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

OMB No. 1545-0052

2019

Department of the Treasury

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

, Int	ernal Re	evenue Service	► Go to www.irs.	gov/Form990PF for in:	structions and the lates	t information.	Open to Public Inspection
Fo	r cale	ndar year 2019 o	r tax year beginning		, 2019, and er	nding	, 20
	lame o	f foundation				A Employer identif	fication number
R	ICH	ARD REX P	ONN TRUST FU	ND		31-6314668	
			. box number if mail is not deli		Room/suite	<del>-</del>	er (see instructions)
		E US HWY		,		(937) 653-7	•
			rince, country, and ZIP or	foreign postal code	<del></del>	C If exemption applicat	<del></del>
	-	NA OH 430	• • •	loreign postal code		check here	, ▶ [
. —		k all that apply:	Initial return	Initial return	of a former nublic obserts	D 1. Foreign organiz	zations shock here
i G	CHEC	k ali triat appiy.	H	H	of a former public charity	D I. Foreign organia	zations, check here.
1			Final return	Amended re		, ,	ions meeting the 85%
· <del></del>	Ob I		Address change		·	E If private foundati	and attach computation.
. "		k type of organiza	_	(c)(3) exempt private fo	/NI	terminated under	section
וַ אַ			exempt charitable trust	Other taxable priva	tte louridation	507(b)(1)(A), che	ck here · •
`		arket value of all a			Cash	F if the foundation i	io in a 60 month
		rom Part II, col. (c		Other (specify)		termination under	
= -	<u> </u>		377,342 (Pa	rt I, column (d) must be	on cash basis.)	507(b)(1)(B), che	ck here
نا جُ	art I		enue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
5		(c), and (d) may r	unts in columns (b), not necessarily equal the	expenses per	income	income	for charitable purposes
) _		amounts in colum	in (a) (see instructions).)	books	IIICOTTIC	meeric	(cash basis only)
	1	(attach schedule)	, grants, etc., received				•
	2	Check ▶ X If the	foundation is not required ach Sch. B				
	3		and temp. cash investments	23	3 23		
	4	Dividends and in	nterest from securities	8,533	8,533		1
	5a	Gross rents					
	b	Net rental income or (loss)			· · · · · · · · · · · · · · · · · ·		†
a	6a	· · · —	sale of assets not on line 10	5,198	3		
2	b	Gross sales price fo					+
Revenue	7	all assets on line 6a	ome (from Part IV, line 2)		5,198		
Œ	8	Net short-term of					ol
	9	Income modifica	, -				0
	1 -	Gross sales less	l o				<del>-</del>
	l b	returns & allowance Less Cost of	95	······································			+
	١,	goods sold Gross profit or (I	oss) (attach schedule)		•		+
	111	Other income (a		39,967	39,967	,	0
	12	Total. Add lines	• " =	53,721	<u> </u>		<del>-</del>
_	13	Compensation of of		210	<del>\</del>		N/FD 210
	14	directors, trustees,		210	<u>′</u>	RECE!	YED   21
			salaries and wages			-	
es	15		mployee benefits			S JUL 1 S	3 2020   <u>Ö</u>
Sus	104	Legal fees (attac	· ·	3,050	1,017	1	2,033
Š			(attach schedule) #2	1,728	· · · · · · · · · · · · · · · · · · ·		
Operating and Administrative Expenses	c	•	nal fees (attach sche∰l®)	1,720	3/0	OGDEN	Y. U. 1,132
aţ.	17	Interest		439	439		Ţ ···
str	18		edule) (see instructions# 4	435	439		
를	19		ach sch.) and depletion				
퉏	20	Occupancy.					
9	21		ces, and meetings				
ā	22	Printing and pub					
ij.	23	•	(attach schedule)				
era	24		and administrative			_	
ŏ	1		lines 13 through 23	5,427		(	3,395
_	25 26	Contributions, gr		14,050	1		14,050
	20	Total exp. & dis Add lines 24 and 25		19,477	2,032	(	17,445
	27	Subtract line 26	from line 12 <sup>.</sup>				
	"	and disburseme	nue over expenses ents	34,244	<b>—</b>		
			income (if neg., enter -0-)	1	51,689		
	С	Adjusted net in	come (if neg., enter -0-)				

For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2019)

_6	IT II	description column should be for	Beginning of year	End	ot year
		end-of-year amounts only. (See inst.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash non-interest-bearing			
	2	Savings and temporary cash investments	9,869	19,95	19,951
	3	Accounts receivable ▶	·		
		Less allowance for doubtful accts. ▶			
	4	Pledges receivable ▶			·
		Less allowance for doubtful accts. ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	7	disqualified persons (attach schedule) (see instructions) Other notes and loans			
	′	receivable (attach schedule)		<u> </u>	
		Less allowance for doubtful accounts			
ş	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
⋖	10a	Investments U.S. and state govt. obligations (attach schedule)			
	b	Investments corporate stock (attach schedule) . #5	145,990	146,15	146,154
		Investments corporate bonds (attach schedule)			
	11	Investments land, buildings, and equipment basis · · · · · · •			
		Less accumulated depreciation (attach schedule)			
	12	Investments mortgage toans			19,951
	13	Investments other (attach schedule)#.6 .	167,288	191,28	6 191,286
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule)		,	
	15	Other assets (describe ▶ )		,	
	16	Total assets (to be completed by all filers see the			
		instructions. Also, see page 1, item l)	323,147	357,39	1 377,342
	17	Accounts payable and accrued expenses			
	18	Grants payable			
Ë	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Lia	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)	0	(	)
		Foundations that follow FASB ASC 958, check here ⋅ ▶ 🏻			,
S		and complete lines 24, 25, 29, and 30.			
alances	24	Net assets without donor restrictions	323,147	357,39	1
sala	25	Net assets with donor restrictions			
g pi		Foundations that do not follow FASB ASC 958, ▶☐			•
Fund		check here and complete lines 26 through 30.			•
<u></u>	26	Capital stock, trust principal, or current funds			
Net Assets or	27	Paid-in or capital surplus, or land, bldg., and equipment fund			
SS	28	Retained earnings, accumulated income, endowment, or other funds			
et A	29	Total net assets or fund balances (see instructions)	323,147	357,39	l ·
ž	30	Total liabilities and net assets/fund balances			
		(see instructions)	323,147	357,39	L
Pa	rt III	Analysis of Changes in Net Assets or Fund Bal	ances		
1	Tota	I net assets or fund balances at beginning of year Part II, column	n (a), line 29 (must agree v	rith	
	end-	-of-year figure reported on prior year's return)		1	323,147
2	Ente	r amount from Part I, line 27a · ·	• • • •	2	34,244
3	Othe	r increases not included in line 2 (itemize)		3	
4		lines 1, 2, and 3	•	4	357,391
5		eases not included in line 2 (itemize)		5	
6	Tota	net assets or fund balances at end of year (line 4 minus line 5)	Part II, column (b), line 29	. 6	357,391

Fart IV Capita	Gains and	Losses for Tax on Inve	estment Incom	е			
(a) List and	describe the kir	nd(s) of property sold (for exam	ple, real estate,	(b) Howacquired	(c) Date ad	cquired	(d) Date sold
2-stor	y brick warehou	se; or common stock, 200 shs.	MLC Co.)	P Purchase D Donation	(mo., da	y, yr.)	(mo., day, yr.)
1a SEE ATTAC	HMENT #7						
b							
С				1			
d							
e		<u> </u>	r	<u> </u>			
(e) Gross sales pi	rice	(f) Depreciation allowed (or allowable)	(g) Cost or o		,		n or (loss)
	-	(or allowable)	plus expens	se of Sale		(e) plus (	(f) minus (g))
 b							
c						-	<del> </del>
d					<u>-</u>		
e						-	
Complete only for a	ssets showing	gain in column (h) and owned I	by the foundation or	n 12/31/69.	(I) Ga	ains (Col	(h) gain minus
(i) FMV as of 12/31		(j) Adjusted basis as of 12/31/69	(k) Excess over col. (	of col (ı)	col. (k)	, but not	less than -0-) <b>or</b> com col. (h))
a							
b						-	
С							
d							
е							
2 Capital gain net inc	ome or (net cap	oital loss) If gain, al	so enter in Part I, lin enter ~0~ in Part I, lii	ne 7	2		5,198
3 Net short-term cap	ıtal gaın or (loss	) as defined in sections 1222(5		1			
If gain, also enter ir	Part I, line 8, c	olumn (c). See instructions. If (I	oss),	7			
enter -0- ın Part I,					3		0
Part V Qualifi	cation Unde	er Section 4940(e) for R	educed Tax or	n Net Investn	<u>nent Inco</u>	me	
(For optional use by do	mestic private fo	oundations subject to the section	on 4940(a) tax on ne	et investment inco	me.)		
If section 4940(d)(2) ap	plies, leave this	part blank.					
Man the foundation ligh	la for the neets	n 4042 toy an the distributable		the been news	40		∏ Yes ⊠ No
		n 4942 tax on the distributable under section 4940(e). Do not o		in the base perior	u:		∐ Yes ⊠ No
		ach column for each year, see		ore making any er	ntries		
(a)	ale amount in e	(b)	THE HIST GOTONS DETO	(c)	10103.		(d)
Base period y Calendar year (or tax year	ears er heginning in)	Adjusted qualifying distribution	noncha	Net value of aritable-use assets		Dis	tribution ratio divided by col. (c))
2018		16,	737	333,	079	(601 (6)	0.050249
2017			262	337,			0.045180
2016		17,	698	339,	139		0.052185
2015			707	339,			0.052212
2014		12,	867	344,	680		0.037330
2 Total of line 1, col		• • • • •			. 2	<u> </u>	0.237156
<del>-</del>		-year base period divide the	· ·	•	ì		0 045404
of years the found	ation has been	in existence if less than 5 years			3	ļ	0.047431
4		l D-	4 V I E				225 165
4 Enter the net value	or noncharitab	le-use assets for 2019 from Pa	πx, line 5 ·		4	<del> </del>	335,165
5 Multiply line 4 by li	ne 3				5		15,897
6 Enter 1% of net in	estment income	e (1% of Part I, line 27b)			6		517
		5 (170 5) 1 W.C. IIII (270)					
7 Add lines 5 and 6	• • • • •		•		. 7	<del> </del>	16,414
8 Enter qualifying dis						<u> </u>	17,445
If line 8 is equal to instructions.	or greater than	line 7, check the box in Part VI	, line 1b, and compl	ete that part using	ja 1% tax r	ate. See	tne Part VI

Page 4

	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 see instru	ctions)	<u> </u>	
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 inst.)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			51
	here ▶ 🔀 and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of			
	Part I, line 12, col. (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, Others, enter -0-)			(
3	Add lines 1 and 2			51
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, Others, enter -0~)			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			51
6	Credits/Payments			
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a			
b	Exempt foreign organizations tax withheld at source 6b			•
C	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments. Add lines 6a through 6d			(
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here  if Form 2220 is attached 8			22
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			539
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			
Par	VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or		Yes	No
	intervene in any political campaign?	1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the			
	definition	1b		x
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	,		
	or distributed by the foundation in connection with the activities.		l`	
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. ▶ \$		, .	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers. ▶ \$ 0	1		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	1	•	
	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? $N/N$	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			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			l
	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 yr.? If "Yes," complete Part II, col. (c), & Part XV	7	Х	
	Enter the states to which the foundation reports or with which it is registered. See instructions.		1	
	OH			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or			
~	designate) of each state as required by General Instruction G? If "No," attach explanation	8b		×
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	- 55		
-	4942(j)(5) for calendar year 2019 or the taxable year beginning in 2019? See the instructions for Part XIV. If "Yes,"			
	complete Part XIV	9		x
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names	-		
	and addresses · · · · · · · · · · · · · · · · ·	10		x
	minus manuscription of the control o	1 .0	, !	

Form	990-PF (2019)		F	age 5
<b>Par</b>	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
	meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person			
	had advisory privileges? If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13		Х
	Website address ► N/A			1
14	The books are in care of ▶ SEE ATTACHMENT #8  Telephone no. ▶			
	Located at ► ZIP+4 ►			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> - check here			▶
	and enter the amount of tax-exempt interest received or accrued during the year			, r
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	103	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			+^
Day	the foreign country ▶ t VII–B Statements Regarding Activities for Which Form 4720 May Be Required	<u> </u>	·	1
rai	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	Г	V	T N =
10			Yes	No
1a	During the year, did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?		'	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1		l
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No	١.	*. *	ĺ
	(5) Transfer any income or assets to a disqualified person (or make any of either available for		٠, ر	
	the benefit or use of a disqualified person)? Yes 🗵 No		'	'
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			Ι,
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in			
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		X
	Organizations relying on a current notice regarding disaster assistance, check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2019?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		· .	
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines		1	, ,
	6d and 6e) for tax year(s) beginning before 2019?	1	<u> </u>	1
	If "Yes," list the years • 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement see instructions )	2b	ļ	X
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	▶ 20 <u> </u>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
ь	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	İ	·	Ł
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)			1
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine			
	If the foundation had excess business holdings in 2019.)	3b		X
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable	70		<del>  ^</del>
~	purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		X
FDA		990	DF /	

Form	990-PF (2019) RICHARD REX PONN TRUST FL	JN 31-6314668				Р	age 6
Par	VII-B Statements Regarding Ac	ctivities for Which	Form 4720 May E	Be Required (contin	ued)		
5a	During the year, did the foundation pay or incu	ir any amount to:				Yes	No
	(1) Carry on propaganda, or otherwise attern	pt to influence legislation	on (section 4945(e))? .	🗌 Yes 🛚 🔀	No	,	
	(2) Influence the outcome of any specific pul	olic election (see section	n 4955); or to carry on,		-		
	directly or indirectly, any voter registration	drive?		H H		'	1
	(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	∐ Yes 🄀	No	'	ļ,
	(4) Provide a grant to an organization other t	han a chantable, etc., c	rganization described in		Ì		
	section 4945(d)(4)(A)? See instructions		•	📙 Yes 🔀	No ·		'
	(5) Provide for any purpose other than religion			п п			
	purposes, or for the prevention of cruelty				No	'	-
b	If any answer is "Yes" to 5a(1)-(5), did any of				/-	_	
	Regulations section 53.4945 or in a current no			onsN	/A   5k	<b>^</b>	٠.
_	Organizations relying on a current notice regar	-	•		` ⊔   [	ŀ	
С	If the answer is "Yes" to question 5a(4), does to			N / 2 D D	`		
	because it maintained expenditure responsibili	•	· · · · · · · · · · · · · · · · · · ·	N/A 📙 Yes 📙	No		-
60	If "Yes," attach the statement required by Regu						
oa	Did the foundation, during the year, receive an on a personal benefit contract?	ly lunas, alrectly or inal	rectly, to pay premiums	Пу Б	N-		1 .
b	Did the foundation, during the year, pay premi	ums directly or indirect	····	∐ Yes ⊠	No	_ '	X
J	If "Yes" to 6b, file Form 8870.	urns, unectly or mailed	ly, on a personal benefit	contract:	·	•	<del>  ^</del>
7a	At any time during the tax year, was the found	ation a party to a probit	nited tay chalter transaction	on? . Tyes	No	1	. '
	If "Yes," did the foundation receive any proceed				/A 7t	<u>-</u>	·
8	Is the foundation subject to the section 4960 ta	-		11,	′" <del>⊢</del>	<del> </del>	<del>                                     </del>
_	remuneration or excess parachute payment(s)		10 than \$1,000,000 m	∏ Yes 🏻	No .		١.
Par	t VIII Information About Officer		stees. Foundation			plove	es.
	and Contractors	, Directore, 114	otooo, i ouridation	managere, riigiliy	· u.u E.i	.p.o,c	
1	List all officers, directors, trustees, and fou	ndation managers and	d their compensation. S	See instructions.			
		(b) Title, and average	· · · · · · · · · · · · · · · · · · ·	(d) Contributions to	(e) Exper	ise acco	ount,
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	n other a	allowanc	es
SEE	ATTACHMENT #9						
				ļ			
2	Compensation of five highest-paid employe	ees (other than those	included on line 1 s	ee instructions). If nor	ne, enter		
	"NONE."	T		(d) Combustions	<del></del>		
(a	Name and address of each employee paid	(b) Title, and average		(d) Contributions to employee benefit	(e) Expen	se acco	unt.
•	more than \$50,000	hours per week	(c) Compensation	plans and deferred	1	llowanc	
<u> </u>	1 2 mm 2 curvery m . # 1 0	devoted to position		compensation			
SEE	ATTACHMENT #10						
		:					
			1				
					1		
		1			1		
	•				1		
					1		
					1		
Tetel	number of other applementations and accompany	I		<u> </u>			0
FDA	number of other employees paid over \$50,000		<u> </u>	· · ·	Form 99		•
ΓUΑ	<b>19 990PF6</b> BWF 990 Form Software Co	opyright 1996 – 2020 HRB 1	ax Group, Inc.		FUIIII <b>33</b>	<u>√</u>	ZU13)

#### 19) RICHARD REX PONN TRUST FUN 31-6314668 Page Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, Part VIII and Contractors (continued)

3 Five highest-paid independent contractors for professional services. Se	e instructions. If none, enter "NC	ONE."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
SEE ATTACHMENT #11		
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 so of organizations and other beneficiaries served, conferences convened, research papers produce.		Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see in	structions)	
Describe the two largest program-related investments made by the foundation during		Amount
1		
•		
2		
All -1		
All other program-related investments. See instructions.		
3		
	i	
Total. Add lines 1 through 3	<b>)</b>	
FDA 19 990PF7 BWF 990 Form Software Copyright 1996 - 2020 HRB Tax Group		Form <b>990–PF</b> (2019)

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign found see instructions.)	lations,	
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	325,359
b	Average of monthly cash balances	1b	14,910
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	340,269
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	340,269
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see		
	ınstructions)	4	5,104
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	335,165
6	Minimum investment return. Enter 5% of line 5	6	16,758
Pa	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundation	ns	
	and certain foreign organizations, check here  and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	16,758
2a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019. (This does not include the tax from Part VI.) 2b		
C	Add lines 2a and 2b	2c	517
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	16,241
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	16,241
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	16,241
Pa	rt 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	17,445
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		
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	17,445
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		_
	Enter 1% of Part I, line 27b. See instructions	5	517
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	16,928
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the	foundation	
	qualifies for the section 4940(e) reduction of tax in those years.		
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Pa	ITEXII Undistributed Income (se	ee instructions)			
1	Distributable amount for 2019 from Part XI,	(a) Corpus	(b) Years prior to 2018	(c) 2018	( <b>d</b> ) 2019
	line 7				16,241
2	Undistributed income, if any, as of the end of 2019				
a	Enter amount for 2018 only			16,654	
Ł	Total for prior years 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2019				
ε					İ
t	From 2015 . 17,725	5			
	From 2016 17,840	<u> </u>			
c	From 2017				, !
•	16.735				
f		68,772			'
4	Qualifying distributions for 2019 from Part XII,		<del></del>		
	line 4 ▶\$ 17,445				
a	A 1 1			The Committee of Committee of the Commit	<u> </u>
	Applied to undistributed income of prior years				
	(Election required see instructions)				
	: Treated as distributions out of corpus				
_	(Election required see instructions)		·-····		-
	Applied to 2019 distributable amount .	12 064			
-	· ·	12,964			
5	Excess distributions carryover applied to 2019				
	(If an amount appears in column (d), the same				
_	amount must be shown in column (a)).				
6	Enter the net total of each column as				
	indicated below:				
ε		81,736			
t	Prior years' undistributed income. Subtract				
	line 4b from line 2b				
•	Enter the amount of prior years' undistributed				1
	income for which a notice of deficiency has been				i
	issued, or on which the section 4942(a) tax has				1
	been previously assessed				
c	Subtract line 6c from line 6b. Taxable		<del></del>		ı
	amount see instructions			İ	j
e	Undistributed income for 2018. Subtract				
	line 4a from line 2a. Taxable amount				Ì
	see instructions			16,654	
f	Undistributed income for 2019. Subtract				
	lines 4d and 5 from line 1. This amount				
	must be distributed in 2020				16,241
7	Amounts treated as distributions out of				,
	corpus to satisfy requirements imposed		•		:
	by section 170(b)(1)(F) or 4942(g)(3) (Elec-				
	tion may be requiredsee instructions) .				
8	Excess distributions carryover from 2014		- 7		
_	not applied on line 5 or line 7 (see				
	instructions) .				
9	Excess distributions carryover to 2020.	<del> </del>	······································		<u> </u>
-	Subtract lines 7 and 8 from line 6a .	81,736		-	
10	Analysis of line 9	01,750			
а					•
h	Excess from 2016 . 2,998	·			1
ن		1			•
2	Excess from 2018 . 2,486 Excess from 2019 . 3,277				İ
е	Excess from 2019	i 1			

Form 990-PF (2019) Page 11 RICHARD REX PONN TRUST FUN 31-6314668 Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment 3 If recipient is an individual, Foundation Recipient Purpose of grant or show any relationship to status of Amount contribution any foundation manager recipient Name and address (home or business) or substantial contributor Paid during the year SEE ATTACHMENT #12 14,050 Total ▶ 3a .. . . . . . . . Approved for future payment

BWF 990

. ▶ 3b

Enter gross amounts unless otherwise indicated.	Unrelated	business income	Excluded by	section 512, 513, or 514	(e)
	(a)	(b)	(c)	(d)	Related or exempt
	Business	Amount	Excl.	Amount	function income (See instructions.)
1 Program service revenue	code		code		
a					
b					
c					
d					
e					
f					
g Fees & contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			1	23	· · · · · · · · · · · · · · · · · · ·
4 Dividends and interest from securities			10	8,533	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
<b>b</b> Not debt-financed property					
6 Net rental income or (loss) from personal property .					
7 Other investment income .					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a					
b					
С					,
d				-	
e					
12 Subtotal Add columns (b), (d), and (e)			0	8 <b>,</b> 556	0
13 Total. Add line 12, columns (b), (d), and (e)				13	8,556
(See worksheet in line 13 instructions to verify calcula	tions.)				
Part XVI-B Relationship of Activities	s to the Acc	omplishment of	f Exempt P	urposes	
Line No. Explain below how each activity for w	hich income is r	eported in column (e	e) of Part XVI-	A contributed importai	ntly to the
▼ accomplishment of the foundation's e					
					•

Form		RD REX PONN TRU		31-6314668				ge <b>1</b>
Pa	rt XVII Information R Exempt Organ	egarding Transfers to	and Transact	ions and Relation	ships With No	ncharit	able	
1	Did the organization directly or		following with an	y other organization desi	cribed in section		Yes	No
	501(c) (other than section 501(	c)(3) organizations) or in section	on 527, relating to	political organizations?				
а	Transfers from the reporting fo	undation to a noncharitable ex	empt organization	of				
	(1) Cash				•	1a(1)		X
	(2) Other assets		• • • • •			1a(2)		X
þ	Other transactions:					45-(4)		<del></del>
		haritable exempt organization a noncharitable exempt organ	Ization	••		1b(1) 1b(2)	-	X
	<ul><li>(2) Purchases of assets from</li><li>(3) Rental of facilities, equipm</li></ul>	• •	izauori	•		1b(2)		X
	(4) Reimbursement arrangen					1b(4)		X
	(5) Loans or loan guarantees					1b(5)		X
		or membership or fundraising s	solicitations .			1b(6)		Х
С	Sharing of facilities, equipment	•				1c		Х
d		· •		lumn (b) should always	how the fair marke	t value o	f the	
	Is the foundation directly or inc section 501(c) (other than sect	on 501(c)(3)) or in section 527		ax-exempt organizations	described in	Ye	s <u>X</u>	 No
<u>_</u> b	(a) Name of organizatio		pe of organization	(c)	Description of rela	tionship		
	<b>10</b>		,		·	·		
Sia	belief, it is true, correct, and co	eclare that I have examined this retu omplete. Declaration of preparer (otl						nd

. / //	1
Nesaus	
	truste
	Signature of officer or

7/3/ Date

Title

Date

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

Paid **Preparer Use Only** 

Preparer's signature Print/Type preparer's name Krewer CPA Firm's name ► H AND R BLOCK

Check If PTIN 07-02-2020 self-employed P01201998

Phone no. (937) 653-7889

Firm's EIN ▶ 472531325

Firm's address ▶ 1637 US HWY 36 E

#### 2019 FORM 990 SCHEDULE OF OTHER INCOME

ATTACHMENT 1: PAGE 1 - 990-PF PAGE 1, PART I, LINE 11

OPEN TO PUBLIC

INSPECTION

For calendar year 2019, or tax period beginning and ending ...

INSPECTION For calendar year 2019, or tax period beginning , and ending .

Name of Organization

RICHARD REX PONN TRUST FUND 31-6314668

ICHARD REX PONN TRUST FUND 31-6314668				
Description of Other Income	Revenue and Expenses	Net Investment Income	Adjusted Net Income	
UNREALIZED GAIN ON INCREASE IN VALUE OF INVESTMENTS	39,967	39,967		
,				
	ı			
Totals:	39,967	39,967		

#### 2019 FORM 990 SCHEDULE OF ACCOUNTING FEES

ATTACHMENT 2: PAGE 1 - 990-PF PAGE 1, PART I, LINE 16B OPEN TO PUBLIC INSPECTION , and ending For calendar year 2019, or tax period beginning Name of Organization **Employer Identification Number** 31-6314668 RICHARD REX PONN TRUST FUND Net Investment Adjusted Disbursements for **Accounting Category Amount** Net Income Income Charity 3,050 1,017 2,033 TAX AND ACCOUNTING FEES 3,050 1,017 2,033 Total:

#### 2019 FORM 990 SCHEDULE OF OTHER PROFESSIONAL FEES

ATTACHMENT 3: PAGE 1 - 990-PF PAGE 1, PART I, LINE 16C **OPEN TO PUBLIC** INSPECTION For calendar year 2019, or tax period beginning , and ending Name of Organization Employer Identification Number RICHARD REX PONN TRUST FUND 31-6314668 Net Investment Adjusted Disbursements for Category **Amount** Net Income Income Charity 1,728 576 INVESTMENT ADVISORY FEES 1,152 1,728 576 1,152 Total:

#### 2019 FORM 990 SCHEDULE OF TAXES PAID

ATTACHMENT 4: PAGE 1 - 990- PF PAGE 1, PART I, LINE 18 **OPEN TO PUBLIC** INSPECTION , and ending For calendar year 2019, or tax period beginning Name of Organization Employer Identification Number RICHARD REX PONN TRUST FUND 31-6314668 Net Investment Adjusted Disbursements for Category **Amount** Net Income Chanty Income 439 439 TAX ON NET INVESTMENT INCOM 439 439 Total:

#### 2019 FORM 990 SCHEDULE OF INVESTMENTS - CORPORATE STOCKS

ATTACHMENT 5: PAGE 1 - 990-PF PAGE 2, PART II, LINE 10B OPENTO PUBLIC INSPECTION For calendar year 2019, or tax period beginning , and ending Name of Organization Employer Identification Number RICHARD REX PONN TRUST FUND 31-6314668 FMV at Book Value Fair Market Value Description of Property Cost Year End EDWARD JONES CORPORATE STOCKS 146,154 146,154 Form Software Copyright 1996 - 2020 HRB Tax Group, Inc. Total: 146,154 146,154 FDA K0510A

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#### 2019 FORM 990 SCHEDULE OF INVESTMENTS - OTHERS

ATTACHMENT 6: PAGE 1 - 990-PF PAGE 2, PART II, LINE 13 · OPEN TO PUBLIC INSPECTION For calendar year 2019, or tax period beginning , and ending Name of Organization Employer Identification Number RICHARD REX PONN TRUST FUND <u>31-6314668</u> FMV at Cost Book Value Fair Market Value Description Year End 21,085 21,085 MUTUAL FUNDS EDWARD JONES 170,201 170,201 MUTUAL FUNDS SEI INVESTMENTS Total: 191,286 191,286

### 2019 FORM 990 PART IV CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

ATT	ACHMENT 7: PAC	SE 1 - 990-PF PAGE	3, PART IV	LINE 1		
	TO PUBLIC					
		alendar year 2019, or tax period begii	nning	, and endin		
	of Organization	morrow Pinto			Employer Identific	
KIC.	HARD REX PONN	TRUST FUND  e the Kind(s) of Property Sold (e.g., F	Pool Estato	(b) How Acquired	31-631466 (c) Date Acquired	(d) Date Sold
		rehouse; or Common Stock, 200 shs		P Purchase D Donation	(mo., day, yr.)	(mo., day, yr.)
1	COMMON STOCK			P		09-09-2019
	(e) Gross Sales Price	(f) Depreciation Allowed	(g) Cost or Oth		(h) Gain oi	
1	28,203	(or allowable)	Plus Expens	23,005	(e) Plus (f)	Minus (g) 5,198
		nowing gain in column (h) and owned			(I) Gains (Col. (h	
]	(i) F.M.V. as of 12/31/69	(j) Adjusted Basis as of 12/31/69	(k) Excess if Over Col. (			Less Than -0-) or om col (h))
1	···	d3 01 12/31/03	Over Cor. (	17, ii Ciry		5,198
-						

#### 2019 FORM 990 BOOKS ARE IN CARE OF

ATTACHMENT 8 - 990-PF PAGE 5, PART VII-A	LINE 14
OPEN TO PUBLIC	
INSPECTION For calendar year 2019, or tax period beginning	, and ending
Name of Organization	Employer Identification Number
RICHARD REX PONN TRUST FUND	31-6314668
Part VII-A - Line 14	
Individual Name	
or	
Business Name:	•
H AND R BLOCK BUSINESS SERVICES	3
Street Address	1637 E US HWY 36 UNIT 8A
•	
U.S Address	
Zip code 43078 City URBANA	State OH
or	
Foreign Address	
City	
Province or State .	
	•
Country	
Postal code	
Phone Number	<u>(937) 653–7889</u>
Fax Number	

#### 2019 FORM 990 CURRENT OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

ATTACHMENT 9: PAGE 1 - 990-PF PAGE 6, PART VIII · OPEN TO PUBLIC INSPECTION , and ending For calendar year 2019, or tax period beginning Name of Organization Employer Identification Number RICHARD REX PONN TRUST FUND 31-6314668 (A) Name and Address (B) Title and Average (C) Compensation (if (D) Cont. to Employee (E) Expense Account Ben. Plans & Def. Comp. Hrs. per Week not paid, enter 0) & Other Allowances DARRELL HECKMAN TRUSTEE 1.00 2519 ARISTOCRACY CIRCLE LEXINGTON, KY 40509 NANCY HECKMAN TRUSTEE 1.00 2519 ARISTOCRACY CIRCLE LEXINGTON, KY 40509 DIANE KREMER CPA TRUSTEE/CPA 1637 E US HWY 36 UNIT 8A 2.00 3,050 URBANA, OH 43078

### 2019 FORM 990 COMPENSATION OF THE FIVE HIGHEST PAID EMPLOYEES

ATTACHMENT 10: PAGE 1 990-PE OPEN TO PUBLIC	<u>PAGE 6, PART V</u>	'III, LINE	1	
INSPECTION For calendar year 2019, or	or tax period beginning	, and	ending	
Name of Organization		<u>.</u>	Employer Identification	ation Number
RICHARD REX PONN TRUST FUND		31-6314668		
Part VIII Compensation of the Five Highest Paid	Employees Other Than Office	ers, Directors, and	Trustees	
(a) Name and Address of Each Employee Paid More Than \$50,000	(b) Title and Average Hours Per Week Devoted to Position	(c) Compensation	(d) Contributions to Empl Benefit Plans & Deferred Compensation	(e) Expense Account and Other Allowances
NONE			,	
	-			
				İ

## 2019 FORM 990 COMPENSATION OF THE FIVE HIGHEST PAID INDEPENDENT CONTRACTORS FOR PROFESSIONAL SERVICES

OPEN TO PUBLIC INSPECTION	For calendar year 2019, or tax period beginning	, and ending	
Name of Organization	Tor calendar year 2013, or tax period beginning		tification Number
	PONN TRUST FUND	31-63146	
ر الخضائد الأسان عند الأسان على الأسان عند ا	tion of the Five Highest Paid Independent Contractors for Pro	•	
(a) Name and address	s of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
1			
			>
		1	

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#### 2019 FORM 990 GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 12: PAGE 1 990-PF PAGE 11, PART XV LINE 3A

OPEN TO PU

INSPECTION For calendar year 2019, or tax period beginning

, and ending

Name of Organization

Employer Identification Number

ICHARD REX	PONN TRU	ST FUND	31-6314668

RICHARD REX PONN TRUST FUN	T	r	31-631	4000
Recipient	If Recipient is an Individual, Show any Relationship to Any Foundation Manager	Status of	Purpose of Grant or Contribution	Amount
Name and Address (home or business)	or Substantial Contributor	Recipient	-	
BARELY USED PETS 844 JACKSON HILL RD URBANA OH 43078			CIVIC	750
CARING KITCHEN 300 MIAMI ST URBANA OH 43078			CIVIC	1,200
CAT WELFARE 741 WETMORE RD COLUMBUS OH 43214			CIVIC	750
CHAMPAIGN COUNTY ANIMAL WELFARE LEA 3858 STATE ROUTE 56			CIVIC	
MECHANICSBURG OH 43044 CHAMPAIGN COUNTY YOUTH CHOIR			EDUCATIONAL	500
116 LAFAYETTE AVE URBANA OH 43078				3,500
FIRST PRESBYTERIAN CHURCH 116 WEST COURT ST URBANA OH 43078			RELIGIOUS	600
GALLUDET UNIVERSITY 800 FLORIDA AVE NE WASHINGTON DC 20002			EDUCATIONAL	200
LEWISPORTE AREA FLIGHT 15 SCHOLARSH C/O COLUMBUS FOUNDATION 1234 E BROAD ST COLUMBUS OH 43205			EDUCATIONAL	200
HABITAT FOR HUMANITY 955 NORTH MAIN ST URBANA OH 43078			CIVIC	300
MESSIAH LUTHERAN CHURCH SCHOOL SUPP 1013 CHILDRENS HOME RD URBANA OH 43078			RELIGIOUS	1,000
OBRYONVILLE ANIMAL RESCUE PO BOX 9206 CINCINNATI OH 45209			CIVIC	750
011101111111111111111111111111111111111			Total:	9,750
			, 4.61.	

#### 2019 FORM 990 GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 12: PAGE 2 990-PF PAGE 11, PART XV LINE 3A

OPEN TO PU

INSPECTION For calendar year 2019, or tax period beginning

, and ending

Name of Organization

Employer Identification Number

ICHARD REX PONN TRUST	FUND	31-6314	668

Becipient Leading Deleterate L. Purpose of Grant or	<u>RICHARD REX PONN TRUST FUN</u>		31-63	14668
Name and Address (home or business)  OHIO ALLEYCAT RESOURCE 5519 ORLANDO PLACE CINCINNATI OH 45227  PET PROMISE PO BOX 14802 COLUMBUS OH 43214  PRIMATE RESCUE CENTER 2515 BETHEL ROAD NICHOLASVILLE KY 40356  DOWNTOWN PUBLIC RESTROOM PROJECT ONE MONUMENT SQUARE URBANA OH 43078  URBANA CITY SCHOOLS 711 WOOD STREET URBANA OH 43078  WYANDOT HUMANE SOCIET 9610 COUNTY WHY 330  UPPER SANDUSKY OH 43351	· ·	Status of		Amount
5619 ORLANDO PLACE CINCINNATI OH 45227 PET PROMISE PO BOX 14802 COLUMBUS OH 43214 PRIMATE RESCUE CENTER 2515 BETHEL ROAD NICHOLASVILLE KY 40356 DOWNTOWN PUBLIC RESTROOM PROJECT ONE MONUMENT SQUARE URBANA OH 43078 WYANDA CITY SCHOOLS 711 WOOD STREET URBANA OH 43078 WYANDOT HUMANE SOCIET 9610 COUNTY WHY 330 UPPER SANDUSKY OH 43351	Name and Address (home or business)	Hecipient		
PO BOX 14802 COLUMBUS OH 43214  PRIMATE RESCUE CENTER 2515 BETHEL ROAD NICHOLASVILLE KY 40356  DOWNTOWN PUBLIC RESTROOM PROJECT ONE MONUMENT SQUARE URBANA OH 43078  URBANA CITY SCHOOLS 7111 WOOD STREET URBANA OH 43078  WYANDOT HUMANE SOCIET 9610 COUNTY WHY 330  UPPER SANDUSKY OH 43351	5619 ORLANDO PLACE		CIVIC	900
2515 BETHEL ROAD NICHOLASVILLE KY 40356  DOWNTOWN PUBLIC RESTROOM PROJECT ONE MONUMENT SQUARE URBANA OH 43078  URBANA CITY SCHOOLS 711 WOOD STREET URBANA OH 43078  WYANDOT HUMANE SOCIET 9610 COUNTY WHY 330 UPPER SANDUSKY OH 43351  CIVIC  CIVIC  CIVIC	PO BOX 14802		CIVIC	900
PROJECT ONE MONUMENT SQUARE URBANA OH 43078  URBANA CITY SCHOOLS 711 WOOD STREET URBANA OH 43078  WYANDOT HUMANE SOCIET 9610 COUNTY WHY 330 UPPER SANDUSKY OH 43351  CIVIC	2515 BETHEL ROAD		CIVIC	400
URBANA OH 43078  URBANA CITY SCHOOLS 711 WOOD STREET URBANA OH 43078  WYANDOT HUMANE SOCIET 9610 COUNTY WHY 330 UPPER SANDUSKY OH 43351	PROJECT		CIVIC	
711 WOOD STREET URBANA OH 43078  WYANDOT HUMANE SOCIET 9610 COUNTY WHY 330 UPPER SANDUSKY OH 43351	JRBANA OH 43078		EDUCATIONAL.	1,000
9610 COUNTY WHY 330 UPPER SANDUSKY OH 43351	711 WOOD STREET			350
	9610 COUNTY WHY 330		CIVIC	750
			,	
				;
				· ·
Total:			Total:	4,300

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