

For calendar year 2018, or tax year beginning 01-01-2018, and ending 12-31-2018

Name of foundation VISTA FOUNDATION		A Employer identification number 31-1347794	
Number and street (or P O box number if mail is not delivered to street address) 1991 MADISON ROAD		Room/suite	B Telephone number (see instructions) (513) 488-0053
City or town, state or province, country, and ZIP or foreign postal code CINCINNATI, OH 45208		C If exemption application is pending, check here ☐	
G Check all that apply ☐ Initial return ☐ Final return ☐ Address change ☐ Initial return of a former public charity ☐ Amended return ☐ Name change		D 1. Foreign organizations, check here ☐ 2 Foreign organizations meeting the 85% test, check here and attach computation ☐	
H Check type of organization ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private 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) \$ 9,296,859	J Accounting method ☒ Cash ☐ Accrual ☐ Other (specify) <u>(Part I, column (d) must be on cash basis)</u>	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)	613,999			
	2 Check ☐ if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	14,370	14,370		
	4 Dividends and interest from securities	181,209	181,209		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10 _____	-42,984			
	b Gross sales price for all assets on line 6a _____ 1,284,261				
	7 Capital gain net income (from Part IV, line 2)				
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	-181,565	3,215		
	12 Total. Add lines 1 through 11	585,029	198,794		
	13 Compensation of officers, directors, trustees, etc				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	2,800	2,800		
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	11,155			
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	32,000	32,000		
	24 Total operating and administrative expenses. Add lines 13 through 23	45,955	34,800		0
	25 Contributions, gifts, grants paid	444,500			444,500
	26 Total expenses and disbursements. Add lines 24 and 25	490,455	34,800		444,500
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	94,574			
	b Net investment income (if negative, enter -0-)		163,994		
c Adjusted net income (if negative, enter -0-)					

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	1,248,070	257,115	257,115
	2	Savings and temporary cash investments			
	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)	1,838,140	2,020,094	1,596,620
	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)	4,820,313	5,723,888	7,443,124
	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)	7,906,523	8,001,097	9,296,859	
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	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ☐ 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 ☒ and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds	7,906,523	8,001,097	
	30	Total net assets or fund balances (see instructions)	7,906,523	8,001,097	
31	Total liabilities and net assets/fund balances (see instructions) .	7,906,523	8,001,097		

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	7,906,523
2	Enter amount from Part I, line 27a	2	94,574
3	Other increases not included in line 2 (itemize) ▶ _____	3	
4	Add lines 1, 2, and 3	4	8,001,097
5	Decreases not included in line 2 (itemize) ▶ _____	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	8,001,097

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 See Additional Data Table				
b				
c				
d				
e				

(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 See Additional Data Table			
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 See Additional Data Table			
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	-42,984
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	4,672

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))
2017	351,000	8,821,327	0 03979
2016	346,247	7,687,943	0 04504
2015	350,873	7,365,471	0 04764
2014	323,200	7,221,874	0 04475
2013	236,150	5,860,304	0 04030
2 Total of line 1, column (d)			2 0 217516
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years			3 0 043503
4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5			4 10,007,556
5 Multiply line 4 by line 3			5 435,359
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 1,640
7 Add lines 5 and 6			7 436,999
8 Enter qualifying distributions from Part XII, line 4			8 444,500

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 ☐ 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 ☒ and enter 1% of Part I, line 27b	1	1,640
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	
3	Add lines 1 and 2.	3	1,640
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	1,640
6	Credits/Payments		
a	2018 estimated tax payments and 2017 overpayment credited to 2018	6a	6,100
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	
7	Total credits and payments. Add lines 6a through 6d.	7	6,100
8	Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶	10	4,460
11	Enter the amount of line 10 to be Credited to 2019 estimated tax ▶ 4,460 Refunded ▶	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	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 ▶ \$ _____ (2) On foundation managers ▶ \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ _____		
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	No
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) ▶ OH _____		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	No
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 2018 or the taxable year beginning in 2018? See the 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	Yes

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 ► VISTA FOUNDATION Telephone no ► (513) 488-0053			

Located at **►** 1991 MADISON ROAD CINCINNATI OH CINCINNATI OH ZIP+4 **►** 45208

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here ► ☐			
	and enter the amount of tax-exempt interest received or accrued during the year ► 15			
16	At any time during calendar year 2018, 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?	16	Yes	No
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ►			

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? ☐ Yes ☒ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ 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)? ☐ Yes ☒ 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). ☐ Yes ☒ 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. ☐	1b		No
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 2018? ☐	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 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? ☐ Yes ☒ 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).	2b		No
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? ☒ Yes ☐ No			
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 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 2018).	3b		No
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 2018?	4b		No

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

		Yes	No
5a	During the year did the foundation pay or incur any amount to		
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes ☒ No	
(2)	Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	☐ Yes ☒ No	
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes ☒ No	
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	☐ Yes ☒ No	
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	☐ Yes ☒ No	
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions.	5b	No
	Organizations relying on a current notice regarding disaster assistance check here.	☐	
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945–5(d)	☐ Yes ☒ No	
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes ☒ No	
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870	6b	No
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	☐ Yes ☒ No	
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	7b	No
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	☐ Yes ☒ No	

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	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				
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	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000.				

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

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.		

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 NONE	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	
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	9,256,089
b	Average of monthly cash balances.	1b	903,866
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	10,159,955
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	
3	Subtract line 2 from line 1d.	3	10,159,955
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	152,399
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	10,007,556
6	Minimum investment return. Enter 5% of line 5.	6	500,378

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	500,378
2a	Tax on investment income for 2018 from Part VI, line 5.	2a	1,640
b	Income tax for 2018 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	1,640
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	498,738
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	498,738
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	498,738

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	444,500
b	Program-related investments—total from Part IX-B.	1b	
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	444,500
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	1,640
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	442,860

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 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				498,738
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only.			434,966	
b Total for prior years 20____, 20____, 20____				
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.				
4 Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ 444,500				
a Applied to 2017, but not more than line 2a			434,966	
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2018 distributable amount.				9,534
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2018 (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				
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—see instructions				
e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions				
f Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019				489,204
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).				
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a				
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.				

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 2018, 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)					
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year	Prior 3 years			(e) Total
	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
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 foundation 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))	
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. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.	
a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed HELEN HEEKIN 1991 MADISON ROAD CINCINNATI, OH 45208 (513) 488-0053	
b The form in which applications should be submitted and information and materials they should include NO MORE THAN THREE PAGES	
c Any submission deadlines NONE	
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors NONE	

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	
b <i>Approved for future payment</i>				
Total			▶ 3b	

Enter gross amounts unless otherwise indicated

(See worksheet in line 13 instructions to verify calculations)

[illegible]

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash.	1a(1)		No
(2) Other assets.	1a(2)		No
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization.	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization.	1b(2)		No
(3) Rental of facilities, equipment, or other assets.	1b(3)		No
(4) Reimbursement arrangements.	1b(4)		No
(5) Loans or loan guarantees.	1b(5)		No
(6) Performance of services or membership or fundraising solicitations.	1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.	1c		No
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.			

(a) Line No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (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

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here	*****	2019-10-16	*****	May the IRS discuss this return with the preparer shown below? (see instr)? ☒ Yes ☐ No
	Signature of officer or trustee	Date	Title	

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ☒	PTIN
	Christina K Mooney				P00947411
	Firm's name ▶ Christina K Mooney				Firm's EIN ▶
Firm's address ▶ 5591 Squirrel Run Lane Cincinnati, OH 45247					Phone no (513) 923-4637

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d				
List and describe the kind(s) of property sold (e g , real estate, (a) 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)
1	667 SHS RESIDEO TECHNOLOGIES INC	P	2017-12-13	2018-10-31
1	24200 SHS SSGA ACTIVE ETF TR BLACKSTN	P	2018-01-11	2018-01-11
	667 SHS APOLLO INVESTMENTS CORP	P	2014-04-24	2018-11-05
	667 SHS ARCOSA INC	P	2014-11-28	2018-11-05
	150 SHS QUALITY CARE PROPERITES INC	P	2016-11-01	2018-07-27
	2200 SHS ENSCO PLC CLASS A	P	2014-08-07	2018-01-11
	LDR PREFERRED INCOME FUND	P	2018-01-11	2018-01-11
	LDR PREFERRED INCOME FUND	P	2011-01-11	2018-11-18
	BLACKSTONE GROUP LP	P	2011-01-11	2018-01-11
	OAK HILL CAPITLA PARTNERS IV	P	2011-01-11	2018-01-11

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(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)
13		18	-5
1,153,008		1,149,296	3,712
10		16	-6
20		19	1
3,113		4,628	-1,515
15,774		154,656	-138,882
965			965
		18,612	-18,612
1,224			1,224
77,338			77,338

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) 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	
			-5
			3,712
			-6
			1
			-1,515
			-138,882
			965
			-18,612
			1,224
			77,338

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 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)
Capital Gain Dividends			

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
			32,796

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

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	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(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
HELEN K HEEKIN 1991 MADISON RD CINCINNATI, OH 45208	Pres & TRUSTEE 0 00	0		
CHARLES L HEEKIN II 1991 MADISON RD CINCINNATI, OH 45208				
R MCSHANE HEEKIN 1991 MADISON RD CINCINNATI, OH 45208	VP & TRUSTEE 0 00	0		
PETER HEEKIN 1991 MADISON ROAD CINCINNATI, OH 45208				
MICAELA HEEKIN 1991 MADISON ROAD CINCINNATI, OH 45208	TREAS & TRUSTEE 0 00	0		

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>				
CONTEMPORARY ARTS CENTER 44 E SIXTH ST CINCINNATI, OH 45202	NONE	Y	GENERAL OPERATING FUNDS	2,000
CINCINNATI ART MUSEUM 953 EDEN PARK DR CINCINNATI, OH 45202	NONE	Y	GENERAL OPERATING FUNDS	79,000
CINCINNATI COUNTRY DAY SCHOOL 6095 GIVEN ROAD CINCINNATI, OH 45243	NONE	Y	GENERAL OPERATING FUNDS	16,000
Total ▶ 3a				444,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, 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 PARKS FOUNDATION 950 EDEN PARK DRIVE CINCINNATI, OH 45273	NONE	Y	GENERAL OPERATING FUNDS	10,000
CINCINNATI NATURE CENTER 4949 TEALTOWN ROAD MILFORD, OH 45150	NONE	Y	GENERAL OPERATING FUNDS	5,000
COMMUNITY SCHOOLPO BOX 2118 SUN VALLEY, ID 83353	NONE	Y	GENERAL OPERATING FUNDS	5,000
Total ▶ 3a				444,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, 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 ARTS ASSOCIATION 650 WALNUT ST CINCINNATI, OH 45202	NONE	Y	GENERAL OPERATING FUNDS	10,000
ARTSWAVE20 EAST CENTRAL PARKWAY CINCINNATI, OH 45202	NONE	Y	GENERAL OPERATING FUNDS	1,500
HILLSIDE TRUST 710 TUSCULUM ALMS PARK CINCINNATI, OH 45226	NONE	Y	GENERAL OPERATING FUNDS	1,000
Total ▶ 3a				444,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, 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 CECILIA SCHOOL 4115 TAYLOR AVENUE CINCINNATI, OH 45209	NONE	Y	GENERAL OPERATING FUNDS	10,000
UNITED WAYPO BOX 632711 CINCINNATI, OH 45263	NONE	Y	GENERAL OPERATING FUNDS	5,000
WCETPO BOX 630210 CINCINNATI, OH 45263	NONE	Y	GENERAL OPERATING FUNDS	1,000
Total ▶ 3a				444,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, 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>				
WVXUPO BOX 634916 CINCINNATI, OH 45263	NONE	Y	GENERAL OPERATING FUNDS	1,000
YWCA898 WALNUT STREET CINCINNATI, OH 45202	NONE	Y	GENERAL OPERATING FUNDS	1,000
BOYS GIRLS CLUB OF GTR CINTI 600 DALTON AVE CINCINNATI, OH 45203	NONE	Y	GENERAL OPERATING FUNDS	2,000
Total ▶ 3a				444,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, 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>				
TAFT MUSEUM OF ART316 PIKE STREET CINCINNATI, OH 45202	NONE	Y	GENERAL OPERATING FUNDS	5,000
CHATFIELD COLLEGE 20918 STATE ROUTE 251 ST MARTIN, OH 45118	NONE	Y	GENERAL OPERATING FUNDS	95,000
CATHOLIC INNER-CITY SCHOOLS 100 E 8TH STREET CINCINNATI, OH 45202	NONE	Y	GENERAL OPERATING FUND	4,000
Total ▶ 3a				444,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, 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>				
ARTWORKS20 E CENTRAL PARKWAY CINCINNATI, OH 45202	NONE	Y	GENERAL OPERATING FUND	5,000
SITE SANTA FE1606 PASEO DE PERALTA SANTA FE, NM 87501	NONE	Y	GENERAL OPERATING FUNDS	5,000
UNIVERSITY OF CINCINNATI ART HISTOR PO BOX 210016 CINCINNATI, OH 45221	NONE	Y	GENERAL OPERATING FUNDS	5,000
Total  3a				444,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, 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>				
LADD INC3603 VICTORY PARKWAY CINCINNATI, OH 45229	NONE	Y	GENERAL OPERATIING FUNDS	5,000
HAZELDON DEVELOPMENT BC2 PO BOX 11 CENTER CITY, MN 55012	NONE	Y	GENERAL OPERATING FUNDS	2,500
CAMPING EDUCATIONAL FOUNDATION 230 NORTHLAND BLVD STE 206 CINCINNATI, OH 45246	NONE	Y	GENERAL OPERATING FUNDS	7,000
Total ▶ 3a				444,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, 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 CECLIA CHURCH 3105 MADISON ROAD CINCINNATI, OH 45209	NONE	Y	GENERAL OPERATING FUNDS	3,000
CINCINNATI ZOO3400 VINE STREET CINCINNATI, OH 45220	NONE	Y	GENERAL OPERATING FUNDS	17,000
THE ACCESS FUNDPO BOX 17010 BOULDER, CO 80308	NONE	Y	GENERAL OPERATING FUND	3,000
Total ▶ 3a				444,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, 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>				
LINDNER CENTER OF HOPE 4075 OLD WESTERN ROW ROAD MASON, OH 45040	NONE	Y	GENERAL OPERATING FUND	5,000
THE NATURE CONSERVATORY 201 MISSION STREET 4TH FLOOR SAN FRANCISCO, CA 94105	NONE	Y	GENERAL OPERATING FUND	15,000
THE SUN CLUBPO BOX 1982 KETCHUM, ID 83340	NONE	Y	GENERAL OPERATING FUND	5,000
Total ▶ 3a				444,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, 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				
ART INSTITUTE OF CHICAGO 111 S MICHIGAN AVE CHICAGO, IL 60603	NONE	Y	GENERAL OPERATING FUNDS	2,500
LES AMIS DE NOTRE DAME VICTORIES 659 PINE ST SAN FRANSISCO, CA 94108	NONE	Y	GENERAL OPERATING FUNDS	500
MUSEUM OF CONTEMPORARY ART 220 E CHICAGO AVE CHICAGO, IL 60611	NONE	Y	GENERAL OPERATING FUNDS	5,900
Total ▶ 3a				444,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, 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>				
NEURO ACUPUNCTURE INSTITUTE 2019 GALISTEO STREET SUITE C-1 SANTA FE, NM 87505	NONE	Y	GENERAL OPERATING FUNDS	25,000
LASOUPÉ4150 ROUND BOTTOM RD CINCINNATI, OH 45244	NONE	Y	GENERAL FUNDS	10,000
AIDSLIFE CYCLE 1625 N SCHRADER BOULEVARD LOS ANGELOS, CA 90028	NONE	Y	GENERAL FUNDS	500
Total ▶ 3a				444,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, 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>				
ANIMAL SHELTER OF WOOD RIVER VALLEY PO BOX 1496 HAILEY, ID 83333	NONE	Y	GENERAL FUNDS	1,000
BEECHWOOD HOME2140 POGUE AVE CINCINNATI, OH 45208	NONE	Y	GENERAL OPERATING FUNDS	3,000
CHRIST IN DESERT MONASTERY PO BOX 270 ABIQUIU, NM 87510	NONE	Y	GENERAL OPERATING FUNDS	500
Total ▶ 3a				444,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, 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>				
KEY WEST LITERARY SEMINAR 717 LOVE ST KEY WEST, FL 33040	NONE	Y	GENERAL OPERATIING FUNDS	10,000
MUSIC HALL 1203 WALNUT ST 4TH FLOOR CINCINNATI, OH 45202	NONE	Y	GENERAL OPERATING FUNDS	5,000
CINCINNATI MEMORIAL HALL 1225 ELM STREET CINCINNATI, OH 45202	NONE	PC	GENERAL OPERATING FUNDS	2,000
Total ► 3a				444,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, 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>				
FIRST STEP HOME 2203 FULTON AVENUE CINCINNATI, OH 45206	NONE	PC	GENERAL OPERATING FUNDS	1,000
FOTO FOCUS212 E 14TH STREET CINCINNATI, OH 45202	NONE	PC	GENERAL OPERATING FUNDS	1,000
STUDIOS OF KEY WEST 533 EATON STREET KEY WEST, FL 33040	NONE	PC	GENERAL OPERATING FUNDS	500
Total ▶ 3a				444,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, 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>				
SOUTHERN POVERTY LAW CENTER 400 WASHINGTON AVE PO BOX 548 MONTGOMERY, AL 36177	NONE	PC	GENERAL OPERATING FUNDS	10,000
MADISONVILLE EDUCATION ASSISTANCE C 4600 ERIE AVENUE CINCINNATI, OH 45227	NONE	PC	GENERAL OPERATING FUNDS	1,000
OHIO HISTORY CONNECTION 800 E 17TH AVENUE COLUMBUS, OH 43211	NONE	PC	GENERAL OPERATING FUNDS	5,000
Total ▶ 3a				444,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, 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>				
XAVIER UNIVERSITY 3800 VICTORY PARKWAY CINCINNATI, OH 45207	NONE	PC	GENERAL OPERATING FUNDS	3,000
METRO SQUASH 6100 S COTTAGE GROVE AVENUE CHICAGO, IL 60637	NONE	PC	GENERAL OPERATING FUNDS	1,100
YMCA OF METRO CHICAGO 1030 W VAN BUREN ST CHICAGO, IL 60607	NONE	PC	GENERAL OPERATING FUNDS	1,000
Total ▶ 3a				444,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, 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>				
THE LYNN SAGE CANCER RESEARCH FOUND 541 NORTH FAIRBANKS CT SUITE 800 CHICAGO, IL 60611	NONE	PC	GENERAL OPERATING FUNDS	6,500
JOSEPH HOUSE1526 REPUBLIC STREET CINCINNATI, OH 45202	NONE	PC	GENERAL OPERATING FUNDS	2,000
THE STERN SCHOOL 838 KEARNEY STREET SAN FRANSISCO, CA 94108	NONE	PC	GENERAL OPERATING FUNDS	2,000
Total ▶ 3a				444,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, 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>				
FAMILY HOUSE 544 MISSION BAY BLVD NORTH SAN FRANSISCO, CA 94158	NONE	PC	GENERAL OPERATING FUNDS	1,000
THE GABBRO PROJECT 133 GOLDEN GATE AVENUE SAN FRANCISCO, CA 94102	NONE	PC	GENERAL OPERATING FUNDS	1,500
THE BASILICA OF ST MARY STAR OF THE 1010 WINDSOR LANE KEY WEST, FL 33040	NONE	PC	GENERAL OPERATING FUNDS	10,000
Total ▶ 3a				444,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, 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 PROTECTIVE SERVICE FAMIL 2400 READING ROAD SUITE 126 CINCINNATI, OH 45202	NONE	PC	GENERAL OPERATING FUNDS	1,000
Total ► 3a				444,500

TY 2018 Accounting Fees Schedule**Name:** VISTA FOUNDATION**EIN:** 31-1347794**Software ID:** 18007218**Software Version:** 2018v3.1

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PROFESSIONAL FEES	2,800	2,800	0	0

TY 2018 Explanation of Non-Filing with Attorney General Statement**Name:** VISTA FOUNDATION**EIN:** 31-1347794**Software ID:** 18007218**Software Version:** 2018v3.1**Statement:**

THE OHIO ATTORNEY GENERAL REQUIRES THAT PRIVATE FOUNDATIONS REGISTER ONLINE AND DOES NOT ACCEPT COPIES OF THE FEDERAL FORM 990-PF.

TY 2018 Investments Corporate Stock Schedule

Name: VISTA FOUNDATION

EIN: 31-1347794

Software ID: 18007218

Software Version: 2018v3.1

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
7500 AT&T	251,475	214,050
6800 ENSCO PLC CL A	326,944	24,208
6666 APOLLO INVESTMENT CORP	149,123	82,658
750 HCP INC	25,141	20,948
600 MAGNA INT'L INC	28,230	27,270
2000 TRINITY INDUS INC	47,795	41,180
2500 THE TRAVELERS CO.	254,450	299,375
150 QUALITY CARE PROPERTIES INC		
50000 NAGACORP LTD.	26,510	53,125
1000 PUBLIC STORAGE	229,010	202,410
500 CROWN CASLTE INTL CORP	107,052	108,630
1000 HONEYWELL INTL INC	149,425	132,120
1000 JP MORGAN CHASE & CO	106,512	97,620
650 APPLE INC	96,467	102,531
666 ARCOSA INC	19,246	18,442
9148 GABELLI DIVIDEND & INCOME	196,565	167,408
100 GARRET MOTION INC	1,676	1,234
166 RESIDEO TECHNOLOGIES INC	4,473	3,411

TY 2018 Investments - Other Schedule

Name: VISTA FOUNDATION

EIN: 31-1347794

Software ID: 18007218

Software Version: 2018v3.1

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
HARBOR CAPITAL APPRECIATION FD	FMV	113,857	247,840
VANGUARD TOTAL STOCK MKT IND FD SIG. SHS	FMV	639,420	1,448,498
VANGUARD TOTAL STOCK MARKET ETF	FMV	639,906	1,157,349
OAK HILLS CAPITAL PARTNERS IV, LP	FMV	386,697	386,697
500 ISHARES CORE S&P ETF	FMV	110,582	125,805
1300 ISHARES TR CORE RUSSELL US GROW ETF	FMV	54,930	68,510
20000 ISHARES TR CORE DIV GROWTH ETF	FMV	541,410	663,600
3000 SPDR TR S&P 500 ETF	FMV	628,510	749,760
LDR PREFERRED INCOME FUND, LLC	FMV	436,830	436,830
24300 SSGA ACTIVE ETF TRUST BLACKSTONE	FMV		
FORT TRINIDAD INVESTORS, LLC	FMV	905,690	905,690
BLACKSTONEGROUP LP	FMV	225,330	225,330
5000 SCHWAB US DIVIDEND EQ ETF	FMV	237,938	234,850
1500 SELECT SECTOR SPDR TRUST	FMV	102,796	92,970
7647 SPDR SERIES TRUST BLOOMBERG	FMV	699,992	699,395

TY 2018 Other Expenses Schedule**Name:** VISTA FOUNDATION**EIN:** 31-1347794**Software ID:** 18007218**Software Version:** 2018v3.1**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ATTORNEY GENERAL FEE	200	200		
BANK FEES	25	25		
BLACKSTONE GROUP LP	470	470		
FOREIGN TAXES PAID	119	119		
INVESTMENT FEES	10,792	10,792		
LDR PREFERRED INCOME FUND, LLC	5,860	5,860		
OAK HILLS CAPITAL PARTNERS IV, LP	14,534	14,534		

TY 2018 Other Income Schedule**Name:** VISTA FOUNDATION**EIN:** 31-1347794**Software ID:** 18007218**Software Version:** 2018v3.1**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
BLACKSTONE GROUP, LP	2,777		
DEFERRED INCOME PAYMENT	1,400		
FORT TRINIDAD INVEST LLC	-185,648		
OAK HILL CAPITAL PART LP	-94		

**TY 2018 Substantial Contributors
Schedule****Name:** VISTA FOUNDATION**EIN:** 31-1347794**Software ID:** 18007218**Software Version:** 2018v3.1**Name****Address**

CHARLES L HEEKIN CLAT II

PNC BANK 620 LIBERTY STEET
PITTSBURGH, PA 15222

TY 2018 Taxes Schedule**Name:** VISTA FOUNDATION**EIN:** 31-1347794**Software ID:** 18007218**Software Version:** 2018v3.1

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAXES	11,155			

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 ▶ Go to <u>www.irs.gov/Form990</u> for the latest information	OMB No 1545-0047
		2018
Name of the organization VISTA FOUNDATION		Employer identification number 31-1347794

Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	☐ 501(c)() (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	☐ 527 political organization
Form 990-PF	☒ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or 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 VISTA FOUNDATION	Employer identification number 31-1347794
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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	CHARLES L HEEKIN CLAT II PNC BANK 620 LIBERTY AVE PITTSBURGH, PA 15222	 \$ 613,999	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-	 	 \$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-	 	 \$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-	 	 \$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-	 	 \$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-	 	 \$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-	 	 \$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-	 	 \$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)

Employer identification number

31-1347794

Part II	Noncash Property
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Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization VISTA FOUNDATION	Employer identification number 31-1347794
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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
(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
(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
(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