2949103004822

**Return of Private Foundation** 

990-PF

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

20**19** 

tion. Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.

-		ne of fou	dat year 2019 of tax year beginning		, a	A Employer	identification number	- 11
			` _			A Employer	identification number	
-	i ne	ber and	A Bantz Foundation street (or PO box number if mail is not delivered to street address)		Room/suit	te	20-5771628	
		Vine S	•		Suite 27	· · · · · · · · · · · · · · · · · · ·	number (see instruction	(a)
-			state or province, country, and ZIP or foreign postal code	•	T Odite 21			,
		cınnatı	ОН	4520	2-2409		(513) 721-445	0
-		-	ntry name Foreign province/state/county	<del></del>	n postal co	de C if exempti	on application is pending	
			• • • • • • • • • • • • • • • • • • • •	•	•	l and	on application to portain	g, 0.100K 11010
•	G	Check	all that apply   Initial return   Initial return	of a former pu	iblic char	ity D 1. Foreign	organizations, check h	ere ▶
			☐ Final return ☐ Amended ret		abile orial	"	organizations meeting	
			☐ Address change ☐ Name chang			· · ·	nere and attach computer	
-	H	Check	type of organization X Section 501(c)(3) exempt pro		on O		oundation status was te	_
[			n 4947(a)(1) nonexempt charitable trust  Other tax		_	I I SACTION 50	7(b)(1)(A), check here	▶
:	•		arket value of all assets at J Accounting method			أادر		
			year (from Part II, col (c), Other (specify)	Z) Casii		F If the foun	dation is in a 60-month t tion 507(b)(1)(B), check	
			(Specify)  \$\infty \infty \\$ 649,274 (Part I, column (d), must be	e on cash basi	s)	· under sec	iion sor(b)(1)(b), check	
ı		art I	Analysis of Revenue and Expenses (The total of			1		(d) Disbursements
	ГС	1101	amounts in columns (b), (c), and (d) may not necessarily	(a) Revenue expenses p		) Net investment	(c) Adjusted net	for charitable
			equal the amounts in column (a) (see instructions) )	books	·	income	ıncome	purposes (cash basis only)
	_	1	Contributions, gifts, grants, etc., received (attach schedule)		(Max	T. Internation		ALTRAFELE IN
	ı		Check ► if the foundation is not required to attach Sch B	57 - 187 E 51			ANTENTAG	
2		2 3	Interest on savings and temporary cash investments	Sen Truck	27	27	HI NEVERSE PERSON OF CA	医海绵沟 海
2- 4		4	Dividends and interest from securities	18	3,049	18,049	DECE	IVED 3. T.
	-	- 5а	Gross rents		,,,,,,	7.010 1.0	REGE	V. D. Cop. Cop.
	- 1	b	Net rental income or (loss)	1 1 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	11. 1 128	OF A WEST ZHA	I O LEGICAL TO LEGICA TO LEGICAL	STREETS WOOD
	o	6a	Net gain or (loss) from sale of assets not on line 10			CHILL SHOPE	<del></del>	7=2020@19.1e1
	2	b				HALL MALE	<b>新教育的</b>	Mentage 2 1
	Revenue	7	Capital gain net income (from Part IV, line 2)	SET PORTUGE		96,618		THIS TO THE
	&	8	Net short-term capital gain	BEAT FROM	10 11	はかった。からこれはは	CODE	A12'0 1 3444 183
		9	Income modifications		" (X )	名のわらりで		的。因此是我们的政
		10a	Gross sales less returns and allowances	VALUE AND	النا ليزانون	素純料財団で	氏がいまるにある。	ながれている。これで
		b	Less Cost of goods sold	国际共享安全工作			では、自然の方式できた。	THE TAXABLE PROPERTY.
		С	Gross profit or (loss) (attach schedule)		P. S.	CONTRACT CONT		2. Programmer and the
		11	Other income (attach schedule)					AND AND AREA
707		12	Total. Add lines 1 through 11		1,694	114,694	0	医2016年119-2012
ú	S	13	Compensation of officers, directors, trustees, etc	28	3,803		·····	
3	penses	14	Other employee salaries and wages					
3	bel	15	Pension plans, employee benefits	ļ				
_	EX	16a	Legal fees (attach schedule)			<del></del>		<del></del>
5	Je l	b	Accounting fees (attach schedule)		2045			<del></del>
SANCHO OC	and Administrative	C	Other professional fees (attach schedule)	<u></u>	5,045			_
ក	tra	17	Interest			<del></del>		
	nis	18	Taxes (attach schedule) (see instructions)					Manual Company
5	Ē	19	Depreciation (attach schedule) and depletion		<del></del>			The second of the second
3	۱q	20	Occupancy					
D	d/	21	Travel, conferences, and meetings	· · · · · ·				
	an	22	Printing and publications Other expenses (attach schedule)		<del></del>	<del></del>		<del></del>
	βL	23 24	Other expenses (attach schedule)  Total operating and administrative expenses.					
	atir	24	Add lines 13 through 23	1 2	4,848	0	0	0
	er	25	Contributions, gifts, grants paid				<b>中国是国际市场中心</b>	120,000
	Operating	26 26	Total expenses and disbursements. Add lines 24 and 25		4,848		U	120,000
	_	ļ	Subtract line 26 from line 12	104	T,040	O CHRISTER WHATE	MARK TENENT MASS	120,000 120,000
		27		1	0,154		用业业系统	THE RESERVE
		a	Excess of revenue over expenses and disbursements  Net investment income (if negative, enter -0-)	A CONTRACTOR OF THE CONTRACTOR		11.4 RQ.4	PERSONAL PART	Experience and the second
		b	Adjusted net income (if negative, enter -0-)			TALL FOLIA		The Strate
			Adjusted liet income (in hegalite, enter so.)	The admitted of the print	THE PERSON AND PROPERTY.	SALLO, MATE, AND THE CALLE		nedering and the hold of

Form 990-PF (2019)

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	of year
		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	9,018		
	2	Savings and temporary cash investments	3,521	8,892	8,892
	3	Accounts receivable	27 Burn 3	The same of the sa	4 15 6 5
		Less allowance for doubtful accounts			
	4	Pledges receivable ▶		BATTER OF LESS	Merch .
		Less allowance for doubtful accounts			
	5	Grants receivable .	,		
	6	Receivables due from officers, directors, trustees, and other		•	
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)	the the grade were	1 to 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	A THE STATE OF THE
		Less. allowance for doubtful accounts			
Ş	8	Inventories for sale or use	·	•	
Assets	9	Prepaid expenses and deferred charges			1
As	10a	Investments—U S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	462,937	509,053	509,053
	С	investments—corporate bonds (attach schedule)	148,034	130,665	130,665
	11	Investments—land, buildings, and equipment basis		- Te	大学機能で
		Less accumulated depreciation (attach schedule)			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			1
	14	Land, buildings, and equipment basis	はないなどは数は、	並是對於這一次	- TATROGEN
		Less accumulated depreciation (attach schedule)			
	15	Other assets (describe Accrued Income )	1,621	664	664
	16	Total assets (to be completed by all filers—see the		•	
		instructions Also, see page 1, item I)	625,131	649,274	
	17	Accounts payable and accrued expenses			中心世界级地學的
S	18	Grants payable .		······	CHOMA TO TURN
Liabilities	19	Deferred revenue			中国的政治
oili	20	Loans from officers, directors, trustees, and other disqualified persons			F ALTONIAN LAND
ia.	21	Mortgages and other notes payable (attach schedule)			A William Control
_	22	Other liabilities (describe  )			97,408,927 (D) \$1
	23	Total liabilities (add lines 17 through 22)	0	0	4000年代東北部
es		Foundations that follow FASB ASC 958, check here ►X			S. Trees and the second
n		and complete lines 24, 25, 29, and 30.			
alances	24	Net assets without donor restrictions	625,131	649,274	THE RESERVE OF THE
00	25	Net assets with donor restrictions			THE PROPERTY OF THE PROPERTY O
Ē		Foundations that do not follow FASB ASC 958, check here		•	
工		and complete lines 26 through 30.			
ō	26	Capital stock, trust principal, or current funds	·		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
ध्र	27	Paid-in or capital surplus, or land, bldg, and equipment fund			CALCULATE TO PROPERTY AND AND
SS	28	Retained earnings, accumulated income, endowment, or other funds	625,131	649,274	PACKED BALLS
ĕ	29	Total net assets or fund balances (see instructions)	625, 151	045,214	A ME TANKS AND THE SECOND
Net Assets or Fund	30	Total liabilities and net assets/fund balances (see	625,131	649,274	
	-: III	Analysis of Changes in Net Assets or Fund Balances	023,131	043,214	1/25 (2) 55/24 28, 20/25/25 735, 12, 15 M
	Total	net assets or fund balances at beginning of year—Part II, column (a)	line 29 (must agree	with	
1			, inic 25 (must agree	1	625,131
-		of-year figure reported on prior year's return) r amount from Part I, line 27a		2	-40,154
_			investment portfolio	· · · · · · · · · · · · · · · · · · ·	64,298
3 4		increases not included in line 2 (itemize) increase in value of	portione	4	649,275
5		eases not included in line 2 (itemize)		5	3.5,275
	Total	net assets or fund balances at end of year (line 4 minus line 5)—Par	t II, column (b), line 2		649,275

3 3

Page 3
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Part	V Capital Gains and	d Losses for Tax on Investm	ent Income					
	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 )				(c) Date acqu (mo , day, )			
1a	See Attached Charles Sch	wab Statement		Р	Various	Various		
b	See Attached Charles Sch	wab Statement		Р	Various	Various		
<u>C</u>								
d	•							
е			–		-			
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis pense of sale		(h) Gain or (loss) ((e) plus (f) minus (g))		
<u>a</u>	106,500			71,005		35,495		
b	164,957			103,834		61,123		
c d								
<u>u</u>						<del></del>		
	Complete only for assets sh	owing gain in column (h) and owned	by the foundation	on on 12/31/69				
		(j) Adjusted basis		ess of col (i)		ins (Col. (h) gain minus , but not less than -0-) <b>or</b>		
	(i) F M V as of 12/31/69	as of 12/31/69		ol (j), if any		osses (from col (h))		
а						35,495		
b						61,123		
С								
d								
е			<del></del>		<del></del>			
2	Capital gain net income or	(net capital loss) 1	also enter in Pa , enter -0- in Pa	7	2	96,618		
3		or (loss) as defined in sections 12						
	_	line 8, column (c) See instruction	ns If (loss), ent	ter -0- in }				
Part	Part I, line 8	ler Section 4940(e) for Redu		J	3	0		
Was t		e this part blank section 4942 tax on the distributab ialify under section 4940(e). Do no			e period?	☐ Yes ☒ No		
1	<del>,,</del>	unt in each column for each year,	· · · · · · · · · · · · · · · · · · ·	<del></del>	ng any entries			
	(a)	dit in each column for each year,	See the matrac		ig any crime.	(d)		
Cal	Base period years endar year (or tax year beginning in)	Adjusted qualifying distributions	Net value	(c) of noncharitable-use as	ssets	Distribution ratio col (b) divided by col (c))		
Çai	2018		2,197	75	1,115	0 109433		
	2017		,456		2,452	0 072504		
	2016	48,600 797,673				0 06092		
	2015	60	0,000	86	7,588	0 069157		
	2014	69	9,854	96	3,057	0 072308		
						0.004000		
2	Total of line 1, column (d)		45 - 4-4-1 b	- 0 h · · 5 0 h · ·	2	0 384329		
3	•	or the 5-year base period—divide undation has been in existence if		-	3	0 076866		
4	Enter the net value of none	charitable-use assets for 2019 from	m Part X, line 5	5	4	648,294		
5	Multiply line 4 by line 3				5	49,832		
6	Enter 1% of net investmen	it income (1% of Part I, line 27b)			6	1,147		
7	Add lines 5 and 6				7	50,979		
8	Enter qualifying distribution If line 8 is equal to or great Part VI instructions	ns from Part XII, line 4 . ter than line 7, check the box in Pa	art VI, line 1b, a	and complete that	8 part using a	120,000 1% tax rate See the		

Form 990-PF (2019)



Part '	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instr	uctio	ns)				
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	1.	通知意		: 1		
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)	<u> </u>	A it.	31.66	***	į	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	_1	** . 1.e*	<u> </u>	,147	į	
_	here $\blacktriangleright$ $\boxtimes$ and enter 1% of Part I, line 27b			33 . 4	<u>ک</u> ک	1	
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of Part I, line 12, col (b)						
2	1 1						
3	Add lines 1 and 2	3			,147		
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	4			, 17,	•	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	-		.147		
6	Credits/Payments		·	7	-34	ĺ	
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 800	7			·		
b	Exempt foreign organizations—tax withheld at source 6b	, , ,	1, 1	75 F.			
C	Tax paid with application for extension of time to file (Form 8868)	1,5	一、推		" 1		
d	Backup withholding erroneously withheld	<u> </u>	7		5	J	
7	Total credits and payments Add lines 6a through 6d	_7			800	,	
8	Enter any penalty for underpayment of estimated tax. Check here	8					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			347		
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  State the amount of line 40 to be Condited to 2000 estimated to:	10 11			0		
11 2054	Enter the amount of line 10 to be Credited to 2020 estimated tax  Refunded  Statements Regarding Activities	11	•		0		
1a	VII-A Statements Regarding Activities  During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Ĩ.i.	Yes	No		
ıa	participate or intervene in any political campaign?		1a	163	X		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			$\dashv$			
-	Instructions for the definition		1 <sub>b</sub>	1	Х		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	6	VF JC	177	: 31		
	published or distributed by the foundation in connection with the activities		1				
С	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 the year		1	2.5	r*: 1		
	(1) On the foundation ►\$ (2) On foundation managers ►\$			,e 3			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impose	ed	البدومين	10			
_	on foundation managers > \$		34.94	1300			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2 1050	45° 3.84	<u>X</u>		
3	If "Yes," attach a detailed description of the activities  Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles		1	T Will	25		
3	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		$\frac{\chi}{\chi}$		
b	If "Yes," has it filed a tax return on Form 990-T for this year?		4b	N/A			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X		
	If "Yes," attach the statement required by General Instruction T		63.5	4 7.55 2 44	1		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			المراجع المراجع	130		
	By language in the governing instrument, or		DWY	30.24			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	at		<u> </u>	March 1		
_	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	_X	e = e = 1		
8a	Enter the states to which the foundation reports or with which it is registered. See instructions		333	3,5	inate		
_	OH  If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gener	 al	الْمِينَ		***		
b	(or designate) of each state as required by General Instruction G? If "No," attach explanation	aı	8b	X	20 1 E Y		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3	3	775°	^	1.1		
J	or 4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV If			إخلامت		1	
	"Yes," complete Part XIV		9		Х	4	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing the	eır					
	names and addresses		10		X		
			- 000	LDE /			

Part	VII-A Statements Regarding Activities (continued)			-9
	Otatemento regulating Activities (continuos)	IFT'S	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the	<u> </u>		
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		x
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisòry privileges? If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ► C Gregory Schmidt Telephone no ► (513) 72	1-445	0	
	Located at ► 600 Vine Street, Suite 2700 Cincinnati OH ZIP+4 ► 45202-2	409		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here		!	▶ □
	and enter the amount of tax-exempt interest received or accrued during the year        15			
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16	# # ·a	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the	1		4
Dart	name of the foreign country  VII-B Statements Regarding Activities for Which Form 4720 May Be Required	1.4	<u> </u>	4
ı aıı	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	. 37 (6)	Yes	No
10	During the year, did the foundation (either directly or indirectly)			(3.5)
1a		1 mg - 2 mg	10 A	17,
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes X No  (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	j	1 4	, _ ,
	disqualified person?	30.0		4 7 7 1
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1,1	3	٠. نوري
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	الانتراكية (الانتراكية الانتراكية الانتراكية الانتراكية الانتراكية (الانتراكية الانتراكية الانتراكية (الانتراك التنمو	ارون مرودار	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	* 0.7		
	the benefit or use of a disqualified person)?	42		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	15.5	22	7.2
	foundation agreed to make a grant to or to employ the official for a period after	Nic.	2	*
	termination of government service, if terminating within 90 days )	15(3)	12 1	4.0
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in		1 5	1711-4
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	N/A	
	Organizations relying on a current notice regarding disaster assistance, check here	100000 1440.		
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	===	سند	il rais
_	were not corrected before the first day of the tax year beginning in 2019?	1c	P 533 1	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	145		0.3
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5))  At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines	1 av 2	43.3	101.0
а	6d and 6e) for tax year(s) beginning before 2019?  Yes X No	· †	1	
	If "Yes," list the years ▶ 20 , 20 , 20	· calle	4	1.3
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)	13,75	3	
-	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	4	18.	100
	all years listed, answer "No" and attach statement—see instructions)	2b	N/A	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	( )		
	<b>▶</b> 20 , 20 , 20 , 20	2	1.	2.57
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	1 2 1		1 m 2 m
	at any time during the year?	4		
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or	الدور فم	2	157
	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		30 6	10.5
	of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	7.37	
	foundation had excess business holdings in 2019 )	3b	N/A	<del></del>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	4	X
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 2019?	4b	<u> </u>	نست. X
	Grantable parpose that had not been removed north jeopardy before the mot day of the tax year beginning in 2013.	717		

Part	VII-B Statements Regarding Activities	for W	hich Form	4720 N	lay Be Re	quire	d (contin	ued)			
5a	During the year, did the foundation pay or incur ar			·	_					Yes	No
	(1) Carry on propaganda, or otherwise attempt to						∐ Yes	X No		. 7 . 7	. " . j.
	(2) Influence the outcome of any specific public el directly or indirectly, any voter registration driv		see section 49	955), or	to carry on,	ı	☐ Yes	X No	<b>X</b>	*	
	(3) Provide a grant to an individual for travel, stud		er sımılar puri	ooses?			Yes	X No			-
	(4) Provide a grant to an organization other than a section 4945(d)(4)(A)? See instructions	•			n described	ın	☐ Yes	X No			مني
	(5) Provide for any purpose other than religious, or purposes, or for the prevention of cruelty to ch			terary, o	r education	al	☐ Yes	X No	, ÷	,	
b	If any answer is "Yes" to 5a(1)–(5), did any of the			alify uni	der the exce	entions			, "ne	١.,	۴
D	Regulations section 53 4945 or in a current notice							<b>.</b>	5b	N/A	
	Organizations relying on a current notice regarding	-	=					▶ 🗌	,**	۳,	
С	If the answer is "Yes" to question 5a(4), does the because it maintained expenditure responsibility f	foundation	on claim exen				☐ Yes	☐ No	, is	î	
6a	If "Yes," attach the statement required by Regulat Did the foundation, during the year, receive any fu				oay premiun	ns			, ,		۱۰. ۴
	on a personal benefit contract?		-				☐ Yes	X No			ئے
b	Did the foundation, during the year, pay premiums If "Yes" to 6b, file Form 8870	s, directly	or indirectly,	on a pe	ersonal ben	efit con	tract?	•	6b	v	<u> </u>
7a	At any time during the tax year, was the foundation a p					- 4	Yes	☐ No			_:\]
b 8	If "Yes," did the foundation receive any proceeds its the foundation subject to the section 4960 tax of		•				action /		7b	"Je" ;	4
	remuneration or excess parachute payment(s) du	ring the	year?				☐ Yes	☐ No		*	y,
Part	VIII Information About Officers, Direct	tors, Tr	ustees, Fo	undati	on Manag	jers, ⊦	lighly P	aid Em	ploye	es,	
4	and Contractors	tion ma	nagore and	their co	mnoneatio	n See	instructi	one			
'	1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions.  (b) Title, and average (c) Compensation (d) Contributions to (e) Expense account.										
									(e) Expe	ense acc	
	(a) Name and address		rs per week ed to position	`´(If n	ot paid, ter -0-)	emplo	yee benefit erred compe	plans		ense acc allowan	
C Gre	(a) Name and address egory Schmidt	devot	rs per week	`´(If n	ot paid,	emplo	yee benefit	plans			
		Dir/Pre	rs per week ed to position es/Trea 15 00	(If n	ot paid,	emplo	yee benefit	plans			
600 V Mary	egory Schmidt fine Street, Suite 2700 Cincinnati, OH 45202 Ann Gergen	Dir/Pre	rs per week ed to position es/Trea 15 00 or & Secretary	(If n	25,981	emplo	yee benefit	plans			
600 V Mary 600 V	egory Schmidt fine Street, Suite 2700 Cincinnati, OH 45202 Ann Gergen fine Street, Suite 2700 Cincinnati, OH 45202	Dir/Pre	rs per week ed to position es/Trea 15 00 or & Secretary 5 00	(If n	ot paid, ter -0-)	emplo	yee benefit	plans			
600 V Mary 600 V Williai	egory Schmidt fine Street, Suite 2700 Cincinnati, OH 45202 Ann Gergen fine Street, Suite 2700 Cincinnati, OH 45202 m J Liss	Dir/Pre	rs per week ed to position es/Trea 15 00 or & Secretary 5 00 or	(If n	25,981	emplo	yee benefit	plans			
600 V Mary 600 V Williai	egory Schmidt fine Street, Suite 2700 Cincinnati, OH 45202 Ann Gergen fine Street, Suite 2700 Cincinnati, OH 45202	Dir/Pre	rs per week ed to position es/Trea 15 00 or & Secretary 5 00	(If n	25,981	emplo	yee benefit	plans			
600 V Mary 600 V Williai	egory Schmidt  fine Street, Suite 2700 Cincinnati, OH 45202  Ann Gergen  fine Street, Suite 2700 Cincinnati, OH 45202  m J Liss  fine Street, Suite 2700 Cincinnati, OH 45202	Dir/Pre	rs per week ed to position es/Trea  15 00 or & Secretary 5 00 or 10 00	(If n	25,981 0 2,822	emplo and def	oyee benefit erred compe	plans ensation	other	allowan	
600 V Mary 600 V Williai	egory Schmidt fine Street, Suite 2700 Cincinnati, OH 45202 Ann Gergen fine Street, Suite 2700 Cincinnati, OH 45202 m J Liss	Dir/Pre	rs per week ed to position es/Trea  15 00 or & Secretary 5 00 or 10 00	(If n	25,981 0 2,822	emplo and def	oyee benefit erred compe	plans ensation	other	allowan	
600 V Mary 600 V Willian 600 V	egory Schmidt  fine Street, Suite 2700 Cincinnati, OH 45202  Ann Gergen  fine Street, Suite 2700 Cincinnati, OH 45202  m J Liss  fine Street, Suite 2700 Cincinnati, OH 45202  Compensation of five highest-paid employees	Directo  Other to	rs per week ed to position es/Trea  15 00 or & Secretary 5 00 or 10 00	cluded	25,981 0 2,822	emplo and def	oyee benefit erred compe	plans ensation  s). If no	ne, ent	allowan	count,
600 V Mary 600 V Willian 600 V	egory Schmidt  fine Street, Suite 2700 Cincinnati, OH 45202  Ann Gergen  fine Street, Suite 2700 Cincinnati, OH 45202  m J Liss  fine Street, Suite 2700 Cincinnati, OH 45202  Compensation of five highest-paid employees  "NONE."	Directo  Other to	rs per week ed to position es/Trea 15 00 or & Secretary 5 00 or 10 00 han those in (b) Title, and a hours per w	cluded	25,981 0 2,822 on line 1—	emplo and def	structions  (d) Control employee plans and	plans ensation  s). If no	ne, ent	allowan	count,
600 V Mary 600 V William 600 V	egory Schmidt  fine Street, Suite 2700 Cincinnati, OH 45202  Ann Gergen  fine Street, Suite 2700 Cincinnati, OH 45202  m J Liss  fine Street, Suite 2700 Cincinnati, OH 45202  Compensation of five highest-paid employees  "NONE."	Directo  Other to	rs per week ed to position es/Trea 15 00 or & Secretary 5 00 or 10 00 han those in (b) Title, and a hours per w	cluded	25,981 0 2,822 on line 1—	emplo and def	structions  (d) Control employee plans and	plans ensation  s). If no	ne, ent	allowan	count,
600 V Mary 600 V William 600 V	egory Schmidt  fine Street, Suite 2700 Cincinnati, OH 45202  Ann Gergen  fine Street, Suite 2700 Cincinnati, OH 45202  m J Liss  fine Street, Suite 2700 Cincinnati, OH 45202  Compensation of five highest-paid employees  "NONE."	Directo  Other to	rs per week ed to position es/Trea 15 00 or & Secretary 5 00 or 10 00 han those in (b) Title, and a hours per w	cluded	25,981 0 2,822 on line 1—	emplo and def	structions  (d) Control employee plans and	plans ensation  s). If no	ne, ent	allowan	count,
600 V Mary 600 V William 600 V	egory Schmidt  fine Street, Suite 2700 Cincinnati, OH 45202  Ann Gergen  fine Street, Suite 2700 Cincinnati, OH 45202  m J Liss  fine Street, Suite 2700 Cincinnati, OH 45202  Compensation of five highest-paid employees  "NONE."	Directo  Other to	rs per week ed to position es/Trea 15 00 or & Secretary 5 00 or 10 00 han those in (b) Title, and a hours per w	cluded	25,981 0 2,822 on line 1—	emplo and def	structions  (d) Control employee plans and	plans ensation  s). If no	ne, ent	allowan	count,
600 V Mary 600 V William 600 V	egory Schmidt  fine Street, Suite 2700 Cincinnati, OH 45202  Ann Gergen  fine Street, Suite 2700 Cincinnati, OH 45202  m J Liss  fine Street, Suite 2700 Cincinnati, OH 45202  Compensation of five highest-paid employees  "NONE."	Directo  Other to	rs per week ed to position es/Trea 15 00 or & Secretary 5 00 or 10 00 han those in (b) Title, and a hours per w	cluded	25,981 0 2,822 on line 1—	emplo and def	structions  (d) Control employee plans and	plans ensation  s). If no	ne, ent	allowan	count,
600 V Mary 600 V William 600 V	egory Schmidt  fine Street, Suite 2700 Cincinnati, OH 45202  Ann Gergen  fine Street, Suite 2700 Cincinnati, OH 45202  m J Liss  fine Street, Suite 2700 Cincinnati, OH 45202  Compensation of five highest-paid employees  "NONE."	Directo  Other to	rs per week ed to position es/Trea 15 00 or & Secretary 5 00 or 10 00 han those in (b) Title, and a hours per w	cluded	25,981 0 2,822 on line 1—	emplo and def	structions  (d) Control employee plans and	plans ensation  s). If no	ne, ent	allowan	count,
600 V Mary 600 V William 600 V	egory Schmidt  fine Street, Suite 2700 Cincinnati, OH 45202  Ann Gergen  fine Street, Suite 2700 Cincinnati, OH 45202  m J Liss  fine Street, Suite 2700 Cincinnati, OH 45202  Compensation of five highest-paid employees  "NONE."	Directo  Other to	rs per week ed to position es/Trea 15 00 or & Secretary 5 00 or 10 00 han those in (b) Title, and a hours per w	cluded	25,981 0 2,822 on line 1—	emplo and def	structions  (d) Control employee plans and	plans ensation  s). If no	ne, ent	allowan	count,

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	mployees,
3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "NOI	NE."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
	<u> </u>
Total number of others receiving over \$50,000 for professional services	
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1 Charitable grants made to organizations that qualify as exempt organizations under Sec 501(c)(3)	
of the Internal Revenue Code that have as one of their stated purposes the support of and/or aid to the	
hearing and/or visually impaired See Part XV	120,000
2	
3	<del>                                     </del>
,	
4	<del> </del>
	1
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
	<del> </del>
2	
	}
All other program-related investments. See instructions	<del>                                     </del>
3	
*	
Total. Add lines 1 through 3	0
	Form 990-PF (2019)

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions)	toune	dations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
•	purposes		
а	Average monthly fair market value of securities	1a	649,274
b	Average of monthly cash balances	1b	8,892
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	658,166
е	Reduction claimed for blockage or other factors reported on lines 1a and		<u> </u>
	1c (attach detailed explanation)	2	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	658,166
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see		
	instructions) .	4	9,872
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	648,294
6	Minimum investment return. Enter 5% of line 5	6	32,415
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundation and certain foreign organizations, check here   ■ and do not complete this part )	าร	
1	Minimum investment return from Part X, line 6	1	32,415
2a	Tax on investment income for 2019 from Part VI, line 5 2a 1,147		
b	Income tax for 2019 (This does not include the tax from Part VI)		
С	Add lines 2a and 2b	2c	1,147
3	Distributable amount before adjustments Subtract line 2c from line 1	3	31,268
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	31,268
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1 .	7	31,268
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	120,000
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the	प्र <sup>द</sup> ्रक	
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	120,000
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	_	4 4 4 7
•	Enter 1% of Part I, line 27b See instructions	5	1,147
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	118,853
	<b>Note.</b> The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth qualifies for the section 4940(e) reduction of tax in those years	iei tne	loundation
	quarries for the section 4340(e) reduction of tax in those years		

Part	XIII Undistributed Income	see instructions	)			
			(a) Corpus	(b) Years pnor to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from line 7	Part XI,				31,268
2	Undistributed income, if any, as of the	end of 2019				<u> </u>
а	Enter amount for 2018 only				l 0	
b	•	20, 20				
3	Excess distributions carryover, if ar			•		
a	From 2014	22,843				
b	From 2015	17,820				
c	From 2016	9,184				
d	From 2017	18,921				
e	From 2018	46,247				
f	Total of lines 3a through e	70,277	115,015			·
4	Qualifying distributions for 2019 fro	m Part XII	110,010			
7	line 4 ▶ \$ 120,000	mrait XII,				
а	Applied to 2018, but not more than	line 2a				
	Applied to undistributed income of				<u>-</u>	
b	(Election required—see instructions					
,.	Treated as distributions out of corp	· .				
·	required—see instructions)	us (Liccilon			,	
a	Applied to 2019 distributable amou	n•				31,268
e	Remaining amount distributed out of	1	88,732			31,200
5	Excess distributions carryover appl	· ·	00,7 32			
5	(If an amount appears in column (d					
	amount must be shown in column (	•				
6	Enter the net total of each column	· ·			<del></del>	<u> </u>
O	indicated below:	ii as			ı	
_	Corpus Add lines 3f, 4c, and 4e S	ubtract line 5	203,747			
a	Prior years' undistributed income S		203,747			
b	line 4b from line 2b	bubliaci		0		
•		distributed	-			
С	Enter the amount of prior years' uncome for which a notice of deficie					,
		- 1				
	been issued, or on which the section	111 4942(a)				
_	tax has been previously assessed Subtract line 6c from line 6b Taxab					
d		ne				
_	amount—see instructions	street has				
е	Undistributed income for 2018 Sub					
	4a from line 2a Taxable amount—s	see			0	
	Instructions Undistributed income for 2019 Sub	street lines		·	U	
f	4d and 5 from line 1. This amount r					
	distributed in 2020	ilust be	Ì			0
7	Amounts treated as distributions ou	it of corpus			<del></del>	
•	to satisfy requirements imposed by					
	170(b)(1)(F) or 4942(g)(3) (Election					
	required—see instructions)	i illay be		•		
	•	2014 not				<del></del>
8	Excess distributions carryover from	1	22 042			
	applied on line 5 or line 7 (see instr		22,843			
9	Excess distributions carryover to	2020.	400.004			
40	Subtract lines 7 and 8 from line 6a		180,904			- ,
10	Analysis of line 9	,				,
<b>a</b>	Excess from 2015	17,820				!
þ	Excess from 2016	9,184				
С	Excess from 2017	18,921				
d	Excess from 2018	46,247				
е	Excess from 2019	88,732				

501(c)(3) organizations that have as one of their purposes the support of and/or aid to the visually impaired and/or hearing impaired

**Total** 

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation show any relationship to Purpose of grant or status of **Amount** any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the yèar PC Cincinnati Association for the Blind and Visually Imapire Visual 20,000 2045 Gilbert Ave Cincinnati, OH 45202 PC Circle Tail, Inc. Visual 10.000 8834 Carey Ln Pleasant Plain, OH 45162 Natl Assoc to Prevent Blindness PC Visual 5,000 2045 Gilbert Ave Cincinnati, OH 45202 PC Ohio Valley Voices Visual and Hearing 20,000 6642 Branch Hill Guinea Pike Loveland, OH 45140 PC American Red Cross Hearing 5,000 2111 Dana Ave Cincinnati, OH 45207 Living Arrangements for the Developmentally Disabled PC Visual and Hearing 10,000 3603 Victory Pkwy Cincinnati, OH 45229 PC Cincinnati Preservation Association Hearing 10,000 430 Reading Rd Ste 300 Cincinnati, OH 45202 PC St Rita School for the Deaf Hearing 15,000 1720 Glendale Milford Rd Cincinnati, OH 45215 PC Visual Clovernook Center for the Blind 15,000 7000 Hamilton Ave Cincinnati, OH 45231 PC Cincinnati Eye Institute Visual 10,000 1945 CEI Drive Cincinnati, OH 45242 3a 120,000 Total b Approved for future payment

0

3b

Pai	rt XVI-	A Analysis of Income-Producing Ac	LIVILIES				
		amounts unless otherwise indicated	Unrelated bus	iness income	Excluded by section	on 512, 513, or 514	4-3
	•						(e) Related or exempt
			(a)	(b)	(c)	(d)	function income
1	Progra	am service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
•					<del>                                     </del>		
			<del></del>	<del></del>	<del>                                     </del>		
			-				
					<b>_</b>		
	d _		I		<del></del>	<del> </del>	
	e						_
	f						
	g Fe	ees and contracts from government agencies					
2	Memb	pership dues and assessments					
3		st on savings and temporary cash investments					-
4		ends and interest from securities			14	18,147	
5		ental income or (loss) from real estate				10,147	
,		• •					·
		ebt-financed property	<del> </del>		<del> </del>		
		ot debt-financed property	ļ .		ļ		·-
6	Net re	ental income or (loss) from personal property			ļ		
7	Other	investment income					
8	Gain o	or (loss) from sales of assets other than inventory			18	96,617	
9	Net in	come or (loss) from special events					
10		profit or (loss) from sales of inventory			1		
11		revenue a					·
• •			· •				
			<del>                                     </del>		<del>                                     </del>		·
	<u> </u>		<del></del>		<del>                                     </del>		
	d				<del> </del>	<del></del>	
	e						
	O L. A	4-1 A-1-1					
		tal Add columns (b), (d), and (e)		0		114,764	
13	Total.	Add line 12, columns (b), (d), and (e)		0		114,764 13	114,764
13	Total.			0			
13 (See	Total.	Add line 12, columns (b), (d), and (e) . heet in line 13 instructions to verify calculations	;)			13	
13 (See Pa	Total. works	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the A  Explain below how each activity for which income	ccomplishme	nt of Exempt	t Purposes	13	114,764
13 (See Pal Lin	Total. works	Add line 12, columns (b), (d), and (e) . heet in line 13 instructions to verify calculations	ccomplishme	nt of Exempt	t Purposes	13	114,764
13 (See Pal Lin	Total. works it XVI- e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the A  Explain below how each activity for which income	ccomplishme	nt of Exempt	t Purposes	13	114,764
13 (See Pal Lin	Total. works it XVI- e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the A  Explain below how each activity for which income	ccomplishme	nt of Exempt	t Purposes	13	114,764
13 (See Pal Lin	Total. works it XVI- e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the A  Explain below how each activity for which income	ccomplishme	nt of Exempt	t Purposes	13	114,764
13 (See Pal Lin	Total. works it XVI- e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the A  Explain below how each activity for which income	ccomplishme	nt of Exempt	t Purposes	13	114,764
13 (See Pal Lin	Total. works it XVI- e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the A  Explain below how each activity for which income	ccomplishme	nt of Exempt	t Purposes	13	114,764
13 (See Pal Lin	Total. works it XVI- e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the A  Explain below how each activity for which income	ccomplishme	nt of Exempt	t Purposes	13	114,764
13 (See Pal Lin	Total. works it XVI- e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the A  Explain below how each activity for which income	ccomplishme	nt of Exempt	t Purposes	13	114,764
13 (See Pal Lin	Total. works it XVI- e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the A  Explain below how each activity for which income	ccomplishme	nt of Exempt	t Purposes	13	114,764
13 (See Pal Lin	Total. works it XVI- e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the A  Explain below how each activity for which income	ccomplishme	nt of Exempt	t Purposes	13	114,764
13 (See Pal Lin	Total. works it XVI- e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the A  Explain below how each activity for which income	ccomplishme	nt of Exempt	t Purposes	13	114,764
13 (See Pal Lin	Total. works it XVI- e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the A  Explain below how each activity for which income	ccomplishme	nt of Exempt	t Purposes	13	114,764
13 (See Pal Lin	Total. works it XVI- e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the A  Explain below how each activity for which income	ccomplishme	nt of Exempt	t Purposes	13	114,764
13 (See Pal Lin	Total. works it XVI- e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the A  Explain below how each activity for which income	ccomplishme	nt of Exempt	t Purposes	13	114,764
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13 (See Pal Lin	Total. works it XVI- e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the A  Explain below how each activity for which income	ccomplishme	nt of Exempt	t Purposes	13	114,764
13 (See Pal Lin	Total. works it XVI- e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the A  Explain below how each activity for which income	ccomplishme	nt of Exempt	t Purposes	13	114,764
13 (See Pal Lin	Total. works it XVI- e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the A  Explain below how each activity for which income	ccomplishme	nt of Exempt	t Purposes	13	114,764
13 (See Pal Lin	Total. works it XVI- e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the A  Explain below how each activity for which income	ccomplishme	nt of Exempt	t Purposes	13	114,764
13 (See Pal Lin	Total. works it XVI- e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the A  Explain below how each activity for which income	ccomplishme	nt of Exempt	t Purposes	13	114,764
13 (See Pal Lin	Total. works it XVI- e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the A  Explain below how each activity for which income	ccomplishme	nt of Exempt	t Purposes	13	114,764
13 (See Pal Lin	Total. works it XVI- e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the A  Explain below how each activity for which income	ccomplishme	nt of Exempt	t Purposes	13	114,764
13 (See Pal Lin	Total. works it XVI- e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the A  Explain below how each activity for which income	ccomplishme	nt of Exempt	t Purposes	13	114,764
13 (See Pal Lin	Total. works it XVI- e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the A  Explain below how each activity for which income	ccomplishme	nt of Exempt	t Purposes	13	114,764

_	0-PF (2	019) The Erma	A Bantz Foundation	<u> </u>		. <u></u>	20-5771628	Page 1	3
Part	XVII	Information Exempt Org		fers to and Transa	ctions and	Relationships With Non	charitable		
1	ın se	_	•	gage in any of the follo (3) organizations) or in	-	y other organization described relating to political		Yes No	}
а	(1) C	ash	porting foundation to a	noncharitable exemp	t organization	of	1a(1)	X	
		ther assets					1a(2)	X	
b		r transactions					21.43		_
			a noncharitable exem		_		1b(1)	X	_
				le exempt organization	1		1b(2)	X	
		ental of facilities, eimbursement ar	equipment, or other a	155615 .		•	1b(3)	X	
		oans or loan gua	_				1b(4) 1b(5)	<del>  x</del>	-
		-		or fundraising solicita	tions		1b(5)	Î	
С			•	, other assets, or paid			1c	X	
d		•		•		b) should always show the fair n		I	-
-	value	of the goods, other	er assets, or services gi	ven by the reporting fou	ndation. If the	foundation received less than fa	ir market		
(a) Line		(b) Amount involved	· · · · · · · · · · · · · · · · · · ·	it, Show in column (a) in		goods, other assets, or services  Description of transfers, transactions,		namente	_
(a) Line	,,,,,	(b) Amount involved	(c) Name of Honer	ariable exempt organization		Description of dansers, dansactions,	and snamy and	igenients	-
	-				<del></del>				-
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		<del></del>	<u> </u>	<del> </del>					_
2a	desci	ribed in section 5	01(c) (other than sect	ed with, or related to, on 501(c)(3)) or in sec		ax-exempt organizations	☐ Yes	X No	
b	If "Ye		following schedule		<del></del>	<del></del>			_
		(a) Name of organ	ization	(b) Type of orga	nization	(c) Description of	of relationship		_
		· · · · · · · · · · · · · · · · · · ·				<del></del>			-
						<del></del>	<del></del>		-
		<del></del>			·	<del>                                     </del>		<del></del>	-
					<del></del>		<del></del> -		-
						, and to the best of my knowledge and belief,	it is true,	<del></del>	_
Sian	correc	t, and complete Declarati	on of preparer (other than taxpay	er) is based on all information of w	hich preparer has an	y knowledge	lay the IRS discuss	4b.c. est	-

President

Date

7/2/2020

Title

7/2/2020

Ste 2700 Wachnati

Date

Preparer's signature

Sign

Here

Paid

Preparer

**Use Only** 

Signature of officer or truste

Firm's name

Print/Type preparer's name

May the IRS discuss this return with the preparer shown below?
See instructions X Yes No

Check I if

self-employed

Firm's EIN > 31-128070

w,

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Than Inventory
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rom Sale of Ass
Sain/Loss f
6 (990-PF) - (
Part I, Line

The Erma A Bantz Foundation

								Totals	ලි	S	Cost or Other Basis, Expenses,	isis, Expenses,	Set	Net Gain
	Amount							•	Sales	ss	Depreciation and Adjustments	d Adjustments	orl	orLoss
Long Term CG Distributions	0						ပ	Capital Gains/Losses		271,457		174,839		96,618
Short Term CG Distributions	Ō							Other sales		0		0		0
				Check "X" if										1
	_	Check "X"		Purchaser					•		Expense of Sale	•		
		to include		is a	Acquisition	Date	Date	Gross Sales	Cost or	Valuation	and Cost of			Net Gain
Description	CUSIP#	In Part IV	Purchaser	Business		Acquired	Sold	Price	Other Basis	Method	Improvements	Depreciation	Adjustments	orLoss
1   See Attached Charles Schwab		×			Ь	Vanous	Vanous	106,500	71,005					35,495
2   See Attached Charles Schwab		×			Ь	Vanous	Vanous	164,957	103,834					61,123

Part I, Line 16c (990-PF) - Other Professional Fees

		6,045	0		0
	Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net	Disbursements for Charitable Purposes (Cash Basis Only)
1	The Greater Cincinnati Foundation	0			0
2	Bartlett & Co	6.045			0

Part I, Line 18 (990-PF) - Taxes

		0	0	0	0
		Revenue	· ·	·	Disbursements
		and Expenses	Net Investment	Adjusted	for Charitable
1	Description	per Books	Income	Net Income	Purposes
1	Real estate tax not included in line 20	0			
2	Tax on investment income	0			
3	Income tax	0			
4	Foreign Taxes Paid	0			

## Part II, Line 10b (990-PF) - Investments - Corporate Stock

509.053	462,937	509.053	462.937		See attached Charles Schwab statements
End of Year	Beg. of Year	End of Year	Beg. of Year	Face Value	Description
FMV	FMV	Book Value	Book Value	Num Shares/	
509,053	462,937	509,053	462,937		i

## The Erma A Bantz Foundation

## Part II, Line 10c (990-PF) - Investments - Corporate Bonds

			148,034	30,665	148,034	130,665
	Interest	Maturity	Book Value	Book Value	FMV	FMV
Description	Rate	Date	Beg. of Year	End of Year	Beg. of Year	End of Year
1 See attached Charles Schwab Statements			148,034	30,665	148,034	130,665

## Part II, Line 15 (990-PF) - Other Assets

	1,621	664	664
	Book Value	Book Value	PUS AW3
Asset Description	Beg of Year	End of Year	of Year
Accrued Income	1,621	999	999



Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

0			<del></del>	1
,	Expense Account		-	
0	Benefits			
28,803	Avg Hrs Title Per Week Compensation	25,981	0	2,822
	Avg Hrs Per Week	15 00	2 00	10 00
	Title	Dır/Pres/Trea	Director & Secretary	Director
	Foreign Country			
	State Zip Code	45202	45202	45202
	State	ОН 45202	동	동
	Cıty	Cincinnati	Cincinnati	Cincinnati
	Street	600 Vine Street, Suite 2700	600 Vine Street, Suite 2700	600 Vine Street, Suite 2700
	Check X			
	Name	C Gregory Schmidt	Mary Ann Gergen	Willam J. Liss
	ı	1	1	