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Form 990-PF

Department of the Treasury
Internal Revenue Service

Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public.

Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

2017

Open to Public Inspection

For calendar year 2017, or tax year beginning 01-01-2017, and ending 12-31-2017

Name of foundation
GEORGE AND MARY JO BUDIG FAMILY
FOUNDATION C/O GEORGE J BUDIG

A Employer identification number
35-2389585

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

Room/suite

B Telephone number (see instructions)
(513) 562-8244

City or town, state or province, country, and ZIP or foreign postal code
FORT MITCHELL, KY 41011

C If exemption application is pending, check here

G Check all that apply

☐ Initial return

☐ Initial return of a former public charity

☐ Final return

☐ Amended return

☐ Address change

☐ Name change

D 1. Foreign organizations, check here

D 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 foundation

E 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 (from Part II, col (c), line 16) \$ 2,508,327

J Accounting method

☒ Cash

☐ Accrual

☐ Other (specify)

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

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) (see instructions))

	(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 (attach schedule)	995,380		
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B			
	3 Interest on savings and temporary cash investments	17	17	
	4 Dividends and interest from securities	40,020	40,020	
	5a Gross rents			
	b Net rental income or (loss)			
	6a Net gain or (loss) from sale of assets not on line 10			
	b Gross sales price for all assets on line 6a			
	7 Capital gain net income (from Part IV, line 2)		0	
	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) (attach schedule)				
11 Other income (attach schedule)				
12 Total. Add lines 1 through 11	1,035,417	40,037		
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 (attach schedule)			
	b Accounting fees (attach schedule)			
	c Other professional fees (attach schedule)			
	17 Interest			
	18 Taxes (attach schedule) (see instructions)	3,329	0	0
	19 Depreciation (attach schedule) and depletion			
	20 Occupancy			
	21 Travel, conferences, and meetings			
	22 Printing and publications			
	23 Other expenses (attach schedule)			
	24 Total operating and administrative expenses. Add lines 13 through 23	3,329	0	0
	25 Contributions, gifts, grants paid	38,100		38,100
	26 Total expenses and disbursements. Add lines 24 and 25	41,429	0	38,100
	27 Subtract line 26 from line 12			
	a Excess of revenue over expenses and disbursements	993,988		
	b Net investment income (if negative, enter -0-)		40,037	
c Adjusted net income (if negative, enter -0-)				

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

Form 990-PF (2017)

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)			
		Beginning of year (a) Book Value	End of year (b) Book Value (c) Fair Market Value		
Assets	1	Cash—non-interest-bearing	10,800	17,981	17,981
	2	Savings and temporary cash investments		103,786	103,786
	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 (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶ _____ 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 (attach schedule)			
	b	Investments—corporate stock (attach schedule)	1,324,369	2,386,560	2,386,560
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15	Other assets (describe ▶ _____)				
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	1,335,169	2,508,327	2,508,327	
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 (attach schedule)			
	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	1,335,169	2,508,327	
30	Total net assets or fund balances (see instructions)	1,335,169	2,508,327		
31	Total liabilities and net assets/fund balances (see instructions) .	1,335,169	2,508,327		

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	1,335,169
2	Enter amount from Part I, line 27a	2	993,988
3	Other increases not included in line 2 (itemize) ▶ _____	3	179,170
4	Add lines 1, 2, and 3	4	2,508,327
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	2,508,327

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , 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)
1a			

(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)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a			
b			
c			
d			
e			

2 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 }	2	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 { }	3	

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 does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see 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	36,400	1,057,180	0 034431
2015	31,500	274,835	0 114614
2014	27,550	63,690	0 432564
2013	21,900	37,065	0 590854
2012	17,300	30,258	0 571750
2 Total of line 1, column (d)			2 1 744213
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			3 0 348843
4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5			4 1,620,909
5 Multiply line 4 by line 3			5 565,443
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 400
7 Add lines 5 and 6			7 565,843
8 Enter qualifying distributions from Part XII, line 4			8 38,100

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 type="checkbox"/> and enter 1% of Part I, line 27b	1	801
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	801
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	801
6	Credits/Payments		
a	2017 estimated tax payments and 2016 overpayment credited to 2017	6a	1,680
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments. Add lines 6a through 6d.	7	1,680
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	879
11	Enter the amount of line 10 to be Credited to 2018 estimated tax <input type="checkbox"/> 879 Refunded <input type="checkbox"/>	11	0

Part 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 participate or intervene in any political campaign?	1a	Yes	No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for 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	1b		No
c	Did the foundation file Form 1120-POL for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ 0 (2) On foundation managers <input 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 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	2		No
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	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No
b	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? If "Yes," attach the statement required by General Instruction T	5		No
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	Yes	
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	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> KY			
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	Yes	
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 taxable year beginning in 2017 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A	13	Yes	
14	The books are in care of MR GEORGE J BUDIG Telephone no (513) 562-8244			

Located at **129 PARK ROAD FORT MITCHELL KY** ZIP+4 **41011**


15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year 15			
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 instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country ▶	16	Yes	No

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.

1a	During the year did the foundation (either directly or indirectly)		Yes	No
	(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)? <input type="checkbox"/> 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? <input type="checkbox"/> 1c			No
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 ▶ 20____, 20____, 20____, 20____			
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). <input type="checkbox"/> 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 ▶ 20____, 20____, 20____, 20____			
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). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 3b			
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4a			No
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			No

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

5a	<p>During the year did the foundation pay or incur any amount to</p> <p>(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(3) Provide a grant to an individual for travel, study, or other similar purposes? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>			
b	<p>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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/> </p>	5b		
c	<p>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? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i></p>			
6a	<p>Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>			
b	<p>Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><i>If "Yes" to 6b, file Form 8870</i></p>	6b		No
7a	<p>At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>			
b	<p>If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	7b		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
GEORGE J BUDIG 129 PARK ROAD FORT MITCHELL, KY 41011	TRUSTEE 2 00	0	0	0
MARY JO BUDIG 129 PARK ROAD FORT MITCHELL, KY 41011	TRUSTEE 2 00	0	0	0
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
NONE				
Total number of other employees paid over \$50,000.				0
3 Five highest-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		
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	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	1,523,002
b	Average of monthly cash balances.	1b	122,591
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	1,645,593
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	1,645,593
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	24,684
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	1,620,909
6	Minimum investment return. Enter 5% of line 5.	6	81,045

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.)

1	Minimum investment return from Part X, line 6.	1	81,045
2a	Tax on investment income for 2017 from Part VI, line 5.	2a	801
b	Income tax for 2017 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	801
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	80,244
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	80,244
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	80,244

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	38,100
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	4	38,100
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	38,100

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				80,244
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only.			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2017				
a From 2012.				12,559
b From 2013.				21,900
c From 2014.				24,365
d From 2015.				17,902
e From 2016.				
f Total of lines 3a through e.	76,726			
4 Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ 38,100				
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.				38,100
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a))	42,144			42,144
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	34,582			
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 instructions			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 (see instructions).	0			
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	34,582			
10 Analysis of line 9				
a Excess from 2013.				
b Excess from 2014.				16,680
c Excess from 2015.				17,902
d Excess from 2016.				
e Excess from 2017.				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the date of the ruling. ▶

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2017	(b) 2016	(c) 2015	(d) 2014	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 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 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment 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, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))
GEORGE J BUDIG

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

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

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

a The name, address, and telephone number or email address of the person to whom applications should be addressed

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

c Any submission deadlines

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

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 <i>Paid during the year</i> See Additional Data Table				
Total			3a	38,100
b <i>Approved for future payment</i>				
Total			3b	0

Enter gross amounts unless otherwise indicated

Part XVI-B Relationship of Activities to the Accomplishment of Exempt PurposesForm **990-PF** (2017)

Part XVII

		Yes	No
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1a(1)	No
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1a(2)	No
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1b(1)	No
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1b(2)	No
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1b(3)		No
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1b(4)		No
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1b(5)	No
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1b(6)		No
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1c		No
----	--	----

value
ue

[illegible]

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations

described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No


b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Title

Print/Type preparer's name MAXWELL M SULLIVAN CPA	Preparer's Signature	Date 2018-01-23	Check if self-employed <input type="checkbox"/>	PTIN P01679066
Firm's name ▶ CLARK SCHAEFER HACKETT & CO				Firm's EIN ▶ 31-0800053
Firm's address ▶ 1 EAST 4TH STREET CINCINNATI, OH 45202				Phone no (513) 241-3111

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
AAA CHILDREN'S OUTING 15 WEST CENTRAL PKWY CINCINNATI, OH 45202	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
ACTION MINISTRIES4375 BORON DR COVINGTON, KY 41015	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
ALZHEIMER'S ASSOCIATION 644 LINN ST SUITE 1026 CINCINNATI, OH 45203	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
AMERICAN CANCER SOCIETY - NORTHERN KENTUCKY OFFICE 297 BUTTERMILK PIKE FT MITCHELL, KY 41011	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
AMERICAN DIABETES ASSOCIATION 1701 N BEAUREGARD ST ALEXANDRIA, VA 22311	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
Total 				38,100
3a				


Form 990PF Part XV Line 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 <i>Paid during the year</i>				
AMERICAN FOUNDATION FOR THE BLIND INC 2 PENN PLAZA SUITE 1102 NEW YORK, NY 10121	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
AMERICAN INSTITUTE FOR CANCER RESEARCH 1759 R STREET NW PO BOX 97167 WASHINGTON, DC 20090	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
AMERICAN PARKINSON DISEASE ASSOICATION 135 PARKINSON AVE STATEN ISLAND, NY 10305	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
AMERICAN RED CROSS - CINCINNATI REGION 2111 DANA AVE CINCINNATI, OH 45207	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
ANDERSON FERRY FOOD PANTRY 380 GREENWELL AVE CINCINNATI, OH 45238	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
Total ► 3a				38,100

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
ARBOR DAY FOUNDATION 100 ARBOR AVENUE NEBRASKA CITY, NE 68410	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
ARTHRITIS FOUNDATION 7124 MIAMI AVENUE CINCINNATI, OH 45243	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
BE CONCERNED714 WASHINGTON ST COVINGTON, KY 41011	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
BEECHWOOD BAND BOOSTERS PO BOX 17353 FT MITCHELL, KY 41017	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
BEECHWOOD EDUCATIONAL FDTN 50 BEACHWOOD ROAD FT MITCHELL, KY 41017	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
Total ▶ 3a				38,100

Form 990PF Part XV Line 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				
BEECHWOOD HOME 2140 POGUE AVENUE CINCINNATI, OH 45208	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
BEHRINGER - CRAWFORD MUSEUM 1600 MONTAGUE RD - DEVOU PARK COVINGTON, KY 41011	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
BETA THETA PI5134 BONHAM RD OXFORD, OH 45056	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
BETHANY HOUSE1841 FAIRMOUNT AVE CINCINNATI, OH 45214	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
BLUEGRASS CARE NAVIGATORS 2312 ALECANDRIA DRIVE LEXINGTON, KY 40228	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
Total ▶ 3a				38,100

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
BOONE CONSERVANCYPO BOX 416 BURLINGTON, KY 41005	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
BOONE COUNTY ADULT WORK AND ACTIVITY CENTER 7970 KENTUCKY DR FLORENCE, KY 41042	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
BOONE COUNTY ARBORETUM 9190 CAMP ERNST ROAD UNION, KY 41091	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
BOONE COUNTY CASA - COURT APPOINTED SPECIAL ADVOC 2989 WASHINGTON SQUARE BURLINGTON, KY 41005	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
BOONE COUNTY HISTORICAL SOCIETY PO BOX 2300 FLORENCE, KY 41022	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
Total ► 3a				38,100

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
BOONE COUNTY 4H 5927 BURLINGTON PIKE BURLINGTON, KY 41005	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
BOY SCOUTS OF AMERICA 10078 READING RD CINCINNATI, OH 45241	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	700
BOYS HOPE GIRLS HOPE 4225 MALSBARY RD SUITE 208 CINCINNATI, OH 45242	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
BRAILLE BOOKS FOR BLIND CHILDREN 1800 JOHNSON ST BALTIMORE, MD 21230	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
BRIGHTEN CENTERS - FOOD PANTRY PO BOX 325 NEWPORT, KY 41072	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
Total 				38,100
3a				

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
CANCER SUPPORT COMMUNITY 4918 COOPER RD CINCINNATI, OH 45242	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
CARMEL MANOR100 CARMEL MANOR RD FT THOMAS, KY 41075	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
CATHOLIC CHARITIES SW OHIO 100 E 8TH STREET CINCINNATI, OH 45202	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
CATHOLIC RELIEF SERVICES 228 W LEXINGTON ST BALTIMORE, MD 21201	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
CEDAR VILLAGE FOUNDATION 5467 CEDAR VILLAGE DRIVE MASON, OH 45040	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
Total ▶ 3a				38,100

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
CENTER FOR COURAGEOUS KIDS 1501 BURNLEY RD SCOTTSVILLE, KY 42164	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
CENTRAL CLINIC FOUNDATION 311 ALBERT SABIN WAY CINCINNATI, OH 45229	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
CENTRAL PARKWAY YMCA 1105 ELM STREET CINCINNATI, OH 45202	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
CHILDHOOD FOOD SOLUTIONS 2573 SAINT LEO PLACE CINCINNATI, OH 45225	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
CHILDREN'S HOME OF CINCINNATI 5050 MADISON ROAD CINCINNATI, OH 45227	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
Total ► 3a				38,100

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
CHILDREN'S HOME OF N KENTUCKY 200 HOME ROAD DEVOU PARK COVINGTON, KY 41011	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
CHILDRENS THEATRE OF CINCINNATI 5020 OAKLAWN DR-STE 2000 CINCINNATI, OH 45227	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
CHRISTIAN APPALACHIAN PROJECT 6550 SOUTH KY RT 321 PO BOX 459 HAGERHILL, KY 41222	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
CHRISTIANS UNITED FOR ISRAEL PO BOX 1307 SAN ANTONIO, TX 78295	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
CHURCH OF OUR SAVIOR 256 EAST 10TH AVE COVINGTON, KY 41011	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
Total ► 3a				38,100

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
CINCINNATI CHILDREN HOSPITAL 3333 BURNET AVE CINCINNATI, OH 45229	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	400
CINCINNATI EDUCATIONAL TV 1223 CENTRAL PARKWAY CINCINNATI, OH 45214	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
CINCINNATI FIRE MUSEUM 315 WEST COURT STREET CINCINNATI, OH 45202	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
CINCINNATI MUSEUM CENTER 1301 WESTERN AVENUE CINCINNATI, OH 45203	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
CINCINNATI SCHOLARSHIP FDTN 602 MAIN ST SUITE 1000 CINCINNATI, OH 45202	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
Total ► 3a				38,100


Form 990PF Part XV Line 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 <i>Paid during the year</i>				
CINCINNATI VA MEDICAL CENTER 3200 VINE STREET CINCINNATI, OH 45220	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
CINCINNATI ZOO & BOTANICAL GARDEN 3400 VINE ST CINCINNATI, OH 45220	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
CITY GOSPEL MISSION1419 ELM ST CINCINNATI, OH 45202	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
CITYLINK CENTER800 BANK ST CINCINNATI, OH 45214	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
CLEVELAND CLINIC9500 EUCLID AVE CLEVELAND, OH 44195	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
Total 				38,100
3a				

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
COAST GUARD FOUNDATION 394 TAUGWONK RD STONINGTON, CT 06378	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
COMMUNITY SHARES OF GREATER CINCINNATI 103 WILLIAM H TAFT RD CINCINNATI, OH 45219	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
COVENANT HOUSE461 EIGHT AVE NEW YORK, NY 10001	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
COVINGTON CATHOLIC HIGH SCHOOL 1600 DIXIE HIGHWAY PARK HILLS, KY 41011	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	400
COVINGTON LADIES HOME 702 GARRARD STREET COVINGTON, KY 41011	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
Total 				38,100

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
CRAYONS TO COMPUTERS 1350 TENNESSEE AVENUE CINCINNATI, OH 45229	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
CRESECENT HILL UNITED METHODIST CHURCH 201 S PETERSON AVENUE LOUISVILLE, KY 40206	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	400
CUMBERLAND COLLEGE 6191 COLLEGE STATION DRIVE WILLIAMSBURG, KY 40769	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
CYSTIC FIBROSIS FOUNDATION 6931 ARLINGTON ROAD BETHESDA, MD 20814	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
DINSMORE HOMESTEADPO BOX 453 BURLINGTON, KY 41005	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
Total ▶ 3a				38,100

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
DIOCESAN CATHOLIC CHILDRENS HM 75 ORPHANAGE ROAD PO BOX 17007 FT MITCHELL, KY 41017	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
DISCIPLE MARKERS4393 BORON DR LATONIA, KY 41015	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
EASTER SEALSPO BOX 111128 LEXINGTON, KY 40512	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
EMERGENCY COLD SHELTER OF NORTHERN KENTUCKY 634 SCOTT STREET COVINGTON, KY 41011	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	500
EPILEPSY FOUNDATIONPO BOX 96546 WASHINGTON, DC 20077	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
Total 				38,100
3a				

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
EVERGREEN CEMETERY COMPANY 25 SOUTH ALEXANDRIA PIKE SOUTHGATE, KY 41072	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
FAIRHAVEN RESCUE MISSION 260 PIKE ST PO BOX 12761 COVINGTON, KY 41012	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
FAMILY NURTURING CENTER 8275 EWING BLVD FLORENCE, KY 41042	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
FAMILY PROMISE OF N KENTUCKY 336 WEST 9TH ST NEWPORT, KY 41042	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
FEEDING AMERICAPO BOX 96749 WASHINGTON, DC 20077	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	50
Total ► 3a				38,100

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
FREESTORE FOODBANK 1141 CENTRAL PARKWAY CINCINNATI, OH 45202	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	1,000
FRIARS CLUB4300 VINE ST CINCINNATI, OH 45202	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
FRIENDS OF BIG BONE INCPO BOX 184 PETERSBURG, KY 41080	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
GARRARD ST CHURCH OF CHRIST 218 GARRARD ST COVINGTON, KY 41011	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
GEORGIA TECH ALUMNI ASSOC 190 NORTH AVE ATLANTA, GA 30313	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
Total 3a				38,100

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
GUIDE DOGS FOR THE BLIND 350 LOS RANCHITOS RD SAN RAFAEL, CA 94903	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
HABBITAT FOR HUMANITY 4910 PARA DRIVE CINCINNATI, OH 45237	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
HAPPEN INC4201 HAMILTON AVE CINCINNATI, OH 45223	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
HEALING PLACE 1020 W MARKET STREET LOUISVILLE, KY 45202	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
HEARING SPEECH & DEAF CENTER OF GREATER CINCINNATI 2825 BURNET AVENUE CINCINNATI, OH 45219	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
Total 3a				38,100

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
HEIFER INTERNATIONAL 1 WORLD AVENUE LITTLE ROCK, AR 72202	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
HENRY HOSEA HOUSEPO BOX 72046 NEWPORT, KY 41072	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
HERITAGE FOUNDATION COVINGTON AREA MEMBERSHIP DR PO BOX 97057 WASHINGTON, KY 20077	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
HIGHLAND MEMORY GARDENS 279 LANDIS LN MT WASHINGTON, KY 40047	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
HILLEL CINCINNATI2615 CLIFTON AVE CINCINNATI, OH 45220	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	500
Total ► 3a				38,100

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
HILLSDALE COLLEGE 33 E COLLEGE ST HILLSDALE, MI 49242	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
HOME OF THE INNOCENTS 1100 EAST MARKET STREET LOUISVILLE, KY 40206	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
HOSPICE OF CINCINNATI 4310 COOPER RD CINCINNATI, OH 45242	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	300
HOSPICE OF ST ELIZABETH HEALTHCARE 483 SOUTH LOOP RD EDGEWOOD, KY 41017	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
HOSPICE OF THE BLUEGRASS 2312 ALEXANDRIA DR LEXINGTON, KY 40504	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
Total ► 3a				38,100

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
HOUSING OPPORTUNITIES OF NORTHERN KENTUCKY 502 FRY STREET COVINGTON, KY 41011	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
INTERFAITH HOSPITALITY NETWORK OF GREATER CINCINNATI 990 NASSAU STREET CINCINNATI, OH 45206	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
INTL FELLOWSHIP OF CHRISTIANS & JEWS 30 NORTH LASALLE ST SUITE 2600 CHICAGO, IL 60602	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
JEWISH FAMILY SERVICES 8485 RIDGE RD CINCINNATI, OH 45236	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
JEWISH NATIONAL FUND 9918 CARVER ROAD - STE 102 CINCINNATI, OH 45242	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
Total 3a				38,100

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
JUNIOR ACHIEVEMENT 644 LINN ST SUITE 1024 CINCINNATI, OH 45203	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
KAREN CARNS FOUNDATION 4600 N MASON-MONTGOMERY ROAD MASON, OH 45040	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
KENTUCKY SYMPHONYPO BOX 72810 NEWPORT, KY 41072	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
KENTUCKY WATERWAYS ALLIANCE 120 WEBSTER ST STE 217 LOUISVILLE, KY 40206	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
KET560 COOPER DR LEXINGTON, KY 40502	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
Total 3a				38,100

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
LEUKEMIA & LYMPHOMA SOCIETY SOUTHERN OHIO CHAPTER 2300 WALL STREET CINCINNATI, OH 45212	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
LIFE LEARNING CENTER 315 EAST 15TH STREET COVINGTON, KY 41011	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
LIGHTHOUSE YOUTH SERVICES 401 E MCMILLAN STREET CINCINNATI, OH 45206	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
LITERACY NETWORK OF GR CINTI 635 W 7TH STREET SUITE 103 - 19 BROADCAST PLAZA CINCINNATI, OH 45203	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
LITTLE BROTHERS FRIENDS OF THE ELDERLY 5530 COLERAIN AVENUE CINCINNATI, OH 45239	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
Total 3a				38,100

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
MACULAR DEGENERATION RESEARCH 22512 GATEWAY CENTER DRIVE CLARKSBURG, MD 20871	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
MADISON AVENUE CHRISTIAN CHURCH 1530 MADISON AVE COVINGTON, KY 41011	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
MAKE A WISH FOUNDATION PO BOX 97104 WASHINGTON, DC 20090	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
MARCH OF DIMESPO BOX 1549 AKRON, OH 44309	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
MARINE CORPS HERITAGE FOUNDTN 3800 FETTLER PARK DR - STE 104 DUMFRIES, VA 22025	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
Total ▶ 3a				38,100

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
MARY ROSE MISSION272 MAIN ST FLORENCE, KY 41042	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
MASTER PROVISIONS 7725 FOUNDATION DR FLORENCE, KY 41042	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
MATHEW 25MINISTRIES 11060 KENWOOD RD CINCINNATI, OH 45242	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	500
MERCY MONTESSORI 2335 GRANDVIEW AVE CINCINNATI, OH 45206	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
MIAMI PROJECT TO CURE PARALYSIS 730 SW 69TH TERRACE PEMBROKE PINES, FL 33023	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
Total ▶ 3a				38,100

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
MIAMI UNIVERSITY725 E CHESTNUT ST OXFORD, OH 45056	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	400
MICHAEL J FOX FOUNDATION PO BOX 5014 HAGERSTOWN, MD 21741	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
MINNESOTA OVARIAN CANCER ALLIANCE INC 4604 CHICAGO AVE SOUTH MINNEAPOLIS, MN 55407	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
MULTIPLE SCLEROSIS ASSOC OF AM 375 KINGS HIGHWAY NORTH CHERRY HILL, NJ 08034	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
MUSCULAR DYSTROPHY ASSOCIATION 1080 NIMITZVIEW DR 208 CINCINNATI, OH 45230	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
Total ▶ 3a				38,100

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
NATL AUDUBON SOCIETY 225 VARICK ST 7TH FLOOR NEW YORK, NY 10014	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
NATL BREAST CANCER COAILITION 1101 17TH ST NW SUITE 1300 WASHINGTON, DC 20036	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
NATL CHILDREN'S CANCER SOCIETY PO BOX 8966 TOPEKA, KS 66608	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
NATL FEDERATION OF THE BLIND 200 EAST WELLS ST BALTIMORE, MD 21230	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
NATL FOUNDATION FOR CANCER RESEARCH 4600 EAST WEST HIGHWAY STE 525 BETHESDA, MD 20814	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
Total ► 3a				38,100

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
NATL GEOGRAPHIC SOCIETY PO BOX 98197 WASHINGTON, DC 98197	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
NATL MULTIPLE SCLEROSIS SOC - OHIO VALLEY CHAPTER PO BOX 14030 CINCINNATI, OH 45250	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
NATL PARK FOUNDATIONPO BOX 17394 BALTIMORE, MD 21298	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
NATL PARKINSON FOUNDATION PO BOX 5018 HAGERSTOWN, MD 21741	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	150
NATL PARKS CONSERVATION ASSOC 777 6TH STREET NW SUITE 700 WASHINGTON, DC 20001	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
Total ► 3a				38,100

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
NATL TRUST FOR HISTORIC PRESERVATION 1785 MASSACHUSETTS AVE NW WASHINGTON, DC 20036	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
NATL WILDLIFE FEDERATION 11100 WILDLIFE CENTER DRIVE RESTON, VA 20190	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
NATURE CONSERVANCY 4245 N FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22203	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
NEEDIEST KIDS OF ALLPO BOX 636666 CINCINNATI, OH 45263	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	500
NEW HOPE CENTER 228 THOMAS MORE PKWY CRESTVIEW HILLS, KY 41017	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
Total 				38,100
3a				

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
NEW PERCEPTIONS INCONE SPERTI DR EDGEWOOD, KY 41017	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
NEWPORT H S ALUMNI & ASSOC CO JORINE COMBS 126 VAN VOAST AVE BELLEVUE, KY 41073	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	300
NEWPORT HS SCHOLARSHIP FUND 3648 TAMBER RIDGE DR INDEPENDENCE, KY 41015	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	300
NORTHERN KENTUCKY COLD SHELTER 634 SCOTT BLVD COVINGTON, KY 41011	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	500
NORTHERN KENTUCKY UNIV FOUND LUCAS ADMIN CENTER 221 NUNN DR HIGHLAND HGHTS, KY 41099	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
Total ► 3a				38,100

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
ONE WAY FARM - CHILDREN'S SHELTER 6131 RIVER ROAD - PO BOX 18637 FAIRFIELD, OH 45018	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
OPERATION SMILE6435 TIDEWATER DR NORFOLK, VA 23509	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
OUR DAILY BREADPO BOX 14862 CINCINNATI, OH 45250	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	300
OUR LORD CHRIST THE KIND 3223 LINWOOD AVE CINCINNATI, OH 45226	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
OVER-THE RHINE KITCHENPO BOX 6045 CINCINNATI, OH 45206	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	300
Total 				38,100
3a				

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
PARALYZED VETERANS OF AMERICA 7 MILL BROOK ROAD WILTON, NH 03086	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
PARISH KITCHENPO BOX 1234 COVINGTON, KY 41012	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	300
PARKINSON DISEASE REHABILITATION CENTER 343 CITY VIEW PLACE CINCINNATI, OH 45219	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
PARKINSON RESEARCH FOUNDATION PO BOX 20256 SARASOTA, FL 34276	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
PARKINSON'S DISEASE FOUNDATION 1359 BROADWAY SUITE 1509 NEW YORK, NY 10018	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
Total ▶ 3a				38,100

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
POINTARC OF NORTHEN KENTUCKY 104 WEST PIKE ST COVINGTON, KY 41011	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	600
POTTERS RANCH5194 BEAVER ROAD UNION, KY 41091	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
PRESBYTERIA CHURCH OF WYMONING 225 WYOMING AVE CINCINNATI, OH 45215	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
PREVENT BLINDNESS OHIO 1500 W THIRD AVE - STE 200 COLUMBUS, OH 43212	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
PRINCE OF PEACE LUTHERAN CHURCH 1528 RACE ST CINCINNATI, OH 45202	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
Total ▶ 3a				38,100

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
PROSTATE CANCER FOUNDATION 1250 FOURTH STREET SANTA MONICA, CA 90401	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
RABBIT HASH HISTORIC SOCIETY PO BOX 332 BURLINGTON, KY 41005	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
REDWOOD71 ORPHANAGE ROAD FT MITCHELL, KY 41017	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
ROCKWERN ACADEMY 8401 MONTGOMERY ROAD CINCINNATI, OH 45236	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
ROSE GARDEN CENTER FOR HOPE PO BOX 122038 COVINGTON, KY 41012	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
Total ▶ 3a				38,100

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
ROTARY INTERNATIONAL POLIO ERADICATION TASK FORCE 1560 SHERMAN AVE EVANSTON, IL 60201	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
SALVATION ARMY1806 SCOTT BLVD COVINGTON, KY 41014	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	500
SANTA MARIA COMMUNITY SERVICES - ADMINISTRATIVE OFFICE 2918 PRICE AVENUE CINCINNATI, OH 45204	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
SCHOOL FOR CREATIVE & PERFORMING ARTS 108 WEST CENTRAL PARKWAY CINCINNATI, OH 45202	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
SHELTERHOUSE411 GEST STREET CINCINNATI, OH 45203	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
Total ► 3a				38,100

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
SHRINERS HOSPITAL FOR CHILDREN 2900 ROCKY POINT DRIVE TAMPA, FL 33607	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
SIERRA CLUB85 SECOND STREET SAN FRANSISCO, CA 94105	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
SMILE TRAIN 41 MADISON AVENUE 28TH FLOOR NEW YORK, NY 10010	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
SPCA11900 CONREY RD CINCINNATI, OH 45249	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
SPECIAL OLYMPICS KENTUCKY PO BOX 2300 FRANKFURT, KY 40602	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
Total ▶ 3a				38,100

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
SPECIAL OLYMPICS OHIOPO BOX 668 COLUMBUS, OH 43216	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
ST BERNARD FOOD PANTRY 701 FIFTH AVE DAYTON, KY 41074	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
ST CHARLES NURSING HOME 500 FARRELL DRIVE COVINGTON, KY 41011	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
ST ELIZABETH HEALTHCARE FDTN 1 MEDICAL VILLAGE DRIVE EDGEWOOD, KY 41017	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
ST JOHN CHURCH627 PIKE ST COVINGTON, KY 41011	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
Total 3a				38,100

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
ST JOHN'S UNITED CHURCH OF CHRIST 415 PARK AVE NEWPORT, KY 41071	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
ST JOSEPH ACADEMY48 NEEDMORE ST WALTON, KY 41094	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
ST JOSEPH ORPHANAGE - OFFICE OF COMMUNITY RELATIONS 5400 EDALBERT DRIVE CINCINNATI, OH 45239	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
ST JUDE HOSPITAL PO BOX 1000 DEPT 142 MEMPHIS, TN 38101	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
ST PAULS OUTREACH MINISTRIES 7 COURT PLACE NEWPORT, KY 41071	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
Total ► 3a				38,100

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
ST RITA SCHOOL FOR THE DEAF 1720 GLENDALE MILFORD ROAD CINCINNATI, OH 45215	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
ST VINCENT DE PAUL NO KY - ATTN EXECUTIVE DIRECTOR 2655 CRESCENT SPRINGS RD COVINGTON, KY 41017	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
STEPPING STONES5650 GIVEN ROAD CINCINNATI, OH 45243	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
STRATEGIES TO END HOMELESSNESS PRINCE OF PEACE SHELTER 2368 VICTORY PARKWAY SUITE 600 CINCINNATI, OH 45206	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
SUSAN G KOMEN FOR THE CURE - GLOBAL HEADQUARTERS 5005 LBJ FREEWAY SUITE 250 DALLAS, TX 75244	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
Total ▶ 3a				38,100

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
TALBERT HOUSE 2600 VICTORY PARKWAY CINCINNATI, OH 45206	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
TENDER MERCIES INC 27 W 12TH STREET CINCINNATI, OH 45202	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
TOYS FOR TOTS PO BOX 227 MARINE CORPS BASE QUANTICO, VA 22134	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	300
UNITED CEREBRAL PALSY OF GREATER CINCINNATI 3601 VICTORY PARKWAY CINCINNATI, OH 45229	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
UNITED WAY OF GREATER CINTI 11 SHELBY ST FLORENCE, KY 41042	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
Total ► 3a				38,100

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
UNIVERSITY OF CINCINNATI NEUROSCIENCE INSTITUTE PO BOX 670570 CINCINNATI, OH 45267	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
UPSPRINGPO BOX 23300 CINCINNATI, OH 45223	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
USOPO BOX 96860 WASHINGTON, DC 20077	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
VILLA MADONNA ACADEMY 2500 AMSTERDAM RD VILLA HILLS, KY 41017	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	400
VOLUNTEERS OF AMERICA 700 W PETE ROSE WAY STE 334 CINCINNATI, OH 45203	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
Total ► 3a				38,100

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
WELCOME HOUSE OF NORTHERN KY 205 PIKE STREET COVINGTON, KY 41011	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
WILDERNESS SOCIETY1615 M ST NW WASHINGTON, DC 20036	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
WISH LISTUNITED WAY 2400 READING ROAD CINCINNATI, OH 45202	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
WOMEN'S CRISIS CENTER 835 MADISON AVE COVINGTON, KY 41011	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
WOOD HUDSON CANCER RESEARCH 931 ISABELLA ST NEWPORT, KY 41071	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
Total ▶ 3a				38,100

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
WORLD WILDLIFE FOUNDATION 1250 TWENTY - FOURTH ST NW WASHINGTON, DC 20037	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
WOUNDED WARRIER PROJECT 4899 BELFORT RD SUITE 300 JACKSONVILLE, FL 32256	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	200
WYMORE SCHOLORSHIP FUND EMANUEL CHRISTIAN SEMINARY MILLIGAN COLL, TN 37682	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
YMCA CAMP ERNST 7615 CAMP ERNST RD BURLINGTON, KY 41005	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	3,000
YMCA OF CINCINNATI1105 ELM STREET CINCINNATI, OH 45202	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	100
Total ▶ 3a				38,100

TY 2017 Distribution from Corpus Election

Name: GEORGE AND MARY JO BUDIG FAMILY
FOUNDATION C/O GEORGE J BUDIG

EIN: 35-2389585

Election: TREATMENT OF QUALIFYING DISTRIBUTIONS ELECTION UNDER
INTERNAL REVENUE CODE SECTION 4942(H)(2) AND REG.
53.4942(A)-3(D)(2), THE NON OPERATING PRIVATE
FOUNDATION ELECTS TO TREAT CURRENT YEAR QUALIFYING
DISTRIBUTIONS IN EXCESS OF IMMEDIATELY PRECEDING TAX
YEAR'S UNDISTRIBUTED INCOME AS BEING MADE OUT OF:
CORPUS

TY 2017 Investments Corporate Stock Schedule

Name: GEORGE AND MARY JO BUDIG FAMILY
FOUNDATION C/O GEORGE J BUDIG

EIN: 35-2389585

Name of Stock	End of Year Book Value	End of Year Fair Market Value
CORPORATE STOCK	2,386,560	2,386,560

TY 2017 Other Increases Schedule

Name: GEORGE AND MARY JO BUDIG FAMILY
FOUNDATION C/O GEORGE J BUDIG

EIN: 35-2389585

Description	Amount
UNREALIZED GAINS	178,660
PRIOR PERIOD ADJUSTMENT - CASH RECONCILIATION	510

TY 2017 Taxes Schedule

Name: GEORGE AND MARY JO BUDIG FAMILY
FOUNDATION C/O GEORGE J BUDIG

EIN: 35-2389585

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL TAXES	3,329	0		0

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990	OMB No 1545-0047 2017
	Name of the organization GEORGE AND MARY JO BUDIG FAMILY FOUNDATION C/O GEORGE J BUDIG	Employer identification number 35-2389585

Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)() (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 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 other 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 33¹/₃% 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 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization GEORGE AND MARY JO BUDIG FAMILY FOUNDATION C/O GEORGE J BUDIG	Employer identification number 35-2389585
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Part I Contributors (See instructions) Use duplicate copies of Part I if additional space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	GEORGE J BUDIG 129 PARK RD FORT MITCHELL, KY41011	\$ 995,380	Person <input checked="" 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)
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-		\$	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 GEORGE AND MARY JO BUDIG FAMILY FOUNDATION C/O GEORGE J BUDIG	Employer identification number 35-2389585
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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	22,000 SHARES OF BB&T CORPORATION (BBT) AT \$44.79 PER SHARE	\$ 985,380	2017-09-12
(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
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	

Name of organizationGEORGE AND MARY JO BUDIG FAMILY
FOUNDATION C/O GEORGE J BUDIG**Employer identification number**

35-2389585

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 information once. See instructions.) ▶ \$ _____ Use duplicate copies of Part III if additional space is needed
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(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	