## **Return of Private Foundation**

OMB No 1545-0052

DLN: 93491315005069

2018

Form 990-PI
Department of the Treasur

Internal Revenue Service

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

Do not enter social security numbers on this form as it may be made public.
 Go to <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

For	caler	ndar year 2018, or tax year beginning 01-01-20	)18 , ar	nd en	ding 12-31-	2018			
		indation Family Foundation			A Employer ide	entification numbe	er		
	e riciae	Tallin, Touridation			20-5881913				
		street (or P.O. box number if mail is not delivered to street address)	Room/suite		<b>B</b> Telephone nu	mber (see instructio	ns)		
91	J/5 CUI	NNINGHAM ROAD		(513) 873-1284					
		, state or province, country, and ZIP or foreign postal code , OH 452431503			C If everntion	application is pendir	ig check here		
CINC		, On 452451505			C II exemption	аррисасіон із ренан	<b>▶</b>		
G Ch	neck al	··· /	former public charity		<b>D 1.</b> Foreign org	ganizations, check h	ere 🕨 🗆		
		☐ Final return ☐ Amended return				ganizations meeting k here and attach co			
		☐ Address change ☐ Name change				ındatıon status was	· -		
_		pe of organization Section 501(c)(3) exempt private			under section	n 507(b)(1)(A), che	ck here		
			e private foundation  Cash  Accru		E If the founds	ition is in a 60-mont	h tarmination —		
of '	year (f	rom Part II, col (c),	Casii Li Acciu	Idi		n 507(b)(1)(B), chec			
line	₹ <i>16)</i>	>\$ 9,173,583	be on cash basis )						
Pa	rt I	Analysis of Revenue and Expenses (The total					(d) Disbursements		
		of amounts in columns (b), (c), and (d) may not necessarily	(a) Revenue and expenses per	(b)	Net investment income	(c) Adjusted net income	for charitable purposes		
		equal the amounts in column (a) (see instructions) )	books				(cash basis only)		
	1	Contributions, gifts, grants, etc , received (attach schedule)							
	2	Check ▶ ☑ if the foundation is <b>not</b> required to attach							
		Sch B							
	3	Interest on savings and temporary cash investments	252.020		252.020				
	4	Dividends and interest from securities	252,930	,	252,930				
	5a b	Net rental income or (loss)							
Revenue	6a	Net gain or (loss) from sale of assets not on line 10	11,803,559	9					
	ь	Gross sales price for all assets on line 6a	, ,						
eve		15,595,626							
~	7	Capital gain net income (from Part IV, line 2)			11,803,559				
	8	Net short-term capital gain							
	10a	Gross sales less returns and allowances							
	ь	Less Cost of goods sold							
	С	Gross profit or (loss) (attach schedule)							
	11	Other income (attach schedule)							
	12	Total. Add lines 1 through 11	12,056,489	)	12,056,489				
	13	Compensation of officers, directors, trustees, etc	C		0				
	14	Other employee salaries and wages							
es es	15	Pension plans, employee benefits							
ens	16a	Legal fees (attach schedule)							
άx	ь	Accounting fees (attach schedule)	7,825		7,825				
ve	С	Other professional fees (attach schedule)	30,910	)	30,910		-		
Administrative Expenses	17	Interest	<b>95-1</b> 40.70	1	10 701		ļ .		
i st	18	Taxes (attach schedule) (see instructions)	10,724	+	10,724				
Ε	19	Depreciation (attach schedule) and depletion							
AG	20 21	Occupancy							
ind Di	22	Printing and publications							
Operating and	23	Other expenses (attach schedule)							
atın	24	Total operating and administrative expenses.							
ber		Add lines 13 through 23	49,459	9	49,459				
Ō	25	Contributions, gifts, grants paid	2,339,672	2			2,339,672		
	26	Total expenses and disbursements. Add lines 24 and							
	27	Subtract line 26 from line 12	2,389,131	1	49,459		2,339,672		
	27 a	Subtract line 26 from line 12  Excess of revenue over expenses and							
		disbursements	9,667,358	3					
	b	Net investment income (if negative, enter -0-)			12,007,030				
===	C	Adjusted net income (If negative, enter -0-)			+ No 11280	<u> </u>	m 990-BE (2018		

13,191

60.097

60,097

60,097

60,097

0

7,475,846

9,732,202

9,732,202

9,732,202 9,732,202

2

3

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6

60,097

4,747

9,667,358

9,732,202

9,732,202 Form 990-PF (2018)

6.917.227

9,173,583

disqualified persons (attach schedule) (see instructions) . . . . .

Investments—U S and state government obligations (attach schedule)

Investments—corporate bonds (attach schedule) . . . . . . . .

Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable (attach schedule). . . . . .

Total liabilities(add lines 17 through 22) . . . . . . . . . . . .

Other notes and loans receivable (attach schedule)

Prepaid expenses and deferred charges . . . . . .

Investments—land, buildings, and equipment basis ▶ \_

Less accumulated depreciation (attach schedule) ▶ \_\_\_

Less accumulated depreciation (attach schedule) ▶ \_\_

Total assets (to be completed by all filers—see the

Accounts payable and accrued expenses . . . . .

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here ▶

Paid-in or capital surplus, or land, bldg, and equipment fund

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions) . . . . .

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year-Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Analysis of Changes in Net Assets or Fund Balances

Less allowance for doubtful accounts ▶

Land, buildings, and equipment basis ▶

instructions Also, see page 1, item I)

Other assets (describe > \_

Other liabilities (describe -

Temporarily restricted

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Enter amount from Part I, line 27a . . . . . . .

Other increases not included in line 2 (itemize) -

Permanently restricted . . .

Grants payable

•	Accete	

7

8

9

10a

h

C

11

12

13 14

15

16

17

18

19

20

21 22

23

24

25

28 29

31 Part III

Liabilities

Balances

Fund 26

ŏ

Assets 27

Net 30

2

	the kınd(s) of property sold (e g , rehouse, or common stock, 200 shs		(b) How acquired P—Purchase D—Donation	<b>(c)</b> Date acquired (mo , day, yr )	<b>(d)</b> Date sold (mo , day, yr )
1 a 134,419 SHARES SCRIPP	S NET A		D	1938-03-02	2018-03-07
<b>b</b> 142,269 SHARES DISCOV	ERY COMMUNICATIONS INC		Р	2018-03-07	2018-03-14
c MIRAMAR SERVICES, INC	- MUTUAL FUNDS		Р	2018-06-07	2018-12-14
<b>d</b> Capital Gains Dividends			Р		
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	Gain o	<b>h)</b> r (loss) ) minus (g)
a 12,097	7,894		13,191	, , , ,	12,084,703
<b>b</b> 2,992	2,971		3,250,436		-257,465
<b>c</b> 498	3,692		528,440		-29,748
d	5,069				6,069
e					
Complete only for assets	showing gain in column (h) and ow	ned by the foundation	on 12/31/69	(	I)
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	( <b>k)</b> of col(ı) (յ), ıf any	Gains (Col ( col (k), but not	h) gain minus less than -0-) <b>or</b> om col (h))
a					12,084,703
ь					-257,465
С					-29,748
d					6,069
e					
If gain, also enter in Par in Part I, line 8	ain or (loss) as defined in sections : t I, line 8, column (c) (see instructi	ons) If (loss), enter -0	}	3	11,803,559
Part V Qualification U	nder Section 4940(e) for Re	educed Tax on Net	Investment Inc	come	
if section 4940(d)(2) applies, lea Was the foundation liable for the	ivate foundations subject to the sec ave this part blank e section 4942 tax on the distributa t qualify under section 4940(e) Do	ble amount of any year			es 🗸 No
1 Enter the appropriate am	ount in each column for each year,	see instructions before	making any entries	5	
(a) Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncharitab	le-use assets	<b>(d)</b> Distribution rati (col (b) divided by c	
2017	2,514,312		4,960,313		0 506886
2016	1,025,153		734,275		1 396143
2015	720,250		1,320,664		0 545370
2014	622,349		813,347		0 765170
2013	633,856		454,937	<u> </u>	1 393283
2 Total of line 1, column (d	•		2		4 606852
number of years the found 4 Enter the net value of nor	for the 5-year base period—divide idation has been in existence if less icharitable-use assets for 2018 fron	than 5 years n Part X, line 5	<u>3</u>		0 921370 10,917,977
5 Multiply line 4 by line 3			5		10,059,496
	nt income (1% of Part I, line 27b)		6		120,070
			7		10,179,566
	ons from Part XII, line 4 , ater than line 7, check the box in Pa				2,339,672 e the Part VI

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Part VIII Information About Officers, Directors, Trustees, Foundation Manager and Contractors (continued)	s, Highly Paid Employees,
3 Five highest-paid independent contractors for professional services (see instructions). I	f none, enter "NONE".
(a) Name and address of each person paid more than \$50,000 (b) Type of ser	vice (c) Compensation
NONE	
Total number of others receiving over \$50,000 for professional services	• 0
Part IX-A Summary of Direct Charitable Activities	<u>'</u>
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information su organizations and other beneficiaries served, conferences convened, research papers produced, etc.	ch as the number of Expenses
1 N/A	0
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 N/A 2	0
2	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3	•
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Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

1b

2

За 3h

4

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2.339.672

2.339.672

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Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4. . . . . . . . . . . . . . . .

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

2

3

4

5

Page 9

305,758

305.758

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0

)-PF	(20	18)	
			_

1 Distributable amount for 2018 from Part XI, line 7

2 Undistributed income, if any, as of the end of 2018 a Enter amount for 2017 only. . . . . .

Excess distributions carryover, if any, to 2018

f Total of lines 3a through e. . . . . . . .

**d** Applied to 2018 distributable amount. . . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a) )

5 Excess distributions carryover applied to 2018

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 **b** Prior years' undistributed income Subtract line 4b from line 2b . . . . . . . . . . c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . . . d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see f Undistributed income for 2018 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019 . . . . . 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) . . . . . . . . . 8 Excess distributions carryover from 2013 not

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a . . . .

9 Excess distributions carryover to 2019.

10 Analysis of line 9

a Excess from 2014. . .

c Excess from 2016. . . .

d Excess from 2017. . . e Excess from 2018. . .

**b** Excess from 2015. .

(If an amount appears in column (d), the

6 Enter the net total of each column as

indicated below:

4 Qualifying distributions for 2018 from Part XII, line 4 🕨 \$ a Applied to 2017, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). . . . . c Treated as distributions out of corpus (Election 

611.131 582,309

673 092

988,439 2,273,567

582.309

673,092

988,439

2,273,567

2.033.914

(a)

Corpus

5.128.538

2,033,914

7,162,452

611.131

6,551,321

(b)

Years prior to 2017

(c)

2017

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t XIII	Undistributed Income	(see instructions)	

**b** Total for prior years

From 2013. . . . .

**b** From 2014. . . . c From 2015. . .

d From 2016. . . . .

e From 2017. . . . .

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Part XIII	U



Enter gross amounts unless otherwise indicated		Unrelated b	usiness income	Excluded by section	(e) Related or exempt	
_	n service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	(d) Amount	function income (See instructions )
g Fees	and contracts from government agencies					
	ership dues and assessments					
3 Interes	t on savings and temporary cash nents					
	nds and interest from securities			14	252,930	
	ntal income or (loss) from real estate					
	financed property					
	ebt-financed property					
	ntal income or (loss) from personal property nvestment income.					
	rvestment income					
invento	• •			18	11,803,559	
	ome or (loss) from special events			10	11,005,555	
	profit or (loss) from sales of inventory					
	revenue a					
b						
	al Add columns (b), (d), and (e).		0		12,056,489	
	Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu			1	.3	12,056,489
Part XV	-B Relationship of Activities to th	ne Accomplish	ment of Exem	pt Purposes		
Line No. ▼	Explain below how each activity for which the accomplishment of the foundation's expressions (					

and Transactions and Relationships With Noncharitable

Part >	(VII	Exempt Organi		ransı	ers 10 a	and Fransacti	ons and	Relatio	nsnips with Non	icnaritab	е		
		anization directly or in han section 501(c)(3)	directly enga							on 501		Yes	No
		om the reporting foun	-				_	,			_		
										. 1a	1)		No
(2)	Other	assets								. 1a			No
<b>b</b> Othe	r trans	actions											
(1)	Sales	of assets to a nonchari	table exempt	t orga	nızatıon.					. <b>1</b> b	(1)		No
(2)	Purcha	ses of assets from a n	oncharitable	exem	pt organiz	zation				1b	(2)		No
(3)	Rental	of facilities, equipmen	nt, or other as	ssets.						<u>1b</u>	(3)		No
		ursement arrangemen								. <u>1b</u>	4)		No
		or loan guarantees.								. 1b			No
		nance of services or m	•		_					. <u>1b</u>			No
	-	acılıtıes, equipment, n			-						С		No
		er to any of the above s, other assets, or ser									•		
		saction or sharing arra											
	. 1												
(a) Line N	No	(b) Amount involved	(c) Name of	noncha	iritable exei	mpt organization	(d) Des	scription of	transfers, transactions,	and sharing	arrar	ngemen	ts
<b>2a</b> Is the	e found	dation directly or indire	ectly affiliated	with,	, or relate	d to, one or more	e tax-exem	npt organ	zations				
descr	ribed ir	n section 501(c) (other	than section	501(	c)(3)) or ı	in section 527? .			🗆 Ye	es 🗹 No	,		
<b>b</b> If "Ye	es," coi	mplete the following so	chedule										
		(a) Name of organization	n		(L	<b>)</b> Type of organizat	tion		(c) Description	of relationsh	р		
								-					
								<u> </u>					
Т	Under	r penalties of perjury,	I declare that	t I hav	/e evamin	ed this return in	cluding ac	company	na schedules and st	atements :	nd t	to the l	hest
	of my	knowledge and belief	, it is true, co	rrect,	and com	plete Declaration	of prepar	er (other	than taxpayer) is ba	ased on all i	nfor	mation	of
l	which	preparer has any kno	wledge			1							
Sign	*:	****				2019-11-08	,	*****		May the IR return	S dis	scuss th	IIS
Here	_						b.			with the pi	epar	er show	vn
	S	ignature of officer or ti	rustee			Date	7.	Tıtle		below	_	<b>7</b> 1 r	_
										(see instr	? 🔼	∠l Yes <sup>L</sup>	⊔ No
		Print/Type preparer's	name	Prepa	arer's Sigr	nature	Date			PTIN			
									Check if self-	POO	226	317	
		Kurt Marty CPA					2019	-11-08	employed ▶ 📙	100	220	J1/	
Paid		,					2017	11 00					
Prepa		Firm's name ► MMB	CPAs & Advi	sors					·	Fırm's EIN ▶	.47-	1877/	.69
Use O	nly		40.00			OTT 155				IIIII 5 LIN P	<del>-</del> /-	102/4	
		Firm's address ► 43	40 GLENDAL	E-MIL	FORD RD	STE 130							
		CI	NCINNATI, O	H 45	242				F	Phone no (	513)	873-1	1284

Form 990PF Part XV Line 1a - 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).

than \$5,000).

ROBERT S HEIDT JR

JULIA S HEIDT

Recipient If recipient is an individual, show any relationship to status of contribution Status of status

LONG TERM MEDICAL CARE

24,500

2,339,672

any foundation manager

or substantial contributor

NONE

Name and address (home or business)

BEECHWOOD HOME

Total .

2140 POGUE AVENUE CINCINNATI, OH 452082087

a Paid during the year				
AMERICAN HEART ASSOCIATION 5211 MADISON ROAD CINCINNATI, OH 45227	NONE	501(C)(3)	RESEARCH AND CHARITABLE ENDEAVORS	5,000
ANNUNCIATION SCHOOL 3545 CLIFTON AVENUE CINCINNATI, OH 45220	NONE	501(C)(3)	FUNDING FOR SCHOOL ATHLETIC PROGRAMS	5,900
	I .			

501(C)(3)

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
BETHANY HOUSE 1836 FAIRMOUNT AVENUE CINCINNATI, OH 45214	NONE	501(C)(3)	CHARITABLE ENDEAVORS	65,427

CINCINNATI, OH 45214				
BOYS & GIRLS CLUBS OF CARLSBAD 2730 BRESSI RANCH WAY CARLSBAD, CA 92009	NONE	501(C)(3)	COMMUNITY SUPPORT OF YOUTH ACTIVITIES	1,000
BOYS HOPE GIRLS HOPE OF CINCINNATI	NONE	501(C)(3)	SUPPORTING YOUTH EDUCATION AND ACHIEVEMENT	5,000

CARLSBAD, CA 92009			YOUTH ACTIVITIES	
BOYS HOPE GIRLS HOPE OF CINCINNATI 1725 RIVERSIDE DRIVE CINCINNATI, OH 45242	NONE	501(C)(3)	SUPPORTING YOUTH EDUCATION AND ACHIEVEMENT	5,000

Criticobrid, Crit 32003				
BOYS HOPE GIRLS HOPE OF CINCINNATI 1725 RIVERSIDE DRIVE CINCINNATI, OH 45242	NONE	501(C)(3)	SUPPORTING YOUTH EDUCATION AND ACHIEVEMENT	5,000
Total			▶ 3a	2,339,672

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

Name and address (nome or business)	or substantial contributor	·		
a Paid during the year				
CATHOLIC INNER-CITY SCHOOLS EDUCATION 100 FAST FIGHTH STREET	NONE	1 ' ' ' '	TO SUPPORT RELIGIOUS EDUCATION IN THE CINCINNATI	10,000

100 EAST EIGHTH STREET CINCINNATI, OH 45202		INNER-CITY	
CERV FOUNDATION 3200 VINE STREET MO 151ROM B435 CINCINNATI OH 45220	NONE	 FUNDING CONTINUING EDUCATION FOR VETERANS	25,000

CERV FOUNDATION 3200 VINE STREET MO 151ROM B435 CINCINNATI, OH 45220	NONE	501(C)(3)	FUNDING CONTINUING EDUCATION FOR VETERANS	25,000
CET PUBLIC TELEVISION 1223 CENTRAL PARKWAY	NONE	501(C)(3)	FUNDING FOR PUBLIC TELEVISION	500

3200 VINE STREET MO 151ROM B435 CINCINNATI, OH 45220	5		EDUCATION FOR VETERANS	·
CET PUBLIC TELEVISION 1223 CENTRAL PARKWAY CINCINNATI, OH 45214	NONE	501(C)(3)	FUNDING FOR PUBLIC TELEVISION	500

Total .

2,339,672

Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
CINCINNATI ART MUSEUM 953 EDEN PARK DRIVE CINCINNATI, OH 45202	NONE	501(C)(3)	TO SUPPORT THE FINE ARTS	12,000

CINCINNATI, OH 45202				
CINCINNATI MUSEUM CENTER 250 WEST COURT STREET	NONE	501(C)(3)	FUNDING FOR MUSEUM AND PROGRAMS	16,520
CINCINNATI OH 45202				

CINCINNATI OPERATATA FLM CTREET	NONE	F01/C\/3\	TO CURRORT THE FINE ARTS	500
CINCINNATI MUSEUM CENTER 250 WEST COURT STREET CINCINNATI, OH 45202	NONE	501(C)(3)	FUNDING FOR MUSEUM AND PROGRAMS	16,520

250 WEST COURT STREET CINCINNATI, OH 45202		, ,, ,	PROGRAMS	,
CINCINNATI OPERA1243 ELM STREET	NONE	501(C)(3)	TO SUPPORT THE FINE ARTS	500

CINCINNATI, OH 45202				
CINCINNATI OPERA1243 ELM STREET	NONE	501(C)(3)	TO SUPPORT THE FINE ARTS	500

2,339,672

CINCINNATI OPERA1243 ELM STREET	NONE	501(C)(3)	TO SUPPORT THE FINE ARTS	500
CINCINNATI, OH 45202				

CINCINIONI OF ENVIRENCE IS LEFT STREET	110112	1 30 1 (0)(3)	I TO SOLL OILL THE LINE ALL	1
CINCINNATI, OH 45202				

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient

Name and address (nome or business)	or substantial contributor	·		
a Paid during the year				
CINCINNATI PARKS FOUNDATION	NONE	501(C)(3)	GENERAL PARKS FUNDING	7,460

421 OAK STREET CINCINNATI, OH 45219	NONE	301(0)(3)	GENERAL PARKS TONDING	7,400
CINCINNATI SYMPHONY ORCHESTRA 1241 ELM STREET	NONE	501(C)(3)	GENERAL FUNDING FOR ORCHESTRA	75

CINCINNATI SYMPHONY ORCHESTRA 1241 ELM STREET	NONE	501(C)(3)	GENERAL FUNDING FOR ORCHESTRA	75
CINCINNATI, OH 45202				
COMMUNITY FOUNDATION OF COLLIER CITY 1110 PINE RIDGE ROAD NAPLES, FL 34108	NONE	501(C)(3)	TO PROVIDE SUPPORT FOR COMMUNITIES GRANTS AND ACTIVITIES	500

1241 ELM STREET CINCINNATI, OH 45202			ORCHESTRA	
COMMUNITY FOUNDATION OF COLLIER CITY 1110 PINE RIDGE ROAD NAPLES, FL 34108	NONE	501(C)(3)	TO PROVIDE SUPPORT FOR COMMUNITIES GRANTS AND ACTIVITIES	500

Total			▶ 3a	2,339,672
COMMUNITY FOUNDATION OF COLLIER CITY 1110 PINE RIDGE ROAD NAPLES, FL 34108	NONE	501(C)(3)	TO PROVIDE SUPPORT FOR COMMUNITIES GRANTS AND ACTIVITIES	500
CINCINNATI, OH 45202				

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
CRIS COLLINSWORTH PROSCAN FUND 5400 KENNEDY AVENUE CINCINNATI, OH 45213	NONE	501(C)(3)	MEDICAL RESEARCH FOR WOMEN	55,000

CINCINNATI, 011 43213				
DEPAUL CRISTO REY HIGH SCHOOL 1133 CLIFTON HILLS AVENUE CINCINNATI, OH 45220	NONE	501(C)(3)	EDUCATIONAL ENDEAVORS	115,000
DOMINICAN ERIARS FORMATION	NONE	501(C)(3)	CHARITARI E ENDEAVORS	500

1133 CLIFTON HILLS AVENUE CINCINNATI, OH 45220		, ,, ,		·
DOMINICAN FRIARS FORMATION APPEAL 141 FAST 65TH STREET	NONE	501(C)(3)	CHARITABLE ENDEAVORS	500

CINCINNATI, OH 45220				
DOMINICAN FRIARS FORMATION APPEAL 141 EAST 65TH STREET NEW YORK NY 10065	NONE	501(C)(3)	CHARITABLE ENDEAVORS	500

CINCINNATI, OTT 45220				
DOMINICAN FRIARS FORMATION APPEAL 141 EAST 65TH STREET NEW YORK, NY 10065	NONE	501(C)(3)	CHARITABLE ENDEAVORS	500
Total			▶ 3a	2,339,672

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business)

	or substantial contributor			
a Paid during the year				
GREATER ORGANIZATION FOR THE LESS FORTUNATE (GOLF) PO BOX 139 GOLF, IL 600290139	NONE	501(C)(3)	TO SUPPORT COLLEGE EDUCATION FOR UNDERPRIVILEGED STUDENTS	1,000
JESUIT SPIRITUAL CENTER OF MILFORD	NONE	501(C)(3)	FUNDING FOR RELIGIOUS AND	16,000

GOLF, IL 600290139				
JESUIT SPIRITUAL CENTER OF MILFORD 5361 SOUTH MILFORD ROAD MILFORD, OH 45150	NONE	501(C)(3)	FUNDING FOR RELIGIOUS AND COMMUNITY PROGRAMS	16,000
JOSEPH HOUSE CINCINNATI 1526 REPUBLIC STREET	NONE	501(C)(3)	TO SUPPORT AND ASSIST HOMELESS VETERANS	7,500

5361 SOUTH MILFORD ROAD MILFORD, OH 45150	NONE	501(C)(3)	COMMUNITY PROGRAMS	16,0
JOSEPH HOUSE CINCINNATI 1526 REPUBLIC STREET CINCINNATI. OH 45202	NONE	501(C)(3)	TO SUPPORT AND ASSIST HOMELESS VETERANS	7,5

Total .

5361 SOUTH MILFORD ROAD MILFORD, OH 45150			COMMUNITY PROGRAMS	
JOSEPH HOUSE CINCINNATI 1526 REPUBLIC STREET CINCINNATI, OH 45202	NONE	501(C)(3)	TO SUPPORT AND ASSIST HOMELESS VETERANS	7,500

JOSEPH HOUSE CINCINNATI 1526 REPUBLIC STREET CINCINNATI, OH 45202	NONE	501(C)(3)	TO SUPPORT AND ASSIST HOMELESS VETERANS	7,500
1526 REPUBLIC STREET	NONE	301(0)(3)		

2,339,672

1526 REPUBLIC STREET CINCINNATI, OH 45202  NONE SUI(C)(3) CINCINNATI HOUSE CINCINNATI HOMELESS VETERANS	
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Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

FEEDING THE HUNGRY

2,339,672

any foundation manager

or substantial contributor

Name and address (home or business)

4150 ROUND BOTTOM ROAD

CINCINNATI, OH 45244

a Paid during the year				
JUVENILE DIABETES RESEARCH FOUNDATION 26 BROADWAY 14TH FLOOR NEW YORK, NY 10004	NONE	501(C)(3)	TO PROVIDE MEDICAL RESEARCH AND SERVICES	1,000
KENZIE'S CLOSETPO BOX 43285	NONE	501(C)(3)	COMMUNITY SUPPORT FOR	500

26 BROADWAY 14TH FLOOR NEW YORK, NY 10004			TRESEARCH AND SERVICES	
KENZIE'S CLOSETPO BOX 43285 CINCINNATI, OH 45243	NONE	501(C)(3)	COMMUNITY SUPPORT FOR YOUTH	500
LA SOUPE INC	NONE	501(C)(3)	GENERAL FUNDING FOR	1,000

Recipient If recipient is an individual, Purpose of grant or Amount Foundation show any relationship to status of contribution any foundation manager recipient

Name and address (home or business)

Total .

Name and datess (nome or business)	or substantial contributor			
a Paid during the year				
LADD3603 VICTORY PARKWAY CINCINNATI, OH 45229	NONE	501(C)(3)	PROVIDE SUPPORT FOR THE LIVING ARRANGEMENTS OF	180,000

				DISABLED	<u> </u>
ı	LIGHTHOUSE YOUTH SERVICES 401 E MCMILLAN STREET CINCINNATI, OH 45206	NONE	501(C)(3)	YOUTH ACTIVITIES SUPPORT	10

LIGHTHOUSE YOUTH SERVICES 401 E MCMILLAN STREET CINCINNATI, OH 45206	NONE	501(C)(3)	YOUTH ACTIVITIES SUPPORT	10,000
LINDNER CENTER OF HOPE 4075 OLD WESTERN ROW ROAD	NONE	501(C)(3)	MEDICAL RESEARCH	109,850

CINCINNATI, OH 45206				
LINDNER CENTER OF HOPE 4075 OLD WESTERN ROW ROAD MASON, OH 45040	NONE	501(C)(3)	MEDICAL RESEARCH	109,850

2,339,672

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

Name and address (home or business)

, ,	or substantial contributor			
a Paid during the year				
MERCY NEIGHBORHOOD MINISTRIES 1602 MADISON RD 200	NONE	501(C)(3)	PROVIDE SUPPORT FOR DISADVANTAGED WOMEN AND	15,000

CINCINNATI, OH 45206			SENIORS WOMEN AND	
NANTUCKET COTTAGE HOSPITAL 57 PROSPECT STREET NANTUCKET, MA 02554	NONE	501(C)(3)	MUSIC THERAPY FUNDING	5,000

NANTUCKET COTTAGE HOSPITAL 57 PROSPECT STREET NANTUCKET, MA 02554	NONE	501(C)(3)	MUSIC THERAPY FUNDING	5,000
NAPLES BOTANICAL GARDEN 4820 BAYSHORE DRIVE	NONE	501(C)(3)	FUNDING FOR BOTANICAL GARDEN	13,740

NANTUCKET COTTAGE HOSPITAL 57 PROSPECT STREET NANTUCKET, MA 02554	NONE	501(C)(3)	MUSIC THERAPY FUNDING	5,000
NAPLES BOTANICAL GARDEN 4820 BAYSHORE DRIVE NAPLES, FL 34112	NONE	501(C)(3)	FUNDING FOR BOTANICAL GARDEN	13,740

NANTUCKET, MA 02554				
NAPLES BOTANICAL GARDEN 4820 BAYSHORE DRIVE NAPLES, FL 34112	NONE	501(C)(3)	FUNDING FOR BOTANICAL GARDEN	13,740
Total			▶ 3a	2,339,672

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year

NATIONAL STEM CELL FOUNDATION 462 S FOURTH STREET SUITE 1230 LOUISVILLE, KY 40202	NONE	501(C)(3)	TO FOSTER THE DEVELOPMENT OF STEM CELL THERAPIES	1,000
ORDER OF MALTA AMERICAN ASSN	NONE	501(C)(3)	RELIGIOUS CHARITABLE	2,000

LOUISVILLE, KY 40202				
ORDER OF MALTA AMERICAN ASSN 1011 FIRST AVENUE ROOM 1350 NEW YORK, NY 10022	NONE	501(C)(3)	RELIGIOUS CHARITABLE ENDEAVORS	2,000
CAFE HAVEN FARMERO BOY 633	NONE	E01/C\/3\	FUNDING FOR AUTISM	2,000

ORDER OF MALTA AMERICAN ASSN 1011 FIRST AVENUE ROOM 1350 NEW YORK, NY 10022	NONE	501(C)(3)	RELIGIOUS CHARITABLE ENDEAVORS	2,000
SAFE HAVEN FARMSPO BOX 633	NONE	501(C)(3)	FUNDING FOR AUTISM	2,000

NEW YORK, NY 10022				
SAFE HAVEN FARMSPO BOX 633 MONROE, OH 45050	NONE	501(C)(3)	FUNDING FOR AUTISM SPECTRUM PROGRAMS	2,000

Total			▶ 3a	2,339,672
SAFE HAVEN FARMSPO BOX 633 MONROE, OH 45050	NONE	501(C)(3)	FUNDING FOR AUTISM SPECTRUM PROGRAMS	2,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

SOCIETY OF ST VINCENT DE PAUL 1125 BANK STREET CINCINNATI, OH 45214	NONE	501(C)(3)	SUPPORT MEDICAL EMERGENCY SERVICES TO THOSE IN NEED	100,000
ST JOSEPH PTO4011 ALEXANDRIA PIKE	NONE	501(C)(3)	GENERAL ACTIVITIES FUNDING	500

CINCINNATI, OH 45214				
ST JOSEPH PTO4011 ALEXANDRIA PIKE COLD SPRING, KY 41076	NONE	501(C)(3)	GENERAL ACTIVITIES FUNDING	500
ST LUKE THE EVANGELIST CHURCH	NONE	501(C)(3)	GENERAL CHURCH FUNDING	1,500

COLD SPRING, KY 41076		`		
ST LUKE THE EVANGELIST CHURCH 3088 SOUTH M-88 HWY PO BOX 799 BELLAIRE, MI 49615	NONE	501(C)(3)	GENERAL CHURCH FUNDING	1,500

Total . .

2,339,672

▶ 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, Purpose of grant or Foundation Amount show any relationship to status of contribution

2,339,672

any foundation manager

or substantial contributor

Name and address (home or business)

a Paid during the year				
ST GERTRUDE PARISH 6543 MIAMI AVENUE CINCINNATI, OH 45243	NONE	501(C)(3)	TO PROMOTE AND SUPPORT RELIGIOUS ENDEAVORS	5,000

ST XAVIER HIGH SCHOOL 600 WEST NORTH BEND ROAD CINCINNATI, OH 45224	NONE	501(C)(3)	EDUCATIONAL ENDEAVORS	117,000
CLIMANATE COLINIEDY DAY COLIOCI	NONE	E04/6\/3\	EDUCATIONAL ENDEAVORS	2

600 WEST NORTH BEND ROAD CINCINNATI, OH 45224				
SUMMMIT COUNTRY DAY SCHOOL 2161 GRANDIN ROAD	NONE	501(C)(3)	EDUCATIONAL ENDEAVORS	2,500

CINCINNATI, OH 45224				
SUMMMIT COUNTRY DAY SCHOOL 2161 GRANDIN ROAD CINCINNATI, OH 45208	NONE	501(C)(3)	EDUCATIONAL ENDEAVORS	2,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

2,339,672

any foundation manager

or substantial contributor

Name and address (home or business)

a Paid during the year				
SUSTAINABLE MEDICAL MISSIONS PO BOX 498493 CINCINNATI, OH 45249	NONE	501(C)(3)	TO PROVIDE MEDICAL CARE TO THOSE WITH HEALTH NEEDS IN OTHER LANDS	20,000
THE ATHENAEUM OF OHIO	NONE	501(C)(3)	CHARITABLE ENDEAVORS	1,000

THE ATHENAEUM OF OHIO 6616 BEECHMONT AVENUE CINCINNATI, OH 45230	NONE	501(C)(3)	CHARITABLE ENDEAVORS	
THE CHILDRENS HOME OF CINCINNATI	NONE	501(C)(3)	EDUCATION AND TREATMENT	

	THE ATHENAEUM OF OHIO 6616 BEECHMONT AVENUE CINCINNATI, OH 45230	NONE	501(C)(3)	CHARITABLE ENDEAVORS	1,00
ш	THE CHILDRENS HOME OF CINCINNATI 5050 MADISON ROAD	NONE	501(C)(3)	EDUCATION AND TREATMENT PROGRAMS FOR CHILDREN	356,20

6616 BEECHMONT AVENUE CINCINNATI, OH 45230				
THE CHILDRENS HOME OF CINCINNATI 5050 MADISON ROAD CINCINNATI OH 45227	NONE	501(C)(3)	EDUCATION AND TREATMENT PROGRAMS FOR CHILDREN	356,200

THE CHILDRENS HOME OF CINCINNATI 5050 MADISON ROAD CINCINNATI, OH 45227	NONE	501(C)(3)	EDUCATION AND TREATMENT PROGRAMS FOR CHILDREN	356,200

5050 MADISON ROAD	, ,, ,	PROGRAMS FOR CHILDREN	
CINCINNATI, OH 45227			

CINCINNATI, OH 45227		

Recipient If recipient is an individual, show any relationship to status of contribution Status of status

2,339,672

any foundation manager

or substantial contributor

Name and address (home or business)

CINCINNATI, OH 45206

	or substantial contributor			
a Paid during the year				
THE HYDE PARK SCHOOL FOUNDATOIN 3401 EDWARDS ROAD CINCINNATI, OH 45208	NONE	501(C)(3)	SCHOOL PLAY YARD FUNDING	2,000
TORCH LAKE PROTECTION ALLIANCE PO BOX 706 BELLAIRE, MI 49615	NONE	501(C)(3)	TO PROVIDE SUPPORT AND UP KEEP OF PUBLIC LAKE	2,500
USO TRIBUTE CINCINNATI 2776 BAKER PLACE	NONE	501(C)(3)	TO SUPPORT OUR ARMED FORCES	5,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager

1,000

2,339,672

	or substantial continuation			
a Paid during the year				
WELLNESS COMMUNITY	NONE	501(C)(3)	FUNDING CANCER PATIENT AND	

or substantial contributor.

Name and address (home or business)

1717 DIXIE HWY 160 FORT WRIGHT, KY 41011			FAMILY SUPPORT	
XAVIER UNIVERSITY	NONE	501(C)(3)	EDUCATIONAL ENDEAVORS	

l	XAVIER UNIVERSITY	NONE	501(C)(3)	EDUCATIONAL ENDEAVORS	1,010,000
	3800 VICTORY PARKWAY				
	CINCINNATI. OH 45207				1

XAVIER UNIVERSITY 3800 VICTORY PARKWAY	NONE	501(C)(3)	EDUCATIONAL ENDEAVORS	1,010,000
CINCINNATI, OH 45207				

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TY 2018 Accounting Fe	es Sch	edule					
	Name: The Heidt Family Foundation						
		20-5881913	•				
_				i	1		
Category	Am	ount N	et Investment	Adjusted Net	Disbursements		
			Income	Income	for Charitable		
					Purposes		

7,825

7,825

MOWRY, MARTY & BAIN

enie GRAPHIC PHIIL - DO NOT PROCESS	AS Filed Data -	DLN. 93491315005009
TY 2018 Investments - Other	Schodulo	
14 2018 livestillents - Other	Scriedule	
Name:	The Heidt Family Foundation	
EIN:	20-5881913	

DI N. 02/0121E00E060

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Investments Other Schedule 2					
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value		
MSI - VARIOUS MUTUAL FUNDS AND EQUITIES	FMV	7,475,846	6,917,227		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491315005069
TY 2018 Other Increases School	edule		
Name:	The Heidt Fam	nily Foundation	
EIN:	20-5881913		
Do	escription		Amount
STOCK BOOK VALUE VERSUS FMV ADJU	STMENT		4,747

efile GRAPHIC print - DO NOT PROC	ESS As Filed Data	-	DL	N: 93491315005069		
TY 2018 Other Profession	al Fees Schedu	le				
Name: The Heidt Family Foundation						
<b>EIN:</b> 20-5881913						
	<u> </u>			1		
Category	Amount	Net Investment	Adjusted Net	Disbursements		

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
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30,910

MFC FEES

30,910

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491315005069				
TY 2018 Substantial Contribut Schedule	ors					
Name: The Heidt Family Foundation EIN: 20-5881913						
Name		Address				
ROBERT S HEIDT JR		9075 CUNNINGHAM ROAD CINCINNATI, OH 452431503				
JULIA S HEIDT		3875 GORDON DRIVE NAPLES, FL 341027911				

efile GRAPHIC print - DO NOT PROCES	S As Filed Data	-	DL	N: 93491315005069				
TY 2018 Taxes Schedule								
Name: The Heidt Family Foundation								
EI	<b>N:</b> 20-5881913	<b>;</b>						
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes				
TREASURER STATE OF OHIO	50	50		0				
FEDERAL EXCISE TAX	1,448	1,448		0				
FEDERAL TAX PAYMENTS	7,600	7,600		0				
FOREIGN TAX PAYMENTS	1,626	1,626		0				