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

Fo	or calendar year 2018 or t	ax year beginning			, and ending		
ŗ	Name of foundation					A Employer identification	number
-	KLOIBER FOU	NDATION,	INC			27-1117156	
1	Number and street (or P O box	number if mail is not di	elivered to street	address)	Room/suite	B Telephone number	
_	333 W VINE S	ST SUITE	212			859-334-03	38
	City or town, state or provi			ostal code		C If exemption application is p	ending, check here
		KY 40507					
G	Check all that apply:	Initial retur		\equiv	ormer public charity	D 1. Foreign organizations	s, check here
		Final return Address ch		Amended return Name change		2 Foreign organizations me check here and attach co	eting the 85% test,
Н	Check type of organization			kempt private foundation	111	E If private foundation sta	
Ï	Section 4947(a)(1) no			Other taxable private founda	ution U Y	under section 507(b)(1)	
ī	Fair market value of all as:		J Account	ng method X Cash	Accrual	F If the foundation is in a	
	(from Part II, col. (c), line			ther (specify)		under section 507(b)(1)	
_	▶ \$ 8	<u>,350,454.</u>	(Part I, colun	nn (d) must be on cash basis	s)		
<u> </u>	Part I Analysis of Reve (The total of amount necessarily equal th	enue and Expenses is in columns (b), (c), ar ie amounts in column (a	nd (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<i>f</i>		s, grants, etc., rece		16,880.		N/A	, i
λ	2 Chock If the	រ បែបរាជ <u>ង្គប្រហ</u> is not required t not temporary	o attach Schi B	, *			
•	o cash investments		_	182,705.	182,705.		STATEMENT 1 STATEMENT 2
	5a Gross rents	erest from securities	5	102,703.	102,703.		SIAIEMENI Z
	b Net rental income or	(loss)					<u> </u>
	6a Naturman flor Chron		lino 10	204,627.			
	b Gross sales price for assets on line 6a		,039.				ECENCE
	b Gross sales price for assets on line 6a 7 Capital gain net incor	me (from Part IV, line 2)			204,627.	r	IECEIVED .
•	8 Net short-term cap	pital gain				9	
	9 Income modificati Gross sales less retui					1 25	10V 1 8 2019 9
	10a and allowances		 	^~			
	b Less Cost of goods : c Gross profit or (lo						GDEN, UT
	11 Other Income	33)					
	12 Total Add lines 1	through 11		404,213.	387,333.		
		cers, directors, trustees	s, etc	0.	0.		0.
	14 Other employee sa	alaries and wages		64,167.	0.		64,167.
	η 15 Pension plans, em	ployee benefits					
	16a Legal fees	a.m.	n.cm 2	11 001	E E / E		5 5 4 6
	b Accounting fees c Other professional		MT 3 MT 4	11,091. 61,275.	5,545. 58,275.		5,546. 3,000.
		ilees 51	MI 4	01,275.	30,273.		3,000.
•	17 Interest 18 Taxes 19 Depreciation and of the conference 20 Occupancy 21 Travel, conference	ST	MT 5	15,902.	3,978.		4,924.
	19 Depreciation and o			1,064.	0.		
	20 Occupancy			18,286.	0.		18,286.
7	21 Travel, conference			175.	0.		175.
<u> </u>	22 Printing and public			0.00			0.060
7 7 7	23 Other expenses		MT 6	2,969.	0.		2,969.
1 2 2019	expenses Add lin			174,929.	67,798.		99,067.
S 6	25 Contributions, gift	-		341,860.	01,150.		341,860.
201	26 Total expenses ar			241,000			311,000
9	Add lines 24 and 2			516,789.	67,798.		440,927.
	27 Subtract line 26 from						• •
	a Excess of revenue over	er expenses and disbu	rsements	-112,576.			
	b Net investment in			- '	319,535.	<u> </u>	
	C Adjusted net incor	Me (if negative, enter -	-0-)	.		N/A	

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

Part IV Capital Gains	and Losses fo	r Tax on inve	estmen	t Income				_		
(a) List and describe 2-story brick wa	the kind(s) of proper irehouse, or common			nte,	(b)	How ac - Purcl - Dona	quired (nase ition (c) Date a (mo., da		(d) Date sold (mo , day, yr)
1a PNC BROKERAGE-	DETAIL ON	REQUEST					P (1/0	1/18	12/31/18
b PNC BROKERAGE-	DETAIL ON	REQUEST					P (1/0	1/18	12/31/18
c L3 COMMUNICATI									1/17	06/27/18
d KLX ENERGY SER	VICES HOL	DING-STO	CK SP	IN OFF			P (1/0	1/17	09/17/18
e										· · · · · · · · · · · · · · · · · · ·
(e) Gross sales price	(f) Depreciation (or allowa			st or other basis expense of sale					in or (loss) (f) minus (
a 3,341,047.				<u>3,559,09</u>						-218,047
b 4,325,889.				<u>3,905,31</u>	8.					420,571
c 542.										542
d 1,561.										1,561
Complete only for accets showing	a acta in column (b)		facedates	10/01/00				- 40		
Complete only for assets showin		····					(I) (Gains (Co k) hut n	ol. (h) gaın ot less thar	minus 1 -0-) or
(i) FMV as of 12/31/69	(ر) Adjusted as of 12/3		, ,	cess of col (ı)			001. (Losses (from col. (h))
	a3 01 12/3	1703		COT (j), it ally						210 047
a		-								<u>-218,047</u> 420,571
<u>b</u>				-						5420,571
d d										1,561
e										1,501
<u> </u>	C 14	ana alaa aatar ia	Dort Line	7	╮	1				
2 Capital gain net income or (net ca		gain, also enter in (loss), enter -0- in				2				204,627
3 Net short-term capital gain or (los				,	7					
If gain, also enter in Part I, line 8,	,	0115 1222(3) aliu (0)		1					
If (loss), enter -0- in Part I, line 8					}	3			N/A	
Part V Qualification U	nder Section 4	1940(e) for R	educed	Tax on Net	Inv	estm	ent Inco	me		
If section 4940(d)(2) applies, leave the Was the foundation liable for the sect If "Yes," the foundation doesn't qualify	ion 4942 tax on the d				od?					Yes X No
1 Enter the appropriate amount in e	ach column for each	year, see the instr	uctions be	fore making any ei	ntries	.				
(a) Base period years Calendar year (or tax year beginnir	ng in) Adjusted	(b) d qualifying distrib	utions	Net value of no	(c) nchai		ise assets	(Distrib col. (b) divi	(d) ution ratio ded by col (c))
2017			,919.		8	<u>,99'</u>	7,479.			.052006
2016			,750.				<u>5,701.</u>			.052749
2015			,466.				<u>5,605.</u>			.051242
2014			,425.				<u>4,110.</u>			.068127
		130	,067.		9	<u>,202</u>	<u>2,086.</u>	<u> </u>		.014135
2 Total of line 1, column (d)								2		.238259
3 Average distribution ratio for the 5 the foundation has been in existen	-		ine 2 by 5 (), or by the numbe	er of y	years		3		.047652
4 Enter the net value of noncharitable	e-use assets for 201	8 from Part X, line	5					4	(9,180,195.
5 Multiply line 4 by line 3								5		437,455.
6 Enter 1% of net investment incom	a / 1%, of Part I line 2	7h)						6		3,195.
	o (170 Oi 1 ai 1 i, iiii 6 2									
7 Add lines 5 and 6								7		440,650.
8 Enter qualifying distributions from	Part XII, line 4							8		440,927.
If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box	ın Part VI, lıne 1b,	and comp	lete that part using	g a 19	% tax ra	nte			
										orm 990-PF (2018

_	n 990-PF (2018) KLOIBER FOUNDATION, INC		<u> 117156</u>		Page 4
Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	1948 -	see instru	ctio	ns)
18	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and enter "N/A" on line 1				
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			_	*
t	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1		3,1	95.
	of Part I, line 27b				
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col (b)	 			1
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	2	-	~	ō.
3	Add lines 1 and 2	3		3,1	
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		3,1	
6	Credits/Payments.			<u> </u>	
-	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 5,986.				r i
	Exempt foreign organizations - tax withheld at source 6b 0.	1			Ì
	E Tax paid with application for extension of time to file (Form 8868) 6c 2,000.	1]
		1			1
		۱ , ۱		7 0	86.
_	Total credits and payments. Add lines 6a through 6d	8		1,3	00.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	-			<u> </u>
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9			91.
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		4,/	
	Enter the amount of line 10 to be: Credited to 2019 estimated tax Art VII-A Statements Regarding Activities 4,791. Refunded	11			0.
_				Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	; in		162	
_	any political campaign?		1a		X
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the defin	iition	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or				
	distributed by the foundation in connection with the activities				- <u></u>
	Did the foundation file Form 1120-POL for this year?		1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation. \blacktriangleright \$ (2) On foundation managers \blacktriangleright \$ 0.	-			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				l i
	managers ► \$O.		•		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
	If "Yes," attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	or		·	
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/	A 4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
	If "Yes," attach the statement required by General Instruction T			ļ	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				1
	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	e law			
	remain in the governing instrument?		6	Х	L
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	Х	
					Ti
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.				1
	KY		•		ı
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)			,	İ –
-	of each state as required by General Instruction G? If "No," attach explanation		8b	x	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	ndar		\neg	
-	year 2018 or the tax year beginning in 2018? See the instructions for Part XIV If "Yes," complete Part XIV		9		\mathbf{x}^{-1}
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10		X
	11 Tod, attach a solitodic north and additional	_	Form 990	-PF	(2018)

Pa	rt VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule See instructions	11		х
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		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► KLOIBERFOUNDATION.ORG			
14	The books are in care of ▶ DEAN DORTON ALLEN FORD, PLLC Telephone no. ▶ 859-2!	<u> </u>	341	
	Located at ► 106 WEST VINE ST., STE 600, LEXINGTON, KY ZIP+4 ►4			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			. []
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			
Pa	rt 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.	T	Yes	No
1a	During the year, did the foundation (either directly or indirectly)		*	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			1
	a disqualified person? Yes X No			,
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			1
	for the benefit or use of a disqualified person)?			. 1
	(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.)			1
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations]
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			† i
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			j,
	before the first day of the tax year beginning in 2018?	1c		<u>X</u>
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 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2018?			_]
	If "Yes," list the years \blacktriangleright			ş
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			\$ 1
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	-		į
	statement - see instructions) N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			1
				;
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			!
	during the year?			1
b	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after			1
	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,	- <u> </u>		
	Form 4720, to determine if the foundation had excess business holdings in 2018.) N/A	3b_		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u> X</u>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			X
	had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b		Δ

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Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be	Required (contin	ued)		
5a During the year, did the foundation pay or incur any amount to				Yes	No
, (1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y	es X No		
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indir	ectly,			,
any voter registration drive?		Y	es 🗶 No		'
(3) Provide a grant to an individual for travel, study, or other similar purposes	37	Y	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section				'
4945(d)(4)(A)? See instructions		Y	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	, or educational purposes, or	for			'
the prevention of cruelty to children or animals?		Y	es X No		!
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described	ın Regulations	_		
section 53 4945 or in a current notice regarding disaster assistance? See instr	uctions		N/A	5b	
Organizations relying on a current notice regarding disaster assistance, check	here				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi	rom the tax because it mainta	ined			1
expenditure responsibility for the grant?	ľ	1/A 🔲 Y	es 🔲 No		, ;
If "Yes," attach the statement required by Regulations section 53 4945-5(d)				ľ	1
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		Ye	es X No	•	1
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870					1
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Ye	es X No		,
b If "Yes," did the foundation receive any proceeds or have any net income attribu	utable to the transaction?		N/A	7b	
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	61,000,000 in remuneration o	r			Ţ.,
excess parachute payment(s) during the year?			es X No		<u> </u>
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	anagers, Highly	У		
Paid Employees, and Contractors		PPPPPPPPPPPPPPPPPPPPPPPPPPPPPPPPPPPPP			
1 List all officers, directors, trustees, and foundation managers and t		1	. (-1)		
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Exp account	ense Lother
(a) Name and address	to position	(If not paid, enter -0-)	compensation	allowa	inces
SEE STATEMENT 11		0.	0.		<u> </u>
		ļ			
		. "			
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to	(a) Eva	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit plans and deferred	(e) Exp account	, other
	devoted to position		compensation	allowa	nces
NONE					
		<u> </u>			
			-		
		<u> </u>			
Total number of other employees paid over \$50,000			<u> </u>	000 PF	0
			Form	990-PF	(2018)

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, High Paid Employees, and Contractors (continued)	nly	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of si	ervice	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	>	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A		
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3		0.
	For	m 990-PF (2018)

P	art X Minimum Investment Return (All domestic foundations must co	emplete this part. Foreign four	idations, s	ee instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.	purposes		
·	Average monthly fair market value of securities	, . ,	1a	9,256,418.
b	Average of monthly cash balances		1b	63,577.
C	Fair market value of all other assets		1c	
ď	Total (add lines 1a, b, and c)		1d	9,319,995.
_	Reduction claimed for blockage or other factors reported on lines 1a and			
Ī	1c (attach detailed explanation)	0.		
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d		3	9,319,995.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see ins	structions)	4	139,800.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V		5	9,180,195.
6	Minimum investment return Enter 5% of line 5		6	459,010.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) foreign organizations, check here ▶ and do not complete this part)	private operating foundations an	d certain	
1	Minimum investment return from Part X, line 6	ļ	1	459,010.
2a	Tax on investment income for 2018 from Part VI, line 5	3,195.	}	
b	Income tax for 2018. (This does not include the tax from Part VI)			
C	Add lines 2a and 2b		2c	3,195.
3	Distributable amount before adjustments Subtract line 2c from line 1		3	455,815.
4	Recoveries of amounts treated as qualifying distributions		4	0.
5	Add lines 3 and 4		5	455,815.
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, lin	e 1	7	455,815.
P	art XII Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes			
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26		1a	440,927.
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			
а	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	440,927.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment $% \left(1\right) =\left(1\right) \left(
	income. Enter 1% of Part I, line 27b	}	5	3,195.
6	Adjusted qualifying distributions Subtract line 5 from line 4	Į	6	437,732.
	Note: The amount on line 6 will be used in Part V. column (b), in subsequent years when call	culating whether the foundation of	nalifies for t	the section

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
Distributable amount for 2018 from Part XI, line 7				455,815.
2 Undistributed income, if any, as of the end of 2018		-		
a Enter amount for 2017 only			315,311.	
b Total for prior years			020/0221	
g rotarior prior yours		0.		
3 Excess distributions carryover, if any, to 2018				
a From 2013				
b From 2014				
c From 2015				
d From 2016				
e From 2017				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2018 from		" '		
Part XII, line 4 [.] ► \$ 440,927.				
a Applied to 2017, but not more than line 2a			315,311.	
b Applied to undistributed income of prior			V=V/V==V	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2018 distributable amount				125,616.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2018	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below;				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
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 2017. Subtract line				
4a from line 2a Taxable amount - see instr.			0.	
f Undistributed income for 2018 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2019				330,199.
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 2013				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2019				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				
a Excess from 2014				
b Excess from 2015				
c Excess from 2016				
d Excess from 2017				
e Excess from 2018				- 000 DE

Form 990-PF (2018) KLOIBEF	R FOUNDATION	, INC	 		.17156 Page 10
Part XIV Private Operating F	oundations (see ins	structions and Part V	II-A, question 9)	N/A	
1, a If the foundation has received a ruling of	or determination letter that	it is a private operating			/
foundation, and the ruling is effective fo	or 2018, enter the date of t	he ruling	>		
b Check box to indicate whether the foun	dation is a private operatir	g foundation described		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
investment return from Part X for					1
each year listed					
b 85% of line 2a					
 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					
Gross investment income			<u> </u>		
Part XV Supplementary Info			if the foundation	had \$5,000 or m	ore in assets
at any time during t	the year-see instr	uctions.)			
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wh			tributions received by the	foundation before the clo	se of any tax
year (but only if they have contributed r	nore than \$5,000). (See se	ection 507(d)(2))			
NONE					
b List any managers of the foundation wh			(or an equally large portion	on of the ownership of a p	artnership or
other entity) of which the foundation ha	s a 10% or greater interes	I			
NONE			,		
2 Information Regarding Contribut					
Check here 🕨 🗶 if the foundation of					iests for funds If
the foundation makes gifts, grants, etc ,					
a The name, address, and telephone num	ber or email address of the	e person to whom appl	cations should be addres	sed.	
b The form in which applications should t	e submitted and informati	ion and materials they s	hould include.		
c Any submission deadlines					
2 mg sasmosion adamites					
d Any restrictions or limitations on awards	s, such as by geographica	l areas, charitable fields	, kınds of ınstitutions, or o	other factors	

Recipient Name and address (home or business) a Paid during the year CAYETTE COUNTY PUBLIC SCHOOLS O1 EAST MAIN STREET JEXINGTON, KY 40502	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
AYETTE COUNTY PUBLIC SCHOOLS				
01 EAST MAIN STREET	NONE	GOV		
01 EAST MAIN STREET	NONE	GOV		
		1	PROVIDE TECHNOLOGY	
EXINGTON XY 40502			EQUIPMENT AND	
BRINGION, KI 40502			EDUCATIONAL SUPPLIES	
			TO FAYETTE COUNTY	
			PUBLIC SCHOOLS	266,860
FICINA LEGAL DEL PUEBLO UNIDO INC -	NONE	PC	TO ASSIST IN THE	
EXAS CIVIL RIGHTS PROJECT			MISSION OF SERVING THE	
405 MONTOPOLIS DR			MOVEMENT FOR EQUALITY	
USTIN, TX 78741		İ	AND JUSTICE IN AND OUT	
USIIN, IX /0/41			OF THE COURTS	75,000
				
Total	<u> </u>		▶ 3a	341,860
b Approved for future payment				
NONE				
Total			▶ 3b	0.

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated	Unrelate	d business income		ded by section 512, 513, or 514	(e)	
-	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income	
1 Program service revenue	code	711100111	code	Amount		
a	_					
b	1					
c	-					
d	1					
e						
	_					
g Fees and contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash			ا ا			
investments			14			
4 Dividends and interest from securities			14	182,705.		
5 Net rental income or (loss) from real estate:		·				
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal property						
7 Other investment income						
8 Gain or (loss) from sales of assets other than inventory			18	204,627.		
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue.						
a						
b						
c						
d	- 1					
e						
12 Subtotal Add columns (b), (d), and (e)		0		387,333.	0.	
13 Total Add line 12, columns (b), (d), and (e)					387,333	
(See worksheet in line 13 instructions to verify calculations.)						

Relationship of Activities to the Accomplishment of Exempt Purposes Part XVI-B

e No ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes)							

Part XVIII	Information Regardi	ng Transfers to and	Transactions and Relationship	s With Noncharitable
	Exempt Organizatio	ns		

•									
1	Did the or	ganization directly or indir	ectly engage in any of	the followin	g with any other organization	n described in secti	on 501(c)	Yes	No
	(other tha	ın section 501(c)(3) organ	izations) or in section	527, relating	to political organizations?				
a	Transfers	from the reporting founda	ition to a noncharitable	e exempt orç	ganization of:				
	(1) Cash							1a(1)	X
	(2) Other	rassets						1a(2)	X
b	Other tran	isactions:							
	(1) Sales	of assets to a noncharitat	ble exempt organizatio	n				1b(1)	X
	(2) Purch	hases of assets from a nor	ncharitable exempt orç	ganization				1b(2)	X
	(3) Renta	al of facilities, equipment, (or other assets					1b(3)	X
	(4) Reim	bursement arrangements						1b(4)	Х
	• •	s or loan guarantees						1b(5)	X
		ormance of services or me	•	_				1b(6)	X
		f facilities, equipment, mai						1c	Х
d		-		_	dule. Column (b) should alw	-			
					ed less than fair market value	e in any transaction	or snaring arrangem	ent, snow in	
(2).	ine no	d) the value of the goods, (b) Amount involved			exempt organization	(d) December	of transfers, transactions		
اهاد	ine no	(b) Amount involved	(c) Name of the	N/A		(u) Description	of transfers, transactions	s, and snaring arrangeme	
				N/A					
	 -								
						 			
	- 								
	- 					-			
	<u> </u>				· · · · · · · · · · · · · · · · · · ·				
	<u> </u>	***							
							······		
		-							
2a	Is the four	ndation directly or indirect	ly affiliated with, or rel	ated to, one	or more tax-exempt organiz	ations described			
	ın section	501(c) (other than section	n 501(c)(3)) or ın sect	ion 527?				Yes X	. No
b	If "Yes," co	omplete the following sch	edule.						
		(a) Name of org	anization		(b) Type of organization	((c) Description of rela	tionship	
		N/A					· · ·		
	<u> </u>								
	T								
0 :.	مر مرمد ا				g accompanying schedules and s n taxpayer) is based on all informa			May the IRS discuss return with the prepar	
Sig He		00	·		1 1/ 10 16	PDEGIE	. T. 3. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7.	shown below? See in	str
116		Car Le	<u> </u>		11-12-17	PRESID	ENT.	∐X Yes ∟	J No I
_	Sign	Tature of officer or trustee	.ma	Dranarar's si	Date /	Title	Check if I P	PTIN	
		Print/Type preparer's na	c 1	Preparer's si	Manual Land	Date / /	self- employed	1.114	
Pa	id	JENNIFER S	ן שעם	July !		11/12/19		P00448795	
	eparer	Firm's name DEA		Y.T.ZANT	FORD, PLLC	• • •	Firm's EIN ▶ 27		
	e Only	rim s name > DEA	M DOKTOM P	THUIN	FORD, FUILC		TIBRITS CIN P 2 /	3030232	
-	y	Firm's address ▶ 10	6 W. VINE	ਰੂਜੂ ਦੂ ਜੁਣ	T, SUITE 600		-		
			XINGTON, K				Phone no. (85	9)255-234	1
		1 116.	IIIIOIOII, I	. 	<u> </u>		1. none no. (00	Form 990-PF	
									,_,,,,

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

Go to www.irs.gov/Form990 for the latest information.

OMB No 1545 0047

2018

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

KLOIBER FOUNDATION, INC 27-1117156 Organization type (check one) Filers of: Section:] 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributors **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

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

Name of organization

Employer identification number

KLOIBER FOUNDATION, INC

27-1117156

Part I	Contributors (see instructions) Use duplicate copies of Part I if a	dditional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	KLOIBER GIFTING TRUST 106 W. VINE ST, STE 600 LEXINGTON, KY 40507	\$16,880.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Onncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Omniant (Complete Part II for noncash contributions)

Employer identification number

KLOIBER FOUNDATION, INC

27-1117156

(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	o. (b) Description of noncash property given rt I a) o. (b) Description of noncash property given rt I	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
	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. irom 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

Employer identification number

KLOIBI	ER FOUNDATION, INC		_		27-1117156							
Part III	Exclusively religious, charitable, etc., contribution from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, or	through (e) and the following line haritable, etc., contributions of \$1,000	entry For orga	anizations								
(a) Na	Use duplicate copies of Part III if additional	space is needed										
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Desc	cription of how gift is held							
		(e) Transfer of	gift									
	Transferee's name, address, an	d ZIP + 4	Rela	tionship of tra	nsferor to transferee							
ļ												
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Desc	cription of how gift is held							
	(e) Transfer of gift											
	Transferee's name, address, an	d ZIP + 4	Rela	tionship of tra	nsferor to transferee							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Desc	ription of how gift is held							
_	(e) Transfer of gift											
	Transferee's name, address, an	d ZIP + 4	Rela	tionship of tra	nsferor to transferee							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	gift (d) (ription of how gift is held							
-		(e) Transfer of g	jift	· -								
-	Transferee's name, address, an	d ZIP + 4	Rela	tionship of trai	nsferor to transferee							
1												

FORM 990-PF INTE	REST ON SAVII	NGS AND TEM	PORARY	CASH IN	VESTMENTS	STATEMENT 1
SOURCE		(A REVE PER B	NUE	NET IN	(B) VESTMENT COME	(C) ADJUSTED NET INCOME
PNC BANK			1.		1.	
TOTAL TO PART I,	LINE 3		1.		1.	
FORM 990-PF	DIVIDEND	S AND INTER	EST FRO	M SECUR	ITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	, RE	(A) EVENUE R BOOKS	(B) NET INVEST MENT INCOM	
PNC BROKERAGE-DIVIDEN	D 134,882	•	0. 1	.34,882.	134,882	
PNC BROKERAGE-INTERES	r 47,823	•	0.	47,823.	47,823	· •
TO PART I, LINE 4	182,705	•	0	82,705.	182,705	
FORM 990-PF		ACCOUNTI	NG FEES	3		STATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS		WEST-	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES		11,091.		5,545.		5,546.
TO FORM 990-PF, PO	 G 1, LN 16B	11,091.		5,545.	, ,,	5,546.

FORM 990-PF	OTHER PROFES	SIONAL FEES	S'	ratement 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT MANAGEMENT FEES	61,275.	58,275.		3,000.
TO FORM 990-PF, PG 1, LN 16C	61,275.	58,275.		3,000.
FORM 990-PF	TAX	ES	S	ratement 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PAYROLL TAX FILING FEES EXCISE TAXES FOREIGN TAX WITHHELD	4,909. 15. 7,000. 3,978.			4,909. 15. 0. 0.
TO FORM 990-PF, PG 1, LN 18	15,902.	3,978.		4,924.
FORM 990-PF	OTHER E	XPENSES	S	ratement 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PARKING	1,155.	0.		1,155.
SUPPLIES PAYROLL FEES BANK FEES INSURANCE	700. 21. 425.	0. 0. 0.		700. 21. 425.

FORM 990-PF C	ORPORATE STOCK	·	STATEMENT 7
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
CORPORATE STOCK		3,260,053.	3,378,180.
TOTAL TO FORM 990-PF, PART II, LI	NE 10B	3,260,053.	3,378,180.
FORM 990-PF C	ORPORATE BONDS		STATEMENT 8
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
CORPORATE BONDS		1,329,788.	1,329,198.
TOTAL TO FORM 990-PF, PART II, LI	NE 10C	1,329,788.	1,329,198.
FORM 990-PF OT	HER INVESTMENTS		STATEMENT 9
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
MUTUAL FUNDS	FMV	3,536,656.	3,563,772.
TOTAL TO FORM 990-PF, PART II, LI	NE 13	3,536,656.	3,563,772.
FORM 990-PF DEPRECIATION OF ASS	ETS NOT HELD FOR	R INVESTMENT	STATEMENT 10
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
OFFICE FURNITURE OFFICE FURNITURE	5,700. 6,415. 5,153.	5,542. 6,170. 4,957.	158. 245. 196.
OFFICE FURNITURE OFFICE FURNITURE COMPUTERS COFFEE MAKER COMPUTER SOFTWARE COMPUTER SOFTWARE	5,153. 2,565. 194. 933. 228.	4,957. 2,565. 181. 933. 228.	196. 0. 13. 0.

·	ST OF OFFICERS, D D FOUNDATION MANA		STAT	EMENT 11
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE
DANIEL J KLOIBER 333 W VINE ST SUITE 212 LEXINGTON, KY 40507	DIRECTOR 0.25	0.	0.	0.
DAVID C KLOIBER 333 W VINE ST SUITE 212 LEXINGTON, KY 40507	PRESIDENT 6.00	0.	0.	0.
CASEY J KLOIBER 333 W VINE ST SUITE 212 LEXINGTON, KY 40507	DIRECTOR 0.25	0.	0.	0.
WILLIAM N. KLOIBER 333 W VINE ST SUITE 212 LEXINGTON, KY 40507	SECRETARY 0.25	0.	0.	0.
MICHAEL C. KLOIBER 333 W VINE ST SUITE 212 LEXINGTON, KY 40507	DIRECTOR 0.25	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	6, PART VIII	0.	0.	0.

GENERAL EXPLANATION

STATEMENT 12

FORM/LINE IDENTIFIER

FORM 990-PF, PART VII-B, LINE 1A(4):

EXPLANATION:

THE FOUNDATION REIMBURSES REASONABLE EXPENSES NECESSARY TO CARRY OUT THE EXEMPT PURPOSES OF THE FOUNDATION UNDER AN ACCOUNTABLE PLAN.

2018 DEPRECIATION AND AMORTIZATION REPORT

Depreciation		252. 2,692.		 			 	2,692 2,962 2,380 2,380 84 82 84 84 84 84 84 84 84 84 84 84 84 84 84	à à à à	, , , , , , , , , , , , , , , , , , , ,	12, 2, 2, 2, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	2, 2, 2, 11, 11, 12, 12, 13, 14, 14, 14, 14, 14, 14, 14, 14, 14, 14	12, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2	13, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2,	12, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2	12, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2	12, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2	2, 2, 2, 2, 1, 1, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2,	2, 2, 2, 2, 1, 1, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2,
Expense				8 8 8	Q Q Q	~ ~ ~ ~	8 8 13 13	8 8 8	8 8 8 8	7, 0	1, 2 2 2	1, C	1, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2,	1, 2 2 2	1, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2,	1, 2 2 2	1, 2 2 2	1, 0	1, 2 2 2
Depreciation		2,440.	2,440.	2,440.	2,440. 2,682. 2,155. 2,155.														
		2,850.	2,850.	2,850. 3,207. 2,576.	2,850. 3,207. 2,576. 2,576.	2,850. 3,207. 2,576. 2,576.	2,850 3,207 2,576 2,576 1,282	2, 2, 3, 2, 8	7, 2, 3, 1, 1, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2,	2, 2, 1, 13,	2, 2, 3, 13,	2, 2, 2, 13,	13,	13, 2, 2, 13,	13, 2, 2, 1, 13,	13, 2, 2, 3, 13, 13, 13, 13, 13, 13, 13, 13, 13,	13, 2, 2, 1, 13, 13, 13, 13, 13, 13, 13, 13, 13,	13, 2, 3, 13, 13, 13, 13, 13, 13, 13, 13, 13,	13, 2, 2, 1, 13, 13, 13, 13, 13, 13, 13, 13, 13,
		2,850.		2,850.	2,850. 3,208. 2,577.	2,850. 3,208. 2,577. 2,577.	2,850. 3,208. 2,577. 2,577.	2,850. 3,208. 2,577. 2,577. 1,283.	2,850. 3,208. 2,577. 1,283.	2,850. 3,208. 2,577. 2,577. 1,283. 97.	2,850. 3,208. 2,577. 1,283. 12,592.	2,850. 3,208. 2,577. 2,577. 1,283.	2,850. 3,208. 2,577. 2,577. 1,283.	2,850. 3,208. 2,577. 2,577. 1,283.	2,850. 3,208. 2,577. 2,577. 1,283.	2,850. 3,208. 2,577. 2,577. 1,283.	2,850. 3,208. 2,577. 2,577. 1,283.	2,850. 3,208. 2,577. 2,577. 1,283.	2,850. 3,208. 2,577. 2,577. 1,283.
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(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone