EXTENDED TO NOVEMBER 16, 2020
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 www.irs.gov/Form990PF for instructions and the latest information.

	int of the Treasury evenue Service				social security numbers or rs.gov/Form990PF for inst				Open to Public Inspection
	ndar year 2019	or tax year be	ginning	١,		, and e	nding		
Name of foundation							A Employer identification number		
			IN FOUNI					27-0167751	
	and street (or PO b		il is not delivered to	street a	ddress)	,	Room/suite	B Telephone number 513-621-26	66
City or	town, state or pr	ovince, count	ry, and ZIP or for	eign p	ostal code	,		C If exemption application is pe	
	CINNATI  k all that apply:		45208 litial return		Initial return of a f	former public (	harity	D 1. Foreign organizations	chack hare
<b>u</b> 000	, was that apply:	=	nal return		Amended return	· ·	on an ey		<i>,</i> - —
	l. b		ddress change	) (O) -	Name change		<u> </u>	Foreign organizations mecheck here and attach cor	nputation
	k type of organiz ection 4947(a)(1			$\overline{}$	empt private foundation Other taxable private found	ation	J4	E If private foundation state under section 507(b)(1)	
	narket value of all		of year J Ac		ng method: X Cash	Accr	ual	F If the foundation is in a (	
(from ►\$	Part II, col. (c), I		859 - (Part I		her (specify) nn (d), must be on cash bas	sis.)	<u>-</u>	under section 507(b)(1)	(B), check here
Part	(The total of ame	evenue and E	xpenses (b), (c), and (d) may		(a) Revenue and expenses per books	(b) Net in	vestment ome	(c) Adjusted net	(d) Disbursements for charitable purposes (cash basis only)
1	Contributions,				1,200.			N/A	
2	Check X Interest on saving	s and temporar	not required to attach Sci	h B		MEGN.		<b>与学教育成本等的</b>	
/ 4	Dividends and		securities		126,071.	12	6,071.		STATEMENT 1
<b>l</b> 1 -	a Gross rents		,		Second Constitute by the	£28000000000000000000000000000000000000	· Sas Industries - Zn.	I PASTORER TO L. C. OF LANCE TORS.	
1	Net rental income				1,326,173.	· 清海湖下 1.5.			
e . 6	A Net gain or (loss) Gross sales price		ets not on line 10 . , 097 , 11:	۹.	1,320,173.				
e le	assets on line 6a Capital gain net in			<u>.                                    </u>	4.4	1.32	6,173.		
~ ~ ~ ~ ~ ~	Net short-term		, <b>-</b> ,			(2000)		C 1 St Designation Con 17 a discharge.	
9	Income modifi	cations					1100		
10:	Gross sales less i a and allowances	returns			開発が経過機能		<b>WEN</b>		
.   1	<b>b</b> Less Cost of goo	ods sold			BIGNI-WARRING W		CONTROL		
'	c Gross profit or	(loss)							
	Other income				-1,740.		<u>1,740.</u>		STATEMENT 2
12					1,451,704.	1,45	0,504.		40.000
13	•				40,000.		0.		40,000. 52,596.
14	Other employe Pension plans,		•		17,281.	<u> </u>	9,447.		7,834.
2 16	a Legal fees	, cimpioyee be	STMT	3	3,325.	<u> </u>	3,000.		325.
as a l	<b>b</b> Accounting fee	es	STMT	4	9,525.	Ī	8,100.		1,425.
Expense	c Other profession	onal fees	STMT	5	1,239.		0		1,239.
	Interest			_		ļ		RECEIVED	
18 E 13			STMT	6	9,306.	ļ	268.		7,466.
<u>s</u> 19	Depreciation a	nd depletion			22.	<del></del>	90 71	NOV 2 3 2020	S S
Administrative 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Occupancy Travel, confere	neas and ma	otinac		11,231.		4,60B.	11(17 20 2020	<u>ර</u> 6,628.
-	· ·	· ·	cunys		11,251.		<del>1</del> ,000.	OG! THE LIT	14 0,020.
E 23			STMT	7	31,164.	1	0,615.	<u> </u>	20,549.
	Total operatin								
Der	expenses. Add	d lines 13 thro	ough 23		175,689.	3	6,033.	,	138,062.
-   25	Contributions,				165,048.	10 10 10 10 10 10 10 10 10 10 10 10 10 1			165,048.
26	Total expense		ements.		240 525	_	C 022		202 440
-	Add lines 24 au		<u>.</u>		340,737.	3	<u>6,033.</u>	The state of the s	303,110.
	Subtract line 2				1,110,967.				
l l	a Excess of revenue b Net investmen				1,110,507.	1.41	4,471.		######################################
	c Adjusted net in				4	7		N/A	The state of the s
				Notice	, see instructions.		- Mary and State of S	•	Form <b>990-PF</b> (2019)

	L SCHOTTENSTEIN						7-016		Page 3
	and Losses for Tax on I				ATTACI		TATEM		
(a) List and describe 2-story brick wa	the kind(s) of property sold (for ex arehouse; or common stock, 200 st	ample, real esta ns. MLC Co.)	te,	(B) H P - D -	ow acquired Purchase Donation	(c) Date (mo., c	acquired lay, yr.)	( <b>d)</b> Da (mo., d	te sold lay, yr.)
1a				<u> </u>					
<u>b</u>				ļ					
<u> </u>				<u> </u>					
<u>d</u>				<u> </u>					
<u>e</u>	<u> </u>	1		┷┿					
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				Sain or (loss) s (f) minus (		
a		+							
b		ļ	<u> </u>	$\dashv$					
<u>c</u>				-					
e 11,097,119.		<del></del>	9,770,94	6				1 326	,173.
	I gain in column (h) and owned by			<del>  •    </del>		(I) Gaine (C	Col. (h) gain		,115.
Complete only for assets shown	(j) Adjusted basis	1	cess of col. (I)		C	òl. (k), but	not less thar	1 -0-) or	
(i) FMV as of 12/31/69	as of 12/31/69		col. (j), if any	$\perp$		Losses	(from col. (	h))	
<u>a</u>		<del></del>		-+					
0	<u> </u>	<del> </del>		$\dashv$					
<u>C</u>		<del>                                     </del>		$\overline{}$					
e				$\dashv$				1.326	,173.
-	C 14 also and	L. Oant Line	7	$\exists$				2,320	12.34
2 Capital gain net income or (net ca		ter in Part I, line -0- in Part I, line		∮	2			1,326	,173.
3 Net short-term capital gain or (los		and (6):		٦					
If gain, also enter in Part I, line 8, If (loss), enter -0- in Part I, line 8					2		N/A		
Part V   Qualification U	nder Section 4940(e) fo	r Reduced	Tax on Net	Inves	stment Inc	ome			
(For optional use by domestic private			· · · · · · · · · · · · · · · · · · ·						
(1 of optional use by definestic private	touridations subject to the section	1010(4) 44 011		00111017					
If section 4940(d)(2) applies, leave the	his part blank.								
Was the foundation liable for the sec	tion 4942 tax on the distributable a	mount of any ve	ar in the base per	iod?				Yes	X No
If "Yes," the foundation doesn't qualif									
	each column for each year; see the			ntries.					
(a) Base period years	(b)			(c)			Dietrih	(d) oution ratio	_
Calendar year (or tax year beginni	ng in) Adjusted qualifying d	istributions	Net value of no	nchari	table-use asset	s	(col. (b) div	rided by col	
2018	2	86,072.			901,97				41448
2017		97,061.			521,430				45551
2016		95,439.			265,56				47153
2015		03,334.			771,539				<u>44795</u>
2014	2	72,886.		6,	855,150	).		.0	<u> 39807</u>
								_	
2 Total of line 1, column (d)						2		.2	<u> 18754</u>
3 Average distribution ratio for the		I on line 2 by 5.0	), or by the numbe	er of ye	ears			_	
the foundation has been in existe	nce if less than 5 years					3		.0	<u>43751</u>
								C 470	417
4 Enter the net value of noncharitat	ole-use assets for 2019 from Part X	(, line 5				4	<del> </del>	6,4/9	<u>,417.</u>
						_		202	401
5 Multiply line 4 by line 3						5		283	<u>,481.</u>
	/40/ (D. )     07/)					ا		1 /	1 / 5
6 Enter 1% of net investment incon	ne (1% of Part I, line 27b)					6		14	<u>,145.</u>
7 Add has Fond C						,		297	,626.
7 Add lines 5 and 6						7	<del>                                     </del>	431	,020.
Enter qualificant distributions for-	m Dart VII. line 4					8		303	,110.
8 Enter qualifying distributions from	•		John Hart 1		<b></b>	[_6_		303	,
If line 8 is equal to or greater that See the Part VI instructions.	n line 7, check the box in Part VI, lii	ne 10, and comp	nete that part usin	ig a 1%	iax raie.				
923521 12-17-19							F	orm <b>990</b> -	PF (2019)
320021 12-11-13								J	(=0.0

, ,

N/A

If (loss), enter "-0-" in Part I, line 8

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Part VIII Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	istructions)
1a Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1.  Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► X and enter 1%	14,145.
of Part I, line 27b	
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)	
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	0.
3 Add lines 1 and 2	14,145.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	14,145.
6 Credits/Payments:	
a 2019 estimated tax payments and 2018 overpayment credited to 2019  6a 1,863.	A transfer to
b Exempt foreign organizations - tax withheld at source  6b  0 •	
c Tax paid with application for extension of time to file (Form 8868)  6c  0.	
d Backup withholding erroneously withheld  6d 0.	1 062
7 Total credits and payments. Add lines 6a through 6d	1,863.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8	12 205
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	12,295.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	
11 Enter the amount of line 10 to be: Credited to 2020 estimated tax ► Refunded ► 11 Refunded ► 11	
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	Yes No
any political campaign?	1a X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	10 21
distributed by the foundation in connection with the activities.	
c Did the foundation file Form 1120-POL for this year?	1c X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	
(1) On the foundation. ► \$ 0 • (2) On foundation managers. ► \$ 0 •	
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	
managers. ► \$ 0.	
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?	2 X
If "Yes," attach a detailed description of the activities.	* 1867 788
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or	
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3 X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a X
b If "Yes," has it filed a tax return on Form 990-T for this year?  N/A	4b
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	
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	
By language in the governing instrument, or	
<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law</li> </ul>	
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
· · · · · · · · · · · · · · · · · · ·	
8a Enter the states to which the foundation reports or with which it is registered. See instructions.	
OH (the control of the first of	
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	
of each state as required by General Instruction G2 If "No," attach explanation  SEE STATEMENT 12	8b X
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar	ر الاستنفاد المستنفل عسستنفل
year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV	9 X
	<u>  10                                   </u>
10	(2013)

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3b

4a

N/A

during the year?

b If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Schedule C, to determine if the foundation had excess business holdings in 2019.)

had not been removed from jeopardy before the first day of the tax year beginning in 2019?

Part VII-B	orm 4720 May Be Re	equired <sub>(contin</sub>	ued)	
5a During the year, did the foundation pay or incur any amount to:			j. v	Yes No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Y	es 🗓 No 🖟	
(2) Influence the outcome of any specific public election (see section 4955); or	to carry on, directly or indire	ectly,		
any voter registration drive?		Y	es 🗶 No 🥬	
(3) Provide a grant to an individual for travel, study, or other similar purposes?	i	Y	es X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	described in section		Ţ	
4945(d)(4)(A)? See instructions			es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fo	or	1	
the prevention of cruelty to children or animals?		Y	es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	er the exceptions described i	n Regulations	[]- c2	
section 53.4945 or in a current notice regarding disaster assistance? See instru	ctions		N/A	5b
Organizations relying on a current notice regarding disaster assistance, check hi	ere			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from	om the tax because it maintai	ned		
expenditure responsibility for the grant?	N	[/A 🔲 y	es 🔲 No 🖟	
If "Yes," attach the statement required by Regulations section 53.4945-5(d).				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	ay premiums on		i i	
a personal benefit contract?		Y	es 🗶 No 🕺	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a pe	ersonal benefit contract?			6b X
If "Yes" to 6b, file Form 8870.			र १:	4 Jal 49 1
7a At any time during the tax year, was the foundation a party to a prohibited tax sf	nelter transaction?	Y	es 🗓 No 🖔	
b If "Yes," did the foundation receive any proceeds or have any net income attribut	able to the transaction?		/-	7b
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$				<u> </u>
excess parachute payment(s) during the year?			es 🗶 No 🗒	
Part VIII Information About Officers, Directors, Truste	es, Foundation Mar	nagers, Highly		
Paid Employees, and Contractors				
1 List all officers, directors, trustees, and foundation managers and th	<del></del>	1		
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Wallie and address	to position	enter -0-)	and deterred compensation	allowances
			i	
SEE STATEMENT 13		40,000.	10,332.	0.
	,			
				-
		<u> </u>	<u> </u>	
2 Compensation of five highest-paid employees (other than those incl		enter "NONE."	[ <del>/                                     </del>	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
	devoted to position		compensation	allowances
	CHIEF ADMINIS			
LANE, CINCINNATI, OH 45208	40.00	52,596.	6,949.	0.
				_
			ļ.,	
				<u> </u>
-				
Total number of other employees paid over \$50,000			<b></b>	0
	· · · · · · · · · · · · · · · · · · ·		Form	990-PF (2019)

Paid Employees, and Contractors (continued) 3 Five highest-paid independent contractors for professional services. If none, enter "NONE."  (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE	Form 990-PF (2019) SAUL SCHOTTENSTEIN FOUNDATION B Part VIII Information About Officers, Directors, Trustees, Foundation		167751 Page 7
(e) Compensation  NONE  (c) Compensation  NONE  (c) Compensation  NONE  (c) Compensation  NONE  (c) Compensation  (c) Compensation  NONE  (c) Compensation  (d) Type of service  (e) Compensation  NONE  (e) Compensation  (f) Type of service  (f) Compensation  (f) Compensation  (f) Type of service  (f) Compensation  (f) Type of service  (f) Compensation  (f)	Paid Employees, and Contractors (continued)		
NONE    Total number of others receiving over \$50,000 for professional services   Dotal number of others receiving over \$50,000 for professional services   Dotal number of others receiving over \$50,000 for professional services   Dotal number of other services   Dotal number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.   Expenses	3 Five highest-paid independent contractors for professional services. If none, enter "N	IONE."	
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 charitable activities during the tax year. Include relevant statistical information such as the number of originations and other beneficiaries served, conferences convened, research papers produced, etc.    N/A		(b) Type of service	(c) Compensation
Part IX-A   Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.  N/A  Part IX-B   Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  Amount  N/A  All other program-related investments. See instructions.	NONE		
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number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.    N/A			
Part IX-B   Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  Amount  N/A  Amount  And other program-related investments. See instructions.	List the foundation's four largest direct charitable activities during the tax year. Include relevant statistics	al information such as the	Expenses
Part IX-B   Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  Amount  N/A  All other program-related investments. See instructions.  Total. Add lines 1 through 3		:d, etc.	
Part IX-B   Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount  IN/A  All other program-related investments. See instructions.  All other program-related investments. See instructions.	1N/A		
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Part IX-B   Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  Amount  N/A  All other program-related investments. See instructions.  All other program-related investments. See instructions.			·-·
Part IX-B   Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  Amount  N/A  All other program-related investments. See instructions.  3  Fotal. Add lines 1 through 3	3 <u></u>	· · · · · · · · · · · · · · · · · · ·	
Part IX-B   Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  Amount  N/A  All other program-related investments. See instructions.  3  Fotal. Add lines 1 through 3			
Part IX-B   Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  Amount  N/A  All other program-related investments. See instructions.  3  Fotal. Add lines 1 through 3			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  Amount  N/A  All other program-related investments. See instructions.  Total, Add lines 1 through 3	4		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  Amount  N/A  All other program-related investments. See instructions.  Total, Add lines 1 through 3			
All other program-related investments. See instructions.   Stotal, Add lines 1 through 3	Part IX-B Summary of Program-Related Investments	,	
All other program-related investments. See instructions.  Total. Add lines 1 through 3	Describe the two largest program-related investments made by the foundation during the tax year on line	as 1 and 2.	Amount
All other program-related investments. See instructions.  3  Fotal. Add lines 1 through 3	1 <u>N/A</u>		
All other program-related investments. See instructions.  3  Fotal. Add lines 1 through 3			
All other program-related investments. See instructions.  3  Fotal. Add lines 1 through 3			<del></del>
Total. Add lines 1 through 3	2		
Total. Add lines 1 through 3			
Total. Add lines 1 through 3	All other program-related investments. See instructions.		·
	3		
	<del></del>		
	Total Add lines 1 through 3		0
	Total, 7,00 miles 1 unlough o		

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P	art X Minimum Investment Return (All domestic foundations	must complete this	s part Foreign four	ndations, se	ee instructions )
1	Fair market value of assets not used (or held for use) directly in carrying out charital			T T	
·a	Average monthly fair market value of securities	210, 0101, pa. pacca.		1a	5,550,354.
b	Average of monthly cash balances			1b	5,550,354. 1,027,734.
_	Fair market value of all other assets			10	
	Total (add lines 1a, b, and c)			1d	6,578,088.
	Reduction claimed for blockage or other factors reported on lines 1a and				
	1c (attach detailed explanation)	1e	0.		
2	Acquisition indebtedness applicable to line 1 assets			2	0.
3	Subtract line 2 from line 1d			3	6,578,088.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount	nt. see instructions)		4	98,671.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and	•		5	6,479,417.
6	Minimum investment return. Enter 5% of line 5	, ,		6	323,971.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3)	and (1)(5) private ope	rating foundations an	d certain	· ·
	foreign organizations, check here  and do not complete this par		J		
1	Minimum investment return from Part X, line 6	,		1	323,971.
2a	Tax on investment income for 2019 from Part VI, line 5	2a	14,145.		
b	Income tax for 2019. (This does not include the tax from Part VI.)	2b		] ]	
c	Add lines 2a and 2b			2c	14,145.
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	14,145. 309,826.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	309,826.
6	Deduction from distributable amount (see instructions)			6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Pai	rt XIII, line 1		7	309,826.
P	art XII Qualifying Distributions (see instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., pu	rposes:			
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26			1a	303,110.
b	Program-related investments - total from Part IX-B			1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charita	able, etc., purposes		2	
3	Amounts set aside for specific charitable projects that satisfy the:			·	
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	303,110.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net inv	estment			
	income. Enter 1% of Part I, line 27b			5	14,145. 288,965.
6	Adjusted qualifying distributions. Subtract line 5 from line 4			6	288,965.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years 4940(e) reduction of tax in those years.	when calculating whe	ther the foundation o	ualifies for t	he section

Form **990-PF** (2019)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	( <b>c)</b> 2018	( <b>d)</b> 2019
1 Distributable amount for 2019 from Part XI,				300 826
line 7				309,826.
2 Undistributed income, if any, as of the end of 2019 a Enter amount for 2018 only			310,358.	
<b>b</b> Total for prior years:			310,330.	
g rotal for prior years.		0.		
3 Excess distributions carryover, if any, to 2019:		0.		
a From 2014		:		
b From 2015				
c From 2016				
d From 2017				
e From 2018				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2019 from	<del></del>			
Part XII, line 4: ► \$ 303, 110.				
a Applied to 2018, but not more than line 2a			303,110.	
b Applied to undistributed income of prior			303,110.	<u>,</u>
		0.		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2019 distributable amount				0.
	0.			
e Remaining amount distributed out of corpus     Excess distributions carryover applied to 2019     (If an amount appears in column (d), the same amount				
must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
<b>b</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	<u> </u>	0.		
amount - see instructions		0.		
e Undistributed income for 2018. Subtract line		<u> </u>		
4a from line 2a. Taxable amount - see instr.			7,248.	
f Undistributed income for 2019. Subtract			7,2101	
lines 4d and 5 from line 1. This amount must				
be distributed in 2020	;			309,826.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				j
section 170(b)(1)(F) or 4942(g)(3) (Election				j
may be required - see instructions)	0.			1
8 Excess distributions carryover from 2014			13 T. P. T.	· · ·
not applied on line 5 or line 7	0.			1
9 Excess distributions carryover to 2020.				·
Subtract lines 7 and 8 from line 6a	0.			(
0 Analysis of line 9:	······································			
a Excess from 2015				,
b Excess from 2016				ı
c Excess from 2017			İ	1
d Excess from 2018				'
e Excess from 2019				
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<del></del>			5 000 PE (0040)

Form **990-PF** (2019)

rm 990-PF (2019) SAUL SC	HOTTENSTEIN	FOUNDATION	В		. <b>67751/</b> Pa
Part XIV Private Operating Fo	oundations (see in	structions and Part VII	A, question 9)	N/A	
a If the foundation has received a ruling o	r determination letter tha	it it is a private operating			
foundation, and the ruling is effective fo	r 2019, enter the date of	the ruling	<b>▶</b>		<u> </u>
<b>b</b> Check box to indicate whether the found	ation is a private operati	ng foundation described i	n section	4942(j)(3) or4	942(j)(5)
a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	( <b>d</b> )/2016	(e) Total
investment return from Part X for					
each year listed					
<b>b</b> 85% of line 2a		ļ			<u> </u>
c Qualifying distributions from Part XII,					
line 4, for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.		,	P		
Subtract line 2d from line 2c Complete 3a, b, or c for the			<u> </u>		
alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets			-	· · · · · · · · · · · · · · · · · · ·	·
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)  b "Endowment" alternative test - enter		<del>                                     </del>			
2/3 of minimum investment return					
shown in Part X, line 6, for each year listed					
c "Support" alternative test - enter:		# <del></del>			
(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	L				
art XV Supplementary Info			the foundation	had \$5,000 or mo	re in assets
at any time during the	ne year-see instr	ructions.)			
Information Regarding Foundatio	n Managers:				
a List any managers of the foundation who			ibutions received by the	e foundation before the clos	se of any tax
year (but only if they have contributed in	iore than \$5,000). (See s	section 507(d)(2).)			
ONE					
b List any managers of the foundation who			or an equally large port	ion of the ownership of a pa	artnership or
other entity) of which the foundation has	s a 10% or greater intere	SL			
FFREY HARRIS					
Information Regarding Contributi		• • • • •	•		
Check here X if the foundation of					ests for funds. If
the foundation makes gifts, grants, etc.,					<del></del>
a The name, address, and telephone number	er or email address of the	he person to whom applica	ations should be addres	ssed:	
<b>b</b> The form in which applications should b	e submitted and informa	ition and materials they sh	ould include:	···	
c Any submission deadlines;			· <del>-</del>	· · <u></u>	
d Any restrictions or limitations on awards	<del></del>				
		al arnan pharitable tella-	undo of inchitistican		

Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Purpose of grant or contribution Foundation show any relationship to status of Amount any foundation manager or substantial contributor Name and address (home or business) recipient Paid during the year ACTIVITIES BEYOND THE CLASSROOM NONE 501(C)(3) TO SUPPORT CONTINUING 635 W 7TH ST **OPERATIONS** CINCINNATI, OH 45203 250. ADVOCATES NONE 501(C)(3) TO SUPPORT CONTINUING 1881 WORCESTER ROAD OPERATIONS FRAMINGHAM, MA 01701 500. ARTWORKS NONE 501(C)(3) TO SUPPORT CONTINUING 20 E CENTRAL PKWY OPERATIONS CINCINNATI, OH 45202 2,500. ASPERGER/AUTISM NETWORK NONE 501(C)(3) TO SUPPORT CONTINUING 51 WATERSTREET, SUITE 206 OPERATIONS WATERTOWN, MA 02472 500. BURTON BLATT INSTITUTE AT SYRACUSE NONE 501(C)(3) TO SUPPORT CONTINUING UNIVERSITY OPERATIONS 900 S. CROUSE AVENUE CROUSE-HINDS HALL, SUITE 300 SYRACUSE, NY 13244 51,000. **▶** 3a SEE CONTINUATION SHEET(S) 165,048. Total b Approved for future payment NONE Total **▶** 3b Form 990-PF (2019)

**Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount contribution any foundation manager status of Name and address (home or business) or substantial contributor recipient NONE 501(C)(3) TO SUPPORT CONTINUING EPISCOPAL DIOCESE OF SOUTHERN OHIO 412 SYCAMORE ST **OPERATIONS** 450. CINCINNATI, OH 45202 501(C)(3) TO SUPPORT CONTINUING IMPACT 100 NONE 4010 EXECUTIVE PARK DR. STE 100 OPERATIONS 1,000. CINCINNATI, OH 45241 501(C)(3) TO SUPPORT CONTINUING JCC OF MANHATTAN REEL ABILITIES NYC NONE 3603 VICTORY PARKWAY OPERATIONS 10,000. CINCINNATI, OH 45229 JEWISH FEDERATION 501(C)(3) TO SUPPORT CONTINUING NONE OPERATIONS 525 VERSAILLES DR DAYTON, OH 45459 10,000. KELBERMAN CENTER NONE 501(C)(3) TO SUPPORT CONTINUING 125 BUSINESS PARK DR OPERATIONS UTICA, NY 13502-6305 350. 501(C)(3) TO SUPPORT CONTINUING KEN ANDERSON ALLIANCE NONE 11260 CHESTER RD, SUITE 280 PERATTONS CINCINNATI, OH 45246 3,000. NONE 501(C)(3) TO SUPPORT CONTINUING LASOUPE OPERATIONS 915 E MCMILLAN ST CINCINNATI, OH 45206 50. LIVING ARRANGEMENTS FOR THE NONE 501(C)(3) TO SUPPORT CONTINUING DEVELOPMENTALLY DISABLED OPERATIONS 3603 VICTORY PARKWAY CINCINNATI, OH 45229 78,300. LOUIS FOUNDATION NONE 501(C)(3) TO SUPPORT CONTINUING OPERATIONS 10866 WILSHIRE BLVD ST 1550 LOS ANGELES, CA 90024-4306 100. MAYERSON ACADEMY NONE 501(C)(3) TO SUPPORT CONTINUING OPERATIONS 700 W PETE ROSE WAY CINCINNATI, OH 45203-1892 50. 110,298. Total from continuation sheets

*:* 

Part XV Supplementary Informati	on			
3 Grants and Contributions Paid During the		т		
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
realite and address (notice of business)	or substantial contributor	recipient		
NETWORK FOR GOOD	NONE	501(C)(3)	TO SUPPORT CONTINUING	
1140 CONNECTICUT AVE NW SUITE 700			OPERATIONS	
WASHINGTON, DC 20036				150
OHIO INNOCENCE PROJECT	NONE	501(C)(3)	TO SUPPORT CONTINUING	
2540 CLIFTON AVE			OPERATIONS	1 000
CINCINNATI, OH 45221			<del>                                     </del>	1,000
PARKINSONS GLOBAL		501(C)(3)	TO SUPPORT CONTINUING	
1359 BROADWAY ST 1509		1	OPERATIONS	115
NEW YORK, NY 10018		-		115
		501/61/21		
PLANNED PARENTHOOD 224 N WILKINSON STREET	NONE	501(C)(3)	TO SUPPORT CONTINUING OPERATIONS	
DAYTON, OH 45402			DI ENGLIONS	833
		-		
STARFIRE	NONE	501(C)(3)	TO SUPPORT CONTINUING	
5030 OAKLAWN DRIVE	NONZ	501(0,(3,	OPERATIONS	
CINCINNATI, OH 45227				250
PEXAS GULF COAST CYSTIC FIBROSIS	NONE	501(C)(3)	TO SUPPORT CONTINUING	
COUNDATION	NONE	B01(C)(3)	OPERATIONS	
50 BRIAR HOLLOW LN, SUITE 300W				
HOUSTON, TX 77027			,	100
IMCM SUNCOAST	NONE	501(C)(3)	TO SUPPORT CONTINUING	
.2945 SEMINOLE BLVD BLD 2			OPERATIONS	
ARGO, FL 33778				50
INIVERSITY OF CINCINNATI	NONE	501(C)(3)	TO SUPPORT CONTINUING	
PO BOX 19970			OPERATIONS	252
CINCINNATI, OH 45219			+	250
		E01/61/01		
WASSON WAY	NONE	501(C)(3)	TO SUPPORT CONTINUING	
2692 MADISON RD CINCINNATI, OH 45208			OPERATIONS	3,750
		· · · · · · · · · · · · · · · · · · ·		3,730
YOMING HIGH SCHOOL FOUNDATION	NONE	₽C	TO SUPPORT CONTINUING	
3512 AULTWOODS LANE	NONE		OPERATIONS	
CINCINNATI, OH 45208				500
Total from continuation sheets		<u> </u>	<u></u>	

er gross amounts unless otherwise indicated.  Program service revenue:  a	Business code	(b) Amount	(C) Exclu- sion code	d by section 512, 513, or 514  (d)  Amount	(e) Related or exempt function income
a b		Amount	sion code		function income
a b					
b					
c			1 1		
-					
d					
e					
f					
Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash		<del></del>			
investments					
Dividends and interest from securities			14	126,071.	
Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal					
property			1 1		
Other investment income	900099	-1,740.			
Gain or (loss) from sales of assets other			1 1		
than inventory			18	1,326,173.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue.					
a					
b					
c					
d					
e					
Subtotal. Add columns (b), (d), and (e)		-1,740.		1,452,244.	
Total. Add line 12, columns (b), (d), and (e)				13	
e worksheet in line 13 instructions to verify calculations.	)			_	
art XVI-B Relationship of Activities		lishment of Eve	amnt D	urnoces	
Melationship of Activities	to the Accomp	namine of Lxe	sinpt r	urposes	
ne No. Explain below how each activity for which in	ncome is reported in col	umn (e) of Part XVI-A	contribut	ed importantly to the accomp	lishment of
▼ the foundation's exempt purposes (other than the foundation)	an by providing funds fo	or such purposes).			
				· · · · · · · · · · · · · · · · · · ·	
				,	
I .					
			· · · · · · · · · · · · · · · · · · ·		
		-			

923621 12-17-19

Form 990-PF (2019)

P00039882

Firm's EIN -31-0800053

Phone no. 937-226-0070

Preparer

**Use Only** 

Firm's name CLARK, SCHAEFER, HACKETT & CO.

Firm's address: 10100 INNOVATION DRIVE DAYTON, OH 45342

10/27/20

FORM 990-PF	DIVIDENDS	AND INT	EREST	FROM SECU	RITIES	STATEMENT 1
SOURCE	GROSS AMOUNT D		AL S NDS	(A) REVENUE PER BOOKS		
JPMORGAN (8002) JPMORGAN (8710) JPMORGAN (8728) JPMORGAN (9005) K-1 SUSAN C. AND	108,937. 6,598. 1,270. 9,251.		0. 0. 0.	108,937 6,598 1,270 9,251	<ul><li>6,598</li><li>1,270</li></ul>	•
JEFFREY P. HARRIS FAMILY II, LLC	15.		0.	15	. 15	•
TO PART I, LINE 4	126,071.		0.	126,071	. 126,071	•
FORM 990-PF		OTHER	INCO	ME	(	STATEMENT 2
DESCRIPTION					(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
ORDINARY BUSINESS II SUSAN C. & JEFFREY I				-1,740.	-1,740.	
TOTAL TO FORM 990-P	F, PART I, I	LINE 11		-1,740.	-1,740.	
				· <u> </u>		
FORM 990-PF		LEG	AL FE	ES	•	STATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOK		(B) T INVEST- NT INCOME		(D) CHARITABLE PURPOSES
LEGAL FEES		3,32	5.	3,000.		325.
TO FM 990-PF, PG 1,	LN 16A	3,32	5. ====	3,000.		325.

FORM 990-PF	ACCOUNTI	NG FEES	S	TATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
ACCOUNTING FEES	9,525.	8,100.		1,425.
TO FORM 990-PF, PG 1, LN 16B	9,525.	8,100.		1,425.
FORM 990-PF (	OTHER PROFES	SIONAL FEES	S	TATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PAYROLL PROCESSING FEES	1,239.	0.		1,239.
TO FORM 990-PF, PG 1, LN 16C	1,239.	0.		1,239.
FORM 990-PF	TAX	ES	S	TATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAXES PAID OHIO ATTORNEY GENERAL FILING FEE (SAUL SCHOTTENSTEIN FOUNDATION	268.	268.		0.
B)	200.	0.		200.
OHIO BUSINESS FILING	99.	0.		0.
PAYROLL TAXES TAX IRS PAYMENT	7,266. 1,473.	0. 0.		7,266. 0.
TO FORM 990-PF, PG 1, LN 18	9,306.	268.		7,466.
<del>-</del>				

FORM 990-PF	OTHER E	XPENSES	STATEMENT 7			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
ADVERTISING	5,231.	697.		4,534.		
BANK FEES	566.	283.		283.		
CHARITABLE CONT. FROM K-1						
SUSAN C. & JEFFREY P. HARRIS						
FAMILY II, LLC	9.	0.		9.		
DUES & SUBSCRIPTIONS	505.	505.		0.		
INVESTMENT FEES	5,840.	5,840.		0.		
OFFICE EXPENSES	4,504.	1,667.		2,837.		
PARKING	449.	449.		0.		
TELEPHONE	942.	637.		305.		
WEB HOSTING	2,996.	537.		2,459.		
INSURANCE	7,829.	0.		7,829.		
INTERNET EXPENSE	1,402.	0.		1,402.		
BLOG FEES	373.	0.		373.		
OTHER GENERAL & ADMIN	518.	0.		518.		
TO FORM 990-PF, PG 1, LN 23	31,164.	10,615.		20,549.		

FORM 990-PF	OTHER	DECREASES	IN NET	ASSETS	OR	FUND	BALANCES	STATEMENT 8
DESCRIPTION								AMOUNT
PRIOR PERIOD ADJUSTMENT							2,914.	
NONDEDUCTIBLE EXP. FROM K-1 SUSAN C. AND JEFFREY P. HARRIS FAMILY II, LLC  TOTAL TO FORM 990-PF, PART III, LINE 5						2,957.		
								FORM 990-PF CORPORATE STOCK
DESCRIPTION						В	OOK VALUE	FAIR MARKET VALUE
CORPORATE STOCK				175,603.	179,747.			
TOTAL TO FORM 990-PF, PART II, LINE 10B				175,603.	179,747.			
							<del></del>	

FORM 990-PF CORI	PORATE BONDS	<u> </u>	STATEMENT 10	
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE	
CORPORATE BONDS	4,455,077.	4,462,974.		
TOTAL TO FORM 990-PF, PART II, LINE	4,455,077.	4,462,974.		
FORM 990-PF OTHER	R INVESTMENTS		STATEMENT 11	
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE	
SUSAN C. & JEFFREY P HARRIS FAMILY	COST			
II, LLC ACCRUALS	COST	187,630. 7,141.	187,630. 7,141.	
TOTAL TO FORM 990-PF, PART II, LINE	194,771.	194,771.		

FORM 990-PF	EXPLANATION	CONCERNING	PART VII-A,	LINE 8B	STATEMENT 12

## EXPLANATION

THE OHIO ATTORNEY GENERAL DOES NOT ACCEPT COPIES OF THE FORM 990-PF. INSTEAD, THE ORGANIZATION HAS COMPLIED WITH THE REQUIREMENTS OF THE OHIO ATTORNEY GENERAL TO COMPLETE A SEPARATE ONLINE FILING WITH THAT OFFICE.

FORM 990-PF PART VIII - LIST TRUSTEES AND	OF OFFICERS, DI		STAT	EMENT 13
NAME AND ADDRESS	TITLE AND AVRG HRS/WK			EXPENSE
JEFFREY HARRIS 3512 AULTWOODS LANE CINCINNATI, OH 45208	CHAIRMAN (SSFB)		0.	0.
SUSAN HARRIS 3512 AULTWOODS LANE CINCINNATI, OH 45208	PRESIDENT (SSFE	3)/DIR. (JA; 0.		0.
JENNA HARRIS 3512 AULTWOODS LANE CINCINNATI, OH 45208	ARTS FOR SOCIAL	CHANGE GIV		0.
JASON HARRIS 3512 AULTWOODS LANE CINCINNATI, OH 45208	DISABILITIES AI 40.00	OVOCATE SPEA 40,000.		0.
DIANA MAIROSE 3512 AULTWOODS LANE CINCINNATI, OH 45208	DIRECTOR (JASON	'S CONNECT: 0.	0.	0.
JOSEPH RITCHEY 3512 AULTWOODS LANE CINCINNATI, OH 45208	DIRECTOR (JASON	I'S CONNECT: 0.		0.
NANCY GOLLOBIN 3512 AULTWOODS LANE CINCINNATI, OH 45208	DIRECTOR (JASON	I'S CONNECT: 0.		0.
SANDY KOHN 3512 AULTWOODS LANE CINCINNATI, OH 45208	DIRECTOR (JASON	'S CONNECT:		0.
ERIC CHAPMAN 3512 AULTWOODS LANE CINCINNATI, OH 45208	DIRECTOR (JASON	N'S CONNECT: 0.	0.	0.
DONNA ZARING 3512 AULTWOODS LANE CINCINNATI, OH 45208	DIRECTOR (JASON	V'S CONNECT:	0.	0.

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TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII 40,000. 10,332.

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