990-PF

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.

Open to Public Inspection

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990PFfor instructions and the latest information. For calendar year 2017 or tax year beginning 2017, and ending Name of foundation RICHARD D. HANNAN FAMILY FOUNDATION FIFTH A Employer identification number THIRD BANK AGENT 31-1482697 Number and street (or PO box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) P O BOX 630858 513-534-5310 City or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here. CINCINNATI, OH 45263-0858 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here . Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach Address change Name change computation . . H Check type of organization: X Section 501(c)(3) exempt private foundation E If private foundation status was terminated Other taxable private foundation Section 4947(a)(1) nonexempt charitable trust under section 507(b)(1)(A) check here -J Accounting method: X Cash Fair market value of all assets at If the foundation is in a 60-month termination end of year (from Part II, col. (c), line Other (specify) under section 507(b)(1)(B) check here . ,075,969 (Part I, column (d) must be on cash basis ) Part I Analysis of Revenue and Expenses (The (d) Disbursements (a) Revenue and for charitable (b) Net investment (c) Adjusted net total of amounts in columns (b), (c), and (d) expenses per may not necessarily equal the amounts in income income purposes books (cash basis only) column (a) (see instructions) ) 22,976 Contributions, gifts, grants, etc., received (attach schedule) if the foundation is not required to attach Sch B. . . . . . . . . . 358 358 STMT 3 Interest on savings and temporary cash investments. 18,230 18,582 STMT Dividends and interest from securities . . . . Net rental income or (loss) 125,710 Net gain or (loss) from sale of assets not on line 10. Gross sales price for all assets on line 6a 505.426 125,710 Capital gain net income (from Part IV, line 2) . Net short-term capital gain...... Income modifications 10a Gross sales less returns and allowances . . . b Less Cost of goods sold . Gross profit or (loss) (attach schedule) . . . . Other income (attach schedule) . . . . . . 11 Total. Add lines 1 through 11 . . . . . . . 167,626 144,298 12.000 12,000 13 Compensation of officers, directors, trustees, etc . . Expenses NONE 14 NONE Other employee salaries and wages . . . . . NONE 15 NONE Pension plans, employee benefits . . . . 475 238 238 Legal fees (attach schedule) . . . STMT 3 . NONE ,175 588 b Accounting fees (attach schedule) STMT 4 NONE 588 Administrative 7.205 7.205 Other professional fees (attach scheduler, 5. 17 Taxes (attach schedule) (see instructions. 6 348 348 18 Depreciation (attach schedule) and depletion ! 19 20 Occupancy . . . . . . NONE 21 Travel, conferences, and meetings NONE and Printing and publications MAY 2 I NONE NONE 22 Other expenses (attach schedule) STMT 200 200 23 Total operating and administrative expenses 24 ,403 8,379 Add lines 13 through 23. NONE 13,026. Ö 25 82,500 82,500. Contributions, gifts, grants paid . . . . . . 103,903 8.379 26 NONE 95,526 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 Excess of revenue over expenses and disbursements . . 63,723 135,919 Net investment income (if negative, enter -0-)

JSA For Paperwork Reduction Act Notice, see instructions.

c Adjusted net income (if negative, enter -0-).

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Form 990-PF (2017)

_		Dalama Ol	Attached schedules and amounts in the	Beginning of year	End	of year
أثنا	art II	Balance Sneets	description column should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
П	1	Cash - non-interest-beari	ng	2.	6,293	
Ì	2	Savings and temporary	cash investments	57,528.	98,711	. 98,711
- {		Accounts receivable				
		Less: allowance for doul	otful accounts >			
	4	Pledges receivable ► _				
		Less: allowance for doul	otful accounts >			
	5	Grants receivable				
	6	Receivables due from	officers, directors, trustees, and other			
		disqualified persons (att	ach schedule) (see instructions)			
			eceivable (attach schedule)			
		Less. allowance for doul	btful accounts ► NONE			
2			se	, ,		
Assets	-		eferred charges			
As		•	government obligations (attach schedule).	<del></del> -		
			stock (attach schedule)	595,183.	607,386	. 815,288
		•	bonds (attach schedule)	153,517.	156,804	
	11	Investments - land, building and equipment basis Less accumulated depreci (attach schedule)	gs, <b>&gt;</b>			
	12		loans			
			sch schedule)			
	14	Land, buildings, and equipment basis	<b>•</b>			
		Less accumulated deprect (attach schedule)	ation			
	15	Other assets (describe	>1			
			completed by all filers - see the			
		instructions. Also, see p	age 1, item I)	806,230.	869,194	1,075,969
_	17	Accounts payable and	accrued expenses			]
	18	• •				
es	19	Deferred revenue		-		
Liabilities	20	Loans from officers, director	ors, trustees, and other disqualified persons			
<u>:</u>	21		otes payable (attach schedule)			
Ë	22	Other liabilities (describ	e <b>&gt;</b> )			
	23	Total liabilities (add line	es 17 through 22)		NON	<u>s</u>
es			w SFAS 117, check here ► through 26, and lines 30 and 31.	_		
alances	24	Unrestricted		·		_
ā	25	Temporarily restricted				
d B	26					
Assets or Fund		Foundations that do no	ot follow SFAS 117, check here ▶ 🗓			
Ī		and complete lines 27	through 31.			
0	27	Capital stock, trust prin	cipal, or current funds	806,230.	869,194	<u>.</u>
ets	28	Paid-in or capital surplus, o	or land, bldg , and equipment fund			
SS	29	Retained earnings, accumu	lated income, endowment, or other funds			
يد	30	Total net assets or fun	d balances (see instructions)	806,230.	869,194	]
ž	30 31		i net assets/fund balances (see			]
		instructions)	<u>.</u> <u></u>	806,230.	869,194	
E	art II		nges in Net Assets or Fund Bala			
1	Tota	al net assets or fund	balances at beginning of year - Part	II, column (a), line 30 (	must agree with	
			ed on prior year's return)		*	806,230.
2			, line 27a			63,723.
3	Oth	er increases not inclu	ded in line 2 (itemize) ▶		3	
4						869,953.
5	Dec	reases not included i		TEMENT 8	5	759.
6			palances at end of year (line 4 minus	line 5) - Part II, column (I	b), line 30 6	869,194.

	eribe the kind(c) of property cold (for e	vample, real estate	(b) How	1	111-2
	cribe the kind(s) of property sold (for excise warehouse; or common stock, 200		acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
a PUBLICLY TRADED	<u>SECURITIES</u>				
b					
c					
<u>d</u>		<del></del>			
<u>e</u>				L	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo ((e) plus (f) min	
a 505,426.		379,716.			125,710.
b				<del></del>	<del></del>
<u>C</u>			ļ		
<u>d</u>			[		
Complete only for assets sh	lowing gain in column (h) and owned b	by the foundation on 12/31/69			
Complete only for assets sir		<del> </del>		Gains (Col (h) ga (k), but not less t	
(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	COI.	Losses (from co	l (h))
a	<u> </u>				125,710.
b					
C			}		
<u></u>	<del> </del>				
e Capital gain net income	or (not expital loss) [ If g	ain, also enter in Part I, line 7		<del></del>	
Capital gain net income	or (net capital loss) {	oss), enter -0- in Part I, line 7	2		125,710.
	ain or (loss) as defined in sections				
	Part I, line 8, column (c). See ins				
	<del> </del>		3		
or optional use by domestic	private foundations subject to the	e section 4940(a) tax on net investr	nent inco	me.)	
section 4940(d)(2) applies,	leave this part blank.			,	
		butable amount of any year in the b o not complete this part.	ase perio	_	] Yes ∑X N
as the foundation liable for 'Yes," the foundation doesn	the section 4942 tax on the distrib	o not complete this part.		d?	Yes X N
as the foundation liable for Yes," the foundation doesn Enter the appropriate an	the section 4942 tax on the distrib			ntries.	
as the foundation liable for Yes," the foundation doesn Enter the appropriate an (a) Base period years	the section 4942 tax on the distrib 't qualify under section 4940(e) D nount in each column for each yea	o not complete this part.  ar; see the instructions before makin		d?	itio
as the foundation liable for Yes," the foundation doesn Enter the appropriate an (a) Base period years	the section 4942 tax on the distrik 't qualify under section 4940(e) D mount in each column for each yea  (b)	o not complete this part.  ar; see the instructions before making (c)		oltries. (d) Distribution ra (col (b) divided by	itio col (c))
as the foundation liable for Yes," the foundation doesn Enter the appropriate an (a) Base period years alendar year (or tax year beginning in)	the section 4942 tax on the distributions the distributions to the distributions the section 4940(e) Described to the distributions the section 4940(e) Described to the distributions to the section 4940(e) Described to the section	no not complete this part.  ar; see the instructions before making (c)  Net value of noncharitable-use assets  857,260.  852,714.		oltries. (d) Distribution ra (col (b) divided by	otto col (c)) 0.093511 0.112392
es the foundation liable for Yes," the foundation doesn  Enter the appropriate ar (a)  Base period years alendar year (or tax year beginning in)  2016 2015 2014	the section 4942 tax on the distrib 't qualify under section 4940(e) D mount in each column for each yea (b) Adjusted qualifying distributions 80,163. 95,838. 105,413.	no not complete this part.  ar; see the instructions before making (c) Net value of noncharitable-use assets 857, 260. 852,714. 845,672.		oltries. (d) Distribution ra (col (b) divided by	0.093511 0.112392 0.124650
es the foundation liable for Yes," the foundation doesn  Enter the appropriate an (a) Base period years alendar year (or tax year beginning in)  2016  2015  2014  2013	the section 4942 tax on the distrib 't qualify under section 4940(e) D mount in each column for each year (b) Adjusted qualifying distributions 80,163. 95,838. 105,413.	no not complete this part.  ar; see the instructions before making (c) Net value of noncharitable-use assets 857,260. 852,714. 845,672. 777,356.		oltries. (d) Distribution ra (col (b) divided by	0.093511 0.112392 0.124650 0.144753
es the foundation liable for Yes," the foundation doesn  Enter the appropriate ar (a)  Base period years alendar year (or tax year beginning in)  2016 2015 2014	the section 4942 tax on the distrib 't qualify under section 4940(e) D mount in each column for each yea (b) Adjusted qualifying distributions 80,163. 95,838. 105,413.	no not complete this part.  ar; see the instructions before making (c) Net value of noncharitable-use assets 857, 260. 852,714. 845,672.		otries. (d) Distribution ra (col (b) divided by	0.093511 0.112392 0.124650 0.144753
es the foundation liable for Yes," the foundation doesn Enter the appropriate an (a) Base period years alendar year (or tax year beginning in) 2016 2015 2014 2013 2012	the section 4942 tax on the distributions (b) Adjusted qualifying distributions  80,163. 95,838. 105,413. 112,525. 93,581.	Not complete this part.  (c)  Net value of noncharitable-use assets  857,260.  852,714.  845,672.  777,356.  748,519.	ng any en	otries. (d) Distribution ra (col (b) divided by	0.093511 0.112392 0.124650 0.144753 0.125022
as the foundation liable for 'Yes," the foundation doesn  Enter the appropriate an (a) Base period years (alendar year (or tax year beginning in)  2016 2015 2014 2013 2012  Total of line 1, column (	the section 4942 tax on the distributions (b) Adjusted qualifying distributions  80,163. 95,838. 105,413. 112,525. 93,581.	00 not complete this part.  ar; see the instructions before making (c)  Net value of noncharitable-use assets  857,260.  852,714.  845,672.  777,356.  748,519.		otries. (d) Distribution ra (col (b) divided by	0.093511 0.112392 0.124650 0.144753 0.125022
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es the foundation liable for Yes," the foundation doesn  Enter the appropriate an (a)  Base period years alendar year (or tax year beginning in)  2016  2015  2014  2013  2012  Total of line 1, column (Average distribution rations)	the section 4942 tax on the distributions (b) Adjusted qualifying distributions  80,163. 95,838. 105,413. 112,525. 93,581.	00 not complete this part.  ar; see the instructions before making (c)  Net value of noncharitable-use assets  857,260.  852,714.  845,672.  777,356.  748,519.	ng any en	otries. (d) Distribution ra (col (b) divided by	0.093511 0.112392 0.124650 0.144753 0.125022
as the foundation liable for Yes," the foundation doesn  Enter the appropriate an (a)  Base period years alendar year (or tax year beginning in)  2016  2015  2014  2013  2012  Total of line 1, column (Average distribution ratithe number of years the	the section 4942 tax on the distributions  (b) Adjusted qualifying distributions  80,163. 95,838. 105,413. 112,525. 93,581.  (d) In ofor the 5-year base period - divice foundation has been in existence	no not complete this part.  ar; see the instructions before making (c) Net value of noncharitable-use assets  857,260. 852,714. 845,672. 777,356. 748,519.  de the total on line 2 by 5.0, or by	ng any en	otries. (d) Distribution ra (col (b) divided by	0.093511 0.112392 0.124650 0.144753 0.125022 0.600328
as the foundation liable for 'Yes," the foundation doesn  Enter the appropriate an (a) Base period years (alendar year (or tax year beginning in)  2016 2015 2014 2013 2012  Total of line 1, column (Average distribution rate the number of years the	the section 4942 tax on the distribution 4940(e) D mount in each column for each year (b)  Adjusted qualifying distributions  80,163. 95,838. 105,413. 112,525. 93,581.  (d)	no not complete this part.  ar; see the instructions before making (c) Net value of noncharitable-use assets  857,260. 852,714. 845,672. 777,356. 748,519.  de the total on line 2 by 5.0, or by if less than 5 years	2 3	otries. (d) Distribution ra (col (b) divided by	0.093511 0.112392 0.124650 0.144753 0.125022 0.600328 0.120066
es the foundation liable for Yes," the foundation doesn  Enter the appropriate an (a)  Base period years alendar year (or tax year beginning in)  2016  2015  2014  2013  2012  Total of line 1, column (Average distribution ratithe number of years the Enter the net value of not Multiply line 4 by line 3	the section 4942 tax on the distrib 't qualify under section 4940(e) D mount in each column for each yea (b) Adjusted qualifying distributions  80,163. 95,838. 105,413. 112,525. 93,581.  (d)	no not complete this part.  ar; see the instructions before making (c)  Net value of noncharitable-use assets  857,260.  852,714.  845,672.  777,356.  748,519.  de the total on line 2 by 5.0, or by if less than 5 years	2 3 4	otries. (d) Distribution ra (col (b) divided by	0.12392 0.124650 0.144753 0.125022 0.600328 0.120066 982,831.
Total of line 1, column (Average distribution ratter the net value of net the number of years the number of years the number of years the factor that are the net value of net the net 1% of net investment.	the section 4942 tax on the distributions (b) Adjusted qualifying distributions  80,163. 95,838. 105,413. 112,525. 93,581.  (d)	no not complete this part.  ar; see the instructions before making (c) Net value of noncharitable-use assets  857,260. 852,714. 845,672. 777,356. 748,519.  de the total on line 2 by 5.0, or by if less than 5 years	2 3 4 5	otries. (d) Distribution ra (col (b) divided by	0.093511 0.112392 0.124650 0.144753 0.125022 0.600328 0.120066 982,831. 118,005. 1,359.
as the foundation liable for Yes," the foundation doesn  Enter the appropriate an (a) Base period years (alendar year (or tax year beginning in)) 2016 2015 2014 2013 2012  Total of line 1, column (alendar year distribution rate the number of years the limit of the number of years the	the section 4942 tax on the distributions (b) Adjusted qualifying distributions  80,163. 95,838. 105,413. 112,525. 93,581.  (d)	no not complete this part.  ar; see the instructions before making (c)  Net value of noncharitable-use assets  857,260.  852,714.  845,672.  777,356.  748,519.  de the total on line 2 by 5.0, or by if less than 5 years	2 3 4 5	otries. (d) Distribution ra (col (b) divided by	0.12392 0.124650 0.144753 0.125022 0.600328 0.120066 982,831.

Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	nstru	ctions	5)	
	Exempt operating foundations described in section 4940(d)(2), check here				
	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		2,7	18.	
	here 🕨 🔛 and enter 1% of Part I, line 27b				
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of ${\cal J}$				
	Part I, line 12, col. (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			ONE	
3	Add lines 1 and 2			18.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			ONE	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		2,7	18.	
6	Credits/Payments:				
a	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 603 .  Exempt foreign organizations - tax withheld at source				
b					
C					
d	Backup withholding erroneously withheld		4	03.	
7 8	Total credits and payments. Add lines 6a through 6d			10.	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		2 1	25.	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			<u>25.</u>	
11	Enter the amount of line 10 to be Credited to 2018 estimated tax ► NONE Refunded ► 11				
Par	VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No	
	participate or intervene in any political campaign?	1a		X	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the				
	instructions for the definition	1b		X	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				
	published or distributed by the foundation in connection with the activities				
C	Did the foundation file Form 1120-POL for this year?	1c		_ <u>X</u>	
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation > \$ (2) On foundation managers > \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
_	on foundation managers > \$	_		v	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		<u>X</u>	
3	If "Yes," attach a detailed description of the activities  Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of				
3	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х	
A a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	48		$\frac{x}{x}$	
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?.	5		X	
	If "Yes," attach the statement required by General Instruction T.				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
	By language in the governing instrument, or				
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that				
	conflict with the state law remain in the governing instrument?	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	7	X		
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.				
	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	<u> </u>		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or				1
	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV If "Yes,"			17	./
	complete Part XIV	9_		<u> X</u>	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			Х	
	names and addresses	10		^	

Par	VII-A Statements Regarding Activities (continued)		1	
		i.	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the	١		
	meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	۱		٠,,
	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?	13	X	
	Website address ► N/A	E 4 0		
14	The books are in care of ► FIFTH THIRD BANK  Located at ► 38 FOUNTAIN SQUARE, CINCINNATI, OH  Telephone no. ► (513) 534  ZIP+4 ► 45263	-549	8	
				$\overline{}$
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	• • •	>	· L
40	and enter the amount of tax-exempt interest received or accrued during the year		Yes	No
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?		103	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			$\stackrel{f }{=}$
	the foreign country			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	i		
	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? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			3.
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			1
	(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 for		. 1	
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	3.77		-
	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.) Yes X No			
t	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		/ 場	
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		X
	Organizations relying on a current notice regarding disaster assistance, check here	3 %		
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			V
_	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)):  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?			
	If "Yes," list the years			
t	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 )	2b		X
•	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	<b>&gt;</b>			
38	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?	!		
t	olf "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)	3b	<u> </u>	<u> </u>
48	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
ı	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
	Fo	orm <b>3</b> 9	リーピト	(2017)

Part	VII-B Statements Regarding Activities f	or Which Form 4	720 May Be Req	uired (continued)			
- 5a	During the year, did the foundation pay or incur any amo	unt to:				Yes	No
	(1) Carry on propaganda, or otherwise attempt to influer	nce legislation (section	n 4945(e))?	. Yes X No			
•	(2) Influence the outcome of any specific public ele	ction (see section 4	1955), or to carry on	<u> </u>			
	directly or indirectly, any voter registration drive?		=	_			
	(3) Provide a grant to an individual for travel, study, or o			<u> </u>			
	(4) Provide a grant to an organization other than a						
	section 4945(d)(4)(A)? See instructions	-					
	(5) Provide for any purpose other than religious, ch			• — —			
	purposes, or for the prevention of cruelty to children		•		ŀ		<b> </b>
ь	If any answer is "Yes" to 5a(1)-(5), did any of the			· — —			
	Regulations section 53 4945 or in a current notice regar				5b		
	Organizations relying on a current notice regarding disas			_	<del></del> _		<del> </del>
_	If the answer is "Yes" to question 5a(4), does the			-			
C	because it maintained expenditure responsibility for the		•				
		-		res NO			
٥.	If "Yes," attach the statement required by Regulations se						
6a	Did the foundation, during the year, receive any fur	•					
	on a personal benefit contract?						v
ь	Did the foundation, during the year, pay premiums, direct	uy or mairectly, on a	personal benefit contra	ictr	6b_	<del> </del>	X
_	If "Yes" to 6b, file Form 8870			□ □	j		
7a	At any time during the tax year, was the foundation a pa						
Ь	If "Yes," did the foundation receive any proceeds or have				7b_	L	Ь
	and Contractors	•	•		ioyees,		
1	List all officers, directors, trustees, foundation m						
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans	(e) Expension		
		devoted to position	enter -0-)	and deferred compensation	Other an	OWATICE	<del></del>
CEE	CHAMENEN O		10 000				
<u>255</u>	STATEMENT 9		_12,000.				
				<del></del>			
				İ			
	Compensation of five highest-paid employees	Inthor than the	o included on line	1 000 imptuudio			
2	"NONE."	(other than thos	e included on line	e i - see instruction	15 <i>)</i> . IT N	one,	enter
-		(b) Title, and average		(d) Contributionsto	(2) 5		
(a)	Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred	(e) Expense other all	owance	unt, es
	<del> </del>			compensation			
77077			MONTE	NONE			
NON	<u>t.                                      </u>		NONE	NONE		ONE	
			<del>-</del>				
		ļ					
				L			
<u>Total</u>	number of other employees paid over \$50,000		<u> </u>	<u> </u>		ONE	
					- 00	A DE	

Part	VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employ and Contractors (continued)	/ees,
	Five h	ighest-paid independent contractors for professional services. See instructions. If none, enter "NONE	."
		(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
			· · · · · · · · · · · · · · · · · · ·
NON	E		NONE
Tota	I numb	er of others receiving over \$50,000 for professional services	NONE
Dom	t IX-A	Summary of Direct Charitable Activities	
rair	LIA-A	Summary of Direct Chantable Activities	
		ndation's four largest direct charitable activities during the tax year include relevant statistical information such as the number of s and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 N	IONE		
177	ONE		
-			
2			
-			
-			
3			······································
<b>-</b>			
-	<u> ·- · · · · · · · · · · · · · · · · ·</u>		
4			
-			
-			
Par	t IX-B	Summary of Program-Related Investments (see instructions)	
		two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
11	IONE		
_			
2			
A	ll other pr	ogram-related investments. See instructions	
31	ONE		
_			
Tota	I. Add	ines 1 through 3	

Par	Minimum Investment Return (All domestic foundations must complete this part. Forei see instructions.)	ign foundations,	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	932,871.
b	Average of monthly cash balances	1b	64,927.
C	Fair market value of all other assets (see instructions)	1c	NONE
d	Total (add lines 1a, b, and c)	1d	997,798.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3	997,798.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	14,967.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	982,831.
6	Minimum investment return. Enter 5% of line 5	6	49,142.
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foun and certain foreign organizations, check here ▶ and do not complete this part.)	dations	
1	Minimum investment return from Part X, line 6	1	49,142.
' 2а			45,142.
	Income tax for 2017. (This does not include the tax from Part VI.)		
	Add lines 2a and 2b	2c	2,718.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	46,424.
4	Recoveries of amounts treated as qualifying distributions		NONE
5	Add lines 3 and 4	5	46,424.
6	Deduction from distributable amount (see instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		NONE
•	line 1	7	46,424.
			10,121.
Par	t XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	95,526.
b		1b	23,320.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		1,01.12
а	Suitability test (prior IRS approval required)	3a	NONE
	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	95,526.
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. See instructions	5 N/	A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	95,526.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca		
	qualifies for the section 4940(e) reduction of tax in those years.	•	

Form **990-PF** (2017)

Par	t XIII Undistributed Income (see instr	uctions)			
_,_		(a)	(b)	(c)	(d)
1	Distributable amount for 2017 from Part XI,	Corpus	Years prior to 2016	2016	2017
	line 7				46,424.
	Undistributed income, if any, as of the end of 2017				
	Enter amount for 2016 only			NONE	
	Total for prior years 20,20,20		NONE		
	Excess distributions carryover, if any, to 2017		ĺ		
	From 2012				
	From 2013				
	FF 431				
	20.200				
	From 2016	293,196.			
	Qualifying distributions for 2017 from Part XII,	255,150.			
•	line 4. ▶ \$ 95,526.				
а	Applied to 2016, but not more than line 2a			NONE	
b	Applied to undistributed income of prior years				
_	(Election required - see instructions)		NONE		
c	Treated as distributions out of corpus (Election				
	required - see instructions)	NONE			
d	Applied to 2017 distributable amount				46,424.
	Remaining amount distributed out of corpus	49,102.			
5	Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same	NONE			NONE
	amount must be shown in column (a))				
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e. Subtract line 5	342,298.			
	Prior years' undistributed income Subtract				·
-	line 4b from line 2b		NONE	_	
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		NONE		
d	Subtract line 6c from line 6b. Taxable		37037		
۵	amount - see instructions		NONE		<del></del>
·	4a from line 2a Taxable amount - see			NONE	
	instructions			NONE	
f	Undistributed income for 2017 Subtract lines 4d and 5 from line 1. This amount must be				
	distributed in 2018				NONE
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)	NONE			
8	Excess distributions carryover from 2012 not	[			
	applied on line 5 or line 7 (see instructions)	57,524.	···-		
9	Excess distributions carryover to 2018.	284,774.			
10	Subtract lines 7 and 8 from line 6a	207,1/4.		<del></del>	
	Excess from 2013				
	Excess from 2014 65, 488 .				
	Excess from 2015				
	Excess from 2016 38,368.				
e	Excess from 2017 49,102.				

Par	t XIV Private Ope	exating Foundations	(see instructions ar	nd Part VII-A, questi	on 9)	NOT APPLICABLE
1 a	If the foundation has	received a ruling or d	etermination letter that	it is a private opera	ating	
	foundation, and the ruling	ıs effective for 2017, ent	ter the date of the ruling		▶	
b	Check box to indicate v		is a private operating		section 494	42(j)(3) or 4942(j)(5)
2a	Enter the lesser of the ad-	Tax ÿear		Prior 3 years	1	(e) Total
	justed net income from Part	(a) 2017	(b) 2016	(c) 2015	(d) 2014	
	for the minimum investment return from Part X for each					
	year listed			-	/	<del></del>
b	85% of line 2a					
С	Qualifying distributions from Part XII, line 4 for each year listed .					
d	Amounts included in line 2c not				-	<del></del>
	used directly for active conduct of exempt activities					
e	Qualifying distributions made					
	directly for active conduct of exempt activities Subtract line					
3	2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
a	"Assets" alternative test - enter		/			
	(1) Value of all assets (2) Value of assets qualifying					
	under section					
b	4942(j)(3)(B)(i) "Endowment" alternative test-		1			
	enter 2/3 of minimum invest-					
	ment return shown in Part X, line 6 for each year listed					
c	"Support" alternative test - enter		/			
	(1) Total support other than					
	gross investment income (interest, dividends, rents,	/	ĺ			
	payments on securities loans (section 512(a)(5)),					
	or royalties)				1	s
	(2) Support from general public and 5 or more					
	exempt organizations as provided in section 4942					
	(j)(3)(B)(m)					
	(3) Largest amount of sup- port from an exempt					
	organization					
Pa		rary information (	Complete this part	only if the founds	tion had \$5 000	or more in assets at
		uring the year - see		only if the rounda	11017 1100 45,000	or more in assets at
1	Information Regarding	Foundation Manager	rs:			<del></del>
а	List any managers of before the close of any	the foundation who ly tax year (but only if the	have contributed mor	e than 2% of the tota nore than \$5,000). (S	al contributions re	ceived by the foundation 2).)
	N/A					
b		the foundation who	own 10% or more o	f the stock of a corp	oration (or an equ	ually large portion of the
		rship or other entity) o				, 0. ,
	N/A					
	Information Regarding	Contribution. Grant.	Gift, Loan, Scholarshi	n. etc. Programs:		
-				•	itable organization	ns and does not accept
	unsolicited requests f	or funds. If the found	ation makes gifts, gra	ints, etc., to individua	als or organizations	s under other conditions,
		c, and d. See instruction			•	·
а	The name, address, ar	nd telephone number o	or email address of the	person to whom app	lications should be	addressed:
	SEE STATEMENT					
b	The form in which app	lications should be su	bmitted and information	on and materials they	should include:	
	N/A					
C	Any submission deadl	ines:	<del></del> .	<del></del>		-
	SEE ATTACHED S	TATEMENT FOR L	INE 2			
d	Any restrictions or I factors:	imitations on awards	, such as by geogra	aphical areas, charita	able fields, kinds	of institutions, or other
		TATEMENT FOR L	INE 2			
_		TALLEST LON D.				

art XV Supplementary Information  Grants and Contributions Paid Duri	<i>(continued)</i> ng the Year or Appr	oved for F	-uture Payment	
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	A
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Purpose of grant or contribution	Amount
a Paid during the year				
E SCHEDULE ATTACHED				
	NONE	PC	GENERAL FUND	82,500
			1	
			1	
		<u> </u>		
Total	· · · · · · · · · · · · · · · · · · ·	<del></del>		82,50
Approved for future payment				
	<u> </u>			
Total			<u> ▶ 3b</u>	

rt XVI-A Analysis of Income-Proder gross amounts unless otherwise indicated.		ted business income	Excluded by s	section 512, 513, or 514	(e)
-	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income
Program service revenue:			<del></del>	<del></del>	(See instructions)
a			1	<del></del>	
b c					
d					<del></del>
e					
f					
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash investments •			14	358.	NON:
Dividends and interest from securities			14	18,582.	NON_
Net rental income or (loss) from real estate:					<u>-</u>
a Debt-financed property	<u></u>	<u> </u>			_ <del></del>
<b>b</b> Not debt-financed property • • • • • •					·
Net rental income or (loss) from personal property	<u> </u>				
Other investment income			<del>-   10    </del>	105 510	37037
Gain or (loss) from sales of assets other than inventor	Y		18	125,710.	NON
Net income or (loss) from special events - • •	4				<del></del>
Gross profit or (loss) from sales of inventory					
Other revenue: a			<del></del>		
b	<del></del>	<u> </u>			
c	1		<del></del>	·	
d	<del></del>	<del> </del>	<del></del> +		
_	1				
Cubatal Add columns (b) (d) and (a)		<u>.</u>		144 650	NON
Subtotal. Add columns (b), (d), and (e)				144,650.	
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)					<del></del>
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)	culations ) es to the A	ccomplishment of	Exempt Purport in column (e)	oses of Part XVI-A contribu	144,650
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculated a substruction of Activities.  Relationship of Activities	culations ) es to the A	ccomplishment of	Exempt Purport in column (e)	oses of Part XVI-A contribu	144,650
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculated at XVI-B Relationship of Activities  ne No. Explain below how each activities	culations ) es to the A	ccomplishment of	Exempt Purport in column (e)	oses of Part XVI-A contribu	144,650
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculated at XVI-B Relationship of Activities  ne No. Explain below how each activities	culations ) es to the A	ccomplishment of	Exempt Purpod in column (e) in by providing	oses of Part XVI-A contribu	144,650
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calc  rt XVI-B Relationship of Activitie  ne No. Explain below how each activ	culations ) es to the A	ccomplishment of h income is reported t purposes (other tha	Exempt Purpod in column (e) in by providing	oses of Part XVI-A contribu	144,650
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calc  rt XVI-B Relationship of Activitie  ne No. Explain below how each activ	culations ) es to the A	ccomplishment of h income is reported t purposes (other tha	Exempt Purpod in column (e) in by providing	oses of Part XVI-A contribu	144,650
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculated at XVI-B Relationship of Activities  ne No. Explain below how each activities	culations ) es to the A	ccomplishment of h income is reported t purposes (other tha	Exempt Purpod in column (e) in by providing	oses of Part XVI-A contribu	144,650
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculated at XVI-B Relationship of Activities  ne No. Explain below how each activities	culations ) es to the A	ccomplishment of h income is reported t purposes (other tha	Exempt Purpod in column (e) in by providing	oses of Part XVI-A contribu	144,650
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculated at XVI-B Relationship of Activities  ne No. Explain below how each activities	culations ) es to the A	ccomplishment of h income is reported t purposes (other tha	Exempt Purpod in column (e) in by providing	oses of Part XVI-A contribu	144,650
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculated at XVI-B Relationship of Activities  ne No. Explain below how each activities	culations ) es to the A	ccomplishment of h income is reported t purposes (other tha	Exempt Purpod in column (e) in by providing	oses of Part XVI-A contribu	144,650
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculated a substitution of activities.  Relationship of Activities ne No.  Explain below how each activities.	culations ) es to the A	ccomplishment of h income is reported t purposes (other tha	Exempt Purpod in column (e) in by providing	oses of Part XVI-A contribu	144,650
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calcondart XVI-B Relationship of Activities ne No.  Explain below how each activities	culations ) es to the A	ccomplishment of h income is reported t purposes (other tha	Exempt Purpod in column (e) in by providing	oses of Part XVI-A contribu	144,650
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  ee worksheet in line 13 instructions to verify calcant XVI-B  Relationship of Activities  ine No.  Explain below how each activities	culations ) es to the A	ccomplishment of h income is reported t purposes (other tha	Exempt Purpod in column (e) in by providing	oses of Part XVI-A contribu	144,650

Form 990	-PF (20	17)				31-1482697		Pa	ge <b>1</b> 3
Part X	(VII	Information F Exempt Orga		ansfers to and Trai	nsactions a	nd Relationships With Nor	ıcharit	table	)
` in	secti	on 501(c) (other				any other organization described ction 527, relating to politica		Yes	No
	rganıza ransfer		g foundation to	a noncharitable exemp	t organization	of:			
		· ·	_	·	•	• • • • • • • • • • • • • • • • • • • •	1a(1)		X
									X
-		ansactions:							<b>.</b> .
				•		• • • • • • • • • • • • • • • • • • • •			X
						• • • • • • • • • • • • • • • • • • • •			X
									X
									X
(6	) Perf	ormance of service	s or membershi	p or fundraising solicita	tions		. 1b(6)		X
c S	haring	of facilities, equipr	nent, mailing lis	ts, other assets, or paid	employees .	• • • • • • • • • • • • • • • • • • • •	. <u>1c</u>		<u> </u>
V	alue of	the goods, other	assets, or servi	ices given by the repor	ting foundatio	. Column (b) should always sho n. If the foundation received les ie of the goods, other assets, or	s than	fair m	narke
(a) Line	no	(b) Amount involved	(c) Name of r	noncharitable exempt organiza	tion (d) D	Description of transfers, transactions, and s	naring arr	angeme	ents
	_		<del></del>						
			<del>                                     </del>						
			<del> </del>		<del></del>				
					-				-
			<u> </u>						
			<del></del>						
			<del> </del>						
			<del> </del>						
	<u> </u>					<del></del>			
			4						
d	escribe	oundation directly ed in section 501(c complete the follo	) (other than see	filiated with, or related ction 501(c)(3)) or in se	to, one or m	ore tax-exempt organizations	Y	es 🔼	X No
		(a) Name of organization		(b) Type of organ	ization	(c) Description of relation	nship		
				-					
		1							
	Under	penalties of perjury, I dec	lare that I have exami	uned this return, including accomt texpayer) is based on all information	panying schedules a	and statements, and to the best of my knowledge	dge and i	pelief, it	is tru
Sign	COTTOCI,	and complete declaration	L-7			May the	IRS discus	na shia	
Here	Sign	ture of officer or trustee	un bruger	5/14/18 Date	Title		preparer t		below?
	L	Print/Tuna pranacar's -	ama	Proposed accompany			07:4:		
Paid	1	Print/Type preparer's n		Preparer's signature Madu Ka	onthe.	5/10/18 Check if	PTIN		1.4
Prepa	rer	MADISON KOEN	IFTH THIRD				P019		<u> 14</u>
Use (	L		O BOX 6308			Firm's EIN ► 31	-0676	005	
						ı			

513-534-0267 Form **990-PF** (2017)

CINCINNATI, OH

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

Department of the Treasury Internal Revenue Service Name of the organization

## **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990for the latest information. OMB No 1545-0047

2017

**Employer identification number** 

RICHARD D. HANNAN FAM	MILY FOUNDATION FIFTH	31-1482697		
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 four	ndation		
	527 political organization			
Form 990-PF	X 501(c)(3) exempt private foundation			
	4947(a)(1) nonexempt charitable trust treated as a private foundate	ıon		
	501(c)(3) taxable private foundation			
Check if your organization is cov	ered by the General Rule or a Special Rule.			
<b>Note:</b> Only a section 501(c)(7), instructions.	(8), or (10) organization can check boxes for both the General Rule and a S	pecial Rule. See		
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).				

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF

Name of organization
RICHARD D. HANNAN FAMILY FOUNDATION FIFTH

Employer identification number 31-1482697

ICI CILLIC	B. IMMAN THIBI TOOMBATION TITTE		31-1402031
Part	Contributors (see instructions). Use duplicate copies of P	art I if additional space is ne	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	RICHARD D. HANNAN  8800 OLD INDIAN HILL ROAD  CINCINNATI, OH 45243	\$1,736.	Person Payroll Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	RICHARD D. HANNAN  8800 OLD INDIAN HILL ROAD  CINCINNATI, OH 45243	\$2,823.	Person Payroll Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	RICHARD D. HANNAN  8800 OLD INDIAN HILL ROAD  CINCINNATI, OH 45243	\$5,820.	Person Payroli Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	RICHARD D. HANNAN  8800 OLD INDIAN HILL ROAD  CINCINNATI, OH 45243	\$2,794	Person Payroll Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5_	RICHARD D. HANNAN  8800 OLD INDIAN ROAD  CINCINNATI, OH 45243	\$4,606	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	RICHARD D. HANNAN  8800 OLD INDIAN ROAD  CINCINNATI, OH 45243	\$4,464	Person Payroll Noncash  (Complete Part II for noncash contributions.)

Name of organization	Employer identification number
RICHARD D. HANNAN FAMILY FOUNDATION FIFTH	31-1482697

Part I	Contributors (see instructions). Use duplicate copi	es of Part I if additional space is i	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	RICHARD D. HANNAN  8800 OLD INDIAN HILL ROAD  CINCINNATI, OH 45243	\$ 733.	Person Payroli Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization
RICHARD D. HANNAN FAMILY FOUNDATION FIFTH

Employer identification number

31-1482697

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

art II	Noncasii Property (see ilistractions). Ose duplicate copies	or rate in in additional opado to field	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	150 SHARES OF DXC TECHNOLOGY		
		\$13,448.	10/13/2017
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
2_	100 SHARES OF HOME DEPOT		
		\$\$	10/13/2017
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
3	100 SHARES OF GENL DYNAMICS		
		\$\$1,425.	10/13/2017
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
4	100 SHARES OF AMERIPRISE FINANCIAL		
		<u> </u>	10/13/2017
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
5_	100 SHARES OF PNC FINANCIAL		
		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	10/13/2017
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
6_	100 SHARES OF PARKER HANNIFIN		
		<b>\$</b> 18,098.	_10/13/2017
	<u></u>		90, 990-EZ, or 990-PF) (

Name of organization

RICHARD D. HANNAN FAMILY FOUNDATION FIFTH

Employer identification number

31-1482697

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
	25 SHARES OF HONEYWELL		
		\$3,602.	10/13/2017
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

STATEMENT

31-1482697

FORM 990PF, PART I - INTEREST ON TEMPORARY CASH	INVESTMENTS
1 990PF, PART I - INTEREST ON	CASH
1 990PF, PART I - INTEREST	TEMPORARY
1 990PF, PART I - INTEREST	NO
M 990PF, PART I	H
1 990PF, PART	ı
1 990PF,	
9	PART
	9

	NET INVESTMENT INCOME	358.
	REVENUE AND EXPENSES PER BOOKS	358.
- INIERES ON IEROTATION INVESTIGATION - INTERPRETATION -		TOTAL
FOKM YYOFF, FAKI I - INIEKESI ====================================	DESCRIPTION	MONEY MARKET INTEREST

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

REVENUE AND EXPENSES INVESTMENT PER BOOKS INCOME	3,	731. 5,547. 5,547 -379.	3,281.	5,765. 5,765.	AL 18,582. 18,230.
DESCRIPTION	USGI REPORTED AS NONQUALIFIED DIVIDENDS FOREIGN DIVIDENDS	NONDIVIDEND DISIRIBUTIONS DOMESTIC DIVIDENDS NONDISTRIBUTIVE DIVIDENDS	US GOVERNMENT INTEREST REPORTED AS QUALINONQUALIFIED FOREIGN DIVIDENDS		TOTAL

FORM 990PF, PART I - LEGAL FEES

CHARITABLE PURPOSES	238.
ADJUSTED NET INCOME	NONE
NET INVESTMENT INCOME	238.
REVENUE AND EXPENSES PER BOOKS	475.
	TOTALS
DESCRIPTION	LEGAL FEES

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FORM 990PF, PART I - ACCOUNTING FEES

CHARITABLE PURPOSES	
ADJUSTED NET INCOME	NONE
NET INVESTMENT INCOME	
REVENUE AND EXPENSES PER BOOKS	1,175.
DESCRIPTION	TAX PREPARATION FEE (NON-ALLOC TOTALS

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31-1482697

PROFESSIONAL FEES	
OTHER	ii 11 11 14 14 11
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PART	          
FORM 990PF,	

NET INVESTMENT INCOME	7,205.
REVENUE AND EXPENSES PER BOOKS	7,205.
DESCRIPTION	INVESTMENT MGMT FEES-SUBJECT T TOTALS

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31-1482697

TAXES	
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NET INVESTMENT INCOME	318. 30. 31. 348.
REVENUE AND EXPENSES PER BOOKS	318.
DESCRIPTION	FOREIGN TAXES ON QUALIFIED FOR FOREIGN TAXES ON NONQUALIFIED TOTALS

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EXPENSES	
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990PF,	          
FORM	

REVENUE	AND	EXPENSES	PER BOOKS	
			DESCRIPTION	

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	TOTALS

200.

OTHER MISC. EXPENSES

200. 200. CHARITABLE PURPOSES

FORM 990PF, 1	PART =====	III ·	- OTHER ======	DECREASES	IN 1 ====	NET ====	WORTH	OR	FUND	BALANCES	
DESCRIPTION										AMOUNT	
ROC ADJ ROUNDING CY DISTRIBUT:	ION F	REVER	SED IN	2018							554. 5. LOO.
				TOT.	AL						759.

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES 

OFFICER NAME:

RICHARD HANNAN

ADDRESS:

8800 OLD INDIAN HILL ROAD

CINCINNATI, OH 45243

PRES & TRUST

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:

JEANNE M HANNAN

ADDRESS:

8800 OLD INDIAN HILL ROAD

CINCINNATI, OH 45243

TITLE:

V.P. & TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:

KENNETH R WURTENBERGER

ADDRESS:

2121 CASTLE BAR CT

CRESENT SPRINGS, KY 41017

TITLE:

TREASURER & TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

COMPENSATION ..... 7,200.

OFFICER NAME:

FRED ROBBINS

ADDRESS:

7 WEST 7TH STREET SUITE 1400

CINCINNATI, OH 45202

TITLE:

SECRETARY

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES 

OFFICER NAME:

HOLLIE J HANNAN

ADDRESS:

7 WEST 7TH STREET SUITE 1400

CINCINNATI, OH 45202

TITLE:

ADVISOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

2,400. COMPENSATION .....

OFFICER NAME:

LAUREN HANNAN HUDSON

ADDRESS:

7 WEST 7TH STREET SUITE 1400

CINCINNATI, OH 45202

TITLE:

ADVISOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

2,400. COMPENSATION ......

TOTAL COMPENSATION:

12,000.  RECIPIENT NAME:

HEIDI JARK, FDN DIR C/O 5/3 BANK

ADDRESS:

1 1 15 h

38 FOUNTAIN SQ PLAZA

CINCINNATI, OH 45263

RECIPIENT'S PHONE NUMBER: 513-534-4397

SUBMISSION DEADLINES:

NONE

RESTRICTIONS OR LIMITATIONS ON AWARDS:

NONE