2949134108804 9 Extended to November 15, 2019 Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation tot enter social security and

Form **990-PF**

Department of the Treasury

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

Do not enter social security numbers on this form as it may be made public.

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

	calendar year 2018 or tax year beginning	o governmotor i lor mot	, and ending	-	Open to rubile inspection
Nar	me of foundation			A Employer identification	number
S	teps Ahead Charitable Fam				
Ċ	o John C Bartley		81-4754425		
Nun	nber and street (or P O box number if mail is not delivered to street	B Telephone number			
P	O Box 80258			330-417-26	52
City	y or town, state or province, country, and ZIP or foreign po	ostal code		C if exemption application is p	ending, check here
C	anton, OH 44706				_
GC	Check all that apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizations	s, check here
	Final return	Amended return		3	
	X Address change	Name change	<u> </u>	Foreign organizations me check here and attach co	ering the 85% test, proputation
H C	Check type of organization. X Section 501(c)(3) exi	empt private foundation	CIA	E If private foundation sta	tus was terminated
L		Other taxable private founda	tion /	under section 507(b)(1)	(A), check here
I Fa	· I —	ng method: X Cash	Accrual	F If the foundation is in a	60-month termination
	rom Part II, col. (c), line 16)	ner (specify)	 	under section 507(b)(1)	(B), check here $ ightharpoonup$
_	\$ 580,468. (Part I, colum	in (d) must be on cash basis	S.)		,
Pa	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(0) Disbursements for charitable purposes
_	necessarily equal the amounts in column (a))	expenses per books	income	income	(cash basis only)
	1 Contributions, gifts, grants, etc., received	250,000.			
	2 Check if the foundation is not required to attach Sch. B Interest on savings and temporary		4-4-5	 	
	3 cash investments	1,456.	1,456.		Statement 1
	4 Dividends and interest from securities	888.	888.		Statement 2
	5a Gross rents				
	b Net rental income or (loss)				
ě	6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all				
Revenue	assets on line 6a		0.		<u> </u>
ě	7 Capital gain net income (from Part IV, line 2)		<u> </u>		
	8 Net short-term capital gain				
	9 Income modifications 102 Gross sales less returns			 	<u> </u>
	10a and allowances				
	b Less Cost of goods sold c Gross profit or (loss)		· · · · · · · · · · · · · · · · · · ·	<u>. </u>	,
	11 Other income		· · · · · · · · · · · · · · · · · · ·		<u> </u>
	12 Total. Add lines 1 through 11	252,344.	2,344.	0.	}
_	13 Compensation of officers, directors, trustees, etc	0.	0.	0.	0.
	14 Other employee salaries and wages			 	<u> </u>
	15 Pension plans, employee benefits				·
Ses	100 1 140	·			
ē	b Accounting fees Stmt 3	400.	40.	0.	360.
Expense	c Other professional fees			DECEN	
<u>×</u>	17 Interest			RECEIVE	D
rat	18 Taxes Stmt 4 [22.	0	140.	
nist	19 Depreciation and depletion			NOV & F 201	
Ē	20 Occupancy				S. S.
Ă	21 Travel conferences, and meetings			OCDE	
Operating and Administrative	22 Printing and publications		L	OGDEN, U	
ing	23 Other expenses Stmt 5	121.	21.	0.	0.
rat	24 Total operating and administrative	5.43			2.50
ď	expenses. Add lines 13 through 23	543.	61.	0.	360.
_	25 Contributions, gifts, grants paid	100,000.	·····		100,000.
	26 Total expenses and disbursements.	100 543	C1		100 300
	Add lines 24 and 25	100,543.	61.	0.	100,360.
	27 Subtract line 26 from line 12:	151 001			[
	a Excess of Tevenue over expenses and disbursements	151,801.	2,283.	 	
	b Net investment income (if negative, enter -0-)		2,203.	0.	
	c Adjusted net income (if negative, enter -0-)				<u> </u>

823501 12-11-18 LHA For Paperwork Reduction Act Notice, see Instructions.

or	' Steps Ahead Charitable rm 990-PF(2018) c/o John C Bartley		81-4	754425 Page
P	Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
_	<u></u>	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1 Cash - non-interest-bearing	442,211.	254,705.	254,705.
	2 Savings and temporary cash investments	444,211.	234,703.	254,705
	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			
i	7 Other notes and loans receivable			
	Less; allowance for doubtful accounts			
2	8 Inventories for sale or use			<u></u>
ממ	9 Prepaid expenses and deferred charges			
<	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock			
	c Investments - corporate bonds			
	11 Investments - land, buildings, and equipment basis			
	Less accumulated depreciation	_		
	12 Investments - mortgage loans	0.	220 207	225 762
	13 Investments - other Stmt 6		339,307.	325,763
	14 Land, buildings, and equipment: basis			
	Less accumulated depreciation 15 Other assets (describe	_	·	
	16 Total assets (to be completed by all filers - see the	-′		
	instructions. Also, see page 1, item I)	442,211.	594,012.	580,468.
_	17 Accounts payable and accrued expenses			000,100
	18 Grants payable			
ņ	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
2	21 Mortgages and other notes payable			
L	22 Other liabilities (describe >)		
			_	
	23 Total liabilities (add lines 17 through 22)	0.	0.	
	Foundations that follow SFAS 117, check here			
2	and complete lines 24 through 26, and lines 30 and 31.			•
	24 Unrestricted			
	25 Temporarily restricted 26 Permanently restricted		····	
2	Foundations that do not follow SFAS 117, check here			
2	and complete lines 27 through 31.			
5	27 Capital stock, trust principal, or current funds	0.	0.	
וני	28 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
ŝ	29 Retained earnings, accumulated income, endowment, or other funds	442,211.	594,012.	•
	30 Total net assets or fund balances	442,211.	594,012.	
				ı
	31 Total liabilities and not assets fund balances	442 211.	594 012	

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	442,211.
2	Enter amount from Part I, line 27a	2	151,801.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	594,012.
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	594,012.

Part IV Capital Gains	and Losses for T	ax on Investmen	t Income					_	<u> </u>
	(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired (P - Purchase D - Donation			acquired lay, yr.)	(d) Date sold (mo., day, yr.)		
1a				1			-		
b NO	b NONE								
C				<u> </u>					
d				<u> </u>				-	
e	40.5			Ц.,					
(e) Gross sales price	e) Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale							ain or (loss s (f) minus (
<u>a</u>									
C									
d									
е									
Complete only for assets showin						(1)	Gains (C	ol. (h) gain	minus
(i) FMV as of 12/31/69	(j) Adjusted bas as of 12/31/69		cess of col (i) col (j), if any			COI.		not less that (from col. (
a									
<u>b</u>	_			_				•	
c d									
e									
	(If nair	ı, also enter ın Part I, line	7	٦					
2 Capital gain net income or (net ca		s), enter -0- in Part I, line)	2				
3 Net short-term capital gain or (los		1222(5) and (6):		٦					
If gain, also enter in Part I, line 8, if (loss), enter -0- in Part I, line 8	column (c).			-	3				
Part V Qualification U	nder Section 494	0(e) for Reduced	Tax on Net	Inv	estr	nent Inc	ome		
(For optional use by domestic private									
	·								
If section 4940(d)(2) applies, leave th	is part biank.								
Was the foundation liable for the sect		• •	•	rod?					Yes X No
If "Yes," the foundation doesn't qualify									
1 Enter the appropriate amount in e	ach column for each yea	·	tore making any e						(d)
Base periód years	Adjusted au	(b) alifying distributions	Net value of no	(c) nchai		-use assets		Distrib	(d) ution ratio
Calendar year (or tax year beginning 2017	ig iii) 1.10,001.00 4.0	59,978.				5,348	(cor (b) divided by cor. (c)		.128888
2016		0.				2,500	} 	.000000	
2015							+		
2014									
2013									
									120000
2 Total of line 1, column (d)		a tha tatal an long O by F	0				2		.128888
3 Average distribution ratio for the 5 the foundation has been in exister		e the total on line 2 by 5.	u, or by the numb	erory	/ears		3		.064444
the fourtation has been in exister	ice ii iess iiiaii 5 years						۲		***************************************
4 Enter the net value of noncharitab	le-use assets for 2018 fr	om Part X, line 5					4		397,878.
5 Multiply line 4 by line 3							5	-	25,641.
3 Multiply line 4 by line 3									
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)						6		23.
7 Add lines 5 and 6							7	_	25,664.
8 Enter qualifying distributions from	Part XII, line 4						8		100,360.
If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in F	Part VI, line 1b, and comp	olete that part usin	g a 19	% tax ı	rate.			

Steps Ahead Charitable Family Foundation

Form 990-PF (2018) C/O John C Bartley	4040/5\ 4040"		81-4/		Pagi	
Part VI Excise Tax Based on Investment Income (Section			948 - SE	e instru	ctions)	 ,
1a Exempt operating foundations described in section 4940(d)(2), check here	and enter "N/A" on lini	e 1.				
Date of ruling or determination letter: (attach copy of letter	if necessary-see ins	tructions)				
b Domestic foundations that meet the section 4940(e) requirements in Part V, check her	1		23	<u>.</u>		
of Part I, line 27b						7
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, en	ter 4% of Part I, line	12, col. (b).				
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations of		, , .	2		0	<u> </u>
3 Add lines 1 and 2			3		23	<u>.</u>
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations o	nly: others, enter -0-)		4	-		.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			5		23	<u>.</u>
6 Credits/Payments:						i i
a 2018 estimated tax payments and 2017 overpayment credited to 2018	6a	0.				- 1
· ·	6b	0.	ľ			- 1
b Exempt foreign organizations - tax withheld at source	6c	0.				-
c Tax paid with application for extension of time to file (Form 8868)	 	0.				
d Backup withholding erroneously withheld	6d	<u> </u>				┦
7 Total credits and payments. Add lines 6a through 6d			7		0	
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 i	s attached		8			<u>.</u>
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		>	9		23	<u>· </u>
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overp	aid	. ▶	10			_
11 Enter the amount of line 10 to be, Credited to 2019 estimated tax		Refunded ▶	11			_
Part VII-A Statements Regarding Activities						
1a During the tax year, did the foundation attempt to influence any national, state, or loca	l legislation or did it p	articipate or intervene	ın	٠,	Yes No	
any political campaign?				1a	X	_
b Did it spend more than \$100 during the year (either directly or indirectly) for political p	ourposes? See the ins	tructions for the defin	ition	1b	X	_
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and co	pies of any materials	published or				7
distributed by the foundation in connection with the activities.		•			- 1	
c Did the foundation file Form 1120-POL for this year?				1c	X	
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during	no the year.					7
(1) On the foundation. > \$ 0 • (2) On foundation man		0.				1
e Enter the reimbursement (if any) paid by the foundation during the year for political ex	· · · · · · · · · · · · · · · · · · ·					
managers. > \$ 0.	penditure tax impose	u on touridation				
2 Has the foundation engaged in any activities that have not previously been reported to	the IDC2			2	— X	
	IIIE INO?				<u>^</u>	- -
If "Yes," attach a detailed description of the activities.		l	_	,	1	1
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 4a	X	
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?					Х	<u> </u>
·	b If "Yes," has it filed a tax return on Form 990-T for this year? N/A					
5 Was there a liquidation, termination, dissolution, or substantial contraction during the	year?			5	Х	`
If "Yes," attach the statement required by General Instruction T						1
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisf	fied either:					
 By language in the governing instrument, or 				:		
 By state legislation that effectively amends the governing instrument so that no man 	datory directions that	conflict with the state	law		_	╛
remain in the governing instrument?				6	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		7	Х	_
	•	• •				7
8a Enter the states to which the foundation reports or with which it is registered. See inst	ructions.					
OH				-		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to	the Attorney General	(or designate)		-		
of each state as required by General Instruction G? If "No," attach explanation	rationally denoted	(5. 000.g., a.to)			$\overline{\mathbf{x}}$	
9 Is the foundation claiming status as a private operating foundation within the meaning	of section 4049(1)/2)	or 4942(1)(5) for cale	ndar	"		ገ ``
year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes,		טו אטאב(ו)(טן וטו נמוכי	iidai	9		
•		c	tmt 7	10	X	<u> </u>
10 Did any persons become substantial contributors during the tax year? if "Yes," attach a s	scnedule fisting their nam	es and addresses 🤛	- 444 - /	10	43	_

Steps Ahead Charitable Family Foundation

c/o John C Bartley 81-4754425 Form 990-PF (2018) Page 5 Part 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 Х section 512(b)(13)? If "Yes," attach schedule. See instructions 11 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 X 13 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A 14 The books are in care of ▶ John C Bartley Telephone no > 330-417-2652Located at ▶ 2861 MacDuff Dr NW, North Canton, OH ZIP+4 ▶44720 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here N/A **▶** | 15 | and enter the amount of tax-exempt interest received or accrued during the year Yes No 16 At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, 16 Х 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 Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required Yes No File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year, did the foundation (either directly or indirectly): Yes X No (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) Yes X No a disqualified person? Yes X No (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 Yes X No for the benefit or use of a disqualified person)? (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 Yes X No termination of government service, if terminating within 90 days.) b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations N/A 1b 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 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 X before the first day of the tax year beginning in 2018? 1c 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(1)(3) or 4942(1)(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 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 N/A 2b statement - see instructions.) c 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, N/A 3ь Form 4720, to determine if the foundation had excess business holdings in 2018.) X 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4a 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?

NONE

Uevoted to position

compensation

allowances

Form 990-PF (2018)

Total number of other employees paid over \$50,000

Steps Ahead Charitable Family Foundation c/o John C Bartley

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Part, VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "	NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	- -	
		-
Total number of others receiving over \$50,000 for professional services		▶ 0
PartilX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical		Expenses
number of organizations and other beneficiaries served, conferences convened, research papers produc	ed, etc.	
1		
		100 200
See Statement 8		100,360.
2		
3		
A		
4		
	·	
Part IX-B Summary of Program-Related Investments	· '	
Describe the two largest program-related investments made by the foundation during the tax year on lin	es 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		
Total, Add lines 1 through 3	-	0.
TOTAL ACCUMES 1 INFOUGH 5		U •

81-4754425

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Rart:X Minimum Investment Return (All domestic fo	oundations must complete this pai	rt Foreign foundations, se	e 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	84,681. 319,256.
b Average of monthly cash balances		1b	319,256.
c Fair market value of all other assets		1c	
d Total (add lines 1a, b, and c)		1d	403,937.
e Reduction claimed for blockage or other factors reported on lines 1a and	d		
1c (attach detailed explanation)	1e	0.	
2 Acquisition indebtedness applicable to line 1 assets		2	0.
3 Subtract line 2 from line 1d		3	403,937.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for gri	eater amount, see instructions)	4	6,059.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Ente	er here and on Part V, line 4	5	397,878.
6 Minimum investment return. Enter 5% of line 5		6	19,894.
Part∤XII Distributable Amount (see instructions) (Section foreign organizations, check here ▶ and do not comp		foundations and certain	
1 Minimum investment return from Part X, line 6		1	19,894.
2a Tax on investment income for 2018 from Part VI, line 5	2a	23.	
b Income tax for 2018. (This does not include the tax from Part VI.)	2b		
c Add lines 2a and 2b	-	2c	23.
3 Distributable amount before adjustments. Subtract line 2c from line 1		3	19,871.
4 Recoveries of amounts treated as qualifying distributions		4	0.
5 Add lines 3 and 4		5	19,871.
6 Deduction from distributable amount (see instructions)		6	0.
7 Distributable amount as adjusted Subtract line 6 from line 5. Enter her	e and on Part XIII, line 1	7	19,871.
PartXIII Qualifying Distributions (see instructions)	able at a number		
1 Amounts paid (including administrative expenses) to accomplish charita		1a	100,360.
a Expenses, contributions, gifts, etc total from Part I, column (d), line 26	0	1b	0.
b Program-related investments - total from Part IX-B	as out sharutable, etc., purposas	2	•
 Amounts paid to acquire assets used (or held for use) directly in carryin Amounts set aside for specific charitable projects that satisfy the. 	ig out charitable, etc., purposes		
, , ,		3a	
a Suitability test (prior IRS approval required)		3a 3b	
b Cash distribution test (attach the required schedule)	art V. Ivan 9: and Dort VIII. Ivan 4	4	100,360.
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Pa		"	100,300.
5 Foundations that qualify under section 4940(e) for the reduced rate of ta	ax on net investment	5	23.
Income. Enter 1% of Part I, line 27b		6	100,337.
6 Adjusted qualifying distributions. Subtract line 5 from line 4 Note: The amount on line 6 will be used in Part V, column (b), in subset	quant years when calculating whether		
4940(e) reduction of tax in those years.	quent years when calculating whether	ure roundation qualifies for th	6 366UUII

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI,				
line 7				19,871.
2 Undistributed income, if any, as of the end of 2018				ĺ
a Enter amount for 2017 only			0.	
b Total for prior years:				
,, ,, ,, ,, , , 2019;		0.		
3 Excess distributions carryover, if any, to 2018:				
a From 2013				
b From 2014	1			
c From 2015				
dFrom 2016 eFrom 2017 35,946.				
	35,946.			
f Total of lines 3a through e	37,740.	1	<u> </u>	,
4 Qualifying distributions for 2018 from Part XII, line 4. ►\$ 100, 360.				
			0.	
a Applied to 2017, but not more than line 2a b Applied to undistributed income of prior				-
• • • • • • • • • • • • • • • • • • • •		0.		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	0.			
(Election required - see instructions)				19,871.
d Applied to 2018 distributable amount e Remaining amount distributed out of corpus	80,489.			15,071.
_ `	0.	<u> </u>		0.
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a))				1
6 Enter the net total of each column as indicated below:		·		
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	116,435.			
b Prior years' undistributed income. Subtract		_		
line 4b from line 2b		0.		
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		0.	:	
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2017. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2018. Subtract		-		
lines 4d and 5 from line 1. This amount must				_
be distributed in 2019				0.
/ Almounts treated as distributions out of		1		
corpus to satisfy requirements imposed by				
section 1/U(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2013				
not applied on line 5 or line 7	0.	·		
9 Excess distributions carryover to 2019.	446 435			
Subtract lines 7 and 8 from line 6a	116,435.	·		
U Analysis of line 9:				e e e e e e e e e e e e e e e e e e e
a Excess from 2014	· · · · · · · · · · · · · · · · · · ·			
b Excess from 2015		á		
c Excess from 2016				,
dExcess from 2017 35,946.				
e Excess from 2018 80,489.				

· Steps Ahead Charitable Family Foundation Form 990-PF (2018) c/o John C Bartley 81-4754425 Page 10 |Part+XIV| Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a 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 4942(j)(3) or b Check box to indicate whether the foundation is a private operating foundation described in section 4942(1)(5) Tax vear Prior 3 years 2 a Enter the lesser of the adjusted net (a) 2018 (b) 2017 (c) 2016 (d) 2015 (e) Total 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 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 of securities loans (section) 512(a)(5)), or royalties (2) Support from general public and 5 or more exempt organizations as provided in section 4842(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization (4) Gross investment income Part XVa Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) 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).)

1	Information	Regarding	Foundation	Managers:
---	-------------	-----------	------------	-----------

John C Bartley

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.

None

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.

a The name, address, and telephone number or email address of the person to whom applications should be addressed.

See Statement 9

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

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

| Part XV | Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to Foundation Purpose of grant or Amount any foundation manager or substantial contributor status of contribution Name and address (home or business) recipient a 'Paid during the year Halo Foundation General Support 134 Western Ave Akron, OH 44313 20,000. General Support Pregnancy Choices 4500 22nd St NW Canton, OH 44708 10,000. Tiqvah - Hands of Hope General Support 530 Tuscarawas St W Canton, OH 44702 20,000. Christian Children's Home of Ohio General Support 2685 Armstrong Rd 50,000. Wooster, OH 44691 ▶ 3a 100,000. **b** Approved for future payment None 0. Total **▶** 3b

r gross amounts unless otherwise indicated.	Unrelated b	usiness income		y section 512, 513, or 514	(e)
Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exemp function income
1					
		•			
Fees and contracts from government agencies					
lembership dues and assessments					
nterest on savings and temporary cash					
vestments			14	1,456.	
ividends and interest from securities			14	888	
et rental income or (loss) from real estate:	; _		.		
Debt-financed property			\rightarrow		
Not debt-financed property					
et rental income or (loss) from personal					
roperty					
ther investment income			\rightarrow		
ain or (loss) from sales of assets other					
nan inventory			+		
et income or (loss) from special events			<u> </u>		
iross profit or (loss) from sales of inventory	<u> </u>				
ther revenue.					
· 	_				
<u> </u>					
			+		
) . ~	2 344	
subtotal. Add columns (b), (d), and (e)		()	2,344.	2.3
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e)	7	()	2,344.	2,3
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations	3.)			13	2,3
	3.)			13	2,3
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations rt XVI-B; Relationship of Activitie	s.)	plishment of	Exempt P	13	
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations	s.) es to the Accom	plishment of	Exempt P	13	
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations irt XVI-B; Relationship of Activitie e No. Explain below how each activity for which i	s.) es to the Accom	plishment of	Exempt P	13	
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations irt XVI-B; Relationship of Activitie e No. Explain below how each activity for which i	s.) es to the Accom	plishment of	Exempt P	13	2,3
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations rt XVI-B; Relationship of Activitie e No. Explain below how each activity for which in	s.) es to the Accom	plishment of	Exempt P	13	
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations rt XVI-B; Relationship of Activitie e No. Explain below how each activity for which in	s.) es to the Accom	plishment of	Exempt P	13	
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations irt XVI-B; Relationship of Activitie e No. Explain below how each activity for which i	s.) es to the Accom	plishment of	Exempt P	13	
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations irt XVI-B; Relationship of Activitie e No. Explain below how each activity for which i	s.) es to the Accom	plishment of	Exempt P	13	
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations rt XVI-B; Relationship of Activitie e No. Explain below how each activity for which in	s.) es to the Accom	plishment of	Exempt P	13	
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations rt XVI-B; Relationship of Activitie e No. Explain below how each activity for which in	s.) es to the Accom	plishment of	Exempt P	13	
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations irt XVI-B; Relationship of Activitie e No. Explain below how each activity for which i	s.) es to the Accom	plishment of	Exempt P	13	
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations int XVI-B; Relationship of Activitie e No. Explain below how each activity for which i	s.) es to the Accom	plishment of	Exempt P	13	
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations int XVI-B; Relationship of Activitie e No. Explain below how each activity for which i	s.) es to the Accom	plishment of	Exempt P	13	
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations int XVI-B; Relationship of Activitie e No. Explain below how each activity for which i	s.) es to the Accom	plishment of	Exempt P	13	
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations irt XVI-B; Relationship of Activitie e No. Explain below how each activity for which i	s.) es to the Accom	plishment of	Exempt P	13	
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations int XVI-B; Relationship of Activitie e No. Explain below how each activity for which i	s.) es to the Accom	plishment of	Exempt P	13	
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations int XVI-B; Relationship of Activitie e No. Explain below how each activity for which i	s.) es to the Accom	plishment of	Exempt P	13	
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations int XVI-B; Relationship of Activitie e No. Explain below how each activity for which i	s.) es to the Accom	plishment of	Exempt P	13	

Form **990-PF** (2018)

823621 12-11-18

Information Regarding Transfers to and Transactions and Relationships With Noncharitable **Exempt Organizations**

1 Did the o	rganization directly or indi	rectly engage in any of the	followin	g with any other organization	on d	escribed in sect	ion 501(c)		Yes	No
(other tha	an section 501(c)(3) organ	ıızatıons) or ın section 527	, relatin	g to political organizations?)			13		
a Transfers	s from the reporting foundation to a noncharitable exempt organization of:									
(1) Cash	1							1a	(1)	X
(2) Othe	r assets							1a	(2)	X
b Other trai	nsactions:								$\neg ert = ert$	
(1) Sales	s of assets to a noncharital	ble exempt organization						16	(1)	X
(2) Purc	hases of assets from a no	ncharıtable exempt organı	zation					1b	(2)	X
(3) Rent	al of facilities, equipment,	or other assets						1b	(3)	X
(4) Reim	nbursement arrangements							1b	(4)	X
(5) Loan	is or loan guarantees							1b	(5)	X
(6) Perfo	ormance of services or me	mbership or fundraising s	olicitatio	ins				1b	(6)	X
c Sharing o	of facilities, equipment, ma	iling lists, other assets, or	paid em	ployees				[1	С	Х
d If the ans	wer to any of the above is	"Yes," complete the follow	ing sche	dule. Column (b) should alv	ways	s show the fair r	narket value of the o	goods, other	assets,	
or service	es given by the reporting fo	oundation. If the foundatio	n receiv	ed less than fair market valu	ue in	any transaction	or sharing arrange	ment, show	ın	
	d) the value of the goods,			·						
(a)Line no	(b) Amount involved			e exempt organization		(d) Description	of transfers, transaction	ons, and sharin	g arrangem	ents
		l	N/A							
					4					
					_					
					\rightarrow					
					+					
					\dashv					
					\dashv					
					+					
					+					
					\dashv					
-					+					
					\dashv					
					\dashv					
	 				\dashv					
					十					
2a Is the fou	indation directly or indirect	L tly affiliated with, or related	to, one	or more tax-exempt organi	ızatıc	ons described				
	501(c) (other than section	•		-					es X	□No
	omplete the following sch									
· ·	(a) Name of org			(b) Type of organization			(c) Description of re	lationship		-
	N/A									
				^						
					<u> </u>					
				g accompanying schedules and n taxpayer) is based on all inform					AS discuss	
Sign Here		1 Pall	_	Mhulia	h			shown be	low? See in	
 _	Kulm	Dance	2	11/19/19	. 1	Presid	lent	_	'es ∟	J No
Sig	nature of officer or trustee			Date	1.	Title	Charle I I II	DTIN		
	Print/Type preparer's na		parer's s	ignature	Da	te	Check if self- employed	PTIN		
Paid	Natalie Si		1 .	- a:	ļ.,	11111	Self- employed	D0101	0.674	
	CPA			e Simmons,	Τ1	1/14/19	Is . sw b 2	P0125		
Preparer Use Only	Firm's name ► 415	Group, Inc.	•				Firm's EIN ► 3	4-T24]	400	
Jac Only		00 Munson St	troo	+ NTM		 -	 -			
		nton, OH 44		C TAAA			Phone no. (3	30) 49	2-00	94
	ı ca	ncon, on 44	, 10				Tellougilo. (2		90-PF	
								1011112		(2010)

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

➤ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Name of the organization

Steps Ahead Charitable Family Foundation c/o John C Bartley

Employer identification number

81-4754425

Organiz	ation type(check or	ne)
Filers of	:	Section:
Form 990 or 990-EZ		501(c)() (enter number) organization
		4947(a)(1) nonexempt charitable trust not treated as a private foundation
		527 political organization
Form 99	0-PF	X 501(c)(3) exempt private foundation
		4947(a)(1) nonexempt charitable trust treated as a private foundation
		501(c)(3) taxable private foundation
	nly a section 501(c)(covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions
X	•	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special	Rules	
	sections 509(a)(1) any one contributo	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from r, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, line 1 Complete Parts I and II
	year, total contribu	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the ty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address),
	year, contributions is checked, enter h purpose Don't con	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., inplete any of the parts unless the General Rule applies to this organization because it received nonexclusively etc., contributions totaling \$5,000 or more during the year.
but it mu	ust answer "No" on	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to be filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

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

Name of organization

Steps Ahead Charitable Family Foundation c/o John C Bartley

Employer identification number

81-4754425

Part II	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
1	John and Karen Bartley 2861 MacDuff Dr NW North Canton, OH 44720	\$	Person X Payroll Noncash (Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
	Marie, address, the En 114	- \$	Person Payroll Noncash Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
			Person Payroll Oncash Occash (Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
	·	\$	Person Payroll Occash Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		 	Person Payroll Oncash (Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
-		\$	Person Payroll Complete Part II for noncash contributions)				

Name of organization
Steps Ahead Charitable Family Foundation
c/o John C Bartley

Employer identification number

81-4754425

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if	additional space is needed		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
		\$	-	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
_		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
		\$		

Name of organization

Employer identification number

Steps Ahead Charitable Family Foundation

	ohn C Bartley	, roundacton			81-4754425			
Part III	Exclusively religious, charitable, etc., contribut	ions to organizations describ	ed in section 5	01(c)(7), (8), or (10)	that total more than \$1,000 for the year			
	from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, or	charitable, etc., contributions of \$1,	000 or less for the	he year (Enterthis info-once	\$			
(a) No	Use duplicate copies of Part III if additional	space is needed	 T		<u> </u>			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	:	(d) Desc	ription of how gift is held			
		(a) Transfer	of gift					
	Transferee's name address a	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee						
Transferee's name, addre								
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	:	(d) Desc	ription of how gift is held			
		(e) Transfer	of gift					
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee					
, , , ,			,					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	:	(d) Desc	ription of how gift is held			
		(e) Transfer	of gift					
	Transferee's name, address, and ZIP + 4			elationship of trai	nsferor to transferee			
		<i>-</i>						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Desc	ription of how gift is held			
		(e) Transfer	of gift					
	Transferee's name, address, ar	nd ZIP + 4	Re	elationship of trar	nsferor to transferee			

Form 990-PF Int	erest on Savi	ings and Tem	porary Cash	Investments	Statement 1	
Source		· (a Reve Per B	nue Net	(b) Investment Income	(c) Adjusted Net Income	
Home Savings	·	1,456.	1,456.	1,456.		
Total to Part I,	line 3		1,456.	1,456.	1,456.	
		-	v -	- · - ·		
Form 990-PF	Dividend	ds and Inter	est from Sec	urities	Statement 2	
Source	Gross Amount	Capital Gains Dividend	Revenue			
Charles Schwab - 6192 Charles Schwab -	397		0. 39		7. 397.	
8572	491	L•	0. <u>49</u>	1. 49 —	491.	
To Part I, line	4 888	B	<u> </u>	8. 88	888.	
Form 990-PF		Accounti	ng Fees		Statement 3	
Description		(a) Expenses Per Books	(b) Net Invest- ment Income	_		
Accounting Fees	_	400.	40	•	0. 360.	
To Form 990-PF,	- Pg 1, ln 16b	400.	40	•	0. 360.	
	=					

Form 990-PF	Taxes			Statement 4			4
Description	(a) Expenses Per Books	(b) Net Inves ment Inco		(c) Adjusted Net Incom		(d) Charita Purpos	
Department of the Treasury	22.		0.		0.		0.
To Form 990-PF, Pg 1, ln 18	22.		0.		0.		0.
Form 990-PF	Other Expenses		Statement !			5	
Description	(a) Expenses Per Books	(b) Net Inves ment Inco		(c) Adjusted Net Incom		(d) Charital Purpose	
State Filing Fee Miscellaneous	100.		0.		0.		0.
To Form 990-PF, Pg 1, ln 23	121.		21.		0.		0.
Form 990-PF	Other Inv	estments			St	atement	6
Description		luation ethod	Вос	ok Value	Fa	ir Marke Value	t
Equities	COST		339,307.			325,763.	
Total to Form 990-PF, Part II	I, line 13	, line 13		339,307.		325,7	63.

Form 990-PF	List of Substantial Contributors Part VII-A, Line 10	Statement	
Name of Contributor	Address		
John C Bartley	2861 MacDuff Dr NW North Canton, OH 44720		

Form 990-PF

Summary of Direct Charitable Activities

Statement

8

Activity One

Steps Ahead Charitable Family Foundation has a mission to bring Faith, Hope and Love to those needing a brighter day. The importance of God's word, the salvation we have in His Son Jesus and the responsibility we have to give back to others. This foundation, and all of our outreach initiatives, are primarily created to show God's love, and we will accomplish our mission through God's blessings and the support of our generous donors and partners. Seeking to put God's love into action and mobilizing resources by inspiring biblical generosity.

Expenses

To Form 990-PF, Part IX-A, line 1

100,360.

Form 990-PF

Grant Application Submission Information Part XV, Lines 2a through 2d

Statement

9

Name and Address of Person to Whom Applications Should be Submitted

John C Bartley 2861 MacDuff Dr NW North Canton, OH 44720

Telephone Number

330-417-2652

Form and Content of Applications

Written Requests

Any Submission Deadlines

None

Restrictions and Limitations on Awards

Except under unusual circumstances, grants are awarded exclusively for charitable religious or religious education purposes to organizations qualified under IRC Section 501(c)(3) and to public charities under 501(A)(1), (2), or (3).