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.

Department of the Treasury

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

111	Cinai	Revenue Service Solo WWW.ms.	90177 0777	133011 101 11130	uctions and t	ne latest lille	// // lat	1011.	
		lendar year 2018 or tax year beginning				<u>, and endir</u>			, 20
Na	me of	foundation STAN R ARNER AND NA	NCY A	ARNER CH	ARITABLE		- 4	A Employer identi	
	FOU	NDATION						81-41086	69
N	ımber	and street (or P O box number if mail is not delivered	o street ac	Idress)		Room/suite	E	3 Telephone numb	ber (see instructions)
	142	2 BREMEN CIRCLE NW						(330) 4:	95-9703
<u></u>		own, state or province, country, and ZIP or foreign post	al code			 .		(330) 1	
٠.	., 0	own, state or province, country, and 21 or loreign post	J, 0000					If exemption applic	cation is
	CAN	TON, OH 44708						pending, check her	
G	Che	ck all that apply Initial return		Initial return	of a former p	oublic chari	ty c	1 Foreign organiza	ations check here
		Final return		Amended re	turn			2 Foreign organiz	
		Address change		Name chang	e			85% test check computation .	here and attach
H	Che	ck type of organization X Section 501	(c)(3) ex	kempt private	foundation		T	•	
ſ	\neg s	section 4947(a)(1) nonexempt charitable trust	По	ther taxable pr	ivate founda	tion D 4	┧╎	•	b)(1)(A) check here .
ī		market value of all assets at J Acco				rual	٦.		s in a 60-month termination
•			ther (sp				'		b)(1)(B) check here
				(d) must be on ca	ash basis)	•	_		
	_	Analysis of Revenue and Expenses (The			T				(d) Disbursements
		total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	(4)	Revenue and penses per books	(b) Net inve		(c)	Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions gifts, grants etc , received (attach schedule) .				· · · · · · · · · · · · · · · · · · ·			
	2	Charles X if the foundation is not required to							
	3	attach Sch B		25		25.			
	4	Dividends and interest from securities	-	5,201		5,201.			
	- т 5 а	Gross rents							
	b	Net rental income or (loss)							
au		Net gain or (loss) from sale of assets not on line 10		13,249		· · · · · · · · · · · · · · · · · · ·			
Revenue	b	Gross sales price for all 36, 965 assets on line 6a	 , 	• • • • • • • • • • • • • • • • • • • •					
Š		Capital gain net income (from Part IV, line 2) .			1	3,249.			
8	7	Net short-term capital gain	<u> </u>						
	8 9	Income modifications							
		Gross sales less returns							
	_	and allowances							-
		Cross profit or (loss) (attach schedule)							
	11	Other income (attach schedule)	-		=-				
	12	Total. Add lines 1 through 11		18,475.	1	8,475.			
_				0.					
_ŭ	13	Compensation of officers, directors, trustees, etc	<u> </u>			-	-		
186	14	Other employee salaries and wages	 	· · · · · · · ·	_	-			
Se S	15	Pension plans, employee benefits	 	<u>-</u>	/ =				 -
滋	14 15 16 a b c 17 18 19	Legal fees (attach schedule)	<u> </u>			ECEIV			
. <u>ģ</u>	b	Accounting fees (attach schedule)			\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		-D	$\overline{}$	
鬔	C	Other professional fees (attach schedule)			 /º/− №	V 18 20)	_		
紫	17	Interest	-		 	<u> </u>	'a]8/ 	1
Ę,	18	Taxes (attach schedule) (see instructions)			000	DEN, UT	,	/ 9/	-
ΪĒ	19	Depreciation (attach schedule) and depletion.			- 30/	EN	\rightarrow	<u>\&</u> /	
A	20	Occupancy	ļ		 		<u> </u>	"/	
and /	21	Travel, conferences, and meetings	<u> </u>				_	J	
a	22	Printing and publications	<u> </u>	100					
Operating	23	Other expenses (attach schedule) $ATCH$, $\ensuremath{\mbox{1}}$,		100.					
ati	24	Total operating and administrative expenses.							
ě		Add lines 13 through 23		100.					
ŏ	25	Contributions, gifts, grants paid		53,500.			•		53,500
_	26	Total expenses and disbursements Add lines 24 and 25		53,600.					53,500
	27	Subtract line 26 from line 12							
		Excess of revenue over expenses and disbursements		-35,125.			_		1_
		Net investment income (if negative, enter -0-)			1	8,475.			
		Adjusted net income (if negative enter -0-)							

Fo	rm 990	-PF (2018) STAN R ARNER AND NAN	CY A ARNER CHARIT	ABLE 81	-4108669 Page 2
		Attached schedules and amounts in the	Beginning of year	End o	f year
ئا 	art li	Balance Sheets description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	24,416.	10,497.	
	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 ▶	- , -	-	
ß	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges	1		
As		Investments - U S and state government obligations (attach schedule).		- · · · · · · · · · · · · · · · · · · ·	
,		Investments - corporate stock (attach schedule) ATCH 2		93,304.	178,922
	i i	· · · · · · · · · · · · · · · · · · ·		22,001.	
	11 C	Investments - corporate bonds (attach schedule)			
		Investments - land, buildings, and equipment basis Less accumulated depreciation	•	-	
		(attach schedule)	_		
	12	Investments - mortgage loans			· · · · · · · · · · · · · · · · · · ·
	13 14	Investments - other (attach schedule)			
		Land, buildings, and equipment basis			
		equipment basis Less accumulated depreciation (attach schedule)			
	15	Other assets (describe ►)			
	16	Total assets (to be completed by all filers - see the	205 257	102 001	170 000
_		ınstructions Also, see page 1, item I)	225,857.	103,801.	178,922
	17	Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
ij	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable (attach schedule)			
Ï	22	Other liabilities (describe ▶)			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here ▶			
Net Assets or Fund Balances		and complete lines 24 through 26, and lines 30 and 31.		i	
ano	24	Unrestricted			
ali	25	Temporarily restricted			
d E	26	Permanently restricted			
Ĭ		Foundations that do not follow SFAS 117, check here ► X			
F		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds	225,857.		·
ets	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
SS	29	Retained earnings, accumulated income, endowment, or other funds			
t A	30	Total net assets or fund balances (see instructions)	225,857.	0.	
Ne	31	Total liabilities and net assets/fund balances (see			
_		instructions)	225,857.	0.	
e	art I	Analysis of Changes in Net Assets or Fund Balar	nces	·····	
		al net assets or fund balances at beginning of year - Part I		st agree with	
-		of-year figure reported on prior year's return)			225,857
2		er amount from Part I, line 27a			-35,125
		er increases not included in line 2 (itemize)			<u> </u>
		lines 1, 2, and 3			190,732
		reases not included in line 2 (itemize)			

190,732.

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

Page 3

(a) List and	describe the kind(s) of property sold (for y brick warehouse, or common stock, 20	r example, real estate,	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a			ļ		
С			 		
d	·		-	<u> </u>	
е				<u> </u>	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo ((e) plus (f) minu	
a		- 	<u> </u>		
b			 	· · · · · · · · · · · · · · · · · · ·	
<u> </u>			-		
_d					
Complete only for accel	ts showing gain in column (h) and owne	ad by the foundation on 12/31/69	<u> </u>	-	
Complete only for asser				Gains (Col (h) ga (k), but not less to	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	COI	Losses (from co	
a					
b					
С					
d					
е					
2 Capital gain net incoi	me or (net canital loss)	gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		
3 Net short-term capita	al gain or (loss) as defined in section				
	n Part I, line 8, column (c) See in				
=			3		
	n Under Section 4940(e) for Re		ncome		
	for the section 4942 tax on the distr		ase perio	d?	Yes N
	esn't qualify under section 4940(e)				
1 Enter the appropriate (a)	e amount in each column for each y		ing any er	(d)	
Base period years	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		Distribution ra	
Calendar year (or tax year beginning i	n) rejusted qualifying distributions	1101 10100 0, 1101101101100 000 000 000		(col (b) divided by	COI (C))
2016					
2015			 		
2014		<u> </u>	 		
2013			-		
2010					
2 Total of line 1, colum	ın (d)		2		
	ratio for the 5-year base period - divi				
	the foundation has been in existence		3	<u> </u>	
•		-			
4 Enter the net value o	f noncharitable-use assets for 2018	from Part X, line 5	4		
Multiply line 4 by line	3		5	.	
6 Enter 1% of net inves	stment income (1% of Part I, line 27b	o)	6		
7 Add lines 5 and 6			7		
e Entor avalituas dista	hutions from Bort VII. bea 4		8		
	butions from Part XII, line 4 or greater than line 7, check the bo			using a 1% tax	rate See t

_	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	nstru		s)
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1)			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	-		370.
	here and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of			t i
	Part I, line 12, col (b)		- -	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			
3	Add lines 1 and 2			370.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			370.
6	Credits/Payments			
а	2018 estimated tax payments and 2017 overpayment credited to 2018 6a			'
b	Exempt foreign organizations - tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d			0.
8	Enter any penalty for underpayment of estimated tax. Check here			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			370.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2019 estimated tax ▶ Refunded ▶ 11			
Pai	t 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		Yes	No
	participate or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			
	Instructions for the definition	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities	-		
C	Did the foundation file Form 1120-POL for this year?	1c		<u> </u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation \blacktriangleright \$ (2) On foundation managers \blacktriangleright \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers \$. <u>, ,</u>
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities			:
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles	-		- , .
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	_5		
_	If "Yes," attach the statement required by General Instruction T	.		'
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		х	
_	conflict with the state law remain in the governing instrument?	6 7	$\frac{x}{x}$	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV			
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			
	If the answer is "Vee" to line 7, has the foundation furnished a copy of Ferry 000 DF to the Attended Control			,
O	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	8b	_x	-
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		41	
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 tax year beginning in 2018? See the instructions for Part XIV If "Yes,"	9		Х
	complete Part XIV	-		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	Х	
	Hulliou alla audi 00000 ; , , , , , , , , , , , , , , , ,			

orm		3669		Page 5
Par	t VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement. See instructions	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A	_		
14	The books are in care of S. FRANKLIN ARNER Telephone no 330-495-	-970	3	
	Located at ▶1422 BREMEN CIRCLE NW CANTON, OH ZIP+4 ▶ 44708			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		▶	. 🔲
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country >			
⊃ar	t 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? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			ļ ,
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	•		
	(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)?		_	j
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			• :
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days) Yes X No	١,		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		X
	Organizations relying on a current notice regarding disaster assistance, check here	•		
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	·		
	were not corrected before the first day of the tax year beginning in 2018?	1c		X
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))	'	.	
а	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and	_		
	6e, Part XIII) for tax year(s) beginning before 2018? Yes X No			-
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			:
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	•			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?		,	
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			

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 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? Form **990-PF** (2018)

3b

4b

During the year, did the foundation pay or incur any amount to (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?		Yes	
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?		162	No
directly or indirectly, any voter registration drive? Yes X No		7	
	.		
(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes X No			
(4) Provide a grant to an organization other than a charitable, etc., organization described in			
section 4945(d)(4)(A)? See instructions		٠	
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational			
purposes, or for the prevention of cruelty to children or animals? Yes X No			
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in			
Regulations section 53 4945 or in a current notice regarding disaster assistance? See instructions.	5b		X
Organizations relying on a current notice regarding disaster assistance, check here		-	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax	_		
because it maintained expenditure responsibility for the grant? Yes X No			
If "Yes," attach the statement required by Regulations section 53 4945-5(d)		-	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums			
on a personal benefit contract?			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6b		X
If "Yes" to 6b, file Form 8870	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes X No			
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	7b		
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in	· · · ·		
The tree realization designed to the designed that are paymented to the research		. <i>'</i>	•
remuneration or excess parachute payment(s) during the year?			
remuneration or excess parachute payment(s) during the year? Yes No Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Empl	oyees,		
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Empland Contractors	oyees,		
Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Empland Contractors 1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions. (b) Title, and average (c) Compensation (d) Contributions to			
Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Empland Contractors List all officers, directors, trustees, and foundation managers and their compensation. See instructions.	Oyees, (e) Expense other allo	accour	nt,
Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Empland Contractors List all officers, directors, trustees, and foundation managers and their compensation. See instructions. (a) Name and address (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation	(e) Expense	accour	nt,
Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Empland Contractors List all officers, directors, trustees, and foundation managers and their compensation. See instructions. (a) Name and address (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation	(e) Expense	accour	nt,
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Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Empland Contractors List all officers, directors, trustees, and foundation managers and their compensation. See instructions. (a) Name and address (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation	(e) Expense	e accour wances	i
Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Empland Contractors 1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions. (a) Name and address (b) Title, and average hours per week devoted to position (lf not paid, enter -0-) (lf not paid, enter -0-) (o) Compensation (o) Contributions to employee benefit plans and deferred compensation (o) . (o) O. (o) Contributions to employee benefit plans and deferred compensation (o) . (o) Contributions to employee benefit plans and deferred compensation (o) . (o) Contributions to employee benefit plans and deferred compensation (o) . (o) Contributions to employee benefit plans and deferred compensation (o) . (o) Contributions to employee benefit plans and deferred compensation (o) . (o) Contributions to employee benefit plans and deferred compensation (o) . (o) Contributions to employee benefit plans and deferred compensation (o) . (o) Contributions to employee benefit plans and deferred compensation (o) . (o) Contributions to employee benefit plans and deferred compensation (o) . (o) Contributions to employee benefit plans and deferred compensation (o) . (o) Contributions to employee benefit plans and deferred compensation (o) . (o) Contributions to employee benefit plans and deferred compensation (o) . (o) Contributions to employee benefit plans and deferred compensation (o) Contributions to employee benefit plans and deferred compensation (o) . (o) Contributions to employee benefit plans and deferred compensation (o) . (o) Contributions to employee benefit plans and deferred compensation (o) . (o) Contributions to employee benefit plans and deferred compensation	(e) Expense other allo	wances	0.
Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Empland Contractors 1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions. (a) Name and address (b) Title, and average hours per week devoted to position (if not paid, enter -0-) (a) Contributions to employee benefit plans and deferred compensation (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (a) Name and address (b) Title, and average hours per week devoted to position (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allo	wances	0.
Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employee and Contractors 1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions. (a) Name and address (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation 0. 0. 1 Compensation of five highest-paid employees (other than those included on line 1 - see instruction when the plant is per week to be provided to position the provided to position t	(e) Expense other allo	ne, e	0.
Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employers and Contractors 1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions. (a) Name and address (b) Title, and average hours per week devoted to position (lf not paid, enter -0-) (a) Contributions to employee benefit plans and deferred compensation (b) Title and average (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation of the highest-paid employees (other than those included on line 1 - see instruction "NONE."	(e) Expense other allo	ne, e	0.
Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Empland Contractors 1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions. (a) Name and address (b) Title, and average hours per week devoted to position (c) Compensation (if not paid, enter -0-) (d) Contributions to employee benefit plans and deferred compensation. 0 . 2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions. (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred deferred deferred to position (d) Contributions to employee benefit plans and deferred deferred deferred deferred to position (e) Compensation (d) Contributions to employee benefit plans and deferred plans and deferred plans and deferred deferred deferred deferred to position (e) Compensation (f) Contributions to employee benefit plans and deferred pla	(e) Expense other allo	ne, e	0.
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Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employer and Contractors 1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions. (a) Name and address (b) Title, and average hours per week devoted to position (c) Compensation (If not paid, enter -0-) (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allo	ne, e	0.
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Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employer and Contractors 1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions. (a) Name and address (b) Title, and average hours per week devoted to position (c) Compensation (If not paid, enter -0-) (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allo	ne, e	0.
Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employer and Contractors 1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions. (a) Name and address (b) Title, and average hours per week devoted to position (c) Compensation (If not paid, enter -0-) (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allo	ne, e	0.
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Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employer and Contractors 1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions. (a) Name and address (b) Title, and average hours per week devoted to position (c) Compensation (If not paid, enter -0-) (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allo	ne, e	0.
Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employer and Contractors 1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions. (a) Name and address (b) Title, and average hours per week devoted to position (c) Compensation (If not paid, enter -0-) (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allo	ne, e	0.

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emploand Contractors (continued)	oyees,
3 Five	highest-paid independent contractors for professional services. See instructions. If none, enter "NON	E."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		
	per of others receiving over \$50,000 for professional services	ļ
Part IX-A	Summary of Direct Charitable Activities undation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of	
	undations four largest direct charitable activities during the tax year include relevant statistical information such as the number of the four field of the fi	Expenses
1 N/A		
2		
3		
4		
Part IX-B	Summary of Program-Related Investments (see instructions)	
	he two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE		
2		
	rogram-related investments. See instructions	
NONE		1
Total. Add	lines 1 through 3 · · · · · · · · · · · · · · · · · ·	

Pa	Part X Minimum Investment Return (All domestic foundations must complessee instructions)	ete this part. Foreign found	dations,
1	Fair market value of assets not used (or held for use) directly in carrying out purposes	t charitable, etc.	
а	a Average monthly fair market value of securities	1a	
	b Average of monthly cash balances		
С	c Fair market value of all other assets (see instructions)		
d	d Total (add lines 1a, b, and c)		0.
е	e Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2		2	
3			
4		ater amount, see	
	instructions)		
5			0.
6			0.
Pa	Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) pr and certain foreign organizations, check here ▶ and do not complete this	ivate operating foundations	
1	Minimum investment return from Part X, line 6	1	
2 a	2a Tax on investment income for 2018 from Part VI, line 5 2a	370.	
b	b Income tax for 2018 (This does not include the tax from Part VI) 2b		
С	c Add lines 2a and 2b	2c	370.
3			-370.
4			
5		5	-370.
6			
7			
	line 1		
Pa	Part XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., pu	rposes	
а	a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	53,500.
þ	b Program-related investments - total from Part IX-B	1b	
2	2 Amounts paid to acquire assets used (or held for use) directly in carrying out	t charitable, etc,	
	purposes	2	
3			
а	a Suitability test (prior IRS approval required)	3a	
b			
4			53,500.
5			
	Enter 1% of Part I, line 27b See instructions		0.
6			53,500.
	Note: The amount on line 6 will be used in Part V, column (b), in subseque		whether the foundation

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

Page 9

Pa	rt XIII Undistributed Income (see instr	uctions)			
	· · · · · · · · · · · · · · · · · · ·	(a)	(b)	(c)	(d)
1	Distributable amount for 2018 from Part XI.	Corpus	Years prior to 2017	2017	2018
	line 7				0.
2	Undistributed income, if any, as of the end of 2018				
	Enter amount for 2017 only				,
b	Total for prior years 20 16 ,20 15 ,20 14				
	Excess distributions carryover, if any, to 2018				
	From 2013				
	From 2014				
	From 2015				
	I From 2016				'
	From 2017 519,235.				
	Total of lines 3a through e	519,235.	- 1		• .
	Qualifying distributions for 2018 from Part XII,				
•	line 4 ▶ \$ 53,500.				
а	Applied to 2017, but not more than line 2a				
	· · ·				
i.	Applied to undistributed income of prior years (Election required - see instructions)				
С	Treated as distributions out of corpus (Election required - see instructions)				
	Applied to 2018 distributable amount				
	Remaining amount distributed out of corpus	53,500.			
	Excess distributions carryover applied to 2018	,			
	(If an amount appears in column (d), the same				
	amount must be shown in column (a))				
6	Enter the net total of each column as indicated below:				
2	Corpus Add lines 3f, 4c, and 4e Subtract line 5	572,735.			1
	· · · · · · · · · · · · · · · · · · ·				
b	Prior years' undistributed income Subtract				,
c	line 4b from line 2b				
·	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a) tax has been previously assessed				
	· ,				
a	Subtract line 6c from line 6b Taxable amount - see instructions		i		
е	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)				
	Excess distributions carryover from 2013 not				
۰	applied on line 5 or line 7 (see instructions)				
۵					
J	Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	572 , 735.			1
10	Analysis of line 9				
	Excess from 2014				
	Excess from 2015				
	Excess from 2016				
	Excess from 2017 519, 235.				
	Excess from 2018 53,500 .				
e	LAGGOS HOM ZOTO , , ,				- 000 DE

Pa	rt XIV Private Op	erating Foundations	s (see instructions a	nd Part VII-A, quest	ion 9)	NOT APPLICABLE
1 a	If the foundation has	received a ruling or o	letermination letter tha	t it is a private opei	ating	
	foundation, and the rulin	g is effective for 2018, e	nter the date of the ruling		▶	
b	Check box to indicate	whether the foundation	is a private operating	foundation described in	n section 4942	2(j)(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years		(e) Total
	justed net income from Part	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(0) 10021
	I or the minimum investment return from Part X for each					
	year listed					
b	85% of line 2a					
С	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					
е	Qualifying distributions made directly for active conduct of					
	exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the			X		
	alternative test relied upon					
a	"Assets" alternative test - enter					
	(1) Value of all assets (2) Value of assets qualifying under section					
h	4942(j)(3)(B)(i)	-				 -
U	enter 2/3 of minimum invest-			\		
	ment return shown in Part X,					
	line 6 for each year listed		/		 	
С	"Support' alternative test - enter					
	(1) Total support other than gross investment income					
	(interest, dividends, rents,					
	payments on secunties loans (section 512(a)(5)),					
	or royalties)			,		
	(2) Support from general public and 5 or more					V
	exempt organizations as	[
	provided in section 4942 (j)(3)(B)(iii)					
	(3) Largest amount of sup-					\
	port from an exempt organization					\
	(4) Gross investment income.					`
Pa				only if the found	ation had \$5,000	or more in assets a
	any time d	uring the year - see	instructions.)			
1	Information Regarding					-
а	List any managers of					
	before the close of any	tax year (but only if th	iey have contributed n	nore than \$5,000) (S	ee section 507(d)(2))
	ATTACHME	NT 4				
b	List any managers of					lly large portion of the
	ownership of a partner	ship or other entity) of	which the foundation	has a 10% or greater	· interest	
	N/A					
2	Information Regarding	g Contribution, Grant	, Gift, Loan, Scholarsh	ip, etc., Programs:		. ,
	Check here ▶ if t	he foundation only i	makes contributions	to preselected char	itable organizations	and does not accep
		or funds if the founda	ation makes gifts, gra	ints, etc. to individua	ils or organizations i	under other conditions
	complete items 2a, b, o			, ,	•	
a	The name, address, a			e person to whom an	olications should be ac	Idressed
-	N/A			- F		
	The form in which appl	lications should be sub	mutted and information	n and materials they	should include	
~	appl			sam materials tricy	J. July Holde	
	N/A					
		noc		· · · · · · · · · · · · · · · · · · ·	······································	
С	Any submission deadli	100				
	N/A					
н	Any restrictions or hi	mitations on awards	such as by decore	inhical areas charits	hle fields kinds of	institutions or other
u	factors	ations on awaius,	caon as by geogra	ipinoui aicas, citalita	ibio ficida, Kilida Ul	moditations, or other
	N/A					
	,					

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3 Grants and Contributions Paid Du	ring the Year or App	roved for	Future Payment	
3 Grants and Contributions Paid Du Recipient Name and address (home or business)	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	contribution	
a Paid during the year				
ATCH 5				
AICH 3				
				50.500
Total		<u></u>	▶ 3a	53,500.
b Approved for future payment				
Total	<u> </u>	<u> </u>	▶ 3b	

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er gross amounts unless otherwise indicated		ivities ated business income	Excluded by	section 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
a					(OCC INSTRUCTIONS)
b					
c				:	
d					
e					
g Fees and contracts from government agencies		_	-		
Membership dues and assessments				-	
Interest on savings and temporary cash investments			14	25.	
Dividends and interest from securities			14	5,201.	
Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property			 		
Net rental income or (loss) from personal property			-		
Other investment income			18	13,249.	·· ··
Gain or (loss) from sales of assets other than inventory			 		
Net income or (loss) from special events · · · · Gross profit or (loss) from sales of inventory					
Other revenue a					
b					
c					
d					
e				10 475	
Subtotal Add columns (b), (d), and (e)				18,475.	10 47
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)					18,47
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculated and the substitution of Activities. Relationship of Activities	ulations) s to the A	ccomplishment of E	xempt Purp	13	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calc	ulations) s to the A	ccomplishment of E	xempt Purp	ooses of Part XVI-A contribu	ted importantly to
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculated a Relationship of Activities Relationship of Activities Explain below how each activities	ulations) s to the A	ccomplishment of E	xempt Purp	ooses of Part XVI-A contribu	ted importantly to
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Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculated a Relationship of Activities Relationship of Activities Explain below how each activities	ulations) s to the A	ccomplishment of E	xempt Purp	ooses of Part XVI-A contribu	ted importantly to
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		Exempt Organ	nizations								
1 [old the	organization direct	ly or indirectly	engage in any	of the followin	g with any	other organi	zation describe	ed	Yes	No
		tion 501(c) (other	•			•	-				
		zations?			J , .		,	- 5 ,			
	-	ers from the reporting	a foundation to	a noncharitab	le exempt organ	nization of					
		sh	-		· -				1a(1		X
	•	ner assets								_	x
•	•	ransactions								+-	
			naharitahla aya	mnt organizatio					45/4		x
		es of assets to a no									X
-	•	chases of assets fro			•						$\frac{x}{x}$
		ntal of facilities, equi									X
		mbursement arrange									
		ans or loan guarantee									X
		formance of service			_)	X
		g of facilities, equipm	_							<u> </u>	Х
		answer to any of th									
		of the goods, other									
	alue II	n any transaction or	sharing arran	gement, show	ın column (d) tl	he value o	of the goods,	other assets, o	r service	es rec	eived
(a) Line	e no	(b) Amount involved	(c) Name of	noncharitable exem	npt organization	(d) Desc	ription of transfer	s, transactions, and	shanng am	angeme	nts
		N/A				N/A					
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		foundation directly of	-					_	г		٦
		ed in section 501(c)) or in section 52	277	• • • • • • •		Y	es X	∫No
b lf	"Yes,	" complete the follow	wing schedule								
		(a) Name of organization	n	(b) Typ	pe of organization		(c)	Description of relat	ionship		
		·								_	
		penalties of perjury, I decla , and complete Declaration of						the best of my know	ledge and I	oelief, it	is true
Sign	London	, and complete Declaration of	preparer (other than t	axpayer) is based off a	iii iiiioiiiation oi which p	preparer nas an	y knowledge	T			
_	s	FRANKLIN ARN	ER a	1 1	4 / 2019	TRUST	EĒ		IRS discus		retum pelow?
Here	Sign	ature of officer or trustee	NA //	Date	/	Title		See instru			X No
		SINOW	the Mu	ley				L			
		Print/Type preparer's nar	me	Preparer's sig	nature		Date	Check	PTIN		
Paid								self-employed			
^o repa	arer	Firm's name					1	ırm's EIN			
Jse C		Firm's address		· · · · · ·			-	ming City			
	,	riiii 3 guule33					_	hone no			
							1 P	hone no			

2018 FORM 990-PF STAN R ARNER AND NANCY A ARNER CHARITABLE

81-4108669

ATTACHMENT 1

FORM 990PF, PART I - OTHER EXPENSES

DESCRIPTION
2017 STATE OF OHIO FILING FEE

REVENUE

AND

EXPENSES

PER BOOKS

100.

TOTALS

100.

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STOCK
- CORPORATE
II
PART
990PE,

ENDING <u>EMV</u>	178,922.	178,922.
Έ	_:	
ENDING BOOK VALUE	93,304.	93,304
BEGINNING BOOK VALUE	201,441.	201,441.
DESCRIPTION	EQUITY INVESTCHARLES SCHWAB	TOTALS

81-4108669

EXPENSE ACCT ATTACHMENT CONTRIBUTIONS TO EMPLOYEE - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION FORM 990PF, PART VIII NAME AND ADDRESS

COMPENSATION

ALLOWANCES AND OTHER BENEFIT PLANS

STANLEY FRANKLIN ARNER 1422 BREMEN CIRCLE NW CANTON, OH 44708

TRUSTEE

1422 BREMEN CIRCLE NW CANTON, OH 44708 JULIE ANN BUSH

TRUSTEE

1422 BREMEN CIRCLE NW KEITH ALLEN ARNER CANTON, OH 44708

TRUSTEE

GRAND TOTALS

ATTACHMENT 4

FORM 990PF, PART XV - INFORMATION REGARDING FOUNDATION MANAGERS

STANLEY FRANKLIN ARNER JULIE ANN BUSH KEITH ALLEN ARNER

81-4108669

FORM 990RF. PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 5

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
IPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOU

	NEW TO SUBSTITUTE CONTINUED OF		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
WISHES CAN HAPPEN 1170 S MAIN ST N. CANTON, OH 44720	PC .	GRANT A WISH - ANNUAL WISH-A-THON	5, 000.
YOUTH DYNAMICS PO BOX 486 BURLINGTON, WA 98233	PC	SUPPORT MINISTRY OF YOUTH DYNAMICS - DONATION PREFERENCE. DAVID HANTHORN	5, 000 .
LIGHTHOUSE MINISTRIES 550 W 6TH ST. LORAIN, OH 44052	PC	SUPPORT MINISTRY - COMPLETE ELECTRICAL AND PLUMBING UPDATES NEEDED FOR MINISTRY BUILDING	5,000
ROCK CITY CHURCH 4311 ANSON DR HILLIARD, OH 43026	PC	SUPPORT BUILDING FUND FOR NEW FACILITY	25,000
WOODSTOCK CHURCH 17495 PANAMA CITY BEACH PKWY PANAMA CITY BEACH, FL 32413	PC	ASSIST IN HURRICANE RELIEF	2,000
PERRY CHRISTIAN CHURCH 139 PERRY DR NW CANTON, OH 44708	D _Q	ANNUAL THANKSGIVING MEAL MINISTRY	1,500

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FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

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2018 FORM 990-PF

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2445ME 2740 11/9/2019

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT AND

2

MISCELANEOUS - \$1,000 OR LESS

VARIOUS, OH VARIOUS

VARIOUS

RECIPIENT NAME AND ADDRESS

PURPOSE OF GRANT OR CONTRIBUTION

AMOUNT

ATTACHMENT 5 (CONT'D)

10,000.

MISCELLANEOUS GIFTS TO VARIOUS 501(C)(3) ENTITIES FOR THEIR MISSION

TOTAL CONTRIBUTIONS PAID

53,500.

ATTACHMENT 5 PAGE 20