOLAB INC</u> _____ _____ _____	\$ <u>33,213.</u>	<u>09/01/17</u>
<u>2</u>	<u>447 SHARES ENBRIDGE INC</u> _____ _____ _____	\$ <u>18,081.</u>	<u>09/01/17</u>
<u>2</u>	<u>155 SHARES FORTIVE CORP</u> _____ _____ _____	\$ <u>10,091.</u>	<u>09/01/17</u>

Name of organization

Employer identification number

**THE GESSNER FAMILY FOUNDATION****27-0609120****Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>2</u>	<u>17 SHARES HONEYWELL INTL INC</u> _____ _____	\$ <u>2,340.</u>	<u>09/01/17</u>
<u>2</u>	<u>135 SHARES JPMORGAN CHASE &amp; CO</u> _____ _____	\$ <u>12,380.</u>	<u>09/01/17</u>
<u>2</u>	<u>156 SHARES MARATHON PETROLEUM CORP</u> _____ _____	\$ <u>8,468.</u>	<u>09/01/17</u>
<u>2</u>	<u>85 SHARES MCKESSON CORP</u> _____ _____	\$ <u>12,700.</u>	<u>09/01/17</u>
<u>2</u>	<u>199 SHARES NEXTERA ENERGY INC</u> _____ _____	\$ <u>29,882.</u>	<u>09/01/17</u>
<u>2</u>	<u>124 SHARES NORTHROP GRUMMAN CORP</u> _____ _____	\$ <u>33,335.</u>	<u>09/01/17</u>

Name of organization

Employer identification number

**THE GESSNER FAMILY FOUNDATION****27-0609120****Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>2</u>	<u>607 SHARES NVIDIA CORP</u> _____ _____	\$ <u>103,469.</u>	<u>09/01/17</u>
<u>2</u>	<u>51 SHARES PHILLIPS 66</u> _____ _____	\$ <u>4,306.</u>	<u>09/01/17</u>
<u>2</u>	<u>166 SHARES THE HOME DEPOT INC</u> _____ _____	\$ <u>25,029.</u>	<u>09/01/17</u>
<u>2</u>	<u>595 SHARES TIME WARNER INC</u> _____ _____	\$ <u>60,452.</u>	<u>09/01/17</u>
<u>2</u>	<u>334 SHARES US BANCORP</u> _____ _____	\$ <u>17,261.</u>	<u>09/01/17</u>
<u>2</u>	<u>236 SHARES VALERO ENERGY CORP</u> _____ _____	\$ <u>16,331.</u>	<u>09/01/17</u>

Name of organization

Employer identification number

**THE GESSNER FAMILY FOUNDATION****27-0609120****Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>2</u>	<u>283 SHARES DOWDUPONT INC</u> _____ _____	\$ <u>18,325.</u>	<u>09/07/17</u>
<u>2</u>	<u>46 SHARES AMAZON.COM INC</u> _____ _____	\$ <u>54,619.</u>	<u>12/19/17</u>
<u>2</u>	<u>26 SHARES CISCO SYSTEMS INC</u> _____ _____	\$ <u>996.</u>	<u>12/19/17</u>
<u>2</u>	<u>310 SHARES DANAHER CORPORATION</u> _____ _____	\$ <u>29,258.</u>	<u>12/19/17</u>
<u>2</u>	<u>13 SHARES INGEVITY CORP</u> _____ _____	\$ <u>926.</u>	<u>12/19/17</u>
<u>2</u>	<u>195 SHARES JPMORGAN CHASE &amp; CO</u> _____ _____	\$ <u>20,769.</u>	<u>12/19/17</u>

Name of organization	Employer identification number
<b>THE GESSNER FAMILY FOUNDATION</b>	<b>27-0609120</b>

**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>2</u>	<u>482 SHARES MICRON TECHNOLOGY INC</u>	\$ <u>21,198.</u>	<u>12/19/17</u>
<u>2</u>	<u>99 SHARES NEXTERA ENERGY INC</u>	\$ <u>15,256.</u>	<u>12/19/17</u>
<u>2</u>	<u>334 SHARES NVIDIA CORP</u>	\$ <u>65,501.</u>	<u>12/19/17</u>
<u>2</u>	<u>72 SHARES PPG INDUSTRIES INC</u>	\$ <u>8,374.</u>	<u>12/19/17</u>
<u>2</u>	<u>238 SHARES THE HOME DEPOT INC</u>	\$ <u>44,263.</u>	<u>12/19/17</u>
<u>2</u>	<u>146 SHARES THE TRAVELERS COMPANIES INC</u>	\$ <u>19,789.</u>	<u>12/19/17</u>

Name of organization

Employer identification number

**THE GESSNER FAMILY FOUNDATION****27-0609120****Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>2</u>	<u>178 SHARES U.S. BANCORP</u>	\$ <u>9,712.</u>	<u>12/19/17</u>
<u>2</u>	<u>32 SHARES UNION PACIFIC CORP</u>	\$ <u>4,264.</u>	<u>12/19/17</u>
<u>2</u>	<u>486 SHARES UNITEDHEALTH GROUP INC</u>	\$ <u>107,911.</u>	<u>12/19/17</u>
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____

Name of organization

Employer identification number

**THE GESSNER FAMILY FOUNDATION****27-0609120**

**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once.) ▶ \$

Use duplicate copies of Part III if additional space is needed.

(a) No. from 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, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

**Part XV** Supplementary Information**3** Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
HABITAT FOR HUMANITY 1400 RAFF ROAD SW CANTON, OH 44710	NONE	PC	HOUSING PROJECTS IN WESTERN STARK COUNTY	5,000.
HEALTH FOUNDATION OF GREATER MASSILLON 1237 LINCOLN WAY EAST MASSILLON, OH 44646	ROBERT GESSNER IS A TRUSTEE	PC	GENERAL OPERATIONS	4,000.
JOHANNES SCHWALM HISTORICAL ASSOCIATION PO BOX 127 SCOTLAND, PA 17254	NONE	PC	GENERAL OPERATIONS	2,000.
MASSILLON HERITAGE FOUNDATION 210 FOURTH STREET N.E. MASSILLON, OH 44646	TRUSTEES ARE MEMBERS	PC	HISTORIC PRESERVATION	30,000.
PREGNANCY CHOICES 121 TREMONT AVE SE MASSILLON, OH 44646	NONE	PC	GENERAL OPERATIONS	5,000.
SALVATION ARMY 315 6TH STREET NE MASSILLON, OH 44646	NANCY GESSNER IS A TRUSTEE	PC	GENERAL OPERATIONS	3,500.
SPRING HILL HISTORIC HOME 1401 SPRINGHILL LANE NE MASSILLON, OH 44646	ROBERT GESSNER IS A TRUSTEE	PC	HISTORIC PRESERVATION	30,000.
ST. JOHN'S UNITED CHURCH OF CHRIST 101 TREMONT AVE SE MASSILLON, OH 44646	RICHARD AND SUSAN ARE MEMBER	PC	GENERAL OPERATIONS	40,000.
STARK COMMUNITY FOUNDATION 400 MARKET AVENUE N. STE. 200 CANTON, OH 44702	NANCY GESSNER IS A DIRECTOR	PC	COMMUNITY CHARITABLE FUND	3,500.
STARK COMMUNITY FOUNDATION 400 MARKET AVENUE N. STE. 200 CANTON, OH 44702	NANCY GESSNER IS A DIRECTOR	PC	MASSILLON COMMUNITY CHARITABLE FUND	2,500.
Total from continuation sheets				325,160.

## THE GESSNER FAMILY FOUNDATION

27-0609120

**Part XV** Supplementary Information**3** Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
STARK COMMUNITY FOUNDATION 400 MARKET AVENUE N. STE. 200 CANTON, OH 44702	NANCY GESSNER IS A DIRECTOR	PC	WESTERN STARK FREE CLINIC CHARITABLE FUND	1,500.
STARK COMMUNITY FOUNDATION 400 MARKET AVENUE N. STE. 200 CANTON, OH 44702	NANCY GESSNER IS A DIRECTOR	PC	AARON SEESAN SCHOLARSHIP FUND	1,000.
STARK COUNTY HUMANE SOCIETY 5100 PEACH ST NE LOUISVILLE, OH 44641	ROBERT GESSNER'S DAUGHTER KA	PC	GENERAL OPERATIONS	5,000.
STARK STATE COLLEGE FOUNDATION 6200 FRANK AVE NW NORTH CANTON, OH 44720	NONE	PC	RUTH HESS-WILLIAMS SCHOLARSHIP	40,000.
THE FIRST TEE OF CANTON 2525 25TH STREET NE CANTON, OH 44705	NONE	PC	GENERAL OPERATIONS	5,000.
THE MASSILLON MUSEUM 121 LINCOLN WAY E MASSILLON, OH 44646	ROBERT AND NANCY ARE MEMBERS	PC	CAPITAL CAMPAIGN	40,000.
THE MASSILLON MUSEUM 121 LINCOLN WAY E MASSILLON, OH 44646	ROBERT AND NANCY ARE MEMBERS	PC	ARTFULL LIVING PROGRAM/MASSILLON PUBLIC SCHOOLS	7,500.
UNITED WAY OF WAYNE & HOLMES COUNTIES 215 S WALNUT STREET WOOSTER, OH 44691	NONE	PC	GENERAL OPERATIONS	5,000.
UNIVERSITY OF CINCINNATI 2600 CLIFTON AVENUE CINCINNATI, OH 45221	NONE	PC	UCC CONSERVATORY OF MUSIC - THREE \$1,500 GRADUATE STUDENT SUMMER SCHOLARSHIPS	4,500.
ARC OF OHIO INC 135 DUBIN RD SUITE 100-A COLUMBUS, OH 43215	NONE	PC	GENERAL OPERATIONS	1,000.
Total from continuation sheets				

**Part XV** Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
BLUE STAR MOTHERS OF AMERICA INC. CHAPTER 2 PO BOX 36412 CANTON, OH 44735	NONE	PC	GENERAL OPERATIONS	2,500.
ENCORE CREATIVITY FOR OLDER ADULTS 5419 DEALE CHURCHTON RD STE 102 CHURCHTON, MD 20733	NONE	PC	GENERAL OPERATIONS	500.
DENVER DUMB FRIENDS LEAGUE 2080 S . QUEBEC ST DENVER, CO 80231	NONE	PC	GENERAL OPERATIONS	1,000.
FRIENDS OF STARK PARKS 5300 TYNER ST NW CANTON, OH 44708	FAMILY MEMBER OF TRUSTEE IS AN EMPLOYEE	PC	PURCHASE DURABLE EQUIPMENT OR SUPPLIES FOR ANIMAL REHABILITATION	2,500.
GIRLS ON THE RUN OF STARK COUNTY 237 TUSCARAWAS ST W, SUITE B CANTON, OH 44702	NONE	PC	EAST CENTRAL OHIO	1,000.
JOHN F. KENNEDY CENTER FOR THE PERFORMING ARTS 2700 P ST NW WASHINGTON, DC 20566	NONE	PC	2017 MILENNIUM STAGE	10,000.
JUMP START INC 6701 CARNEGIE AVE SUITE 100 CLEVELAND, OH 44103	NONE	PC	STARK ECONOMIC DEVELOPMENT PLAN	20,000.
MARYLAND AFFILIATE OF THE SUSAN G KOMEN BREAST CANCER FOUNDATION 200 EAST JOPPA RD STE 407 TOWSON, MD 21286	NONE	PC	KOMEN PROMISE RIDE	1,000.
MEALS ON WHEELS OF STARK & WAYNE COUNTIES 2363 NAVE RD SE MASSILLON, OH 44646	NONE	PC	GENERAL OPERATIONS	3,000.
MILITARY AVIATION PRESERVATION SOCIETY 2260 INTERNATIONAL PARKWAY NORTH CANTON, OH 44720	NONE	PC	GENERAL OPERATIONS	2,500.
Total from continuation sheets				

## THE GESSNER FAMILY FOUNDATION

27-0609120

**Part XV** Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
NAVARRE-BETHLEHEM TOWNSHIP HISTORICAL SOCIETY PO BOX 291 NAVARRE, OH 44662	NONE	PC	RESTORATION OF MATTHEWS AND SCHMIDT HOUSES, EXCESS FOR GENERAL OPERATIONS	1,500.
PRESCRIPTION ASSISTANCE NETWORK OF STARK COUNTY 408 9TH ST SW CANTON, OH 44707	NONE	PC	GENERAL OPERATIONS	8,500.
SERVING AREA MILITARY VETERANS 413 LINCOLN WAY E MASSILLON, OH 44646	NONE	PC	GENERAL OPERATIONS	2,500.
STARK COUNTY HISTORICAL SOCIETY 800 MCKINLEY MONUMENT DR NW CANTON, OH 44708	NONE	PC	RESTORATION OF DRESS	5,160.
STARK COUNTY HUNGER TASK FORCE 408 9TH ST SW CANTON, OH 44707	NONE	PC	GENERAL OPERATIONS	10,000.
WASHINGTON HIGH SCHOOL ALUMNI ASSOCIATION OF MASSILLON 1 PAUL E BROWN DR SE MASSILLON, OH 44646	NONE	PC	PURCHASE BOOKS FOR MEDIA CENTER	15,000.
WILDERNESS CENTER INC PO BOX 202 WILMOT, OH 44689	NONE	PC	GENERAL OPERATIONS	2,500.
Total from continuation sheets				

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FORM 990-PF	GAIN OR (LOSS) FROM SALE OF ASSETS	STATEMENT	1
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(A) DESCRIPTION OF PROPERTY	MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD	
PUBLICLY TRADED SECURITIES		VARIOUS	12/31/17	
(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
2,532,299.	2,532,941.	0.	0.	-642.
CAPITAL GAINS DIVIDENDS FROM PART IV				24,189.
TOTAL TO FORM 990-PF, PART I, LINE 6A				23,547.

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FORM 990-PF	DIVIDENDS AND INTEREST FROM SECURITIES	STATEMENT	2
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SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
DIVIDENDS	155,294.	24,189.	131,105.	131,105.	
TO PART I, LINE 4	155,294.	24,189.	131,105.	131,105.	

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FORM 990-PF	OTHER INCOME	STATEMENT	3
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DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
STARK BOARD OF TRADE, LLC	-1,045.	-1,045.	
TOTAL TO FORM 990-PF, PART I, LINE 11	-1,045.	-1,045.	

FORM 990-PF	ACCOUNTING FEES			STATEMENT	4
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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTANT FEES	1,850.	925.		925.
TO FORM 990-PF, PG 1, LN 16B	1,850.	925.		925.

FORM 990-PF	OTHER PROFESSIONAL FEES			STATEMENT	5
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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TRUST SERVICE FEES	19,383.	9,692.		9,691.
TO FORM 990-PF, PG 1, LN 16C	19,383.	9,692.		9,691.

FORM 990-PF	TAXES			STATEMENT	6
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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
2016 ANNUAL OH REG FEE	200.	0.		200.
FOREIGN TAXES PAID ON DIVIDENDS	3,629.	3,629.		0.
TO FORM 990-PF, PG 1, LN 18	3,829.	3,629.		200.

FORM 990-PF	OTHER INCREASES IN NET ASSETS OR FUND BALANCES			STATEMENT	7
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DESCRIPTION	AMOUNT
BASIS DIFFERENCE IN CONTRIBUTED STOCK FROM PRIOR YEAR	239,682.
TOTAL TO FORM 990-PF, PART III, LINE 3	239,682.

FORM 990-PF	CORPORATE STOCK	STATEMENT	8
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE	
DFA EMERGING MARKETS CORE EQUITY PORTFOLIO	70,790.	91,628.	
DFA U.S. CORE EQUITY 1 PORTFOLIO	129,103.	168,537.	
CAUSEWAY INTERNATIONAL VALUE	132,651.	151,043.	
HARTFORD MUT FDS INC INTL SML COM I	131,968.	159,345.	
CAPITAL WORLD GRW & INCM CL F-2	219,482.	227,348.	
NEW PERSPECTIVE FD INC SHS CL F-2	216,672.	230,703.	
WILLIAM BLAIR EMERG MKTS SM CP GR INSL	109,009.	110,202.	
DIAMOND HILL LARGE CAP FD-I	329,585.	348,082.	
FIDELITY CONCORD STR SPRTN US EQIDX	141,019.	177,916.	
VANGUARD INDEX FDS STK MRK ETF	393,935.	415,181.	
VANGUARD TOTAL INTERNATIONAL STOCK	1,389,894.	1,647,036.	
VANGUARD S&P 500 ETF	509,074.	665,472.	
ISHARES TR RUSSELL 1000 GRW	404,010.	522,289.	
ISHARES TR RUSSELL 1000 VAL	132,770.	150,202.	
TOTAL TO FORM 990-PF, PART II, LINE 10B	4,309,962.	5,064,984.	

FORM 990-PF	CORPORATE BONDS	STATEMENT	9
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE	
VANGUARD TOT BD MKT IDX-ADM	1,703,522.	1,711,698.	
DFA 2-YR GLBL FIXED INC PORT	230,418.	229,208.	
WESTERN ASSET SHRT-TRM BD-IS	230,756.	231,014.	
TOTAL TO FORM 990-PF, PART II, LINE 10C	2,164,696.	2,171,920.	

FORM 990-PF	OTHER INVESTMENTS	STATEMENT	10
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
INVESTMENT IN STARK BOARD OF TRADE	COST	248,720.	248,720.
TOTAL TO FORM 990-PF, PART II, LINE 13		248,720.	248,720.

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FORM 990-PF	PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS	STATEMENT 11
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NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
RICHARD W. GESSNER P.O. BOX 1000 MASSILLON, OH 44648-1000	DIRECTOR 0.10	0.	0.	0.
SUSAN R. GESSNER P.O. BOX 1000 MASSILLON, OH 44648-1000	DIRECTOR 0.10	0.	0.	0.
ROBERT B. GESSNER P.O. BOX 1000 MASSILLON, OH 44648-1000	DIRECTOR 0.10	0.	0.	0.
ELIZABETH A. MCCALLISTER P.O. BOX 1000 MASSILLON, OH 44648-1000	DIRECTOR 0.10	0.	0.	0.
RICHARD W. GESSNER, JR. P.O. BOX 1000 MASSILLON, OH 44648-1000	DIRECTOR 0.10	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		0.	0.	0.

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FORM 990-PF	PART XV - LINE 1A LIST OF FOUNDATION MANAGERS	STATEMENT 12
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NAME OF MANAGER

RICHARD W. GESSNER  
SUSAN R. GESSNER  
ROBERT B. GESSNER