Form **990-PF** Department of the Treasury Internal Revenue Service

Return of Private Foundation

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

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

JOSEPH & HELEN SKILKEN FOUN Number and street (or P O box number if mail is not delivered to street ac		Room/suite	31-6050827 B Telephone number	
P.O. BOX 1148			(614)221-4	547
City or town, state or province, country, and ZIP or foreign po COLUMBUS, OH 43216-1148	stal code		C If exemption application is pe	ending, check here
G Check all that apply: Initial return	Initial return of a fo	rmer public charity	D 1 Foreign organizations	, check here
Final return	Amended return		2 Eccoup. or constrains may	ation the 8594 test
Address change	Name change		Foreign organizations med check here and attach core	mputation
H Check type of organization: Section 501(c)(3) execution 4947(a)(1) nonexempt charitable trust X	empt private foundation	,,,, (V)	E If private foundation state under section 507(b)(1)	
Fair market value of all assets at end of year J Accounting		Accrual	F If the foundation is in a	
· l —	ner (specify)		under section 507(b)(1)	
▶\$ 3,059,280. (Part I, colum	n (d) must be on cash basis	5)		· · ·
Part Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (e))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received	9 7 2 7 7 7		`	· · · · · · · · · · · · · · · · · · ·
2 Check ► X if the foundation is not required to attach Sch. B Interest on savings and temporary	536.	536.	536.	STATEMENT
3 cash investments 4 Dividends and interest from securities	330.	330.	330.	DIAIDRENT .
5a Gross rents	511,893.	511,893.	511,893.	STATEMENT
b Net rental income or (loss) 511,893.				
6a Net gain or (loss) from sale of assets not on line 10 . Gross sales price for all			ļ	
D assets on line 6a		0.	<u>-</u>	<u></u>
7 Capital gain net income (from Pert IV, line 2) 8 Net short-term capital gain		0.	 	
9 Income modifications	,	· · · · · · · · · · · · · · · · · · ·		- ,
Gross sales less returns and allowances		· · · · · · · · · · · · · · · · · · ·	1	, , , ,
b Less Cost of goods sold	* * * * * *			, ',
c Gross profit or (loss)		 	ļ	<u></u>
11 Other income 12 Total. Add lines 1 through 11	512,429.	512,429.	512,429.	
13 Compensation of officers, directors, trustees, etc	0.	0.		(
14 Other employee salaries and wages	45,236.	45,236.		(
15 Pension plans, employee benefits	17,696.	17,696.	17,696.	
b Accounting fees STMT 3	4 750	2 275	2 275	2 27
	4,750. 46,970.	2,375. 46,970.		2,37
c Other professional fees STMT 4	=0,910.	±0,510	20,570.	
18 Taxes STMT 5	80,567.	76,557	76,557.	200
and General San General Control Contro	27,877.	27,877.	27,877.	·
E 20 Occupancy			 	
전 21 전 avel, qonterenges can (한 연호 fings 이			 	
22 Printing and publications CC 97 Other expenses STMT 6	154,628.	154,618.	154,618.	
22 Pointing and publications Cottler-expenses Total one atting and administrative expenses. Add lines 13 through 23 Contributions of the grants paid	101,020.	101/010	102,010.	1
expenses. Add lines 13 through 23	377,724.	371,329	371,329.	2,57
25 Contributions, gifts, grants paid	129,250.		†	129,25
26 Total expenses and disbursements.	E0C 074	271 200	271 220	121 02
Add lines 24 and 25 27 Subtract line 26 from line 12:	506,974.	371,329	371,329.	131,82
3 Excess of revenue over expenses and disbursements	5,455.		 	
Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)		141,100		- <u>:</u> .
c Adjusted net income (if negative, enter -0-)	,	,	141,100.	
E23501 12-11-18 LHA For Paperwork Reduction Act Notice 40509 149058 SKIL0827COL1	e, see instructions			Form 990-PF (2)

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Form 990-PF (2018)

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Pai	t VI Excise Tax Based on Investment Income (Section 4940	(a), 49	940(b), 4940(e), or 49	948 -	see ins	truction	ons)	_
·1a	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and ei	nter "N/A	N" on line 1.)	3.57	F m. # 4-12	toolige	, 1 5 r]
	Date of ruling or determination letter: (attach copy of letter if nec				3	1.	3	ر آن آن الم	Ì
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	_		}	1		2,	822.	•
	of Part I, line 27b				7,47.74 (\$ 15)	想到	(2) 18 4 (m)	والموادية والموادية	}
	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4%	of Part	l, line 12, col. (b).	J,	()		186		
_	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, of			•	2			0.	
	Add lines 1 and 2		,	'	3		2.	822.	-
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; of	hers en	ter -0-1		4			0.	-
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	,			5		2	822.	-
	Credits/Payments:				774	و المرسية تبهيوا	<u>*************************************</u>	21.2	7
	2018 estimated tax payments and 2017 overpayment credited to 2018	6a		0.	4. 7	W. T. E.	10 m	المجاورة الأوارية المجاورة الأوارية	
	Exempt foreign organizations - tax withheld at source	6b		0.	32		Crace.	، وَ ذِنْ الْآلِيَةِ فِي	
	Tax paid with application for extension of time to file (Form 8868)	6c		0.		,			1
	Backup withholding erroneously withheld	6d		0.	· ·		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		,
	Total credits and payments. Add lines 6a through 6d	<u> </u>	L	<u> </u>	7		- 1234	0.	J
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	chad			8			$\frac{0}{0}$	-
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	CHEU		_	9			822.	-
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				10			022.	-
	Enter the amount of line 10 to be: Credited to 2019 estimated tax		l not	unded 🕨	11				-
	t VII-A: Statements Regarding Activities		I ucii	anueu –		<u> </u>			-
	During the tax year, did the foundation attempt to influence any national, state, or local legis	lation or	did it partionate o	r intoniono	ın.	 -1	(74. Y	es No	-
ıa		ומנוטוו טו	oid it participate o	i ilitei velie	111	F	•	X	-
	any political campaign?	0002 Cod	the instructions for	ar tha datum	.t.oo	ŀ	1a	$\frac{1}{X}$	-
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purpos				ווטוו	<u> </u>	1b		1
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of	JI ally III	ateriais publisheu i	JI		ŀ			
	distributed by the foundation in connection with the activities.					ŀ	21.5	X	J
	Did the foundation file Form 1120-POL for this year?					<u> </u>	1c		٦
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	-		0.		į.	<u> </u>		ļ
	(1) On the foundation. > \$ 0 (2) On foundation managers				-				İ
е	Enter the reimbursement (if any) paid by the foundation during the year for political expending managers. \blacktriangleright \$ 0 •	ilui e lax	imposeu on round	ation		ľ		الرائدة المساح	
	· · · · · · · · · · · · · · · · · · ·	202				}	2	X	ك
2	Has the foundation engaged in any activities that have not previously been reported to the IF	10'				}			7
	If "Yes," attach a detailed description of the activities				_	ľ	第二次 第二次 第二次		<u>'</u>
3	Has the foundation made any changes, not previously reported to the IRS, in its governing i	nstrume	articles of incor	poration, o	ı	ł		X	נ
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	-0				ŀ	3	$\frac{\Lambda}{X}$	-
	Did the foundation have unrelated business gross income of \$1,000 or more during the year	11			N	/A	4a	- ^-	-
	If "Yes," has it filed a tax return on Form 990-T for this year?	,		,	14	'^ <u>^</u> }	4b	X	-
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?					ŀ	5	- ^-	٦
_	If "Yes," attach the statement required by General Instruction T	thar-				ļ			-1
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied et	uler.				ĺ			-
	By language in the governing instrument, or By language in the governing instrument, or	المراجعة المراجعة	ana that and the	4h 4h	. Ia	l			1
	By state legislation that effectively amends the governing instrument so that no mandator	y airecti	ons that conflict w	ith the State	alaw	ŀ	35-3 4	7 () (****) ****************************	1
_	remain in the governing instrument?					}		X	-
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," comp	piete Par	t II, coi (c), and Pa	n xv		}	7	X 1 - 325.	π.
_							数法拉		:
8a	Enter the states to which the foundation reports or with which it is registered. See instruction	ons. P				}			1
	OH					<u> </u>		950 B2.00 A2 F20.00	.
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	ttorney	General (or designa	ate)			大學集 医		1
	of each state as required by General Instruction G? If "No," attach explanation					ļ		X	7 /
9	Is the foundation claiming status as a private operating foundation within the meaning of se		*** ***	(5) for cale	ndar	ļ		2: 2	الم ل
	year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," com-					1	9	X	_ V\
_10	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedu	ule listing	their names and addre	sses			10	X	-
						Enri	m 440-	PF (2018	ıN.

orm 990-PF (2018) JOSEPH & HELEN SKILKEN FC			31-60508	27 Page 6
Part VII-B: Statements Regarding Activities for Which Fo	orm 4720 May Be Re	equired (continu	ıed) ,	
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	4945(e))?	Ye	s 🗶 No 🛚 🚉	
(2) Influence the outcome of any specific public election (see section 4955); or	to carry on, directly or indirec	• • • • • • • • • • • • • • • • • • • •		
any voter registration drive?	•	Ye	s 🔀 No 🚉	
(3) Provide a grant to an individual for travel, study, or other similar purposes?)	☐ Ye	s 🗓 No 🖺	经国际
(4) Provide a grant to an organization other than a charitable, etc., organization	described in section		- P	
4945(d)(4)(A)? See instructions		☐ Ye	s 🛣 No 🗒	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fo		\\ \frac{\fin}}}{\fint}}}}}}}{\frac{\f{\frac{\frac{\frac{\f{	
the prevention of cruelty to children or animals?		Ye	s 🗶 No 📓	[2] [2] [2]
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	ler the exceptions described in	n Regulations		源 宝宝
section 53.4945 or in a current notice regarding disaster assistance? See instru	ctions		N/A	5b
Organizations relying on a current notice regarding disaster assistance, check h			▶ □ 5	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it maintair	ned	T.	
expenditure responsibility for the grant?	N	/A 🛄 Ye	s 🔲 No 🕏	
If "Yes," attach the statement required by Regulations section 53 4945-5(d).				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to g	oav premiums on		1	
a personal benefit contract?	, , , , , , , , , , , , , , , , , , ,	Ye	s 🗓 No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b X
If "Yes" to 6b, file Form 8870.	or obtained out and		2-5	क्षा कर्म राज्य
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	[Ye	s X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu			/-	7b
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$		•	77,	7-1-7 284 825
excess parachute payment(s) during the year?	1,000,000 in remaineration of	□ v _e	s X No	
Part VIII : Information About Officers, Directors, Truste	es Foundation Man		3 22 110 **	To Establish
Paid Employees, and Contractors	oo, i oanaanon man			
List all officers, directors, trustees, and foundation managers and the	eir compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	hòurs per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
STEPHEN A. SKILKEN	DIRECTOR	cinci o j	compensation	anovanos.
383 S. THIRD ST.				
COLUMBUS, OH 43215	0.00	0.	0.	0.
	DIRECTOR	<u>·</u>		· ·
383 S. THIRD ST.	DIRECTOR			
COLUMBUS, OH 43215	0.00	0.	0.	0.
CODOFIDOS, OII 43213	0.00		- 0.	
		<u> </u>	<u> </u>	
		1		
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none. (enter "NONE."	L	<u> </u>
	(b) Title, and average		(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	account, other
NONE	devoted to position		compensation	allowances
NONE		İ	ľ	{
		 		
	1			
		 `		
	-	1		l
		 -		
	1.	1	1	
		ļ		
			Ì	
	L	L		
Total number of other employees paid over \$50,000				0
			Enrm	990-PF (2018)

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "I	MONE "	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	(b) Type of service	(c) compensation
7011	†	ļ
	 	
	_	
	1	
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 statistic number of organizations and other beneficiaries served, conferences convened, research papers produc	al information such as the ed, etc	Expenses
1 N/A		
2		
3		
<u> </u>		
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 lin	nes 1 and 2	Amount
1 N/A	100 T 4110 E.	741102111
2		
All other program-related investments. See instructions.		
3	ł	
~ <u></u>		
Table Addison 4 through 0		0.
Total. Add lines 1 through 3	<u></u>	Form 990-PF (2018)
		101111 000 11 (2010)

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JOSEPH & HELEN SKILKEN FOUNDATION

Fatr Wills Older indeed inco	(see instructions)	<u>, - , </u>	·	<u> </u>
	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part line 7	XI,			146,963.
2 Undistributed income, if any, as of the end of 20	18			
a Enter amount for 2017 only		在基本的基本的基本的	129,110.	
b Total for prior years:				建筑。至少位置
		0.	SANDARIA TALENTARIA	
3 Excess distributions carryover, if any, to	2018:			
a From 2013				
b From 2014				
c From 2015				
d From 2016				
e From 2017	多种的基本的特殊的	A CONTRACTOR OF THE WAY	The same of the sa	The state of the s
f Total of lines 3a through e	0.	A CONTRACTOR OF THE STATE OF TH	PARTY OF THE PARTY	
4 Qualifying distributions for 2018 from				
Part XII, line 4; ► \$ 131, 8	2000年的中国中国中国中国中国中国中国中国中国中国中国中国中国中国中国中国中国中国中国		100 110	
a Applied to 2017, but not more than line	4 15 12 5 14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	建 品的是一种工具的	129,110.	ALTER STATES
b Applied to undistributed income of prior	The state of the s			
years (Election required - see instruction	is) <u>ANDERSON</u>	0.	是主要是不是12.30mm。 12.40mm。	Haran Baran Ba
c Treated as distributions out of corpus				
(Election required - see instructions)	U.	一位工作的特别的《新国工作》 1000年100日表示1000年1000年1000年1000年1000年1000年1000年100	では、水晶では青海州(株子)を前に 一つである。マジュナロ・データーで	2 715
d Applied to 2018 distributable amount	THE PROPERTY OF THE CONTRACT O		SALE ALL SALES OF THE SALES OF	
e Remaining amount distributed out of co	rpus $\frac{0}{0}$.	(2) (2) (2) (2) (3) (3) (3) (3) (3) (3) (3) (3) (3) (3	A CARLO DE MANAGEMENTO	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same a		Charles of the second of the s	THE RESERVE THE PARTY OF THE PA	
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	and the first open to the published and the published in the published and the publi	Provide the Control of the Control o	KETTER THE THE THE	
b Prior years' undistributed income. Subti line 4b from line 2b	du la la la la la la la la la la la la la	0.		
c Enter the amount of prior years'	A CAMPAGE STATES			
undistributed income for which a notice deficiency has been issued, or on which the section 4942(a) tax has been previo		. 0.		
assessed	在1995年1999年1995年1995年1995年1995年1995年1995	2	新疆·西西西西西西西西西西西西西西西西西西西西西西西西西西西西西西西西西西西西	學是因為中國內容的學術學
d Subtract line 6c from line 6b Taxable		0.		医连续型产生
amount - see instructions e Undistributed income for 2017. Subtrac	the Manager And And And And And And And And And And		The same of the sa	STATE OF THE STATE
4a from line 2a. Taxable amount - see if	(2) は、これには、は、は、これには、これには、これには、これには、これには、これには		0.	
f Undistributed income for 2018. Subtrac	The second of the literal and the second of the			THE RESERVE OF THE PROPERTY AND ADMINISTRAL
lines 4d and 5 from line 1. This amount	。 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1			-
be distributed in 2019				144,248.
7 Amounts treated as distributions out of	Court printed by S. demand on the one of the St. Martin.	Winds Hard The San Print	TOTAL TO MANAGEMENT OF THE	CONTROL RESPONSABLE
corpus to satisfy requirements imposed	•			
section 170(b)(1)(F) or 4942(g)(3) (Ele	-			
rhay be required 'sce instructions)	0.			A Section of the Part of the Section
8 Excess distributions carryover from 20		The state of the s	· 中心是一个人,	STATES WELL TO CONTROL
not applied on line 5 or line 7	0.		建一种的种种的	WEST CONTROL OF THE
9 Excess distributions carryover to 2019				
Subtract lines 7 and 8 from line 6a	0.			WESS TO SERVICE THE
10 Analysis of line 9:				
a Excess from 2014				
b Excess from 2015				
c Excess from 2016				
d Excess from 2017		一种一种一种一种一种一种一种一种一种一种一种一种一种一种一种一种一种一种一种		
e Excess from 2018				
O EVOCOO HOUSE TO LO	To Charle and An appropriate and Louise	All the least may by the agreed many to a supply	and it is not to the second of	The second of th

Form 990-PF (2018) JOSEPH	& HELEN SKII	LKEN FOUNDAT	ION		050827 Page 10
Part XIV: Private Operating Fo	oundations (see ins	tructions and Part VII-	A, question 9)	N/A	
.1 a If the foundation has received a ruling or			ì		
foundation, and the ruling is effective for	2018, enter the date of the	ne ruling	▶ ∟		
b Check box to indicate whether the found	ation is a private operatin	g foundation described in	section	4942(j)(3) or4	1942(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					
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					1
exempt activities					
e Qualifying distributions made directly					
• •		\ <u>`</u> .			
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:	ļ				
(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	<u> </u>				
an exempt organization					
(4) Gross investment income				 	\
Part:XV Supplementary Info	rmation (Complet	e this part only i	the foundation	had \$5.000 or me	ore in assets
at any time during t					
1 Information Regarding Foundatio		•			
a List any managers of the foundation wh	-	than 20% of the total contr	hutions received by the	foundation before the cli	nea of any tay
year (but only if they have contributed in			ibutions received by the	Touridation before the Ch	use of arry tax
SEE STATEMENT 8	, , , , , , , , , , , , , , , , , , ,				
b List any managers of the foundation wh	no own 10% or more of the	e stock of a pornoration /	or an equally large portion	on of the ownership of a	nartnership or
other entity) of which the foundation ha			or an equally large portion	on or the ownership or a	partifership of
NONE					
		Ochoborski oto Do			
2 Information Regarding Contribution					
Check here if the foundation of the foundation makes gifts, grants, etc.,	only makes contributions to				quests for funds. If
	<u>-</u>				
a The name, address, and telephone num		e person to whom applic	ations should be address	sed:	
TRUSTEES, (614) 221-					
383 SOUTH THIRD STRE					
b The form in which applications should b	e submitted and informat	ion and materials they sh	ould include;		
c Any submission deadlines;					
N/A					
d Any restrictions or limitations on award	s, such as by geographica	al areas, charitable fields,	kinds of institutions, or e	other factors;	
N/A					
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Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid During the Ye	ar or Approved for Future P	ayment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	CONBIDURON	
Paid during the year	1			
	1			
MISCELLANEOUS: SEE STATEMENT #9				
			1	129,250.
)			
•	ļ			
]			
•				
				
	,			
			 	 -
Total			<u></u> 3a	129,250.
b Approved for future payment	T	<u> </u>		
- Approved for lattice payment				
NONE				
1				
		}		
		ļ		
	 	 	 	
]	
	-	[
	<u> </u>	L	(
Total			▶ 3b	0.
			F	orm 990-PF (2018

Page 12

Inter gross amounts unless otherwise indicated	Unrelate	d business income		ded by section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code		code	Amount	Tanodon moonic
a			-		<u> </u>
ь					
C	_	<u></u> .			
d	_		-		
e	_				
f	_	<u>,</u>			
g Fees and contracts from government agencies					
2 Membership dues and assessments					
Interest on savings and temporary cash	iii		1		
investments			14	536.	
Dividends and interest from securities					
Net rental income or (loss) from real estate:		g are the garden and the	1 3	13. 13. 13 mg 17 mg	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
a Debt-financed property	•				
b Not debt-financed property			16	511,893.	
6 Net rental income or (loss) from personal			†		
property			1		
7 Other investment income					
B Gain or (loss) from sales of assets other			+		
than inventory					Í
9 Net income or (loss) from special events					
D Gross profit or (loss) from sales of inventory	 	·- -	<u> </u>		
	 	<u> </u>	+	<u> </u>	
1 Other revenue:			ļ		}
a	1			L	
b			<u> </u>		
b			ļ		
b					
b b d				F12 420	
b c d e 2 Subtotal. Add columns (b), (d), and (e)		0	•	512,429.	540 400
b c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e)	a to the second	0	• 25	·	
b c d e 2 Subtotal. Add columns (b), (d), and (e)	a to the second	0	• •	·	540 400
b c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations				13_	540 400
b c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B, Relationship of Activitie	s to the Acco	mplishment of E	xempt	13_ Purposes	512,429
b c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B, Relationship of Activitie Line No. Explain below how each activity for which	s to the Acco	mplishment of E	xempt	13_ Purposes	512,429
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in se		on 501(c)(3)) or in section 527	one or more tax-exempt organiz		. Yes X No
	(a) Name of org		(b) Type of organization	(c) Description of i	relationship
	N/A	<u> </u>			<u>'</u>
					
					,
				tements, and to the best of my knowledge	May the IRS discuss this
Sign	and belief, it is true, correct, and con		than taxpayer) is based on all informat	non of which preparer has any knowledge,	return with the preparer

DELOITTE TAX, LLP 86-1065772 180 EAST BROAD STREET COLUMBUS, OHIO 43215-3611 614-221-1000

Firm's name ► DELOITTE TAX LLP

Firm's address ▶ 180 EAST BROAD STREET

COLUMBUS, OH 43215

823622 12-11-18

Here

Paid

Preparer

Use Only

Prepared's signature

Signature of officer or trustee

Print/Type preparer's name

CHARLES S. BASICH

Check f

self- employed

DIRECTOR

X Yes

P00183617

(614) 221-1000

Form 990-PF (2018)

PTIN

Firm's EIN ▶ 86-1065772

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY CASH	INVESTMENTS	STATEMENT 1
SOURCE	(A) REVEI PER BO	NUE NET	(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME
PRUDENTIAL MONEY MARKET		536.	536.	536.
TOTAL TO PART I, LINE 3		536.	536.	7 536.
FORM 990-PF	RENTAL INC	COME		STATEMENT 2
KIND AND LOCATION OF PROPERTY			ACTIVITY NUMBER	GROSS RENTAL INCOME
APARTMENT RENTAL' WASHER & DRYER INCOME LATE FEES FORFEITED SECURITY DEPOSITS APPLICATION FEES COLLECTIONS OTHER INCOME TOTAL TO FORM 990-PF, PART I,	LINE 5A		1 2 3 4 6 7 8	498,774 5,540 1,120 3,234 1,440 1,145 640
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT 3
DESCRIPTION	(A) . EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
ACCOUNTING FEES	4,750.	2,375	2,37	2,375
TO FORM 990-PF, PG 1, LN 16B	4,750.	2,375	2,37	2,375.
FORM 990-PF C	THER PROFES	SIONAL FEES		STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
MANAGEMENT FEES	46,970.	46,970	46,97	70. 0.
TO FORM 990-PF, PG 1, LN 16C	46,970.	46,970	46,97	70. 0
				

STATEMENT(S) 1, 2, 3, 4

0.

0.

0.

0.

0.

FORM 990-PF	TAX	ES		STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
PAYROLL TAXES REAL ESTATE TAXES OHIO REGISTRATION FEE FEDERAL INCOME TAXES	4,874. 71,683. 200. 3,810.	71,683. 0.	4,874. 71,683. 0.	0. 0. 200. 0.		
TO FORM 990-PF, PG 1, LN 18	80,567.	76,557.	76,557.	200.		
FORM 990-PF	OTHER EXPENSES		STATEMENT 6			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
MISCELLANEOUS EXPENSES ADVERTISING INSURANCE UTILITIES	442. 1,816. 10,067. 31,378.	1,816. 10,067.	442. 1,816. 10,067. 31,378.	0. 0. 0.		

110,177.

154,628.

103.

629.

16.

110,175.

154,618.

103.

629.

8.

110,175.

154,618.

103.

629.

8.

FORM 990-PF (CORPORATE BONDS		STATEMENT 7
DESCRIPTION	BOO	K VALUE	FAIR MARKET VALUE
ISRAEL BONDS		3,000.	3,000.
TOTAL TO FORM 990-PF, PART II, L	INE 10C	3,000.	3,000.

REPAIRS & MAINTENANCE

DUES & SUBSCRIPTIONS

TO FORM 990-PF, PG 1, LN 23

OFFICE SUPPLIES

MEALS

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT 8

NAME OF MANAGER

STEPHEN A. SKILKEN LYNNE E. SKILKEN