

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](http://www.irs.gov/Form990PF) for instructions and the latest information.

2018

Open to Public  
Inspection

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

Name of foundation Doris & Floyd Kimble Foundation		A Employer identification number 34-1622273
Number and street (or P O box number if mail is not delivered to street address) PO Box 67		Room/suite
City or town, state or province, country, and ZIP or foreign postal code Dover, OH 44622		
<b>G</b> Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		
<b>H</b> Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>D</b> 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> <b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> <b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ►\$ 47,150,764	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ <i>(Part I, column (d) must be on cash basis)</i>	

<b>Part I Analysis of Revenue and Expenses</b> <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		(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 (attach schedule)					
2 Check ► <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B					
3 Interest on savings and temporary cash investments		143,364	143,364		
4 Dividends and interest from securities		433,537	433,537		
5a Gross rents					
b Net rental income or (loss)					
6a Net gain or (loss) from sale of assets not on line 10		719,989			
b Gross sales price for all assets on line 6a	7,277,915				
7 Capital gain net income (from Part IV, line 2)			719,989		
8 Net short-term capital gain					
9 Income modifications					
10a Gross sales less returns and allowances					
b Less Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)		673,991	673,991		
12 <b>Total.</b> Add lines 1 through 11		1,970,881	1,970,881		
13 Compensation of officers, directors, trustees, etc		0	0		0
14 Other employee salaries and wages					
15 Pension plans, employee benefits					
16a Legal fees (attach schedule)					
b Accounting fees (attach schedule)		11,135	5,568		5,568
c Other professional fees (attach schedule)		225,979	225,979		0
17 Interest		304	0		0
18 Taxes (attach schedule) (see instructions)		30,200	0		200
19 Depreciation (attach schedule) and depletion					
20 Occupancy					
21 Travel, conferences, and meetings					
22 Printing and publications					
23 Other expenses (attach schedule)		17,466	4,567		12,901
<b>24 Total operating and administrative expenses.</b>					
Add lines 13 through 23		285,084	236,114		18,669
25 Contributions, gifts, grants paid		1,748,086			1,748,086
<b>26 Total expenses and disbursements.</b> Add lines 24 and 25		2,033,170	236,114		1,766,755
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements		-62,289			
b Net investment income (if negative, enter -0-)			1,734,767		
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	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
	1 Cash—non-interest-bearing		734,814	799,322	799,322
	2 Savings and temporary cash investments		1,060,792	1,848,407	1,848,407
	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)		13,400,036	13,358,528	17,000,447
	c Investments—corporate bonds (attach schedule)		5,527,921	6,145,442	6,011,832
	11 Investments—land, buildings, and equipment basis ►				
	Less accumulated depreciation (attach schedule) ►				
	12 Investments—mortgage loans				
	13 Investments—other (attach schedule)		9,233,420	7,740,995	10,050,965
	14 Land, buildings, and equipment basis ►	14,307,701			
	Less accumulated depreciation (attach schedule) ►	2,867,910			
	15 Other assets (describe ►)				
	16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)		41,396,774	41,332,485	47,150,764
	17 Accounts payable and accrued expenses				-2,000
	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		-2,000
	<b>Foundations that follow SFAS 117, check here ► <input type="checkbox"/></b> <b>and complete lines 24 through 26 and lines 30 and 31.</b>				
	24 Unrestricted				
	25 Temporarily restricted				
	26 Permanently restricted				
	<b>Foundations that do not follow SFAS 117, check here ► <input checked="" type="checkbox"/></b> <b>and complete lines 27 through 31.</b>				
	27 Capital stock, trust principal, or current funds		0	0	
	28 Paid-in or capital surplus, or land, bldg , and equipment fund		0	0	
	29 Retained earnings, accumulated income, endowment, or other funds		41,396,774	41,334,485	
	30 Total net assets or fund balances (see instructions)		41,396,774	41,334,485	
	31 Total liabilities and net assets/fund balances (see instructions)		41,396,774	41,332,485	

**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	41,396,774
2	Enter amount from Part I, line 27a	2	-62,289
3	Other increases not included in line 2 (itemize) ►	3	0
4	Add lines 1, 2, and 3	4	41,334,485
5	Decreases not included in line 2 (itemize) ►	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	41,334,485

**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.)
<b>1 a</b> Atlantic Trust Short Term				
<b>b</b> Atlantic Trust Long Term				
<b>c</b> Atlantic Trust Long Term				
<b>d</b> Atlantic Trust Other				
<b>e</b> Atlantic Trust Capital Gain Distributions				
(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)	
<b>a</b> 422,164		457,563	-35,399	
<b>b</b> 5,823,972		5,699,807	124,165	
<b>c</b> 871,230		400,556	470,674	
<b>d</b> 3,872			3,872	
<b>e</b> 156,677			156,677	
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		
<b>a</b>			-35,399	
<b>b</b>			124,165	
<b>c</b>			470,674	
<b>d</b>			3,872	
<b>e</b>			156,677	
<b>2</b> 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	<b>2</b>	719,989
<b>3</b> 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	<b>3</b>	

**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	1,925,136	38,111,530	0 050513
2016	2,037,914	35,830,290	0 056877
2015	1,587,449	37,943,241	0 041837
2014	1,694,454	38,401,714	0 044124
2013	1,513,217	36,534,382	0 041419
<b>2</b> Total of line 1, column (d)			<b>2</b> 0 234770
<b>3</b> 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			<b>3</b> 0 046954
<b>4</b> Enter the net value of noncharitable-use assets for 2018 from Part X, line 5			<b>4</b> 38,275,743
<b>5</b> Multiply line 4 by line 3			<b>5</b> 1,797,199
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)			<b>6</b> 17,348
<b>7</b> Add lines 5 and 6			<b>7</b> 1,814,547
<b>8</b> Enter qualifying distributions from Part XII, line 4			<b>8</b> 1,766,755

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)**

1a	Exempt operating foundations described in section 4940(d)(2), check here ► <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)	1	34,695
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► <input type="checkbox"/> and enter 1% of Part I, line 27b		
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2	0
3	Add lines 1 and 2.	3	34,695
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4	0
5	<b>Tax based on investment income.</b> Subtract line 4 from line 3 If zero or less, enter -0-	5	34,695
6	Credits/Payments		
a	2018 estimated tax payments and 2017 overpayment credited to 2018	6a	95,763
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	0
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments Add lines 6a through 6d.	7	95,763
8	Enter any <b>penalty</b> for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached	8	0
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b>	9	
10	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b>	10	61,068
11	Enter the amount of line 10 to be <b>Credited to 2019 estimated tax</b> ►	11	0

**Part VII-A Statements Regarding Activities**

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	Yes	No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition).  <i>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</i>	1b		No
c	Did the foundation file <b>Form 1120-POL</b> 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 ► \$ _____ 0 (2) On foundation managers ► \$ _____ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$ _____ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?  <i>If "Yes," attach a detailed description of the activities</i>	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? <i>If "Yes," attach a conformed copy of the changes</i>	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	Yes	
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	4b	Yes	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?  <i>If "Yes," attach the statement required by General Instruction T</i>	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		No
7	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	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? <i>If "No," attach explanation</i>	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2018 or the taxable year beginning in 2018? See the instructions for Part XIV  <i>If "Yes," complete Part XIV</i>	9		No
10	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	10		No

**Part VII-A Statements Regarding Activities (continued)**

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions.	11	No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions.	12	No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ►N/A	13	Yes
14	The books are in care of ►Greg Kimble	Telephone no ►(330) 343-1226	
Located at ►4653 Old State Route 39 NW Dover OH			ZIP+4 ►44622
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —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? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ►	16	Yes No

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		
		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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days).	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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. Organizations relying on a current notice regarding disaster assistance check here.	► <input type="checkbox"/> 1b
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2018?	► <input type="checkbox"/> 1c No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))	
a	At the end of tax year 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 ► 20____, 20____, 20____, 20____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement—see instructions)	► <input type="checkbox"/> 2b
c	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
b	If "Yes," did it have excess business holdings in 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)	► <input type="checkbox"/> 3b
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	► <input type="checkbox"/> 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?	► <input type="checkbox"/> 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  <b>(1)</b> Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? <b>(2)</b> Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? <b>(3)</b> Provide a grant to an individual for travel, study, or other similar purposes? <b>(4)</b> Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions. <b>(5)</b> Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> 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. Organizations relying on a current notice regarding disaster assistance check here.	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
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?  <i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  <i>If "Yes" to 6b, file Form 8870</i>	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
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?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

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**

<b>(a) Name and address</b>	<b>(b) Title, and average hours per week devoted to position</b>	<b>(c) Compensation (If not paid, enter -0-)</b>	<b>(d) Contributions to employee benefit plans and deferred compensation</b>	<b>(e) Expense account, other allowances</b>
Doris Kimble 3596 SR 39 Dover, OH 44622	Trustee 8 00	0	0	0
Greg Kimble 3596 SR 39 Dover, OH 44622	Trustee 4 00	0	0	0
Phillip Raber 2045 Pleasant Hill Dr New Philadelphia, OH 44663	Trustee 4 00	0	0	0
Jo Mako 3596 SR 39 Dover, OH 44663	Trustee 4 00	0	0	0

**2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."**

<b>(a)</b> Name and address of each employee paid more than \$50,000	<b>(b)</b> Title, and average hours per week devoted to position	<b>(c)</b> Compensation	<b>(d)</b> Contributions to employee benefit plans and deferred compensation	<b>(e)</b> Expense account, other allowances
NONE				
<b>Total number of other employees paid over \$50,000</b>				

<b>Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)</b>		
<b>3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".</b>		
<b>(a) Name and address of each person paid more than \$50,000</b>	<b>(b) Type of service</b>	<b>(c) Compensation</b>
Atlantic Trust Company 100 Federal St 37th Floor Boston, MA 02110	Investment Fees	225,979
<b>Total number of others receiving over \$50,000 for professional services.</b>		0
<b>Part IX-A Summary of Direct Charitable Activities</b>		
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		<b>Expenses</b>
1	Support of local community organizations for the development of the community and the well being of the citizens	1,748,086
2		
3		
4		
<b>Part IX-B Summary of Program-Related Investments (see instructions)</b>		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		<b>Amount</b>
1		
2		
All other program-related investments See instructions		
3		
<b>Total. Add lines 1 through 3</b>		0

**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	38,249,447
b	Average of monthly cash balances. . . . .	1b	609,175
c	Fair market value of all other assets (see instructions). . . . .	1c	0
d	<b>Total</b> (add lines 1a, b, and c). . . . .	1d	38,858,622
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	1e	0
2	Acquisition indebtedness applicable to line 1 assets. . . . .	2	0
3	Subtract line 2 from line 1d. . . . .	3	38,858,622
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	4	582,879
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 Enter here and on Part V, line 4	5	38,275,743
6	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	6	1,913,787

**Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign

**Part XI** organizations check here ►  and do not complete this part )

1	Minimum investment return from Part X, line 6. . . . .	1	1,913,787
2a	Tax on investment income for 2018 from Part VI, line 5. . . . .	2a	34,695
b	Income tax for 2018 (This does not include the tax from Part VI). . . . .	2b	
c	Add lines 2a and 2b. . . . .	2c	34,695
3	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	3	1,879,092
4	Recoveries of amounts treated as qualifying distributions. . . . .	4	0
5	Add lines 3 and 4. . . . .	5	1,879,092
6	Deduction from distributable amount (see instructions). . . . .	6	0
7	<b>Distributable amount</b> as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	7	1,879,092

**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	1,766,755
b	Program-related investments—total from Part IX-B. . . . .	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required). . . . .	3a	
b	Cash distribution test (attach the required schedule). . . . .	3b	
4	<b>Qualifying distributions.</b> Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	1,766,755
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b See instructions. . . . .	5	0
6	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	6	1,766,755
<b>Note:</b> 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
<b>1</b> Distributable amount for 2018 from Part XI, line 7				1,879,092
<b>2</b> Undistributed income, if any, as of the end of 2018			0	
<b>a</b> Enter amount for 2017 only. . . . .			0	
<b>b</b> Total for prior years 20____, 20____, 20____		0		
<b>3</b> Excess distributions carryover, if any, to 2018				
<b>a</b> From 2013. . . . .				
<b>b</b> From 2014. . . . .				
<b>c</b> From 2015. . . . .				
<b>d</b> From 2016. . . . .	103,191			
<b>e</b> From 2017. . . . .	51,371			
<b>f</b> <b>Total</b> of lines 3a through e. . . . .	154,562			
<b>4</b> Qualifying distributions for 2018 from Part XII, line 4 ► \$ 1,766,755			0	
<b>a</b> Applied to 2017, but not more than line 2a			0	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2018 distributable amount. . . . .				1,766,755
<b>e</b> Remaining amount distributed out of corpus	0			
<b>5</b> Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a) )	112,337			112,337
<b>6</b> <b>Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	42,225			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b. . . . .		0		
<b>c</b> 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		
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
<b>e</b> Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
<b>f</b> Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019 . . . . .				0
<b>7</b> 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			
<b>8</b> Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions) . . . . .	0			
<b>9</b> <b>Excess distributions carryover to 2019.</b> Subtract lines 7 and 8 from line 6a . . . . .	42,225			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2014. . . . .				
<b>b</b> Excess from 2015. . . . .				
<b>c</b> Excess from 2016. . . . .				
<b>d</b> Excess from 2017. . . . .	42,225			
<b>e</b> 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 <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 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.			
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))  
Doris Kimble

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

Gregory Kimble Trustee  
PO BOX 67  
Dover, OH 44622  
(330) 704-2890

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

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 Name and address (home or business)	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
<i>a Paid during the year</i> See Additional Data Table				
<b>Total</b> . . . . .				► 3a
<i>b Approved for future payment</i>				
<b>Total</b> . . . . .				► 3b

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions )
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
<b>1</b> Program service revenue					
a					
b					
c					
d					
e					
f					
<b>g</b> Fees and contracts from government agencies					
<b>2</b> Membership dues and assessments. . . . .					
<b>3</b> Interest on savings and temporary cash investments . . . . .			14	143,364	
<b>4</b> Dividends and interest from securities. . . . .			14	433,537	
<b>5</b> Net rental income or (loss) from real estate					
a Debt-financed property. . . . .					
b Not debt-financed property. . . . .					
<b>6</b> Net rental income or (loss) from personal property					
<b>7</b> Other investment income. . . . .					
<b>8</b> Gain or (loss) from sales of assets other than inventory . . . . .			14	719,989	
<b>9</b> Net income or (loss) from special events					
<b>10</b> Gross profit or (loss) from sales of inventory					
<b>11</b> Other revenue					
a WLR Recovery IV Investors			14	-73,210	
b AT MLP Fund			14	694,839	
c Encap Flatrock			14	52,362	
d					
e					
<b>12</b> Subtotal Add columns (b), (d), and (e). . . . .		0		1,970,881	
<b>13</b> Total. Add line 12, columns (b), (d), and (e). . . . .			13		1,970,881

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

**Line 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) (See instructions.)



## 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)				
<b>a Paid during the year</b>				
Akron Children's Hospital 1 Perkins Square Akron, OH 44308	N/A	Public	Support medical research	100,000
Antrim Fire Dept 20138 Cadiz Rd Freeport, OH 43973	N/A	Public	Funding for emergency services	10,000
Antrim Presbyterian Cemetery Assoc 20138 Cadiz Rd Freeport, OH 43973	N/A	Public	Sustaining support	1,000
<b>Total . . . . .</b>			► 3a	1,748,086

**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)				
<i>a Paid during the year</i>				
Barnesville Hospital Fdn 639 W Main St Barnesville, OH 43713	N/A	Public	Sustaining support	50,000
Big Brothers Big Sisters 115 Canton Rd NW Carrollton, OH 44615	N/A	Public	Sustaining support	15,000
Buckeye Career Center Foundation 545 University Dr NE New Philadelphia, OH 44663	N/A	Public	Educational programs	10,363
<b>Total . . . . .</b>			► 3a	1,748,086

## 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)				
<i>a Paid during the year</i>				
Buckeye Council Boy Scouts of America 2301 13th St NW Canton, OH 44708	N/A	Public	Sustaining Support	10,000
Cambridge YMCA Family Center 1301 Cambridge Avenue Cambridge, OH 43725	N/A	Public	Sustaining support	4,000
Camp Tuscazoar Foundation Inc 6066 Boy Scout Rd NE Dover, OH 44622	N/A	Public	Sustaining Support	34,000
<b>Total . . . . .</b>			► 3a	1,748,086

## 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)				
<b>a Paid during the year</b>				
Camp Zimmerman Foundation 10397 Williams Rd SW Gnadenhutten, OH 44629	N/A	Public	Sustaining support	10,000
Canion Country Day School 3000 Demington Ave NW Canton, OH 44718	N/A	Public	Educational programs	10,000
Carroll County Agricultural Society 160 Kensington Rd NE Carrollton, OH 44615	N/A	Public	Sustaining support	35,000
<b>Total . . . . .</b>			► 3a	1,748,086

**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)				
<b>a Paid during the year</b>				
Case Western Reserve Univ Hospital 10900 Euclid Ave Cleveland, OH 44106	N/A	Public	Sustaining Support	100,000
Children's Museum Cleveland 3813 Euclid Ave Cleveland, OH 44115	N/A	Public	Sustaining Support	5,000
Community Hospice 201 W Third Street Dover, OH 44622	N/A	Public	Sustaining support	100,000
<b>Total . . . . .</b>			► 3a	1,748,086

**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)				
<i>a Paid during the year</i>				
Dennison Rail Road Festival PO Box 222 Dennison, OH 44621	N/A	Public	Sustaining Support	10,000
Dennison Depot 400 Center St Dennison, OH 44621	N/A	Public	Children's program - North Pole Express	19,358
Dennison Railroad Depot Museum PO Box 11 Dennison, OH 44621	N/A	Public	Sustaining support	10,000
<b>Total . . . . .</b>			► 3a	1,748,086

**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)				
<i>a Paid during the year</i>				
Dover City Schools 219 West 6th Street Dover, OH 44622	N/A	Public	Sustaining Support	100,000
Dover Faith UMC - Missionary trip 420 N Wooster Ave Dover, OH 44622	N/A	Public	Rebuilding of Church and School	2,451
Dover Faith UMC 420 N Wooster Ave Dover, OH 44622	N/A	Public	Building Improvements	1,327
<b>Total . . . . .</b>			► 3a	1,748,086

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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)				
<i>a Paid during the year</i>				
Dover Historical Society 325 E Iron Ave Dover, OH 44622	N/A	Public	Sustaining support	5,000
Dover Public Library 525 N Walnut St Dover, OH 44622	N/A	Public	Sustaining support	15,000
EAA Chapter 1077727 Davis Rd SE Gnadenhutten, OH 44629	N/A	Public	Harry Cleaver Field	3,000
<b>Total . . . . .</b>			► 3a	1,748,086

**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)				
<i>a Paid during the year</i>				
Elkhorn United Methodist Church PO Box 32 Kimbball, WV 24853	N/A	Public	Sustaining Support	10,503
FFA Camp Muskingham 3266 Dyewood Rd SW Carrollton, OH 44615	N/A	Public	Sustaining support	10,000
First United Methodist-New Philadelphia 201 W High Ave New Philadelphia, OH 44663	N/A	Public	Sustaining Support	5,000
<b>Total . . . . .</b>			► 3a	1,748,086

## 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)				
<b>a Paid during the year</b>				
Friends of Adult Education Buckeye Career PO Box 132 New Philadelphia, OH 44663	N/A	Public	Sustaining support	1,000
Friends of the Homeless PO Box 466 New Philadelphia, OH 44663	N/A	Public	Sustaining support	10,000
Greater Dover-New Philadelphia Food Pantry 420 W 3rd Street Dover, OH 44622	N/A	Public	Sustaining support	15,000
<b>Total . . . . .</b>			► 3a	1,748,086

**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)				
<i>a Paid during the year</i>				
Harrison County Community Hospital 2600 Miller St Bethany, MO 64424	N/A	Public	Sustaining Support	549
Health Care for the Homeless 421 The Fallsway Baltimore, MD 21202	N/A	Public	Sustaining support	15,000
Historic Canal Dover Association 124 E High Ave New Philadelphia, OH 44663	N/A	Public	Sustaining Support	26,000
<b>Total . . . . .</b>			► 3a	1,748,086

**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)				
<i>a Paid during the year</i>				
Hope Clinic of Coshocton 131 S 6th St Coshocton, OH 43812	N/A	Public	Sustaining support	15,000
Hospice of Guernsey Co 1341 Clark Street Cambridge, OH 43725	N/A	Public	Sustaining support	10,000
Journey's End Ministries 205 S River St Newcomerstown, OH 43832	N/A	Public	Sustaining support	10,000
<b>Total . . . . .</b>			► 3a	1,748,086

**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)				
<b>a Paid during the year</b>				
Little Theatre of Tuscarawas Co 466 Carrie Ave NW New Philadelphia, OH 44663	N/A	Public	Sustaining Support	3,800
Malone University 2600 Cleveland Ave NW Canton, OH 44709	N/A	Public	Sustaining support	5,000
Marietta College 215 5th Street Marietta, OH 45750	N/A	Public	Sustaining support	5,000
<b>Total . . . . .</b>			► 3a	1,748,086

**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)				
<i>a Paid during the year</i>				
Memorial Sloan-Kettering Cancer Center 1275 York Ave New York, NY 10065	N/A	Public	Support for medical assistance	5,000
Mercy Development Foundation 1320 Mercy Dr NW Canton, OH 44708	N/A	Public	Sustaining Support	50,000
Movers & Shakers - Parkinson's 260 NW 146th Dr Suite 145 Newberry, FL 32669	N/A	Public	Sustaining Support	5,800
<b>Total . . . . .</b>			► 3a	1,748,086

**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)				
<i>a Paid during the year</i>				
Muskingum Lakes American Red Cross 1451 4th Street NE New Philadelphia, OH 44663	N/A	Public	Sustaining support	5,000
New Life Ministries Food Pantry 84 Nottingham Road Raymond, NH 03077	N/A	Public	Sustaining support	10,000
Norma Johnson Center 85 E Iron Ave Dover, OH 44622	N/A	Public	Sustaining support	5,096
<b>Total . . . . .</b>			► 3a	1,748,086

**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)				
<b>a Paid during the year</b>				
Ohio Oil & Gas Energy Ed Program PO Box 187 1718 Columbus Rd SW Granville, OH 43023	N/A	Public	Sustaining support	10,000
Ohio Outdoor Drama Assoc PO Box 450 New Philadelphia, OH 44663	N/A	Public	Sustaining support for the arts	60,000
Perry Twp Search & Rescue Inc 4561 Phillips Fork Rd SE Port Washington, OH 43837	N/A	Public	Sustaining Support	10,000
<b>Total . . . . .</b>			► 3a	1,748,086

**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)				
<i>a Paid during the year</i>				
Ragersville Historical Society 8800 Crooked Run Rd Sugarcreek, OH 44681	N/A	Public	Sustaining Support	5,000
Rainbow Connection 621 W University Rochester, MI 48307	N/A	Public	Sustaining support	15,000
RTY Bank Organ Project 200 Bay St Toronto, Ontario CA	N/A	Public	Sustaining Support	5,000
<b>Total . . . . .</b>			► 3a	1,748,086

**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)				
<b>a Paid during the year</b>				
Sandy Township 1094 Chestnut Ave DuBois, PA 15801	N/A	Public	Sustaining Support	10,000
Senior Center of Tuscarawas County 425 Prospect Street Dover, OH 44622	N/A	Public	Sustaining support	30,000
Shriners' Hospital for Children 2900 Rocky Point Dr Tampa, FL 33607	N/A	Public	Support for medical assistance	30,000
<b>Total . . . . .</b>			► 3a	1,748,086

**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)				
<b>a Paid during the year</b>				
Southeastern Med 1341 Clark Street Cambridge, OH 43725	N/A	Public	Sustaining Support	50,000
Stark Community Foundation 400 Market Ave N Canton, OH 44702	N/A	Public	Sustaining support	10,000
Stark State College Fdn 6200 Frank Ave NW North Canton, OH 44720	N/A	Public	Sustaining support	10,000
<b>Total . . . . .</b>			► 3a	1,748,086

**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)				
<i>a Paid during the year</i>				
Starlite Enterprises 400 East High Ave PO Box 1054 New Philadelphia, OH 44663	N/A	Public	Sustaining support	10,000
The Salvation Army of Stark County 315 6th Street NE Massillon, OH 44646	N/A	Public	Sustaining support	10,000
The Salvation Army of Tusco 809 Emmet Ave NW New Philadelphia, OH 44663	N/A	Public	Sustaining Support	20,000
<b>Total . . . . .</b>			► 3a	1,748,086

**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)				
<i>a Paid during the year</i>				
Tunnel Hill Community Center PO Box 84 Stone Creek, OH 43840	N/A	Public	Sustaining support	5,000
Tusc Co - Auburn Township 11010 East Washington Street Auburn Township, OH 44023	N/A	Public	Sustaining Support	10,000
Tusc Co - Bucks Township PO Box 273 Bear Creek, PA 18602	N/A	Public	Sustaining Support	10,000
<b>Total . . . . .</b>			► 3a	1,748,086

## 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)				
<b>a Paid during the year</b>				
Tusc Co Council for Church & Community 1458 Fifth St NW New Philadelphia, OH 44663	N/A	Public	T-4-C & Character Formation	20,000
Tusc Co Sheriff 2295 Reiser Ave SE New Philadelphia, OH 44663	N/A	Public	Sustaining Support	26,846
Tuscarawas Center for the Arts 461 Robinson Dr SE New Philadelphia, OH 44663	N/A	Public	Sustaining support for the arts	5,000
<b>Total . . . . .</b>			► 3a	1,748,086

## 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)				
<b>a Paid during the year</b>				
Tuscarawas Clinic for Working Uninsured 614 N Tuscarawas Ave Dover, OH 44622	N/A	Public	Sustaining support	10,000
Tuscarawas Co Child Advocacy Center 152 2nd St NE New Philadelphia, OH 44663	N/A	Public	Sustaining Support	10,000
Tuscarawas Co Convention & Visitors Bur 124 E High Ave New Philadelphia, OH 44663	N/A	Public	Sustaining Support	5,000
<b>Total . . . . .</b>			► 3a	1,748,086

**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)				
<i>a Paid during the year</i>				
Tuscarawas Co Fair 259 S Tuscarawas Ave Dover, OH 44622	N/A	Public	Sustaining Support	3,358
Tuscarawas Co University Fdn 330 University Dr NE New Philadelphia, OH 44663	N/A	Public	Performing Arts Proj	10,000
Tuscarawas Co Trail Commission 125 E High Ave New Philadelphia, OH 44663	N/A	Public	Sustaining Support	10,000
<b>Total . . . . .</b>			► 3a	1,748,086

**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)				
<i>a Paid during the year</i>				
Tuscarawas Co YMCA600 Monroe St Dover, OH 44622	N/A	Public	Capital Campaign	50,000
Tuscarawas County Amateur Radio 2295 Reiser Ave SE New Philadelphia, OH 44663	N/A	Public	Sustaining Support	6,243
Tuscarawas County Historical Society 300 University Drive NE New Philadelphia, OH 44663	N/A	Public	Sustaining support	5,000
<b>Total . . . . .</b>			► 3a	1,748,086

**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)				
<b>a Paid during the year</b>				
Tuscarawas County Humane Society 1432 Tall Timber Rd NE New Philadelphia, OH 44663	N/A	Public	Sustaining Support	5,000
Tuscarawas Philharmonic PO Box 406 New Philadelphia, OH 44663	N/A	Public	Sustaining support	5,000
Tuscarawas Co Farm Bureau 2146 E High Ave New Philadelphia, OH 44663	N/A	Public	Sustaining Support	10,000
<b>Total . . . . .</b>			► 3a	1,748,086

**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)				
<i>a Paid during the year</i>				
Twin City Hospital Capital Fund 819 N First St Dennison, OH 44621	N/A	Public	Support for medical assistance	20,000
UMC Hindman KY27 Cokesbury Road Hindman, KY 41822	N/A	Public	Building Improvements	6,892
Union Hospital 659 Boulevard Dover, OH 44622	N/A	Public	Sustaining support	10,000
<b>Total . . . . .</b>			► 3a	1,748,086

**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)				
<i>a Paid during the year</i>				
United Way Inc - Tuscarawas Co 204 W High Ave New Philadelphia, OH 44663	N/A	Public	Sustaining support	50,000
University Hospitals 1320 Mercy Dr NW Canton, OH 44708	N/A	Public	Sustaining support	250,000
University of Findlay 1000 N Main St Findlay, OH 45840	N/A	Public	Sustaining support	5,000
<b>Total . . . . .</b>			► 3a	1,748,086

**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)				
<b>a Paid during the year</b>				
Wheels of Hope 367 Prince Avenue Suite 3M Athens, GA 30601	N/A	Public	Sustaining Support	5,000
York Volunteer Fire Department 1576 Stonecreek Rd New Philadelphia, OH 44663	N/A	Public	Sustaining Support	10,000
Zoar Community Association 250 Main St Zoar, OH 44697	N/A	Public	Sustaining Support	16,500
<b>Total . . . . .</b>			► 3a	1,748,086

## TY 2018 Accounting Fees Schedule

**Name:** Doris & Floyd Kimble Foundation

**EIN:** 34-1622273

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Accounting fees	11,135	5,568		5,568

## TY 2018 Investments Corporate Bonds Schedule

**Name:** Doris & Floyd Kimble Foundation

**EIN:** 34-1622273

### Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
Corporate bonds	6,145,442	6,011,832

## TY 2018 Investments Corporate Stock Schedule

**Name:** Doris & Floyd Kimble Foundation

**EIN:** 34-1622273

### Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
Common stocks	13,358,528	17,000,447

**TY 2018 Investments - Other Schedule****Name:** Doris & Floyd Kimble Foundation**EIN:** 34-1622273**Investments Other Schedule 2**

<b>Category/ Item</b>	<b>Listed at Cost or FMV</b>	<b>Book Value</b>	<b>End of Year Fair Market Value</b>
Other investments	AT COST	4,447,504	5,405,251
WLR Recovery Fund	AT COST	38,959	81,869
Encap Flat Rock	AT COST	33,165	293,321
AP Energy Infrastructure Fund	AT COST	3,221,367	4,270,524

**TY 2018 Land, Etc.  
Schedule**

**Name:** Doris & Floyd Kimble Foundation  
**EIN:** 34-1622273

<b>Category / Item</b>	<b>Cost / Other Basis</b>	<b>Accumulated Depreciation</b>	<b>Book Value</b>	<b>End of Year Fair Market Value</b>
Building - Antrim	11,421,537	0	11,421,537	11,421,537
Equipment	2,477,668	2,477,668	0	
Office Equipment	40,424	40,424	0	
Vehicles	368,072	349,818	18,254	18,254

## TY 2018 Other Expenses Schedule

**Name:** Doris & Floyd Kimble Foundation**EIN:** 34-1622273**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
General insurance	7,542	3,771		3,771
Licenses & permits	381	0		381
Supplies	7,446	745		6,701
Misc Expense	707	0		707
Telephone	1,026	0		1,026
Service Charge	100	51		51
Office Supplies	264	0		264

## TY 2018 Other Income Schedule

**Name:** Doris & Floyd Kimble Foundation**EIN:** 34-1622273**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
WLR Recovery IV Investors	-73,210	-73,210	-73,210
AT MLP Fund	694,839	694,839	694,839
Encap Flatrock	52,362	52,362	52,362

## TY 2018 Other Professional Fees Schedule

**Name:** Doris & Floyd Kimble Foundation

**EIN:** 34-1622273

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
Investment fees	225,979	225,979		0

## TY 2018 Taxes Schedule

**Name:** Doris & Floyd Kimble Foundation

**EIN:** 34-1622273

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
Ohio filing fees	200	0		200
Federal Income Tax	30,000	0		0