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2019

OMB No. 1545-0052

Form 990-PF

Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

or	caler	ndar year 2019, or tax year	beginning 01-01-20)19 , a	nd end	ing 12-31-	2019	
		ndation R SCHIFF FOUNDATION				A Employer id	entification numbe	r
		IAS R SCHIFF				20-5678503		
		I street (or P.O. box number if mail is no	t delivered to street address)	Room/suite		B Telephone nu	mber (see instructio	ns)
4	GRAND	IN TERRACE				(513) 721-4532	•	,
		, state or province, country, and ZIP or	foreign postal code			<u> </u>		
CINC	INNAT:	I, OH 45208				C If exemption	application is pendin	g, check here
G Cł	neck al	l that apply: \Box Initial return	\square Initial return of a	former public charity		D 1. Foreign or	ganizations, check he	ere
		☐ Final return	Amended return				ganizations meeting	
		Address chang	ge 🔲 Name change			test, chec	k here and attach co	mputation 🕨 🔼
I Ch	neck ty	pe of organization: 🗹 Section 5	501(c)(3) exempt private t	foundation			undation status was f n 507(b)(1)(A), chec	
	Section	4947(a)(1) nonexempt charitable	trust 🔲 Other taxable	e private foundation				
		et value of all assets at end	J Accounting method:	☑ Cash ☐ Accru	ual		ation is in a 60-mont	
		rom Part II, col. (c), ▶\$ 15,164,675	Other (specify)			under sectio	n 507(b)(1)(B), chec	k nere
			(Part I, column (d) must	be on cash basis.)				
Pa	rt I	Analysis of Revenue and I	•	(a) Revenue and	(h) No	t investment	(a) Adjusted not	(d) Disbursements
		of amounts in columns (b), (c), and (c) equal the amounts in column (a) (see		expenses per books	(b) Ne	t investment income	(c) Adjusted net income	for charitable purposes
			* '	I	-			(cash basis only)
	1	Contributions, gifts, grants, etc., schedule)	received (attach	1,717,250				
	2	Check \blacktriangleright \square if the foundation is n	not required to attach					
		Sch. B						
Φ	3	Interest on savings and temporar	•	1,071		1,071		
	4	Dividends and interest from secur	rities	286,764	1	286,764		
	5a	Gross rents						
	b	Net rental income or (loss)						
Ĕ	6a	Net gain or (loss) from sale of ass		-				
Revenue	b	Gross sales price for all assets on Capital gain net income (from Par		+	0			
~	7 8	Net short-term capital gain			0			
	9	Income modifications						
	10a	Gross sales less returns and allow	vances					
	ь	Less: Cost of goods sold						
	С	Gross profit or (loss) (attach sche	edule)					
	11	Other income (attach schedule)						
	12	Total. Add lines 1 through 11 .		2,005,085	5	287,835		
	13	Compensation of officers, director	rs, trustees, etc.	C		0		(
	14	Other employee salaries and wag	jes					
S)	15	Pension plans, employee benefits	·					
Š	16a	Legal fees (attach schedule)						
Expenses	b	Accounting fees (attach schedule))	2,050		1,025		1,025
i O	С	Other professional fees (attach so	chedule)	% 5,163	3	2,582		2,581
Operating and Administrative	17	Interest						
stra	18	Taxes (attach schedule) (see inst	ructions)	2,220		0		2,220
ੂ	19	Depreciation (attach schedule) ar	nd depletion					
Ę	20	Occupancy						
₹	21	Travel, conferences, and meeting	s					
a	22	Printing and publications						
<u>5</u> .	23	Other expenses (attach schedule))	1,500		0		1,500
rat S	24	Total operating and administra	-					
<u>pe</u>	_	Add lines 13 through 23		10,933		3,607		7,326
ر	25	Contributions, gifts, grants paid		437,190	7			437,190
	26	Total expenses and disbursem	nents. Add lines 24 and	440 115		2 507		444 F14
	27	Subtract line 26 from line 12:		448,123	1	3,607		444,516
	a	Excess of revenue over expens	ses and					
		disbursements		1,556,962	2			
	b	Net investment income (if negative				284,228		
	C	Adjusted net income (if negative	re, enter -U-)		<u> </u>	. N. 44322	<u> </u>	000 PF (2010

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Pai	t II	Balance Sheets Attached schedules and amounts in the des should be for end-of-year amounts only. (S	cription column	Beginning of year (a) Book Value	(b) Book Value	of year (c) Fair Market Value
	1	Cash—non-interest-bearing	-	20,439	(b) Book value	
	2	Savings and temporary cash investments		,		
	3	Accounts receivable ▶	ŀ			
	•	Less: allowance for doubtful accounts ▶				
	4	Pledges receivable ▶	_			
	•	Less: allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and oth				
		disqualified persons (attach schedule) (see instructions) .				
	7	Other notes and loans receivable (attach schedule)				
		Less: allowance for doubtful accounts ▶				
۱ ۵.	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges	ŀ			
PS	10a	Investments—U.S. and state government obligations (att.	ŀ			
1	b	Investments—corporate stock (attach schedule)	´	1,380,950	1,557,200	15,164,524
	c	Investments—corporate bonds (attach schedule)			<u> </u>	, ,
	11	Investments—land, buildings, and equipment: basis ▶				
		Less: accumulated depreciation (attach schedule)				
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)				
	14	Land, buildings, and equipment: basis	L L			
		Less: accumulated depreciation (attach schedule)				
	15	Other assets (describe >				
	16	Total assets (to be completed by all filers—see the	ŕ			
		instructions. Also, see page 1, item I)		1,401,389	1,557,351	15,164,675
1	17	Accounts payable and accrued expenses				
	18	Grants payable				
es	19	Deferred revenue				
┋╽	20	Loans from officers, directors, trustees, and other disqual	ified persons			
Liabilities	21	Mortgages and other notes payable (attach schedule).				
-	22	Other liabilities (describe)			
	23	Total liabilities(add lines 17 through 22)		0	0	
~		Foundations that follow FASB ASC 958, check here	ightharpoonup			
Fund Balances		and complete lines 24, 25, 29 and 30.				
<u>=</u>	24	Net assets without donor restrictions				
ଞ୍ଚ	25	Net assets with donor restrictions				
밁		- 1				
<u>.</u>		Foundations that do not follow FASB ASC 958, check and complete lines 26 through 30.	k here 🕨 🗹			
٥	26	Capital stock, trust principal, or current funds		0	0	
ا ي	20 27	Paid-in or capital surplus, or land, bldg., and equipment for	ŀ	0	0	
155	28	Retained earnings, accumulated income, endowment, or o		1,401,389	1,557,351	
	29 29	Total net assets or fund balances (see instructions)		1,401,389	1,557,351	
21	30	Total liabilities and net assets/fund balances (see in		1,401,389	1,557,351	
	t IIII	. ,		, ,	, ,	
1		net assets or fund balances at beginning of year—Part II,		e 29 (must agree with	end-	
		ear figure reported on prior year's return)			. 1	1,401,389
2		r amount from Part I, line 27a			. 2	1,556,962
3		er increases not included in line 2 (itemize)			3	0
4 5		lines 1, 2, and 3			. 4	2,958,351 1,401,000
6		I net assets or fund balances at end of year (line 4 minus l		column (b), line 29	. 6	1,557,351
		,	,,			Form 990-PF (2019)

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	ee the kind(s) of property sold (e.g., arehouse; or common stock, 200 shs		(b) How acquired P—Purchase D—Donation	'	(c) Date acquired mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a						
(e)	(f)		(g)		(1	n)
Gross sales price	Depreciation allowed		other basis			r (loss)
·	(or allowable)	pius expe	ense of sale		(e) pius (r) minus (g)
a .						
b				_		
d				_		
e			12/21/60	_		
Complete only for assets	s showing gain in column (h) and ow		(k)	_		l) h) gain minus
(i)	(j) Adjusted basis		of col. (i)			less than -0-) or
F.M.V. as of 12/31/69	as of 12/31/69		. (j), if any		Losses (fre	om col.(h))
а						
b						
c						
d						
e						
•	gain or (loss) as defined in sections 1 ort I, line 8, column (c) (see instruction	. ,		} 2		
Darly Qualification I	Undon Continu 4040(a) for Bo	duand Tau an Nat	T	, T		
_	Under Section 4940(e) for Re				ne	
(For optional use by domestic p	private foundations subject to the sec	ction 4940(a) tax on ne	t investment inc	ome.)		
If section 4940(d)(2) applies, le	eave this part blank.					
	ne section 4942 tax on the distributal ot qualify under section 4940(e). Do			od?	☐ Ye	es 🔽 No
	nount in each column for each year;	see instructions before	making any ent	ries.		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable	le-use assets	(c	(d) Distribution ratiol. (b) divided by c	
2018	407,775		8,832,406			0.046168
2017	361,984		8,252,226			0.043865
2016	250,368		7,411,408			0.033781
2015	182,518		5,082,720			0.035910
2014	151,226		4,081,423			0.037052
2 Total of line 1, column (•		⊢	2		0.196776
	o for the 5-year base period—divide to the following the f		· · · · · · · · · · · · · · · · · · ·	3		0.039355
	incharitable-use assets for 2019 from			4		12,872,568
5 Multiply line 4 by line 3				5		506,600
6 Enter 1% of net investme	ent income (1% of Part I, line 27b)		🗔	6		2,842
7 Add lines 5 and 6			🗀	7		509,442
	ions from Part XII, line 4 ,			В		444,516
If line 8 is equal to or gre	eater than line 7, check the box in Pa			ising a	1% tax rate. Se	e the Part VI
instructions.						

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Pa	rt VII-B	Statements Regard	ding	Activities for Which	Form 4720 May Be	Required (contin	ued)				
5a	During the y	ear did the foundation	pay o	r incur any amount to:						Yes	No
	(1) Carry or	n propaganda, or otherv	vise a	ttempt to influence legisla	ation (section 4945(e))?	□ v	s 🗸	No			
	(2) Influence	ce the outcome of any s	pecific	public election (see sect	ion 4955); or to carry						
	on, dire	ctly or indirectly, any vo	ter re	gistration drive?		· · □ v	es 🗸	No			
	(3) Provide	a grant to an individual	for tr	avel, study, or other simi	ilar purposes?		s 🔽	No			
		-		her than a charitable, etc ctions	· -		s 🗸				
	• •	, , ,		eligious, charitable, scient ention of cruelty to childr							
b				ny of the transactions fa		Y ₀	es 🗸	No			
	•			nt notice regarding disas		•			5b		
	Organization	ns relying on a current r	otice	regarding disaster assist	ance check here	1	▶ □				
C	If the answe	er is "Yes" to question 5	a(4),	does the foundation claim	n exemption from the		ш				
	tax because	it maintained expendite	ıre re	sponsibility for the grant?		· · □ v	I	No			
	If "Yes," atta	ach the statement requi	red b	y Regulations section 53.	4945-5(d).	L ''	:5 Ш	110			
6a	Did the foun	dation, during the year	, rece	ive any funds, directly or	indirectly, to pay premiu	ıms on					
	a personal b	enefit contract?				· 🗆 🗆 🗸	es 🗸	No			
b		idation, during the year ib, file Form 8870.	, pay	premiums, directly or ind	irectly, on a personal be	nefit contract?			6b		No
7a		·	s the	foundation a party to a p	rohibited tax shelter trar	nsaction?	es 🗸				
b	If "Yes", did	the foundation receive	any p	roceeds or have any net	income attributable to th	e transaction?	es 💌	No	7 b		
8				.960 tax on payment(s) o							
	excess para	chute payment during t	he ye	ar?		· ·	es 🗸	N.			
				ers, Directors, Trust					ees.		
Pa		nd Contractors		,,	,			,	,		
1	List all offic	ers, directors, truste	es. fo	oundation managers an	d their compensation	See instructions					
	2.50 4.11 51.11	ocio, un octoro, ci uoco	$\overline{}$	b) Title, and average	(c) Compensation (If	(d) Contribution	s to	(-)	F		
	(a) Nam	e and address	`	hours per week	not paid, enter	employee benefit pl	ans and			ise acc Ilowano	
				devoted to position	-0-)	deferred compens					
	ELLEN GOEKE		1.00	CTOR	0		0	1			0
	ANDIN TERRACE INNATI, OH 45:										
THOM	1AS R SCHIFF		PRES	IDENT, SECRETARY, TREA	0		0				0
	ANDIN TERRACE		2.00								
	INNATI, OH 45		2725	CTOR							
	Y HOWELL-KOE		0.50	CTOR	0		0	1			0
	ANDIN TERRACE INNATI, OH 45:										
MAUF	REEN FRANCE		DIRE	CTOR	0		0				0
	ANDIN TERRACE		0.50								
2 CINC.	INNATI, OH 45:		idon	nployees (other than th	soco includad on lina 1	soo instructions	\ Tf no		tor "	NONE	71
	Compensat	ion of five ingliest-pa	iu eii	ipioyees (other than ti	lose included on line 1	(d) Contribution		iie, eii	tei	NONE.	
(a)		dress of each employee e than \$50,000	paid	(b) Title, and average hours per week devoted to position	(c) Compensation	employee bend plans and defer compensatio	efit red			se acco	
NON	E					1					
						1					
Tota	I number of a	other employees paid ov	er \$5	0,000			•				
				· '		<u> </u>		Forn	n 99 1	0-PF ((2019)
										• \	(/

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Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	aid Employees,
3 Five highest-paid independent contractors for professional servic	es (see instructions). 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
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include rele organizations and other beneficiaries served, conferences convened, research papers produ		r of Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see i	nstructions)	
Describe the two largest program-related investments made by the foundation during the	<u> </u>	Amount
1	,	
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		• o
Total Add Mico Landagn 5		Form 990-PF (2019)

2c

3

4

5

6

7

1a

1b

2

3a 3b

4

5

5,685

637,943

637.943

637.943

444,516

444.516

444.516

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Distributable amount before adjustments. Subtract line 2c from line 1.

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

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

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

income. Enter 1% of Part I, line 27b. See instructions.

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

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

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

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

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

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

3

4 5

6

1

2

3

4

5

b

Part XII

instructions f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must

be distributed in 2020 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2014 not

9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a.

10 Analysis of line 9: a Excess from 2015. **b** Excess from 2016. c Excess from 2017. d Excess from 2018. e Excess from 2019.

applied on line 5 or line 7 (see instructions). . .

Undistributed Income (see instructions)

Part XIII

	,	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from Part XI, line 7				637,943
2	Undistributed income, if any, as of the end of 2019:				
а	Enter amount for 2018 only			431,198	
b	Total for prior years: 20, 20, 20		0		
3	Excess distributions carryover, if any, to 2019:				
а	From 2014				
b	From 2015				
С	From 2016				
d	From 2017				
_	From 2018				
	Total of lines 3a through e	0			
4	Qualifying distributions for 2019 from Part				
	XII, line 4: ► \$				
а	Applied to 2018, but not more than line 2a			431,198	_
b	Applied to undistributed income of prior years (Election required—see instructions)		0		
С	Treated as distributions out of corpus (Election required—see instructions)	0			
d	Applied to 2019 distributable amount				13,318
е	Remaining amount distributed out of corpus	0			
5	Excess distributions carryover applied to 2019.	0			0
	(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:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0			
b	Prior years' undistributed income. Subtract line 4b from line 2b		0		
С	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		
е	Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see				

5	Excess distributions carryover applied to 2019.	0		0
	(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:			
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0		
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			

0

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624,625

0

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	under section 4942(j)(3)(B)(i)				
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed				
C	"Support" alternative test—enter:				
	 (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties). (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). 				
	(3) Largest amount of support from an exempt organization				
	(4) Gross investment income				
Pai	Supplementary Information assets at any time during the		oundation had	5,000 or more	in
	and the second s	,			

Information Regarding Foundation Managers: 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).)

THOMAS R SCHIFF

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

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ightharpoons 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

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:

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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.

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

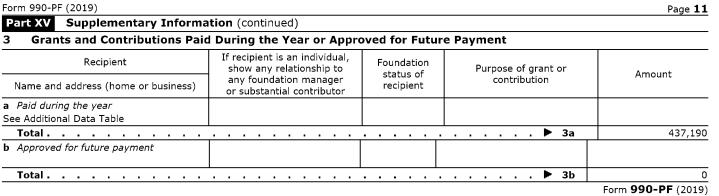
other conditions, complete items 2a, b, c, and d. See instructions

THOMAS SCHIFF 4 GRANDIN TERRACE CINCINNATI, OH 45208 (513) 721-4532

NONE

factors: NONE

2



ter gross amounts unless otherwise indicated.		usiness income	Excluded by section		(e) Related or exempt
Program service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions.)
a b					
C					
d					
e					
f					
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash investments					
Dividends and interest from securities			14 14	1,071 286,764	
Net rental income or (loss) from real estate:			14	200,764	
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal property					
Other investment income					
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					
e		0		287,835	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e).		0	1	287,835 3	
	lations.)				
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculated and the substitution of the substitu	lations.) le Accomplis income is report	hment of Exempted in column (e) of	ot Purposes Fart XVI-A contribu	3	287,835
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the second s	lations.) le Accomplis income is report	hment of Exempted in column (e) of	ot Purposes Fart XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcular XVI-B Relationship of Activities to the second se	lations.) le Accomplis income is report	hment of Exempted in column (e) of	ot Purposes Fart XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcular XVI-B Relationship of Activities to the second se	lations.) le Accomplis income is report	hment of Exempted in column (e) of	ot Purposes Fart XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the substitution of the foundation of the	lations.) le Accomplis income is report	hment of Exempted in column (e) of	ot Purposes Fart XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the substitution of the foundation of the	lations.) le Accomplis income is report	hment of Exempted in column (e) of	ot Purposes Fart XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the substitution of the foundation of the	lations.) le Accomplis income is report	hment of Exempted in column (e) of	ot Purposes Fart XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the substitution of the foundation of the	lations.) le Accomplis income is report	hment of Exempted in column (e) of	ot Purposes Fart XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the second s	lations.) le Accomplis income is report	hment of Exempted in column (e) of	ot Purposes Fart XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcular XVI-B Relationship of Activities to the second se	lations.) le Accomplis income is report	hment of Exempted in column (e) of	ot Purposes Fart XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcular XVI-B Relationship of Activities to the second se	lations.) le Accomplis income is report	hment of Exempted in column (e) of	ot Purposes Fart XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcular XVI-B Relationship of Activities to the second se	lations.) le Accomplis income is report	hment of Exempted in column (e) of	ot Purposes Fart XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcular XVI-B Relationship of Activities to the second se	lations.) le Accomplis income is report	hment of Exempted in column (e) of	ot Purposes Fart XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcular XVI-B Relationship of Activities to the second se	lations.) le Accomplis income is report	hment of Exempted in column (e) of	ot Purposes Fart XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the substitution of the foundation of the	lations.) le Accomplis income is report	hment of Exempted in column (e) of	ot Purposes Fart XVI-A contribu	3	

Foi	rm 990-Pl	(2019)				Pa	ge 13
	Part XV	Information Re Exempt Organi		ions and Relationships With Nonchari	table		
1			directly engage in any of the following with a organizations) or in section 527, relating to	any other organization described in section 501 political organizations?		Yes	No
а	Transfer	s from the reporting foun	dation to a noncharitable exempt organization	on of:			
	(1) Cas	sh			1a(1)		No
					1a(2)		No
b	Other tr	ansactions:					
	(1) Sal	es of assets to a nonchari	itable exempt organization		1b(1)		No
					1b(2)		No
	(3) Rer	ntal of facilities, equipmer	nt, or other assets		1b(3)		No
	(4) Rei	mbursement arrangemen	ts		1b(4)		No
	(5) Loa	ns or loan guarantees.			1b(5)		No
	(6) Perf	ormance of services or m	embership or fundraising solicitations		1b(6)		No
c	Sharing	of facilities, equipment, n	nailing lists, other assets, or paid employees		1c		No
	of the go in any tr	oods, other assets, or ser ansaction or sharing arra	vices given by the reporting foundation. If th ngement, show in column (d) the value of tl	column (b) should always show the fair market was foundation received less than fair market value goods, other assets, or services received.	ie		
<u>(a</u>) Line No.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sha	ring arra	ngemer	its
_							
_							
_							
					_		

2a Is the fo	oundation directly or indire	ectly affiliated with, or related to, one or mo	re tax-exempt organizations
describe	ed in section 501(c) (other	r than section 501(c)(3)) or in section 527?	Yes 🗸 No
	complete the following se		

(b) Type of organization (c) Description of relationship (a) Name of organization

of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. May the IRS discuss this 2020-07-01 return with the preparer shown Signature of officer or trustee Title Date (see instr.) 🗹 Yes 🗆 No

Sign Here PTIN Print/Type preparer's name Preparer's Signature Date Check if self-P00744843 employed ▶ 🔲 STEPHANIE J PAPE CPA Paid **Preparer** Firm's name ▶ FLYNN & COMPANY INC Firm's EIN ▶31-1451941 **Use Only** Firm's address ▶ 7800 E KEMPER ROAD CINCINNATI, OH 452491614

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best Phone no. (513) 530-9200 Form **990-PF** (2019)

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

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
ANTIOCH COLLECE		DC.	RIENNIAL CRANT	2 57

APERTURE FOUNDATION	PC	GENERAL	
ONE MORGAN PL SOUTH HALL YELLOW SPRINGS, OH 45387			
ANTIOCH COLLEGE	l FC	DIEMMIAL GRAIN	

TEELOW SPICINGS, OIT 45587			
APERTURE FOUNDATION	PC	GENERAL	
547 WEST 27TH STREEET 4TH FLOOR			
NEW YORK, NY 10001			

547 WEST 27TH STREEET 4TH FLOOR NEW YORK, NY 10001	2	GLIVEIVAL	
ARCHIVE OF CREATIVE CULTURE	PC	BIENNIAL GRANT	3,2

NEW YORK, NY 10001			
ARCHIVE OF CREATIVE CULTURE	PC	BIENNIAL GRANT	3,250
2868 COLERAIN AVE			

32

ARCHIVE OF CREATIVE CULTURE	PC	BIENNIAL GRANT	3,250
2868 COLERAIN AVE CINCINNATI, OH 45225			
CINCINNATI, 011 45225			

2868 COLERAIN AVE CINCINNATI, OH 45225			-,
Total	 	▶ 3a	437,190

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

or substantial contributor

Name and address (home or business)

Total .

a Paid during the year			
ART ACADEMY OF CINCINNATI 1212 JACKSON STREET CINCINNATIOH, OH 45202	PC	BIENNIAL GRANT	6,363
ART OPPORTUNITIES	PC	BIENNIAL GRANT	5,000

1				_
	ART OPPORTUNITIES 20 E CENTRAL PARKWAY CINCINNATI, OH 45202	PC	BIENNIAL GRANT	5,0
1			l .	

CINCINNATI, OH 45202			
BAKER HUNT ART & CULTURAL CENTER 620 GREENUP STREET	PC	BIENNIAL GRANT	750
COVINCTON KV 41011			

▶ 3a

437,190

	CINCINIVATI, OH 45202			<u> </u>
П	BAKER HUNT ART & CULTURAL CENTER	PC	BIENNIAL GRANT	7
	620 GREENUP STREET			1
	COVINGTON, KY 41011			1

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

or substantial contributor

a Paid during the year			
BEHRINGER-CRAWFORD MUSEUM	PC	BIENNIAL GRANT	2,250

COVINGTON, KY 41011			
CARNEGIE CENTER FOR ART & HISTORY 201 EAST SPRING STREET	PC	BIENNIAL GRANT	

CARNEGIE CENTER FOR ART & HISTORY 201 EAST SPRING STREET NEW ALBANY, IN 47150	PC	BIENNIAL GRANT	750
CARNECIE CENTER FOR ART & HISTORY	DC.	CENEDAL	25 225

NEW ALBANY, IN 47150			
CARNEGIE CENTER FOR ART & HISTORY 1028 SCOTT BLVD	PC	GENERAL	25,325

NEW ALDANT, IN 47150			
CARNEGIE CENTER FOR ART & HISTORY 1028 SCOTT BLVD COVINGTON, KY 41011	PC	GENERAL	25,325
Total	 	▶ 3a	437,190

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

a Paid during the year			
CARNEGIE VISUAL & PERFORMING ARTS CENTER 1028 SCOTT BLVD COVINGTON, KY 41011	PC	BIENNIAL GRANT	2,500

COVINGTON, KY 41011			
CHASE ELEMENTARY SCHOOL 4151 TURRILL ST CINCINNATI, OH 45223	PC	GENERAL	5,000

CHASE ELEMENTARY SCHOOL 4151 TURRILL ST CINCINNATI, OH 45223	PC	GENERAL	5,000
CINCINNATI ARTS ASSOCIATION	PC	BIENNIAL GRANT	16,500

4151 TURRILL ST CINCINNATI, OH 45223	PC	GENERAL	5,000
CINCINNATI ARTS ASSOCIATION 650 WALNUT STREET	PC	BIENNIAL GRANT	16,500

CINCINNATI, OH 45223			
CINCINNATI ARTS ASSOCIATION 650 WALNUT STREET CINCINNATI, OH 45202	PC	BIENNIAL GRANT	16,500

CINCINNATI, OIT 43223			
CINCINNATI ARTS ASSOCIATION	PC	BIENNIAL GRANT	16,500
650 WALNUT STREET CINCINNATI, OH 45202			

Total	 	▶ 3a	437,190
650 WALNUT STREET CINCINNATI, OH 45202			
CINCINNATI ARTS ASSOCIATION	PC	BIENNIAL GRANT	16,500

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

or substantial contributor

Name and address (home or business)

Total .

a Paid during the year			
CINCINNATI ARTS ASSOCIATION 650 WALNUT STREET CINCINNATI, OH 45202	PC	GENERAL	10,000

CINCINNATI MUSEUM ASSOCIATION 953 EDEN PARK DRIVE CINCINNATI, OH 45202	PC	BIENNIAL GRANT	
CINCINNATI MUSEUM ASSOCIATION	PC	GENERAL	

CINCINNATI, OH 45202			
CINCINNATI MUSEUM ASSOCIATION 953 EDEN PARK DRIVE	PC	GENERAL	1,2

CINCINNATI, OH 45202			
CINCINNATI MUSEUM ASSOCIATION 953 EDEN PARK DRIVE	PC	GENERAL	1,29
CINCINNATI OH 45202			

CINCINNATI MUSEUM ASSOCIATION	PC	GENERAL	1,29
953 EDEN PARK DRIVE			

CINCINNATI MUSEUM ASSOCIATION	PC	GENERAL	1,293
953 EDEN PARK DRIVE			
CINCINNATI OH 45202			

62,500

437,190

▶ 3a

953 EDEN PARK DRIVE		
CINCINNATI, OH 45202		

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

a Paid during the year			
CINCINNATI MUSEUM CENTER 1301 WESTERN AVENUE CINCINNATI, OH 45203	PC	GENERAL	16,000

CINCINNATI, OH 45203			
CINCINNATI PRESERVATION ASSOCIATION 1301 WESTERN AVENUE CINCINNATI, OH 45203	PC	BIENNIAL GRANT	7,500

ASSOCIATION 1301 WESTERN AVENUE CINCINNATI, OH 45203			,,,,,
CINCINNATI STATE	PC	BIENNIAL GRANT	1,500

CINCINNATI, OH 45203			
CINCINNATI STATE 3520 CENTRAL PARKWAY ATLC 352	PC	BIENNIAL GRANT	1,500

CINCINNATI STATE 3520 CENTRAL PARKWAY ATLC 352 CINCINNATI, OH 45223	PC	BIENNIAL GRANT	1,500

Total .

437,190

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

a Paid during the year			
CITY OF KETTERING 3600 SHROYER ROAD KETTERING, OH 45429	PC	BIENNIAL GRANT	1,250

KETTERING, OH 45429			
CLIFTON CULTURAL ARTS CENTER 2728 SHORT VINE STREET CINCINNATI, OH 45219	PC	BIENNIAL GRANT	4,000

CLIFTON CULTURAL ARTS CENTER 2728 SHORT VINE STREET CINCINNATI, OH 45219	PC	BIENNIAL GRANT	4,000
CLIFTON TOWN MEETINGPO BOX 20042	PC	GENERAL	750

CINCINNATI, OH 45219			
CLIFTON TOWN MEETINGPO BOX 20042 CINCINNATI, OH 45220	PC	GENERAL	750

CLIFTON TOWN MEETINGPO BOX 20042 CINCINNATI, OH 45220		PC	GENERAL	750

CINCINNATI, OH 45220	FC	GLINERAL	, , ,
Total	 	▶ 3a	437,190

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

Name and address (home or business)

	or substantial contributor			
a Paid during the year				
COLUMBUS MUSEUM OF ART		PC	BIENNIAL GRANT	5,00

COLUMBUS, OH 43215			
CONTEMPORARY ARTS CENTER	PC	BIENNIAL GRANT	
44 E 6TH STREET			
CINCINNATI OH 45202			1

CONTEMPORARY ARTS CENTER 44 E 6TH STREET CINCINNATI, OH 45202	PC	BIENNIAL GRANT	90,553
CONTEMPORARY ARTS CENTER 44 E 6TH STREET	PC	GENERAL	23,000

CINCINNATI, OH 45202			
CONTEMPORARY ARTS CENTER 44 E 6TH STREET CINCINNATI, OH 45202	PC	GENERAL	23,000

CONTEMPORARY ARTS CENTER 44 E 6TH STREET CINCINNATI, OH 45202	PC	GENERAL	23,000
Total	 	▶ 3a	437,190

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

or substantial contributor

Name and address (home or business)

a Paid during the year			
DAYTON ART INSTITUTE 456 BELMONTE PARK NORTH DAYTON, OH 45405	PC	BIENNIAL GRANT	15,000
DAYTON SOCIETY OF ARTISTS	PC	BIENNIAL GRANT	500

DAYTON, OH 45405			
DAYTON SOCIETY OF ARTISTS 48 HIGH ST DAYTON, OH 45403	PC	BIENNIAL GRANT	5
EVENDALE CULTURAL ARTS CENTER	PC	RIENNIAL GRANT	3

48 HIGH ST DAYTON, OH 45403			
EVENDALE CULTURAL ARTS CENTER 10428 READING RD	PC	BIENNIAL GRANT	337

DAYTON, OH 45403			
EVENDALE CULTURAL ARTS CENTER 10428 READING RD CINCINNATI, OH 45241	PC	BIENNIAL GRANT	337

10428 READING RD CINCINNATI, OH 45241			
Total	 	▶ 3a	437,190

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

a Paid during the year			
FITTON CENTER CREATIVE ARTS	PC	BIENNIAL GRANT	3,500

101 S MONUMENT AVE HAMILTON, OH 45011			
FOTOFOCUS212 EAST 14TH STREET	PC	GENERAL	

or substantial contributor

Total .

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

HAMILTON, OH 43011			
 FOTOFOCUS212 EAST 14TH STREET CINCINNATI, OH 45202	PC	GENERAL	14

FOTOFOCUS212 EAST 14TH STREET CINCINNATI, OH 45202	PC	GENERAL	14,950
TIMACINE INC124 WEST DIKE STREET	DC .	RIENNIAL CRANT	3 500

CINCINNATI, OH 45202			,
IIMAGINE INC124 WEST PIKE STREET	PC	BIENNIAL GRANT	3,500

IIMAGINE INC124 WEST PIKE STREET COVINGTON, KY 41011		PC	BIENNIAL GRANT	3,500
·				

437,190

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

recipient

▶ 3a

437,190

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

a Paid during the year			
INDEPENDENT LIVING OPTIONS 2031 AUBURN AVE CINCINNATI, OH 45219	PC	BIENNIAL GRANT	650
KENNEDY HEIGHTS ART CENTER	PC	BIENNIAL GRANT	3,500

6546 MONTGOMERY ROAD CINCINNATI, OH 45213		DIENVIAL GIVANT
LLOYD LIBRARY AND MUSEUM	PC	BIENNIAL GRANT

any foundation manager

or substantial contributor

Name and address (home or business)

Total .

CINCINNATI, OH 45213			
LLOYD LIBRARY AND MUSEUM	PC	BIENNIAL GRANT	1
917 PLUM STREET			
CINCINNATI OH 45202			

CINCINNATI, OH 45213			
LLOYD LIBRARY AND MUSEUM 917 PLUM STREET CINCINNATI, OH 45202	PC	BIENNIAL GRANT	1,750

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

Name and address (home or business)

Total .

Name and address (nome or business)	or substantial contributor			
a Paid during the year				
LOUISVILLE PHOTO BIENNIAL 713 E MARKET ST LOUISVILLE, KY 40202		PC	GENERAL	1,000

LOUISVILLE, KT 40202			
MANIFEST CREATIVE RESEARCH GALLERY PO BOX 6218 CINCINNATI, OH 45206	PC	BIENNIAL GRANT	4,250

GALLERY PO BOX 6218 CINCINNATI, OH 45206			
MIAMI UNIVERSITY501 E HIGH ST OXFORD, OH 45056	PC	BIENNIAL GRANT	6,500

437,190

CINCINNATI, OH 45206			
MIAMI UNIVERSITY501 E HIGH ST OXFORD, OH 45056	PC	BIENNIAL GRANT	6,500

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

recipient

▶ 3a

437,190

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

any foundation manager

or substantial contributor

Name and address (home or business)

CINCINNATI, OH 45233

Total .

a Paid during the year			
MIAMI UNIVERSITY CENTER FOR COMMUNITY ENGAGEMENT 101 ALUMNI HALL OXFORD, OH 45056	PC	GENERAL	250
MINI MICROCINEMA1329 MAIN STREET	PC	GENERAL	7 000

0XF0RD, 0H 45056			
MINI MICROCINEMA1329 MAIN STREET CINCINNATI, OH 45202	PC	GENERAL	7,
MT ST JOSEPH UNIVERSITY	PC	BIENNIAL GRANT	1

MINI MICROCINEMA1329 MAIN STREET CINCINNATI, OH 45202	PC	GENERAL	7,000
MT ST JOSEPH UNIVERSITY 5701 DELHI PIKE	PC	BIENNIAL GRANT	1,000

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

or substantial contributor

Name and address (home or business)

	or substantial contributor			
a Paid during the year				
NORTHERN KENTUCKY UNIVERSITY DEPARTMENT OF ART FA 312 HIGHI AND HEIGHTS, KY 41099		PC	BIENNIAL GRANT	6,250

ı				
ı	OXFORD COMMUNITY ARTS CENTER PO BOX 172 OXFORD, OH 45056	PC	BIENNIAL GRANT	
ı				

PO BOX 172 OXFORD, OH 45056		DIEWWY IE GIV IIV	250
PROFESSIONAL ARTISTIC RESEARCH 1662 HOFFNER STREET CINCINNATI OH 45223	PC	BIENNIAL GRANT	5,500

250

OXFORD, OH 45056			
PROFESSIONAL ARTISTIC RESEARCH 1662 HOFFNER STREET CINCINNATI, OH 45223	PC	BIENNIAL GRANT	5,500
Total	 	▶ 3a	437,190

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

	or substantial contributor			
a Paid during the year				
PUBLIC LIBRARY OF CINCINNATI 800 VINE ST		PC	BIENNIAL GRANT	6,300

CINCINNATI, OH 45202			
PYRAMID HILL SCULPTURE PARK 1763 HAMILTON CLEVES RD	PC	BIENNIAL GRANT	

or substantial contributor.

•			
PYRAMID HILL SCULPTURE PARK 1763 HAMILTON CLEVES RD HAMILTON, OH 45013	PC	BIENNIAL GRANT	3,500

ROY G RIV GALLERY435 W RICH ST	PC PC	BIENNIAL GRANT	375
1763 HAMILTON CLEVES RD HAMILTON, OH 45013			
FIRAMID HILL SCOLFTONE PARK	r C	DIEMMIAL GRAIN	3,500

HAMILTON, OH 45013			
ROY G BIV GALLERY435 W RICH ST	PC	BIENNIAL GRANT	375

HAMILION, OH 43013			
ROY G BIV GALLERY435 W RICH ST	PC	BIENNIAL GRANT	37
COLUMBUS, OH 43215			

COLUMBUS, OH 43215		
Total	 ▶ 3a	437,190

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

a Paid during the year			
SEEDLING FOUNDATIONPO BOX 1858 DAYTON, OH 45401	PC	BIENNIAL GRANT	3,500

OCIETY FOR PHOTOGRAPHIC ED O BOX 6653 LEVELAND, OH 44101	PC	BIENNIAL GRANT

Total .

SOCIETY FOR PHOTOGRAPHIC ED PO BOX 6653 CLEVELAND, OH 44101	PC	BIENNIAL GRANT	1,950
ST JOHN'S UNITARIAN UNIVERSAL	PC	BIENNIAL GRANT	600

CLEVELAND, OH 44101			
ST JOHN'S UNITARIAN UNIVERSAL 320 RESOR AVE	PC	BIENNIAL GRANT	600

CLEVELAND, OH 44101			
ST JOHN'S UNITARIAN UNIVERSAL 320 RESOR AVE	PC	BIENNIAL GRANT	600
CINCINNATI, OH 45220			

ST JOHN'S UNITARIAN UNIVERSAL	PC	BIENNIAL GRANT	(
320 RESOR AVE			
CINCINNATI OH 45220			

,		
INCINNATI, OH 45220		
20 RESOR AVE		

437,190

▶ 3a

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

a Paid during the year			
TAFT MUSEUM OF ART316 PIKE STREET	PC	BIENNIAL GRANT	5,000

CINCINNATI, OH 45202			
THE CONTEMPORARY DAYTON 118 N JEFFERSON ST	PC	BIENNIAL GRANT	1,750

THE CONTEMPORARY DAYTON	PC	BIENNIAL GRANT	1,75
118 N JEFFERSON ST			
DAYTON, OH 45402			

DAYTON, OH 45402			
THE SPEED ART MUSEUM2035 S 3RD ST	PC	GENERAL	250

DAYTON, OH 45402			
THE SPEED ART MUSEUM2035 S 3RD ST LOUISVILLE, KY 40208	PC	GENERAL	250

THE SPEED ART MUSEUM2035 S 3RD ST LOUISVILLE, KY 40208	PC	GENERAL	250
20013V1222, KT 10200			

437,190

ı	THE SPEED ART MOSEOM2033 3 SRD ST	I F C	GENERAL	
	LOUISVILLE, KY 40208			

Total .

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

Name and address (home or business)

Total .

	or substantial contributor			
a Paid during the year				
THOMAS MORE COLLEGE 333 THOMAS MORE PARKWAY		PC	BIENNIAL GRANT	1,500

CRESTVIEW HILLS, KY 41017			
UNIVERSITY OF CINCINNATI 2600 CLIFTON AVE CINCINNATI, OH 45221	PC	BIENNIAL GRANT	17,500

2600 CLIFTON AVE CINCINNATI, OH 45221			2.722
UNIVERSITY OF CINCINNATI CLERMONT 4200 CLERMONT COLLEGE DR	PC	BIENNIAL GRANT	1,00

CINCINNATI, OH 45221			
UNIVERSITY OF CINCINNATI CLERMONT 4200 CLERMONT COLLEGE DR	PC	BIENNIAL GRANT	1,0

UNIVERSITY OF CINCINNATI CLERMONT PC BIENNIAL GRANT	
4200 CLERMONT COLLEGE DR BATAVIA, OH 45103	1,000

437,190

BATAVIA, OH 45103		
4200 CLERMONT COLLEGE DR		

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

recipient

2,500

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

or substantial contributor

Name and address (home or business)

a Paid during the year			
UNIVERSITY OF DAYTON 300 COLLEGE PARK DAYTON. OH 45469	PC	BIENNIAL GRANT	1,250

2A110N, 011 43403			
VISIONARIES AND VOICES 3841 SPRING GROVE AVE CINCINNATI, OH 45223	PC	BIENNIAL GRANT	

3841 SPRING GROVE AVE CINCINNATI, OH 45223			_,
WAVE POOL GALLERY 2940 COLERAIN AVE	PC	BIENNIAL GRANT	7,62

CINCINNATI, OH 45223			
WAVE POOL GALLERY 2940 COLERAIN AVE	PC	BIENNIAL GRANT	7,62

WAVE POOL GALLERY 2940 COLERAIN AVE CINCINNATI, OH 45225	PC	BIENNIAL GRANT	7,625
01.101.11.1.11.7.01.1.101.101			

Total	 	▶ 3a	437,190
2940 COLERAIN AVE CINCINNATI, OH 45225			
WAVE POOL GALLERY	PC	DIENNIAL GRAIN	7,023

CINCINNATI, OH 45225		
2940 COLERAIN AVE		

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

recipient

437,190

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

,	or substantial contributor			
a Paid during the year				
WOMENS ART CLUB OF CINCINNATI 6980 CAMBRIDGE AVE CINCINNATI, OH 45227		PC	BIENNIAL GRANT	4,000
WRIGHT STATE UNIVERSITY		PC	BIENNIAL GRANT	3,512

WRIGHT STATE UNIVERSITY 3640 COLONEL GLENN HWY DAYTON, OH 45435	PC	BIENNIAL GRANT	
CINCINNATI, OH 45227			

any foundation manager

Name and address (home or business)

Total .

WRIGHT STATE UNIVERSITY 3640 COLONEL GLENN HWY DAYTON, OH 45435	PC	BIENNIAL GRANT	3,
XAVIER UNIVERSITY	PC	BIENNIAL GRANT	4,

3640 COLONEL GLENN HWY DAYTON, OH 45435	PC	BIENNIAL GRANT	3,512
XAVIER UNIVERSITY AB COHEN CENTER 1658 HERALD AVE	PC	BIENNIAL GRANT	4,602

3640 COLONEL GLENN HWY DAYTON, OH 45435			
XAVIER UNIVERSITY AB COHEN CENTER 1658 HERALD AVE	PC	BIENNIAL GRANT	4,602

XAVIER UNIVERSITY AB COHEN CENTER 1658 HERALD AVE CINCINNATI, OH 45207	PC	BIENNIAL GRANT	4,602
CINCINNATI, OTT 45207			

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

a Paid during the year			
XAVIER UNIVERSITY LIBRARY 3800 VICTORY PARKWAY 5211	PC	BIENNIAL GRANT	398

CINICININIATI OLI 4E207

or substantial contributor

Name and address (home or business)

Total .

CINCINNATI, OH 45207			
YMCA WOMEN'S ART GALLERY 898 WALNUT ST	PC	BIENNIAL GRANT	7
CINCINNATI. OH 45202			

YMCA WOMEN'S ART GALLERY	PC	BIENNIAL GRANT	750
898 WALNUT ST			
CINCINNATI, OH 45202			

▶ 3a

437,190

efile GRAPHIC print - DO NOT P	ROCESS As File	ed Data -	DI	N: 93491188006180			
TY 2019 Accounting Fe	es Schedule			_			
Name: THOMAS R SCHIFF FOUNDATION							
	C/O THOMAS R SCHIFF						
	EIN: 20-56	578503					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			

1,025

1,025

2,050

ACCOUNTING FEES

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TY 2019 Investments Corporate Stock Schedule

Name: THOMAS R SCHIFF FOUNDATION

C/O THOMAS R SCHIFF

ETN: 20-5678503

EIN: 20-56/8503		
Investments Corporation Stock Schedule		
Name of Stock	End of Year Book Value	End of Year Fair Market Value
12,800 SHARES OF CINCINNATI FINANCIAL CORP	151,258	1,345,920
16,698 SHARES OF CINCINNATI FINANCIAL CORP	146,675	1,755,795
18,000 SHARES OF CINCINNATI FINANCIAL CORP	172,908	1,892,700
19,620 SHARES OF CINCINNATI FINANCIAL CORP	180,406	2,063,043
9,000 SHARES OF CINCINNATI FINANCIAL CORP	105,759	946,350
7,600 SHARES OF CINCINNATI FINANCIAL CORP	89,308	799,140
9,500 SHARES OF CINCINNATI FINANCIAL CORP	111,635	998,925
11,000 SHARES OF CINCINNATI FINANCIAL CORP	129,250	1,156,650
7,250 SHARES OF CINCINNATI FINANCIAL CORP	85,188	762,338
5,000 SHARES OF CINCINNATI FINANCIAL CORP	58,750	525,750
12,750 SHARES OF CINCINNATI FINANCIAL CORP	149,813	1,340,663
15,000 SHARES OF CINCINNATI FINANCIAL CORP	176,250	1,577,250

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491188006180
TY 2019 Other Decreases Scho	edule		
Name:	THOMAS R SC	HIFF FOUNDATION	
	C/O THOMAS	R SCHIFF	
EIN:	20-5678503		
De	escription		Amount
ADJUSTMENT FOR FMV			1,401,000

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	: 93491188006180	
TY 2019 Other Expenses Sche	dule			_	
Name:	THOMAS R SCH	IFF FOUNDATION	J		
	C/O THOMAS R SCHIFF				
EIN:	20-5678503				
Other Expenses Schedule		,			
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
URBAN EXPRESSION	1,500	0		1,500	

efile GRAPHIC print - DO NOT PROCES	SS As Filed Data	-	DLI	N: 93491188006180	
TY 2019 Other Professional	l Fees Schedu	le		_	
Nam	ne: THOMAS R S	SCHIFF FOUNDATI	ON		
	C/O THOMAS	S R SCHIFF			
EIN: 20-5678503					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable	

20 30,0303				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

2,582

2,581

5,163

INSURANCE FEES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DLI	N: 93491188006180
TY 2019 Taxes Schedule				
Name: THOMAS R SCHIFF FOUNDATION C/O THOMAS R SCHIFF EIN: 20-5678503				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TREASURER STATE OF OHIO	200	0		200
2019 ESTIMATED PAYMENTS	2,020	0		2,020

efile GRAPHIC print - I		led Data -		DLN: 93491188006180	
Schedule B (Form 990, 990-EZ,	Schedule of Contributors			OMB No. 1545-0047	
or 990-PF) Department of the Treasury Internal Revenue Service	PF) ► Attach to Form 990, 990-EZ, or 990-PF. Int of the Treasury ► Go to www.irs.gov/Form990 for the latest information.		2019		
Name of the organization THOMAS R SCHIFF FOUN C/O THOMAS R SCHIFF	DATION		Employer 20-567850	identification number	
Organization type (che	ck one):				
Filers of:	Section:				
Form 990 or 990-EZ	☐ 501(c)() (enter	number) organization			
	4947(a)(1) nonex	xempt charitable trust not treated as a	private foundation		
	☐ 527 political orga	anization			
Form 990-PF	✓ 501(c)(3) exempt	501(c)(3) exempt private foundation			
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
501(c)(3) taxable private foundation					
		Z, or 990-PF that received, during the ntributor. Complete Parts I and II. See			
Special Rules					
under sections to received from a	09(a)(1) and 170(b)(1)(A)(vi y one contributor, during the	1(c)(3) filing Form 990 or 990-EZ that r i), that checked Schedule A (Form 990 e year, total contributions of the greate ne 1. Complete Parts I and II.	0 or 990-EZ), Part II, line 1	3, 16a, or 16b, and that	
during the year,	total contributions of more th	1(c)(7), (8), or (10) filing Form 990 or 9 han \$1,000 <i>exclusively</i> for religious, cl children or animals. Complete Parts I,	haritable, scientific, literary		
during the year, If this box is che purpose. Don't o	contributions <i>exclusively</i> for cked, enter here the total co omplete any of the parts unl	1(c)(7), (8), or (10) filing Form 990 or 9 religious, charitable, etc., purposes, bontributions that were received during the less the General Rule applies to this ong \$5,000 or more during the year.	out no such contributions to the year for an <i>exclusively</i> organization because it rec	otaled more than \$1,000. religious, charitable, etc., ceived <i>nonexclusively</i>	
990-EZ, or 990-PF), but	it must answer "No" on Par	General Rule and/or the Special Rules rt IV, line 2, of its Form 990; or check t doesn't meet the filing requirements of	the box on line H of its For		
For Paperwork Reduction of for Form 990, 990-EZ, or 99	Act Notice, see the Instructions 0-PF.	Cat. No. 30613X	Schedule B (Form 9	90, 990-EZ, or 990-PF) (2019)	

20-5678503

Employer identification number

C/O THOM	AS R SCHIFF	
Part I		Coi
Contribut	ors	COI

ntributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1	THOMAS R SCHIFF 4 GRANDIN TERRACE CINCINNATI, OH 45208	\$ 1,717,250	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		Schedule B (F	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule	B (Form 990, 990-EZ, or 990-PF) (2019)			Page 4
THOMAS R	rganization SCHIFF FOUNDATION AS R SCHIFF			Employer identification number 20-5678503
Part III	than \$1,000 for the year from any one contrib	outor. Complete otal of exclusive structions.) ►	columns (a) throu ely religious, charita	in section 501(c)(7), (8), or (10) that total more gh (e) and the following line entry. For able, etc., contributions of \$1,000 or less for
(a) No. from Part I	(b) Purpose of gift	(c)	Use of gift	(d) Description of how gift is held
	Transferee's name, address, and ZIP 4		ansfer of gift Relat	ionship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	Transferee's name, address, and ZIF	ionship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	c) Use of gift		(d) Description of how gift is held
	(e) Transfer of Transferee's name, address, and ZIP 4		-	ionship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	Transferee's name, address, and ZIF		ansfer of gift Relat	ionship of transferor to transferee
			So	chedule B (Form 990, 990-EZ, or 990-PF) (2019)