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2018

Return of Private Foundation

Form 990-PF

Department of the Treasury

Internal Revenue Service

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

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

Open to Public Inspection

								•			
		ndar year 2018, or tax year begin	nning 01-01-20)18 , ar	nd er	nding 12-31-					
		ndation NESS OF GOOD FOUNDATION				A Employer identification number 34-1973248					
		street (or P O box number if mail is not deliver	red to street address)	Room/suite		B Telephone nu	mber (see instruction	s)			
PO BOX 2838					(440) 964-5541	•	<i>-</i> ,				
		, state or province, country, and ZIP or foreign p , OH 44005	postal code				application is pending	g, check here			
			<u> </u>								
G Cr	ieck al	· · · ·	Amended return	former public charity			ganizations, check he	▶ ∟			
			Name change				ganizations meeting k here and attach cor				
u Ch	ock tv	pe of organization Section 501(c)(3	-	foundation			ındatıon status was t				
		4947(a)(1) nonexempt charitable trust	_	e private foundation		under sectio	n 507(b)(1)(A), checl	k here			
				☑ Cash ☐ Accru	al	F If the founda	ition is in a 60-month	termination			
		rom Part II, col (c), ▶\$ 216 632	Other (specify) _	be on cash basis)			n 507(b)(1)(B), check				
Pa	rt I	Analysis of Revenue and Expen	ISES (The total	Ī.,				(d) Disbursements			
		of amounts in columns (b), (c), and (d) may requal the amounts in column (a) (see instruct	not necessarily	(a) Revenue and expenses per books	(Ь)	Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)			
	1	Contributions, gifts, grants, etc , receive	d (attach								
		schedule)		975,478							
	2	Check ► ☐ If the foundation is not request.	uired to attach								
	3	Interest on savings and temporary cash	ınvestments								
	4	Dividends and interest from securities		37		37	37				
	5a	Gross rents									
	ь	Net rental income or (loss)									
ne	6a	Net gain or (loss) from sale of assets no	t on line 10								
Reversie	b	Gross sales price for all assets on line 6a	a								
	7	Capital gain net income (from Part IV, lir	ne 2)			0					
	8	Net short-term capital gain					0				
	9	Income modifications					8,113				
	10a	Gross sales less returns and allowances									
	Ь	Less Cost of goods sold									
	C	Gross profit or (loss) (attach schedule)									
	11	Other income (attach schedule)		075 545			0.450				
	12			975,515		37	8,150				
	13	Other employee salaries and wages	•	0		0	0	(
۰.	14 15	Other employee salaries and wages . Pension plans, employee benefits									
Se	16a	Legal fees (attach schedule)		9 6,561		0	0	6,561			
<u> </u>	ь	Accounting fees (attach schedule)		1,717		0	0	1,717			
Operating and Administrative Expenses	c	Other professional fees (attach schedule		343,400		0	0	343,400			
ΙΛe	17	Interest	´					,			
trat	18	Taxes (attach schedule) (see instruction:	s)								
<u> </u>	19	Depreciation (attach schedule) and deple	•	21,667		0	21,667				
Ē	20	Occupancy		_							
ĕ	21	Travel, conferences, and meetings		236		0	0	236			
anc	22	Printing and publications									
ЫĠ	23	Other expenses (attach schedule)		123,455		50	0	123,405			
atı	24	Total operating and administrative e	expenses.								
<u>p</u>		Add lines 13 through 23		497,036		50	21,667	475,319			
ن	25	Contributions, gifts, grants paid		424,449				424,449			
	26	Total expenses and disbursements. 25	Add lines 24 and	921,485		50	21,667	899,768			
	27	Subtract line 26 from line 12									
	a	Excess of revenue over expenses an disbursements	d	54,030							
	ь	Net investment income (if negative, e	nter -0-)			0					
	С	Adjusted net income (If negative, enter	er-0-)				0				
-or	Daner	work Reduction Act Notice, see instru	ıctions			Cat No. 11280	· F	~ QQ0-DE (2019			

	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 ▶	'	'	
S	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U S and state government obligations (attach schedule)			
	ь	Investments—corporate stock (attach schedule)			
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶ 81,093			
		Less accumulated depreciation (attach schedule) ▶	'	'	

1,805

216,632

1,009,000

-792,368

216,632

216,632

2

3

4

5

6

162,602

54,030

216,632

216,632 Form **990-PF** (2018)

0

0

1,971

1,009,000

-846,398

162,602

164,573

1,805

216,632

12 13 Investments—other (attach schedule) 14 Land, buildings, and equipment basis Less accumulated depreciation (attach schedule) ▶ 63,195 23,472 15 Other assets (describe > _ Total assets (to be completed by all filers—see the 16 instructions Also, see page 1, item I) 164,573 17 1.971 18 Grants payable Liabilities 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 -_

Total liabilities(add lines 17 through 22)

Foundations that follow SFAS 117, check here ▶

Unrestricted . . .

Temporarily restricted

Permanently restricted . .

and complete lines 27 through 31.

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

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize) -

Enter amount from Part I, line 27a

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

Foundations that do not follow SFAS 117, check here ▶

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

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

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

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

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

Analysis of Changes in Net Assets or Fund Balances

23

24

25

26

28

29 Net 30

31 Part III

2

Balances

Fund

ŏ

Assets 27

Part IV Capital Gains a	and Losses for Tax on Investn	nent Income			
	cribe the kind(s) of property sold (e g , real estate, warehouse, or common stock, 200 shs MLC Co) How acqu P—Purch D—Dona			(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a					
	1				<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sa		Gain d	h) or (loss) j) minus (g)
a					
b					
С					
d					
e					
Complete only for assets	showing gain in column (h) and own	i	69		D)
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col(ı) over col(յ), ıf an	/	col (k), but not	h) gain minus less than -0-) or om col (h))
a					
b					
с					
d					
e					
2 Capital gain net income		f gain, also enter in Part I, line f (loss), enter -0- in Part I, line		2	
3 Net short-term capital g	aın or (loss) as defined ın sections 12	222(5) and (6)			
If gain, also enter in Par in Part I, line 8	t I, line 8, column (c) (see instruction		. }	3	
Part V Qualification U	nder Section 4940(e) for Rec	luced Tay on Net Invest	nent In	come	
_					
For optional use by domestic pr	rivate foundations subject to the sect	ion 4940(a) tax on net investm	ent incom	ne)	
f section 4940(d)(2) applies, lea	ave this part blank				
	e section 4942 tax on the distributabl t qualify under section 4940(e) Do n	· · · · · · · · · · · · · · · · · · ·	se period	?	es 🔽 No
1 Enter the appropriate am	ount in each column for each year, s	ee instructions before making a	ny entrie	s	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use asse		(d) Distribution rat (col (b) divided by o	col (c))
2017	849,558	146,6	_		5 792230
2016	1,014,397	157,0			6 458824
2015	318,498	325,			0 977602
2014	388,354	83,			4 647495
2013	471,892	260,8		T	1 808812
2 Total of line 1, column (d			. 2		19 684963
	for the 5-year base period—divide the dation has been in existence if less the		ne . 3		3 936993

4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5 302,376 5 1,190,452 **6** Enter 1% of net investment income (1% of Part I, line 27b) . . . 6 0 7 1,190,452 **7** Add lines 5 and 6 8 899,768 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 Form **990-PF** (2018)

Page 3

orm	990-PF (2018)									P	Page 6
Pai	rt VIII-B Statements Regard	ding	Activities for Which	Form 4720 May Be	Required (c	ontinue	ed)				
5a During the year did the foundation j			pay or incur any amount to								
	(1) Carry on propaganda, or otherv	vise attempt to influence legislation (section 4945(e))?									
(2) Influence the outcome of any spe			ecific public election (see section 4955), or to carry								
	on, directly or indirectly, any vo	ter re	egistration drive?		٠ ٠ ـ ٢	Yes	V	No			
	(3) Provide a grant to an individual	for t	avel, study, or other sım	ılar purposes?	F	Yes		No			
	(4) Provide a grant to an organizati	on ot	her than a charitable, etc	, organization described	l	_ res	•	NO			
in section 4945(d)(4)(A)? See in			tions		г	7 v		No			
	(5) Provide for any purpose other t	han r	eligious, charitable, scien	tific, literary, or	L	」 Yes	•	NO			
	educational purposes, or for the	prev	ention of cruelty to childr	en or animals?	г	٦.,		No			
ь	If any answer is "Yes" to $5a(1)-(5)$,	dıd a	ny of the transactions fa	il to qualify under the ex	L ceptions describ	_ Yes bed in	¥	No			
	Regulations section 53 4945 or in a		=		•				5b		
	Organizations relying on a current r					. ▶					
С	If the answer is "Yes" to question 5						ш				
	tax because it maintained expenditu			•	г	٦					
	If "Yes," attach the statement requi		-		L	」 Yes	ш	No			
6a	Did the foundation, during the year,		-		ims on						
-	a personal benefit contract?					_					
ь	Did the foundation, during the year,				L	」 Yes	✓	No	6b		No
	If "Yes" to 6b, file Form 8870	, puy	premiums, an ectry or ma	irectly, on a personal be	Tierre contrace.	•	•				110
7a	At any time during the tax year, wa	s the	foundation a party to a n	rohibited tax shelter trai	nsaction? F	_					
	If yes, did the foundation receive ar				L			7b			
8	Is the foundation subject to the sec		•								
•	excess parachute payment during the				III Temuneration	7					
						<u> Yes</u>	<u> </u>	No			
Par	Information About (Offic	ers, Directors, Trust	ees, Foundation Ma	inagers, Higi	niy Pai	a Er	npio	yees,		
1	List all officers, directors, truste			·				1			
	(a) Name and address	(b) Title, and average hours per week 	(c) Compensation (If not paid, enter	(d) Contrib employee bene					se acc	
	(a) Name and dadress		devoted to position	-0-)	deferred cor			٥	ther a	lowand	es
BRAD	ROLLER		IDENT	0			C				0
	OX 2300	16 00)								
	ABULA, OH 44005	VICE	PRECIDENT					_			
	MCCARTHY	16 00	PRESIDENT	0			C	ή			0
	OX 2300 ABULA, OH 44005										
	THY P MCCARTHY	SECR	ETARY	0			(0
о вс	OX 2300	16 00)								
ASHTA	ABULA, OH 44005										
	RT W CORDELL		SURER	0			C				0
	OX 2300 ABULA, OH 44005	16 00	,								
2	Compensation of five highest-pa	id en	nplovees (other than th	l nose included on line 1	see instruct	ions).	[f no	ne, e	nter "	NONE.	**
	,				(d) Contrib			-, -			
(a)	Name and address of each employee	paid	(b) Title, and average hours per week	(c) Compensation	employee	benefit	:			se acco	
	more than \$50,000		devoted to position	(c) compensation	plans and		d	ot	her all	owance	es
IONI	=				compen	Sation	-				
NON	=										
							1				
				1							
				1							
Гota	I number of other employees paid ov	er \$5	0,000			<u> </u>					0
								For	-m 001	N-DF (2018

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Part VIII Information About Officers, Directors, Trus and Contractors (continued)	stees, Foundation Managers, Highly Paid E	mployees,
3 Five highest-paid independent contractors for professional	services (see instructions). If none, enter "NOI	NE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
MENTORCLIQ	PROGRAM CONSULTING	150,000
595 S 3RD ST 2ND FLOOR	7	
COLUMBUS, OH 43215		
COMMUNITY STRATEGIES CONSULTING	PROGRAM CONSULTING	80,000
11710 BUCKINGHAM AVE SUITE 3 CLEVELAND, OH 44120		
NEXT STEP BUSINESS CONSULTING	PROGRAM CONSULTING	55,000
1271 W 1ST AVENUE COLUMBUS, OH 43212		
Total number of others receiving over \$50,000 for professional service		0
Part IX-A Summary of Direct Charitable Activities	5	
List the foundation's four largest direct charitable activities during the tax year Incorganizations and other beneficiaries served, conferences convened, research paper.		Expenses
1 THE EXECUTIVE COACHING AND CONSULTING PROGRAM SUPPOR ENTREPRENEURS IN NORTHEAST OHIO WHO ARE COMMITTED TO OF THE ECONOMICALLY DISADVANTAGED	I	475,319
2		
3		
4		
Part IX-B Summary of Program-Related Investments	s (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	· · · · · · · · · · · · · · · · · · ·	Form 990-PF (2018)

4

5

6

1a

1b

2

3a 3b

4

5

899,768

899.768

899.768

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Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . .

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

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

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

Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.

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

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the

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

4 5

6

1

2

3

4

5

Part XII

e From 2017.

XII, line 4 ▶ \$

indicated below:

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Part XIII Undistributed Income (see instruc	tions)			
	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only				
b Total for prior years 20, 20, 20				
2 Evenes distributions correspond if any to 2019				

3 Excess distributions carryover, if any, to 2018 a From 2013. **b** From 2014. . . . c From 2015. . d From 2016. . . .

f Total of lines 3a through e.

4 Qualifying distributions for 2018 from Part

a Applied to 2017, but not more than line 2a

same amount must be shown in column (a)) 6 Enter the net total of each column as

b Applied to undistributed income of prior years (Election required—see instructions). required—see instructions).

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

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2018 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2019.

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. .

Subtract lines 7 and 8 from line 6a

c Treated as distributions out of corpus (Election **d** Applied to 2018 distributable amount. e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2018

4,889

10,079

Qualifying distributions from Part XII, d Amounts included in line 2c not used

(1) Value of all assets (2) Value of assets qualifying

under section 4942(1)(3)(B)(1)"Endowment" alternative test— enter 2/3 of minimum investment return shown in

Part X, line 6 for each year listed. . .

512(a)(5)), or royalties) . . . (2) Support from general public and 5 or more exempt organizations as provided in section 4942(1)(3)(B)(III). . . .

c "Support" alternative test-enter (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section

(3) Largest amount of support

(4) Gross investment income

Part XV

from an exempt organization

Information Regarding Foundation Managers:

0

0

0

0

- 5,235 10,860 31,063

- Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.) 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 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
- BRAD ROLLER
- PO BOX 2838
- ASHTABULA, OH 44005
- (440) 964-5541 b The form in which applications should be submitted and information and materials they should include
 - APPLICATION SHOULD BE MADE IN THE FORM OF A WRITTEN REQUEST, INCLUDING PROOF OF EXEMPT STATUS AND AN EXPLANATION OF
- HOW THE APPLICANT INTENDS TO USE THE FUNDS c Any submission deadlines
- APPLICATIONS SHOULD BE SUBMITTED PRIOR TO OCT 15 FOR CONSIDERATION BY DEC 31 OF THE CURRENT YEAR
- d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors
 - NONE Form 990-PF (2018)



contracts from government agencies in dues and assessments	(a) Business code	(b) Amount	Exclusion code	(d) Amount	function income (See instructions)
contracts from government agencies in dues and assessments. In savings and temporary cash its			14	37	
contracts from government agencies ip dues and assessments			14	37	
contracts from government agencies in dues and assessments			14	37	
contracts from government agencies ip dues and assessments. In savings and temporary cash its			14	37	
contracts from government agencies in dues and assessments. In savings and temporary cash its and interest from securities. Income or (loss) from real estate anced property. Income or (loss) from personal property stment income. Income or (loss) from sales of assets other than income. It or (loss) from sales of inventory enue a			14	37	
ip dues and assessments			14	37	
and interest from securities. and interest from securities. income or (loss) from real estate anced property. financed property. income or (loss) from personal property stment income. ass) from sales of assets other than action (loss) from special events action (loss) from sales of inventory enue a			14	37	
and interest from securities. Income or (loss) from real estate anced property. Income or (loss) from personal property stment income. Income or (loss) from sales of assets other than Income or (loss) from special events Intor (loss) from sales of inventory senue a			14	37	
Income or (loss) from real estate anced property Infinanced property Income or (loss) from personal property stment income Income or sales of assets other than Income or (loss) from special events it or (loss) from sales of inventory senue a			14	37	
enced property					
-financed property					
structure or (loss) from personal property stment income. ss) from sales of assets other than se or (loss) from special events or (loss) from sales of inventory enue a					
stment income					
e or (loss) from special events fit or (loss) from sales of inventory enue a					
e or (loss) from special events it or (loss) from sales of inventory enue a					
it or (loss) from sales of inventory enue a					
enue a					
				37	
			13	·	37
		ment of Exem	ot Purposes		
the accomplishment of the foundation's ex					
,					
	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calcular Relationship of Activities to the Explain below how each activity for which	Add columns (b), (d), and (e). d line 12, columns (b), (d), and (e). sheet in line 13 instructions to verify calculations) Relationship of Activities to the Accomplish Explain below how each activity for which income is reported the accomplishment of the foundation's exempt purposes (Add columns (b), (d), and (e)	Add columns (b), (d), and (e). d line 12, columns (b), (d), and (e). sheet in line 13 instructions to verify calculations) Relationship of Activities to the Accomplishment of Exempt Purposes Explain below how each activity for which income is reported in column (e) of Part XVI-A contribute accomplishment of the foundation's exempt purposes (other than by providing funds for such	Add columns (b), (d), and (e)

(==			
VII	Information Regarding Transfers To and Transactions and Relationships With Noncharit Exempt Organizations	able	

Part XVII	Exempt Organiz		olcis io c	and mansaction	iis aliu Kelat	ionampa with No	il charitable		
	ganization directly or inc than section 501(c)(3)	directly engage in					ion 501	Yes	No
` ' '	from the reporting found			,	•				
	.) Cash								No
	rassets						. 1a(1) 1a(2)	_	No
b Other tran							(-)		
	of assets to a noncharr	table exempt org	anization.				1b(1)		No
	nases of assets from a n						1b(2)	1	No
	al of facilities, equipmen						1b(3)	_	No
	bursement arrangement	•					. 1b(4)	_	No
` '	s or loan guarantees.						1b(5)	_	No
	mance of services or me						. 1b(6)	_	No
` '	f facilities, equipment, m	•	_						No
_	wer to any of the above							1	
of the goo	ds, other assets, or serv	vices given by the	reporting	foundation If the	foundation rece	ived less than fair ma	rket value		
ın any tra	nsaction or sharing arrai	ngement, show ır	column (c	d) the value of the	goods, other a	ssets, or services rece	eived		
(a) Line No	(b) Amount involved	(c) Name of noncl	naritable exe	mpt organization I	(d) Description	of transfers, transactions	s and sharing arra	ngemen	nts
(4) 2	(2) runoune involveu	(c) Hame of Home	Tarreasie exe	pc organization	(4) 5 6 6 6 1 1 1 1 1	or cransions, cransactions	o, and onaming are	gee.	
2a Is the fou	ndation directly or indire	ctly affiliated wit	h. or relate	d to, one or more	tax-exempt org	anizations			
	ın section 501(c) (other	•	•	•			∕es ☑ No		
	omplete the following so		.(ح)(ع)) ٥١ ١	in section 527			103		
D II Tes, C	(a) Name of organizatio		1 0	b) Type of organizatio	n I	(c) Descriptio	n of relationship		
	(2)		\	-, .,po o. o.gaaa.o		(c) becompare			
	er penalties of perjury, I								
	ny knowledge and belief, ch preparer has any kno		t, and com	plete Declaration of	of preparer (oth	ner than taxpayer) is b	pased on all info	rmation	n of
Sign	in preparer has any kno	wiedge					May the IRS d	iconice th	NE.
Here L	*****			2019-09-12	*****	k	return		
					—) —		with the prepa	rer shov	vn
'	Signature of officer or tr	ustee		Date	Title		(see instr)?	√ vac	⊓∾ଦ
						1	(see mstr).	163	- 110
	Print/Type preparer's	name Pre	oarer's Sigr	nature	Date		PTIN		
						Check if self-	P0044	8446	
	RAYMOND POLANT	z				employed ▶ 📙		-	
Paid									
Preparer	i ii iii s ii aiii e r	EN & COMPANY L	TD		•	•	Fırm's EIN ▶34	-10120	261
Use Only							THITIS LIN P34	19125	,51
	Firm's address ► OF	FICES LISTED AT	-						
	wv	WWCOHENCPACO	M, OH 441	115			Phone no (800) 229-	1099
			-						

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

NONE

ASHTABULA CHAMBER OF COMMERCE

Total .

ASHTABULA, OH 44004				
ASHTABULA LIGHTHOUSE RESTORATION & PRESERVATION SOCIETY PO BOX 221	NONE	EXEMPT	GENERAL OPERATIONS	500

EXEMPT

GENERAL OPERATIONS

▶ 3a

500

SOCIETY PO BOX 221 NORTH KINGSVILLE, OH 44068				
ASHTABULA LOCAL FOOD COUNCIL	NONE	EXEMPT	GENERAL OPERATIONS	250

NORTH KINGSVILLE, OH 44068				
ASHTABULA LOCAL FOOD COUNCIL 4536 MAIN AVENUE COLUMBUS, OH 44004	NONE	EXEMPT	GENERAL OPERATIONS	250

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

or substantial contributor

Name and address (home or business)

	or substantial contributor			
a Paid during the year				
ASHTABULA MARITIME MUSEUM PO BOX 1546 ASHTABULA, OH 44005	NONE	EXEMPT	GENERAL OPERATIONS	2,500

recipient

ASHTABULA, OH 44005				
ASHTABULA YMCA263 W PROSPECT RD ASHTABULA, OH 44004	NONE	EXEMPT	GENERAL OPERATIONS	11,000
CENTER FOR ACTION &	NONE	EXEMPT	GENERAL OPERATIONS	100

ASHTABULA YMCA263 W PROSPECT RD ASHTABULA, OH 44004	NONE	EXEMPT	GENERAL OPERATIONS	11,000
CENTER FOR ACTION & CONTEMPLATION PO BOX 12464 ALBURQUERQUE, NM 87195	NONE	EXEMPT	GENERAL OPERATIONS	100

ASHTABULA, OH 44004				
CENTER FOR ACTION & CONTEMPLATION PO BOX 12464 ALBURQUERQUE, NM 87195	NONE	EXEMPT	GENERAL OPERATIONS	100
Total			▶ 3a	424,449

Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CINCINNATI YOUTH COLLABORATIVE NONE **EXEMPT** CYC CLOTHING ITEMS 90,000 301 OAK STREET

CINCINNATI, OH 45219				
CIVIC DEVELOPMENT CORP OF ASHTABULA PO BOX 131 ASHTABULA, OH 44005	NONE	EXEMPT	GENERAL OPERATIONS	20,000

PO BOX 131 ASHTABULA, OH 44005				
CLEVELAND METROPOLITAN SCHOOL DISTRICT - KINDER KITS 1111 SUPERIOR AVE E SUITE 1844	NONE	EXEMPT	KINDER KITS	15,000

CLEVELAND METROPOLITAN SCHOOL DISTRICT - KINDER KITS 1111 SUPERIOR AVE E SUITE 1844 CLEVELAND, OH 44114	NONE	EXEMPT	KINDER KITS	15,000
Total			▶ 3a	424,449

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CONCORD CONSULTING SERVICES NONE **EXEMPT GENERAL OPERATIONS** 1.750 700 BROOKSEDGE BLVD WESTERVILLE, OH 43081

GLOBAL GRATITUDE ALLIANCE 2237 15TH AVE SAN FRANCISCO, CA 941161824	NONE	EXEMPT	GENERAL OPERATIONS	5,000
GROWTH PARTNERSHIP FOR ASHTABULA COUNTY 17 N MARKET STREET JEFFERSON, OH 44047	NONE	EXEMPT	GENERAL OPERATIONS	5,000

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

HEBREW FREE LOAN ASSOCIATION 23300 CHAGRIN BLVD 204 BEAECHWOOD, OH 44122	NONE	EXEMPT	GENERAL OPERATIONS	35,000
JUNIOR ACHIEVEMENT 68 EAST 2ND AVE	NONE	EXEMPT	IMMERSIONS AND SPONSORSHIPS	3,500

BEAECHWOOD, OH 44122				
JUNIOR ACHIEVEMENT 68 EAST 2ND AVE COLUMBUS, OH 43201	NONE	EXEMPT	IMMERSIONS AND SPONSORSHIPS	3,500
LIFT BRIDGE COMMUNITY ASSOCIATION PO BOX 3111	NONE	EXEMPT	GENERAL OPERATIONS	2,500

Tatal			A 2-	434 440
LIFT BRIDGE COMMUNITY ASSOCIATION PO BOX 3111 ASHTABULA, OH 44005	NONE	EXEMPT	GENERAL OPERATIONS	2,500
68 EAST 2ND AVE COLUMBUS, OH 43201			SPONSORSHIPS	

LIFT BRIDGE COMMUNITY ASSOCIATION PO BOX 3111 ASHTABULA, OH 44005	NONE	EXEMPT	GENERAL OPERATIONS	2,500
Total			▶ 3a	424,449

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

a Paid during the year

Total .

a raid during the year				
MARY'S MISSION345 TAYLOR DRIVE SIERRA VISTA, AZ 85635	NONE	EXEMPT	GENERAL OPERATIONS	100
MLK SCHOLARSHIP FUNDPO BOX 28782	NONE	EXEMPT	SCHOLARSHIP	19,000

MLK SCHOLARSHIP FUNDPO BOX 28782 PROVIDENCE, RI 02908	NONE	EXEMPT	SCHOLARSHIP	19,000
NEO FUNDPO BOX 2300 ASHTABULA. OH 44005	NONE	EXEMPT	SEA CHANGE FESTIVAL	109,055

NEO FUNDPO BOX 2300 ASHTABULA, OH 44005	NONE	EXEMPT	SEA CHANGE FESTIVAL	109,055

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

any foundation manager

or substantial contributor

Name and address (home or business)

Total .

	or substantial contributor			
a Paid during the year				
NORTH MARKET DEVELOPMENT AUTHORITY 59 SPRUCE STREET	NONE	EXEMPT	GENERAL OPERATIONS	2,000

recipient

COLUMBUS, OH 43215				
NOTRE DAME COLLEGE 4545 COLLEGE RD	NONE	EXEMPT	GRANTS	75,500
SOUTH FUCLID OH 44121				

NOTRE DAME COLLEGE 4545 COLLEGE RD SOUTH EUCLID, OH 44121	NONE	EXEMPT	GRANTS	75,500
SAINT JOHN SCHOOL7911 DEPOT RD	NONE	EXEMPT	GENERAL OPERATIONS	1,000

4545 COLLEGE RD SOUTH EUCLID, OH 44121				
SAINT JOHN SCHOOL7911 DEPOT RD	NONE	EXEMPT	GENERAL OPERATIONS	1,000

SOUTH EUCLID, OH 44121				
SAINT JOHN SCHOOL7911 DEPOT RD ASHTABULA, OH 44004	NONE	EXEMPT	GENERAL OPERATIONS	1,000

			1	
SAINT JOHN SCHOOL7911 DEPOT RD ASHTABULA, OH 44004	NONE	EXEMPT	GENERAL OPERATIONS	

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

any foundation manager

or substantial contributor

Name and address (home or business)

Total .

	or substantial continuator			
a Paid during the year				
SAINT MARTIN DE PORRES HIGH SCHOOL 6202 ST CLAIR AVE CLEVELAND, OH 44103	NONE	EXEMPT	GENERAL OPERATIONS	2,194

recipient

CLEVELAND, OH 44103				
ST CLAIR SUPERIOR DEVELOPMENT 3615 SUPERIOR AVENUE SUITE 3102 E	NONE	EXEMPT	GENERAL OPERATIONS	15,00
CLEVELAND, OH 44114				ĺ

ST CLAIR SUPERIOR DEVELOPMENT 3615 SUPERIOR AVENUE SUITE 3102 E CLEVELAND, OH 44114	NONE	EXEMPT	GENERAL OPERATIONS	15,000
VELOSANO9500 EUCLID AVE	NONE	EXEMPT	GENERAL OPERATIONS	2.000

3615 SUPERIOR AVENUE SUITE 3102 E CLEVELAND, OH 44114				·
VELOSANO9500 EUCLID AVE	NONE	EXEMPT	GENERAL OPERATIONS	2,000

CLEVELAND, OH 44114				
VELOSANO9500 EUCLID AVE CLEVELAND, OH 44195	NONE	EXEMPT	GENERAL OPERATIONS	2,000

VELOSANO9500 EUCLID AVE	NONE	EXEMPT	GENERAL OPERATIONS	
CLEVELAND, OH 44195				

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

recipient

424,449

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

any foundation manager

Name and address (home or business)

MORELAND HILLS, OH 44022

Total .

,	or substantial contributor			
a Paid during the year				
WESTERN RESERVE LAND CONSERVANCY 3850 CHAGRIN RIVER RD	NONE	EXEMPT	GENERAL OPERATIONS	6,000

efile GRAPHIC print - DO NOT P	ROCESS	As Filed D	ata -	DI	N: 93491315002089		
TY 2018 Accounting Fees Schedule							
	Name	THE BUS	INESS OF GOOD FO	ΝΟΙΤΔΟΝΙ			
		34-19732		301127111011			
	ETIA:	34-19/32	240				
Category	Amo	unt	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
ACCOUNTING FEES		1,717	0	0	1,717		

Note: To capture the full content of this document, please select landscape mode (11" $ imes$ 8.5") when printing.						
TY 2018 Depreciation Scheduk	e					
Name:	THE BUSINESS OF GOOD FOUNDATION					
EIN:	34-1973248					

DLN: 93491315002089

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

		==:1:	1 13/32 10						
	Depreci	ation Schedule							
Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
COMPUTER SOFTWARE	2016-01-25	65,000	41,528	SL	3 000000000000	21,667	0	21,667	

TY 2018 Land, Etc.			
Schedule			

DLN: 93491315002089

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Name: THE BUSINESS OF GOOD FOUNDATION

<u></u>				
Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
COMPUTER SOFTWARE	65,000	63,195	1,805	

FTN: 34-1973248

efile GRAPHIC print - DO NOT PROCES	S As Filed Data	-	DLN	i: 93491315002089			
TY 2018 Legal Fees Schedu	le			_			
Nam	e: THE BUSINE	SS OF GOOD FOU	NDATION				
EIN: 34-1973248							
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			
LEGAL FEES	6,561	0	0	6,561			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	93491315002089				
TY 2018 Other Expenses Schedule								
Name: THE BUSINESS OF GOOD FOUNDATION								
EIN: 34-1973248								
Other Expenses Schedule								
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes				
OFFICE EXPENSE	2,619	0	0	2,619				
COMPUTER EXPENSE	11,183	0	0	11,183				
INSURANCE	534	0	0	534				

35

50

72

108,962

50

0

35

72

108,962

REPAIRS

BANK FEES

MARKETING

PROGRAM AWARDS

efile GRAPHIC print - DO NOT PROCES	S As Filed Data	-	DLI	N: 93491315002089				
TY 2018 Other Professional Fees Schedule								
Nam	ne: THE BUSINE	SS OF GOOD FOU	NDATION					
EIN: 34-1973248								
Category	Amount	Net Investment	Adjusted Net	Disbursements				

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable
				Purposes

343,400

343,400

CONSULTANT FEES

efile GRAPHIC print - D	O NOT PROCESS As Filed Da	ata -		DLN: 93491315002089			
Schedule B	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF ▶ Go to www urs gov/Form990 for the latest information		OMB No 1545-0047				
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service			nation	2018			
Name of the organization			Employer id	dentification number			
Organization type (chec	ek one)		34-1973248	·			
	,						
Filers of:	Section:						
Form 990 or 990-EZ	501(c)() (enter number) organization						
	4947(a)(1) nonexempt	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	☐ 527 political organizati	☐ 527 political organization					
Form 990-PF	✓ 501(c)(3) exempt priva	☑ 501(c)(3) exempt private foundation					
	☐ 4947(a)(1) nonexempt	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable priva	501(c)(3) taxable private foundation					
		990-PF that received, during the y for Complete Parts I and II See in					
Special Rules							
under sections 50 received from any	9(a)(1) and 170(b)(1)(A)(vi), tha) filing Form 990 or 990-EZ that mo it checked Schedule A (Form 990 or r, total contributions of the greater Complete Parts I and II	or 990-EZ), Part II, line 13,	, 16a, or 16b, and that			
during the year, t	otal contributions of more than \$), (8), or (10) filing Form 990 or 99 1,000 exclusively for religious, cha en or animals Complete Parts I, II	aritable, scientific, literary, o				
during the year, of If this box is check purpose Don't co	ontributions exclusively for religions, which is a contributed, enter here the total contributed in the parts unless the parts unless the parts unless the parts unless the contributed in the parts unless the contributed in), (8), or (10) filing Form 990 or 99 oous, charitable, etc., purposes, bu utions that were received during the General Rule applies to this or 0,000 or more during the year	t no such contributions tota e year for an exclusively re ganization because it rece	aled more than \$1,000 eligious, charitable, etc , eved <i>nonexclusively</i>			
990-EZ, or 990-PF), but	t must answer "No" on Part IV, I	al Rule and/or the Special Rules d line 2, of its Form 990, or check the fy that it doesn't meet the filing req	e box on line H of its				
For Paperwork Reduction A for Form 990, 990-EZ, or 990	ct Notice, see the Instructions -PF	Cat No 30613X	Schedule B (Form 990	D, 990-EZ, or 990-PF) (2018)			

Name of organization Employer identification number THE BUSINESS OF GOOD FOUNDATION 34-1973248 Part I Contributors (See instructions) Use duplicate copies of Part I if additional space is needed (d) (a) (b) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person TIMOTHY P MCCARTHY PO BOX 2300 Payroll \$ 654,423 Noncash ASHTABULA, OH 44005 (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person TIMOTHY P MCCARTHY DAF **Payroll** PO BOX 2300 \$ 321,055 Noncash ASHTABULA, OH 44005 (Complete Part II for noncash contributions) (a) (b) (c) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) **Total contributions** No. Type of contribution Name, address, and ZIP + 4 Person **Payroll** Noncash (Complete Part II for noncash contributions) (b) (c) (a) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions) (c) (a) (b) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions)

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