

Form **990-PF**Department of the Treasury  
Internal Revenue Service**Return of Private Foundation****or Section 4947(a)(1) Trust Treated as Private Foundation**

- Do not enter social security numbers on this form as it may be made public.
- Go to [www.irs.gov/Form990PF](http://www.irs.gov/Form990PF) for instructions and the latest information.

**2019****Open to Public  
Inspection****For calendar year 2019, or tax year beginning 01-01-2019 , and ending 12-31-2019**

|  |   |   |
|--|---|---|
| Name of foundation<br>Doris & Floyd Kimble Foundation  |   | <b>A Employer identification number</b><br>34-1622273   |
| Number and street (or P.O. box number if mail is not delivered to street address)<br>PO Box 67   |   | <b>B Telephone number (see instructions)</b><br>(330) 407-2890  |
| City or town, state or province, country, and ZIP or foreign postal code<br>Dover, OH 44622  |   | <b>C If exemption application is pending, check here</b> ► <input type="checkbox"/>   |
| <b>G Check all that apply:</b> <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity<br><input type="checkbox"/> Final return <input type="checkbox"/> Amended return<br><input type="checkbox"/> Address change <input type="checkbox"/> Name change |   | <b>D 1. Foreign organizations, check here.....</b> ► <input type="checkbox"/><br><b>2. Foreign organizations meeting the 85% test, check here and attach computation ...</b> ► <input type="checkbox"/>   |
| <b>H Check type of organization:</b> <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation<br><input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation   |   | <b>E If private foundation status was terminated under section 507(b)(1)(A), check here .....</b> ► <input type="checkbox"/><br><b>F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here .....</b> ► <input type="checkbox"/> |
| <b>I Fair market value of all assets at end of year (from Part II, col. (c), line 16)</b> ► \$ <u>50,018,166</u>   | <b>J Accounting method:</b> <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual<br><input type="checkbox"/> Other (specify) _____ | (Part I, column (d) must be on cash basis.)   |

| <b>Part I Analysis of Revenue and Expenses</b> <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)</i> | <b>(a)</b><br>Revenue and expenses per books | <b>(b)</b><br>Net investment income | <b>(c)</b><br>Adjusted net income | <b>(d)</b><br>Disbursements for charitable purposes (cash basis only) |
|---|--|-------------------------------------|-----------------------------------|---|
| <b>1</b> Contributions, gifts, grants, etc., received (attach schedule)   |  |                                     |                                   |   |
| <b>2</b> Check ► <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B   |  |                                     |                                   |   |
| <b>3</b> Interest on savings and temporary cash investments   | 200,716                                      | 200,716                             |                                   |   |
| <b>4</b> Dividends and interest from securities   | 381,250                                      | 381,250                             |                                   |   |
| <b>5a</b> Gross rents   |  |                                     |                                   |   |
| <b>b</b> Net rental income or (loss)  |  |                                     |                                   |   |
| <b>6a</b> Net gain or (loss) from sale of assets not on line 10   | 531,323                                      |                                     |                                   |   |
| <b>b</b> Gross sales price for all assets on line 6a  | 6,968,420                                    |                                     |                                   |   |
| <b>7</b> Capital gain net income (from Part IV, line 2)   |  | 531,323                             |                                   |   |
| <b>8</b> Net short-term capital gain  |  |                                     |                                   |   |
| <b>9</b> Income modifications   |  |                                     |                                   |   |
| <b>10a</b> Gross sales less returns and allowances  |  |                                     |                                   |   |
| <b>b</b> Less: Cost of goods sold   |  |                                     |                                   |   |
| <b>c</b> Gross profit or (loss) (attach schedule)   |  |                                     |                                   |   |
| <b>11</b> Other income (attach schedule)  | 20   | -155,102                            | -155,102                          |   |
| <b>12 Total.</b> Add lines 1 through 11   | 958,187                                      | 958,187                             |                                   |   |
| <b>13</b> Compensation of officers, directors, trustees, etc.   | 0  | 0                                   |                                   | 0   |
| <b>14</b> Other employee salaries and wages   |  |                                     |                                   |   |
| <b>15</b> Pension plans, employee benefits  |  |                                     |                                   |   |
| <b>16a</b> Legal fees (attach schedule)   |  |                                     |                                   |   |
| <b>b</b> Accounting fees (attach schedule)  | 18,207                                       | 9,103                               |                                   | 9,103   |
| <b>c</b> Other professional fees (attach schedule)  | 213,828                                      | 213,828                             |                                   | 0   |
| <b>17</b> Interest  |  |                                     |                                   |   |
| <b>18</b> Taxes (attach schedule) (see instructions)  | 8,113  | 7,913                               |                                   | 200   |
| <b>19</b> Depreciation (attach schedule) and depletion  |  |                                     |                                   |   |
| <b>20</b> Occupancy   |  |                                     |                                   |   |
| <b>21</b> Travel, conferences, and meetings   |  |                                     |                                   |   |
| <b>22</b> Printing and publications   |  |                                     |                                   |   |
| <b>23</b> Other expenses (attach schedule)  | 28,616                                       | 15,210                              |                                   | 13,406  |
| <b>24 Total operating and administrative expenses.</b>  |  |                                     |                                   |   |
| Add lines 13 through 23   | 268,764                                      | 246,054                             |                                   | 22,709  |
| <b>25</b> Contributions, gifts, grants paid   | 2,216,998                                    |                                     |                                   | 2,216,998   |
| <b>26 Total expenses and disbursements.</b> Add lines 24 and 25   | 2,485,762                                    | 246,054                             |                                   | 2,239,707   |
| <b>27</b> Subtract line 26 from line 12:  |  |                                     |                                   |   |
| <b>a</b> <b>Excess of revenue over expenses and disbursements</b>   | -1,527,575                                   |                                     |                                   |   |
| <b>b</b> <b>Net investment income</b> (if negative, enter -0-)  |  | 712,133                             |                                   |   |
| <b>c</b> <b>Adjusted net income</b> (if negative, enter -0-)  |  |                                     |                                   |   |

|  | <b>Part II Balance Sheets</b>  | Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.) | Beginning of year | End of year    |                       |
|--|--|--|-------------------|----------------|-----------------------|
|  |  |  | (a) Book Value    | (b) Book Value | (c) Fair Market Value |
|  | <b>1</b> Cash—non-interest-bearing . . . . .   |  | 799,322           | 448,802        | 448,802               |
|  | <b>2</b> Savings and temporary cash investments . . . . .  |  | 1,848,407         | 1,377,506      | 1,377,506             |
|  | <b>3</b> Accounts receivable ► _____   |  |                   |                |                       |
|  | Less: allowance for doubtful accounts ► _____  |  |                   |                |                       |
|  | <b>4</b> Pledges receivable ► _____  |  |                   |                |                       |
|  | Less: allowance for doubtful accounts ► _____  |  |                   |                |                       |
|  | <b>5</b> Grants receivable . . . . .   |  |                   |                |                       |
|  | <b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .       |  |                   |                |                       |
|  | <b>7</b> Other notes and loans receivable (attach schedule) ► _____  |  |                   |                |                       |
|  | Less: allowance for doubtful accounts ► _____  |  |                   |                |                       |
|  | <b>8</b> Inventories for sale or use . . . . .   |  |                   |                |                       |
|  | <b>9</b> Prepaid expenses and deferred charges . . . . .   |  |                   |                |                       |
|  | <b>10a</b> Investments—U.S. and state government obligations (attach schedule)   |  |                   |                |                       |
|  | <b>b</b> Investments—corporate stock (attach schedule) . . . . .   | 13,358,528   | 14,811,803        | 22,676,027     |                       |
|  | <b>c</b> Investments—corporate bonds (attach schedule) . . . . .   | 6,145,442  | 6,910,678         | 7,049,502      |                       |
|  | <b>11</b> Investments—land, buildings, and equipment: basis ► _____  |  |                   |                |                       |
|  | Less: accumulated depreciation (attach schedule) ► _____   |  |                   |                |                       |
|  | <b>12</b> Investments—mortgage loans . . . . .   |  |                   |                |                       |
|  | <b>13</b> Investments—other (attach schedule) . . . . .  | 7,740,995  | 4,818,842         | 7,026,538      |                       |
|  | <b>14</b> Land, buildings, and equipment: basis ► _____ 14,307,701   |  |                   |                |                       |
|  | Less: accumulated depreciation (attach schedule) ► 2,867,910   |  |                   |                |                       |
|  | <b>15</b> Other assets (describe ► _____)  | 11,439,791   | 11,439,791        | 11,439,791     |                       |
|  | <b>16</b> <b>Total assets</b> (to be completed by all filers—see the instructions. Also, see page 1, item I)                                     | 41,332,485   | 39,807,422        | 50,018,166     |                       |
|  | <b>17</b> Accounts payable and accrued expenses . . . . .  |  | -2,000            | 512            |                       |
|  | <b>18</b> Grants payable . . . . .   |  |                   |                |                       |
|  | <b>19</b> Deferred revenue . . . . .   |  |                   |                |                       |
|  | <b>20</b> Loans from officers, directors, trustees, and other disqualified persons   |  |                   |                |                       |
|  | <b>21</b> Mortgages and other notes payable (attach schedule) . . . . .  |  |                   |                |                       |
|  | <b>22</b> Other liabilities (describe ► _____)   |  |                   |                |                       |
|  | <b>23</b> <b>Total liabilities</b> (add lines 17 through 22) . . . . .   |  | -2,000            | 512            |                       |
|  | <b>Foundations that follow FASB ASC 958, check here ► <input type="checkbox"/></b><br><b>and complete lines 24, 25, 29 and 30.</b>               |  |                   |                |                       |
|  | <b>24</b> Net assets without donor restrictions . . . . .  |  |                   |                |                       |
|  | <b>25</b> Net assets with donor restrictions . . . . .   |  |                   |                |                       |
|  | <b>Foundations that do not follow FASB ASC 958, check here ► <input checked="" type="checkbox"/></b><br><b>and complete lines 26 through 30.</b> |  |                   |                |                       |
|  | <b>26</b> Capital stock, trust principal, or current funds . . . . .   |  | 0                 | 0              |                       |
|  | <b>27</b> Paid-in or capital surplus, or land, bldg., and equipment fund   |  | 0                 | 0              |                       |
|  | <b>28</b> Retained earnings, accumulated income, endowment, or other funds   |  | 41,334,485        | 39,806,910     |                       |
|  | <b>29</b> <b>Total net assets or fund balances</b> (see instructions) . . . . .  | 41,334,485   | 39,806,910        |                |                       |
|  | <b>30</b> <b>Total liabilities and net assets/fund balances</b> (see instructions) . . . . .   | 41,332,485   | 39,807,422        |                |                       |

**Part III Analysis of Changes in Net Assets or Fund Balances**

|   |          |            |
|---|----------|------------|
| <b>1</b> Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return) . . . . . | <b>1</b> | 41,334,485 |
| <b>2</b> Enter amount from Part I, line 27a . . . . .   | <b>2</b> | -1,527,575 |
| <b>3</b> Other increases not included in line 2 (itemize) ► _____   | <b>3</b> | 0          |
| <b>4</b> Add lines 1, 2, and 3 . . . . .  | <b>4</b> | 39,806,910 |
| <b>5</b> Decreases not included in line 2 (itemize) ► _____   | <b>5</b> | 0          |
| <b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 . . . . .  | <b>6</b> | 39,806,910 |

**Part IV Capital Gains and Losses for Tax on Investment Income**

| (a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)   |   | (b) How acquired<br>P—Purchase<br>D—Donation  | (c) Date acquired<br>(mo., day, yr.)   | (d) Date sold<br>(mo., day, yr.) |
|--|---|---|--|----------------------------------|
| <b>1 a</b> Atlantic Trust Short Term   |   |   |  |                                  |
| <b>b</b> Atlantic Trust Long Term  |   |   |  |                                  |
| <b>c</b> Atlantic Trust Long Term  |   |   |  |                                  |
| <b>d</b> Capital Gains Dividends   |   | P   |  |                                  |
| <b>e</b>   |   |   |  |                                  |
| (e) Gross sales price  | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale  | (h) Gain or (loss) (e) plus (f) minus (g)  |                                  |
| <b>a</b> 571,526   |   | 590,585   |  | -19,059                          |
| <b>b</b> 5,680,734   |   | 5,399,288   |  | 281,446                          |
| <b>c</b> 583,917   |   | 447,224   |  | 136,693                          |
| <b>d</b> 132,243   |   |   |  | 132,243                          |
| <b>e</b>   |   |   |  |                                  |
| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69  |   |   |  |                                  |
| (i) F.M.V. as of 12/31/69  | (j) Adjusted basis as of 12/31/69       | (k) Excess of col. (i) over col. (j), if any  | (l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h)) |                                  |
| <b>a</b>   |   |   |  | -19,059                          |
| <b>b</b>   |   |   |  | 281,446                          |
| <b>c</b>   |   |   |  | 136,693                          |
| <b>d</b>   |   |   |  | 132,243                          |
| <b>e</b>   |   |   |  |                                  |
| <b>2</b> Capital gain net income or (net capital loss)   |   | { If gain, also enter in Part I, line 7<br>If (loss), enter -0- in Part I, line 7 } | <b>2</b>   | 531,323                          |
| <b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):<br>If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8 |   |   | <b>3</b>   |                                  |

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

 Yes  No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

**1** Enter the appropriate amount in each column for each year; see instructions before making any entries.

| (a)<br>Base period years<br>Calendar year (or tax year beginning in)  | (b)<br>Adjusted qualifying distributions | (c)<br>Net value of noncharitable-use assets | (d)<br>Distribution ratio<br>(col. (b) divided by col. (c)) |
|---|--|--|---|
| 2018  | 1,766,755                                | 38,275,743                                   | 0.046159  |
| 2017  | 1,925,136                                | 38,111,530                                   | 0.050513  |
| 2016  | 2,037,914                                | 35,830,290                                   | 0.056877  |
| 2015  | 1,587,449                                | 37,943,241                                   | 0.041837  |
| 2014  | 1,694,454                                | 38,401,714                                   | 0.044124  |
| <b>2</b> Total of line 1, column (d)  |  |  | <b>2</b> 0.239510   |
| <b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years |  |  | <b>3</b> 0.047902   |
| <b>4</b> Enter the net value of noncharitable-use assets for 2019 from Part X, line 5   |  |  | <b>4</b> 38,039,594   |
| <b>5</b> Multiply line 4 by line 3  |  |  | <b>5</b> 1,822,173  |
| <b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)   |  |  | <b>6</b> 7,121  |
| <b>7</b> Add lines 5 and 6  |  |  | <b>7</b> 1,829,294  |
| <b>8</b> Enter qualifying distributions from Part XIII, line 4  |  |  | <b>8</b> 2,239,707  |

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)**

|    |  |        |                   |
|----|--|--------|-------------------|
| 1a | Exempt operating foundations described in section 4940(d)(2), check here ► <input type="checkbox"/> and enter "N/A" on line 1.                               | 1      | 7,121             |
|    | 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 ► <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b | 1      | 7,121             |
| 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-)  | 2      | 0                 |
| 3  | Add lines 1 and 2.   | 3      | 7,121             |
| 4  | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  | 4      | 0                 |
| 5  | <b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0-.  | 5      | 7,121             |
| 6  | Credits/Payments:  |        |                   |
| a  | 2019 estimated tax payments and 2018 overpayment credited to 2019  | 6a     | 61,068            |
| b  | Exempt foreign organizations—tax withheld at source  | 6b     |                   |
| c  | Tax paid with application for extension of time to file (Form 8868)  | 6c     | 0                 |
| d  | Backup withholding erroneously withheld  | 6d     | 0                 |
| 7  | Total credits and payments. Add lines 6a through 6d.   | 7      | 61,068            |
| 8  | Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached.                                    | 8      | 0                 |
| 9  | <b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b>  | 9      |                   |
| 10 | <b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b>  | 10     | 53,947            |
| 11 | Enter the amount of line 10 to be: <b>Credited to 2020 estimated tax</b> ►   | 53,947 | <b>Refunded</b> ► |
|    |  | 11     | 0                 |

**Part 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 intervene in any political campaign?   |     | <b>Yes</b>                           | <b>No</b> |
| 1b  | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition).  |     | <b>Yes</b>                           | <b>No</b> |
|     | <i>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.</i>   |     |                                      |           |
| 1c  | Did the foundation file <b>Form 1120-POL</b> for this year?  |     | <b>Yes</b>                           | <b>No</b> |
| 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?  |     | <b>Yes</b>                           | <b>No</b> |
|     | <i>If "Yes," attach a detailed description of the activities.</i>  |     |                                      |           |
| 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? <i>If "Yes," attach a conformed copy of the changes</i>                              |     | <b>Yes</b>                           | <b>No</b> |
| 4a  | Did the foundation have unrelated business gross income of \$1,000 or more during the year?  |     | <b>Yes</b>                           |           |
| b   | If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?  |     | <b>Yes</b>                           |           |
| 5   | Was there a liquidation, termination, dissolution, or substantial contraction during the year?   |     | <b>Yes</b>                           | <b>No</b> |
|     | <i>If "Yes," attach the statement required by General Instruction T.</i>   |     |                                      |           |
| 6   | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:  |     | <b>Yes</b>                           | <b>No</b> |
|     | • By language in the governing instrument, or  |     |                                      |           |
|     | • By state legislation that effectively amends the governing instrument so that no mandatory directions  |     |                                      |           |
|     | that conflict with the state law remain in the governing instrument?   |     |                                      |           |
| 7   | Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>  |     | <b>Yes</b>                           |           |
| 8a  | Enter the states to which the foundation reports or with which it is registered (see instructions)   |     |                                      |           |
|     | ► 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? <i>If "No," attach explanation.</i>  |     | <b>Yes</b>                           |           |
| 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 year 2019 or the taxable year beginning in 2019? See the instructions for Part XIV. <i>If "Yes," complete Part XIV</i> |     | <b>Yes</b>                           | <b>No</b> |
| 10  | Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>   |     | <b>Yes</b>                           | <b>No</b> |

**Part 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 meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions.   | 11                            | No  |
| 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                            | No  |
| 13  | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ►N/A  | 13                            | Yes   |
| 14  | The books are in care of ►Greg Kimble   | Telephone no. ►(330) 343-1226 |   |
| Located at ►4653 Old State Route 39 NW Dover OH |   |                               | ZIP+4 ►44622  |
| 15  | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —check here. . . . .  | ► 15                          | <input type="checkbox"/>  |
| 16  | At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? . . . . .<br>See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ► | 16                            | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required****File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

|     |   | 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?  | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| (2) | Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . .  | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| (3) | Furnish goods, services, or facilities to (or accept them from) a disqualified person?  | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| (4) | Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| (5) | Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? . . . . .   | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| (6) | Agree to pay money or property to a government official? ( <b>Exception.</b> 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.). . . . .  | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| b   | If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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. . . . .<br>Organizations relying on a current notice regarding disaster assistance check here. . . . . ► <input type="checkbox"/>  | 1b                           |  |
| 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                           | No                                     |
| 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)):  |                              |  |
| a   | At the end of tax year 2019, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2019? . . . . .<br>If "Yes," list the years ► 20____, 20____, 20____, 20____  | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 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 <b>all</b> years listed, answer "No" and attach statement—see instructions.) . . . . .   | 2b                           |  |
| c   | If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.<br>► 20____, 20____, 20____, 20____   |                              |  |
| 3a  | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . .  | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 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 Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2019.) . . . . . | 3b                           |  |
| 4a  | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?   | 4a                           | No                                     |
| 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                           | No                                     |

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**

|   |  |   |            |           |
|---|--|---|------------|-----------|
| <b>5a</b>   | During the year did the foundation pay or incur any amount to:   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <b>Yes</b> | <b>No</b> |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?   |  |   |            |           |
| <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |  |   |            |           |
| (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? . . . . .                   |  |   |            |           |
| <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |  |   |            |           |
| (3) Provide a grant to an individual for travel, study, or other similar purposes?  |  |   |            |           |
| <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |  |   |            |           |
| (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions. . . . .                                |  |   |            |           |
| <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |  |   |            |           |
| (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? . . . . . |  |   |            |           |
| <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |  |   |            |           |
| <b>b</b>  | If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions . . . . . | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <b>5b</b>  |           |
| Organizations relying on a current notice regarding disaster assistance check here. . . . . ► <input type="checkbox"/>  |  |   |            |           |
| <b>c</b>  | If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? . . . . .   | <input type="checkbox"/> Yes <input type="checkbox"/> No            |            |           |
| If "Yes," attach the statement required by Regulations section 53.4945–5(d).  |  |   |            |           |
| <b>6a</b>   | Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <b>6b</b>  | <b>No</b> |
| <b>b</b>  | Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <b>7b</b>  |           |
| If "Yes" to 6b, file Form 8870.   |  |   |            |           |
| <b>7a</b>   | At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |            |           |
| <b>b</b>  | If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction? . . . . .  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |            |           |
| <b>8</b>  | Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year? . . . . .  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |            |           |

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

|   |  |  |  |  |
|---|--|--|--|--|
| <b>1 List all officers, directors, trustees, foundation managers and their compensation. See instructions</b>                       |  |  |  |  |
| <b>(a) Name and address</b>   | <b>(b) Title, and average hours per week devoted to position</b> | <b>(c) Compensation (If not paid, enter -0-)</b> | <b>(d) Contributions to employee benefit plans and deferred compensation</b> | <b>(e) Expense account, other allowances</b> |
| Doris Kimble<br>3596 SR 39<br>Dover, OH 44622   | Trustee<br>8.00  | 0  | 0  | 0  |
| Greg Kimble<br>3596 SR 39<br>Dover, OH 44622  | Trustee<br>4.00  | 0  | 0  | 0  |
| Phillip Raber<br>2045 Pleasant Hill Dr<br>New Philadelphia, OH 44663  | Trustee<br>4.00  | 0  | 0  | 0  |
| Jo Mako<br>3596 SR 39<br>Dover, OH 44663  | Trustee<br>4.00  | 0  | 0  | 0  |
| <b>2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."</b> |  |  |  |  |
| <b>(a) Name and address of each employee paid more than \$50,000</b>  | <b>(b) Title, and average hours per week devoted to position</b> | <b>(c) Compensation</b>                          | <b>(d) Contributions to employee benefit plans and deferred compensation</b> | <b>(e) Expense account, other allowances</b> |
| NONE  |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
| Total number of other employees paid over \$50,000. . . . . ► 0   |  |  |  |  |



**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

|   |  |    |            |
|---|--|----|------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:        |    |            |
| a | Average monthly fair market value of securities. . . . .   | 1a | 37,926,606 |
| b | Average of monthly cash balances. . . . .  | 1b | 692,271    |
| c | Fair market value of all other assets (see instructions). . . . .  | 1c | 0          |
| d | <b>Total</b> (add lines 1a, b, and c). . . . .   | 1d | 38,618,877 |
| e | 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  | 38,618,877 |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . . | 4  | 579,283    |
| 5 | <b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4        | 5  | 38,039,594 |
| 6 | <b>Minimum investment return.</b> Enter 5% of line 5. . . . .  | 6  | 1,901,980  |

**Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign**Part XI** organizations check here ►  and do not complete this part.)

|    |  |    |           |
|----|--|----|-----------|
| 1  | Minimum investment return from Part X, line 6. . . . .   | 1  | 1,901,980 |
| 2a | Tax on investment income for 2019 from Part VI, line 5. . . . .  | 2a | 7,121     |
| b  | Income tax for 2019. (This does not include the tax from Part VI.). . . . .  | 2b |           |
| c  | Add lines 2a and 2b. . . . .   | 2c | 7,121     |
| 3  | Distributable amount before adjustments. Subtract line 2c from line 1. . . . .                                     | 3  | 1,894,859 |
| 4  | Recoveries of amounts treated as qualifying distributions. . . . .   | 4  | 0         |
| 5  | Add lines 3 and 4. . . . .   | 5  | 1,894,859 |
| 6  | Deduction from distributable amount (see instructions). . . . .  | 6  | 0         |
| 7  | <b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . . . . | 7  | 1,894,859 |

**Part XII Qualifying Distributions** (see instructions)

|  |  |    |           |
|--|--|----|-----------|
| 1  | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:   |    |           |
| a  | Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26. . . . .   | 1a | 2,239,707 |
| 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 charitable, etc., purposes. . . . .   | 2  |           |
| 3  | Amounts set aside for specific charitable projects that satisfy the:   |    |           |
| a  | Suitability test (prior IRS approval required). . . . .  | 3a |           |
| b  | Cash distribution test (attach the required schedule). . . . .   | 3b |           |
| 4  | <b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4  | 4  | 2,239,707 |
| 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  | 7,121     |
| 6  | <b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .   | 6  | 2,232,586 |
| <b>Note:</b> 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. |  |    |           |

**Part XIII Undistributed Income** (see instructions)

|  | (a)<br>Corpus | (b)<br>Years prior to 2018 | (c)<br>2018 | (d)<br>2019 |
|--|---------------|----------------------------|-------------|-------------|
| <b>1</b> Distributable amount for 2019 from Part XI, line 7  |               |                            |             | 1,894,859   |
| <b>2</b> Undistributed income, if any, as of the end of 2019:  |               |                            | 0           |             |
| <b>a</b> Enter amount for 2018 only. . . . .   |               |                            | 0           |             |
| <b>b</b> Total for prior years: 20____, 20____, 20____   |               | 0                          |             |             |
| <b>3</b> Excess distributions carryover, if any, to 2019:  |               |                            |             |             |
| <b>a</b> From 2014. . . . .  |               |                            |             |             |
| <b>b</b> From 2015. . . . .  |               |                            |             |             |
| <b>c</b> From 2016. . . . .  |               |                            |             |             |
| <b>d</b> From 2017. . . . .  | 42,225        |                            |             |             |
| <b>e</b> From 2018. . . . .  |               |                            |             |             |
| <b>f</b> <b>Total</b> of lines 3a through e. . . . .   | 42,225        |                            |             |             |
| <b>4</b> Qualifying distributions for 2019 from Part XII, line 4: ► \$ 2,239,707   |               |                            | 0           |             |
| <b>a</b> Applied to 2018, but not more than line 2a  |               |                            | 0           |             |
| <b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .  |               | 0                          |             |             |
| <b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .  | 0             |                            |             |             |
| <b>d</b> Applied to 2019 distributable amount. . . . .   |               |                            | 1,894,859   |             |
| <b>e</b> Remaining amount distributed out of corpus  | 344,848       |                            |             |             |
| <b>5</b> Excess distributions carryover applied to 2019.<br>(If an amount appears in column (d), the same amount must be shown in column (a).)   | 0             |                            |             | 0           |
| <b>6</b> <b>Enter the net total of each column as indicated below:</b>   | 387,073       |                            |             |             |
| <b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5   |               |                            |             |             |
| <b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b. . . . .   |               | 0                          |             |             |
| <b>c</b> 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                          |             |             |
| <b>d</b> Subtract line 6c from line 6b. Taxable amount—see instructions . . . . .  |               | 0                          |             |             |
| <b>e</b> Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions . . . . .   |               |                            | 0           |             |
| <b>f</b> Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020 . . . . .   |               |                            |             | 0           |
| <b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . .      | 0             |                            |             |             |
| <b>8</b> Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions) . . . . .   | 0             |                            |             |             |
| <b>9</b> <b>Excess distributions carryover to 2020.</b><br>Subtract lines 7 and 8 from line 6a . . . . .   | 387,073       |                            |             |             |
| <b>10</b> Analysis of line 9:  |               |                            |             |             |
| <b>a</b> Excess from 2015. . . . .   |               |                            |             |             |
| <b>b</b> Excess from 2016. . . . .   |               |                            |             |             |
| <b>c</b> Excess from 2017. . . . .   | 42,225        |                            |             |             |
| <b>d</b> Excess from 2018. . . . .   |               |                            |             |             |
| <b>e</b> Excess from 2019. . . . .   | 344,848       |                            |             |             |

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

|     |  |  |  |  |
|-----|--|--|--|--|
| 1a  | If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling. ► |  |  |  |
| b   | Check box to indicate whether the organization is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5) |  |  |  |
| 2a  | Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed.   |  |  |  |
| b   | 85% of line 2a.  |  |  |  |
| c   | Qualifying distributions from Part XII, line 4 for each year listed.   |  |  |  |
| d   | Amounts included in line 2c not used directly for active conduct of exempt activities.   |  |  |  |
| e   | Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c.   |  |  |  |
| 3   | Complete 3a, b, or c for the alternative test relied upon:   |  |  |  |
| a   | "Assets" alternative test—enter:   |  |  |  |
| (1) | Value of all assets.   |  |  |  |
| (2) | Value of assets qualifying under section 4942(j)(3)(B)(i).   |  |  |  |
| b   | "Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.  |  |  |  |
| c   | "Support" alternative test—enter:  |  |  |  |
| (1) | Total support other than gross investment income (interest, dividends, rents, payments 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.   |  |  |  |

**Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)****1 Information Regarding Foundation Managers:**

- a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)  
Doris Kimble

- b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

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

Check here ►  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions

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

Gregory Kimble Trustee  
PO BOX 67  
Dover, OH 44622  
(330) 407-2890

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

Written requests

- c Any submission deadlines:

None

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

None

**Part XV Supplementary Information (continued)****3 Grants and Contributions Paid During the Year or Approved for Future Payment**

| Recipient<br>Name and address (home or business)           | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution | Amount    |
|--|--|--------------------------------------|-------------------------------------|-----------|
| <i>a Paid during the year</i><br>See Additional Data Table |  |                                      |                                     |           |
| <b>Total</b> . . . . .                                     |  |                                      | ► 3a                                | 2,216,998 |
| <i>b Approved for future payment</i>                       |  |                                      |                                     |           |
| <b>Total</b> . . . . .                                     |  |                                      | ► 3b                                | 0         |

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

| Enter gross amounts unless otherwise indicated. |   | Unrelated business income |               | Excluded by section 512, 513, or 514 | (e)<br>Related or exempt<br>function income<br>(See instructions.) |
|---|---|---------------------------|---------------|--------------------------------------|--|
| 1   | Program service revenue:                                      | (a)<br>Business code      | (b)<br>Amount | (c)<br>Exclusion code                |  |
| a   |   |                           |               |                                      |  |
| b   |   |                           |               |                                      |  |
| c   |   |                           |               |                                      |  |
| d   |   |                           |               |                                      |  |
| e   |   |                           |               |                                      |  |
| f   |   |                           |               |                                      |  |
| g   | Fees and contracts from government agencies                   |                           |               |                                      |  |
| 2   | Membership dues and assessments.                              |                           |               |                                      |  |
| 3   | Interest on savings and temporary cash investments            |                           |               | 14                                   | 200,716  |
| 4   | Dividends and interest from securities.                       |                           |               | 14                                   | 381,250  |
| 5   | Net rental income or (loss) from real estate:                 |                           |               |                                      |  |
| a   | Debt-financed property.                                       |                           |               |                                      |  |
| 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      |                           |               | 14                                   | 531,323  |
| 9   | Net income or (loss) from special events:                     |                           |               |                                      |  |
| 10  | Gross profit or (loss) from sales of inventory                |                           |               |                                      |  |
| 11  | Other revenue:  |                           |               |                                      |  |
| a   | WLR Recovery IV Investors                                     |                           |               | 14                                   | 1,334  |
| b   | AT MLP Fund   |                           |               | 14                                   | -70,511  |
| c   | Encap Flatrock  |                           |               | 14                                   | -85,925  |
| d   |   |                           |               |                                      |  |
| e   |   |                           |               |                                      |  |
| 12  | Subtotal. Add columns (b), (d), and (e).                      |                           | 0             |                                      | 958,187  |
| 13  | Total. Add line 12, columns (b), (d), and (e).                |                           |               | 13                                   | 958,187  |
|   | (Carry over amount in line 12, instruction 1, if applicable.) |                           |               |                                      |  |

**Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes**



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

| Recipient  | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution | Amount    |
|--|--|--------------------------------------|-------------------------------------|-----------|
| Name and address (home or business)  |  |                                      |                                     |           |
| <b>a Paid during the year</b>  |  |                                      |                                     |           |
| Akron Children's Hospital<br>1 Perkins Square<br>Akron, OH 44308           | N/A  | Public                               | Support medical research            | 400,000   |
| Antrim Fire Dept<br>20138 Cadiz Rd<br>Freeport, OH 43973                   | N/A  | Public                               | Funding for emergency services      | 10,000    |
| Antrim Presbyterian Cemetery Assoc<br>20138 Cadiz Rd<br>Freeport, OH 43973 | N/A  | Public                               | Sustaining support                  | 1,000     |
| <b>Total . . . . .</b>   |  |                                      | ► 3a                                | 2,216,998 |

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

| Recipient  | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution | Amount    |
|--|--|--------------------------------------|-------------------------------------|-----------|
| Name and address (home or business)  |  |                                      |                                     |           |
| <b>a Paid during the year</b>  |  |                                      |                                     |           |
| Barnesville Hospital Fdn<br>639 W Main St<br>Barnesville, OH 43713                     | N/A  | Public                               | Sustaining support                  | 10,000    |
| Big Brothers Big Sisters<br>115 Canton Rd NW<br>Carrollton, OH 44615                   | N/A  | Public                               | Sustaining support                  | 15,000    |
| Buckeye Career Center Foundation<br>545 University Dr NE<br>New Philadelphia, OH 44663 | N/A  | Public                               | Educational programs                | 5,000     |
| <b>Total . . . . .</b>   |  |                                      | ► 3a                                | 2,216,998 |

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

| Recipient  | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount    |
|--|---|--------------------------------|----------------------------------|-----------|
| Name and address (home or business)  |   |                                |                                  |           |
| <i>a Paid during the year</i>  |   |                                |                                  |           |
| Buckeye Council Boy Scouts of America<br>2301 13th St NW<br>Canton, OH 44708 | N/A   | Public                         | Sustaining Support               | 10,000    |
| Cambridge YMCA Family Center<br>1301 Cambridge Avenue<br>Cambridge, OH 43725 | N/A   | Public                         | Sustaining support               | 5,000     |
| Camp Tuscazoar Foundation Inc<br>6066 Boy Scout Rd NE<br>Dover, OH 44622     | N/A   | Public                         | Sustaining Support               | 10,000    |
| <b>Total . . . . .</b>   |   |                                | ► 3a                             | 2,216,998 |

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

| Recipient   | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount    |
|---|---|--------------------------------|----------------------------------|-----------|
| Name and address (home or business)   |   |                                |                                  |           |
| <b>a Paid during the year</b>   |   |                                |                                  |           |
| Camp Zimmerman Foundation<br>10397 Williams Rd SW<br>Gnadenhutten, OH 44629         | N/A   | Public                         | Sustaining support               | 10,000    |
| Canion Country Day School<br>3000 Demington Ave NW<br>Canion, OH 44718              | N/A   | Public                         | Educational programs             | 10,000    |
| Carroll County Agricultural Society<br>160 Kensington Rd NE<br>Carrollton, OH 44615 | N/A   | Public                         | Sustaining support               | 10,000    |
| <b>Total . . . . .</b>  |   |                                | ► 3a                             | 2,216,998 |

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

| Recipient   | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount    |
|---|---|--------------------------------|----------------------------------|-----------|
| Name and address (home or business)   |   |                                |                                  |           |
| <i>a Paid during the year</i>   |   |                                |                                  |           |
| Case Western Reserve Univ Hospital<br>10900 Euclid Ave<br>Cleveland, OH 44106 | N/A   | Public                         | Sustaining Support               | 100,000   |
| Community Hospice<br>201 W Third Street<br>Dover, OH 44622                    | N/A   | Public                         | Sustaining support               | 100,000   |
| Dennision Rail Road Festival<br>PO Box 222<br>Dennison, OH 44621              | N/A   | Public                         | Sustaining Support               | 10,000    |
| <b>Total . . . . .</b>  |   |                                | ► 3a                             | 2,216,998 |

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

| Recipient  | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount    |
|--|---|--------------------------------|----------------------------------|-----------|
| Name and address (home or business)                            |   |                                |                                  |           |
| <i>a Paid during the year</i>                                  |   |                                |                                  |           |
| Dennison Fire Department<br>302 Grant St<br>Dennison, OH 44621 | N/A   | Public                         | Sustaining Support               | 20,000    |
| Dover City Schools<br>219 West 6th Street<br>Dover, OH 44622   | N/A   | Public                         | Sustaining Support               | 90,000    |
| Dover Historical Society<br>325 E Iron Ave<br>Dover, OH 44622  | N/A   | Public                         | Sustaining support               | 5,000     |
| <b>Total . . . . .</b>   |   |                                | ► 3a                             | 2,216,998 |

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

| Recipient   | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount    |
|---|---|--------------------------------|----------------------------------|-----------|
| Name and address (home or business)                               |   |                                |                                  |           |
| <i>a Paid during the year</i>                                     |   |                                |                                  |           |
| Dover Public Library<br>525 N Walnut St<br>Dover, OH 44622        | N/A   | Public                         | Sustaining support               | 10,000    |
| EAA Chapter 1077727<br>27 Davis Rd SE<br>Gnadenhutten, OH 44629   | N/A   | Public                         | Harry Cleaver Field              | 3,000     |
| FFA Camp Muskingham<br>3266 Dyewood Rd SW<br>Carrollton, OH 44615 | N/A   | Public                         | Sustaining support               | 5,000     |
| <b>Total . . . . .</b>  |   |                                | ► 3a                             | 2,216,998 |

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

| Recipient  | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount    |
|--|---|--------------------------------|----------------------------------|-----------|
| Name and address (home or business)  |   |                                |                                  |           |
| <b>a Paid during the year</b>  |   |                                |                                  |           |
| Friends of Adult Education Buckeye<br>Career<br>PO Box 132<br>New Philadelphia, OH 44663 | N/A   | Public                         | Sustaining support               | 1,000     |
| Friends of the Homeless<br>PO Box 466<br>New Philadelphia, OH 44663                      | N/A   | Public                         | Sustaining support               | 15,000    |
| Greater Dover-New Philadelphia Food<br>Pantry<br>420 W 3rd Street<br>Dover, OH 44622     | N/A   | Public                         | Sustaining support               | 30,000    |
| <b>Total . . . . .</b>   |   |                                | ► 3a                             | 2,216,998 |

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

| Recipient   | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution | Amount    |
|---|--|--------------------------------------|-------------------------------------|-----------|
| Name and address (home or business)                                   |  |                                      |                                     |           |
| <b>a Paid during the year</b>   |  |                                      |                                     |           |
| Health Care for the Homeless<br>1934 Caroline St<br>Houston, TX 77002 | N/A  | Public                               | Sustaining support                  | 15,000    |
| Hope Clinic of Coshocton<br>131 S 6th St<br>Coshocton, OH 43812       | N/A  | Public                               | Sustaining support                  | 15,000    |
| Hospice of Guernsey Co<br>1341 Clark Street<br>Cambridge, OH 43725    | N/A  | Public                               | Sustaining support                  | 10,000    |
| <b>Total . . . . .</b>  |  |                                      | ► 3a                                | 2,216,998 |

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

| Recipient   | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution | Amount    |
|---|--|--------------------------------------|-------------------------------------|-----------|
| Name and address (home or business)                                   |  |                                      |                                     |           |
| <b>a Paid during the year</b>   |  |                                      |                                     |           |
| Journey's End Ministries<br>205 S River St<br>Newcomerstown, OH 43832 | N/A  | Public                               | Sustaining support                  | 10,000    |
| JRC Capital Campaign<br>1731 Grace Avenue NE<br>Canton, OH 44705      | N/A  | Public                               | Sustaining Support                  | 200,000   |
| Malone University<br>2600 Cleveland Ave NW<br>Canton, OH 44709        | N/A  | Public                               | Sustaining support                  | 5,000     |
| <b>Total . . . . .</b>  |  |                                      | ► 3a                                | 2,216,998 |

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

| Recipient   | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount    |
|---|---|--------------------------------|----------------------------------|-----------|
| Name and address (home or business)   |   |                                |                                  |           |
| <i>a Paid during the year</i>   |   |                                |                                  |           |
| Marietta College<br>215 5th Street<br>Marietta, OH 45750                          | N/A   | Public                         | Sustaining support               | 5,000     |
| Memorial Sloan-Kettering Cancer Center<br>1275 York Ave<br>New York, NY 10065     | N/A   | Public                         | Support for medical assistance   | 5,000     |
| Mennonite Central Committee<br>Greatlakes<br>1013 Division St<br>Goshen, IN 46528 | N/A   | Public                         | Sustaining Support               | 10,000    |
| <b>Total . . . . .</b>  |   |                                | ► 3a                             | 2,216,998 |

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| Recipient  | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount    |
|--|---|--------------------------------|----------------------------------|-----------|
| Name and address (home or business)  |   |                                |                                  |           |
| <i>a Paid during the year</i>  |   |                                |                                  |           |
| Mercy Development Foundation<br>1320 Mercy Dr NW<br>Canton, OH 44708                   | N/A   | Public                         | Sustaining Support               | 50,000    |
| Muskingum Lakes American Red Cross<br>1451 4th Street NE<br>New Philadelphia, OH 44663 | N/A   | Public                         | Sustaining support               | 5,000     |
| New Life Ministries Food Pantry<br>727 S 7th St<br>Coshocton, OH 43812                 | N/A   | Public                         | Sustaining support               | 10,000    |
| <b>Total . . . . .</b>   |   |                                | ► 3a                             | 2,216,998 |

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

| Recipient   | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount    |
|---|---|--------------------------------|----------------------------------|-----------|
| Name and address (home or business)   |   |                                |                                  |           |
| <b>a Paid during the year</b>   |   |                                |                                  |           |
| Newcomerstown Exempted Village Schools<br>702 S River St<br>Newcomerstown, OH 43832 | N/A   | Public                         | Sustaining Support               | 24,000    |
| Norma Johnson Center<br>85 E Iron Ave<br>Dover, OH 44622                            | N/A   | Public                         | Sustaining support               | 5,000     |
| Ohio Hills Health Services Foundation<br>101 E Main St<br>Barnesville, OH 43713     | N/A   | Public                         | Sustaining Support               | 50,000    |
| <b>Total . . . . .</b>  |   |                                | ► 3a                             | 2,216,998 |

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| Recipient   | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution | Amount    |
|---|--|--------------------------------------|-------------------------------------|-----------|
| Name and address (home or business)   |  |                                      |                                     |           |
| <b>a Paid during the year</b>   |  |                                      |                                     |           |
| Ohio Oil & Gas Energy Ed Program<br>PO Box 187 1718 Columbus Rd SW<br>Granville, OH 43023 | N/A  | Public                               | Sustaining support                  | 10,000    |
| Ohio Outdoor Drama Assoc<br>PO Box 450<br>New Philadelphia, OH 44663                      | N/A  | Public                               | Sustaining support for the arts     | 76,000    |
| Perry Twp Search & Rescue Inc<br>4561 Phillips Fork Rd SE<br>Port Washington, OH 43837    | N/A  | Public                               | Sustaining Support                  | 10,000    |
| <b>Total . . . . .</b>  |  |                                      | ► 3a                                | 2,216,998 |

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| Recipient   | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount    |
|---|---|--------------------------------|----------------------------------|-----------|
| Name and address (home or business)   |   |                                |                                  |           |
| <b>a Paid during the year</b>   |   |                                |                                  |           |
| Project - Baltic Local Schools<br>300 E Main St<br>Baltic, OH 43804                 | N/A   | Public                         | Facilities Project               | 24,338    |
| Project - Dennison Railroad Depot<br>Museum<br>PO Box 11<br>Dennison, OH 44621      | N/A   | Public                         | Sustaining support               | 5,400     |
| Project - Dundee Local Schools<br>8072 School Street PO Box 145<br>Dundee, OH 44624 | N/A   | Public                         | Facility project                 | 8,740     |
| <b>Total . . . . .</b>  |   |                                | ► 3a                             | 2,216,998 |

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| Recipient  | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount    |
|--|---|--------------------------------|----------------------------------|-----------|
| Name and address (home or business)  |   |                                |                                  |           |
| <i>a Paid during the year</i>  |   |                                |                                  |           |
| Project - Elkhorn Church<br>5247 SR 516 NW<br>New Philadelphia, OH 44663         | N/A   | Public                         | Building Project                 | 815       |
| Project - Tappan Church<br>5247 SR 516 NW<br>New Philadelphia, OH 44663          | N/A   | Public                         | Building Project                 | 2,476     |
| Project - Tusc Amateur Radio<br>2295 Reiser Ave SE<br>New Philadelphia, OH 44663 | N/A   | Public                         | Sustaining                       | 258       |
| <b>Total . . . . .</b>   |   |                                | ► 3a                             | 2,216,998 |

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| Recipient  | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount    |
|--|---|--------------------------------|----------------------------------|-----------|
| Name and address (home or business)  |   |                                |                                  |           |
| <i>a Paid during the year</i>  |   |                                |                                  |           |
| Project - Tuscarawas Co Fair 4H<br>259 S Tuscarawas Ave<br>Dover, OH 44622             | N/A   | Public                         | Sustaining Support               | 46,553    |
| Project - UMC Mission Trip McDowell WV<br>5247 SR 516 NW<br>New Philadelphia, OH 44663 | N/A   | Public                         | Building Project                 | 12,078    |
| Project - UMC Mission Trip<br>5247 SR 516 NW<br>Dover, OH 44622                        | N/A   | Public                         | Building Project                 | 6,595     |
| <b>Total . . . . .</b>   |   |                                | ► 3a                             | 2,216,998 |

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|---|--|--------------------------------------|-------------------------------------|-----------|
| Name and address (home or business)   |  |                                      |                                     |           |
| <b>a Paid during the year</b>   |  |                                      |                                     |           |
| Project - UMC Hindman KY<br>27 Cokesbury Road<br>Hindman, KY 41822            | N/A  | Public                               | Building Improvements               | 5,745     |
| Ragersville Historical Society<br>8800 Crooked Run Rd<br>Sugarcreek, OH 44681 | N/A  | Public                               | Sustaining Support                  | 5,000     |
| Rainbow Connection<br>119 3rd St NW<br>New Philadelphia, OH 44663             | N/A  | Public                               | Sustaining support                  | 15,000    |
| <b>Total . . . . .</b>  |  |                                      | ► 3a                                | 2,216,998 |

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| Recipient  | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution | Amount    |
|--|--|--------------------------------------|-------------------------------------|-----------|
| Name and address (home or business)  |  |                                      |                                     |           |
| <b>a Paid during the year</b>  |  |                                      |                                     |           |
| Samaritan's Purse PO Box 3000<br>Boone, NC 28607                             | N/A  | Public                               | Sustaining Support                  | 1,000     |
| Senior Center of Tuscarawas County<br>425 Prospect Street<br>Dover, OH 44622 | N/A  | Public                               | Sustaining support                  | 50,000    |
| Shriners' Hospital for Children<br>2900 Rocky Point Dr<br>Tampa, FL 33607    | N/A  | Public                               | Support for medical assistance      | 30,000    |
| <b>Total . . . . .</b>   |  |                                      | ► 3a                                | 2,216,998 |

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|--|--|--------------------------------------|-------------------------------------|-----------|
| Name and address (home or business)                                    |  |                                      |                                     |           |
| <b>a Paid during the year</b>  |  |                                      |                                     |           |
| Southeastern Med<br>1341 Clark Street<br>Cambridge, OH 43725           | N/A  | Public                               | Sustaining Support                  | 50,000    |
| Stark Community Foundation<br>400 Market Ave N<br>Canton, OH 44702     | N/A  | Public                               | Sustaining support                  | 10,000    |
| Stark State College Fdn<br>6200 Frank Ave NW<br>North Canton, OH 44720 | N/A  | Public                               | Sustaining support                  | 10,000    |
| <b>Total . . . . .</b>   |  |                                      | ► 3a                                | 2,216,998 |

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|---|--|--------------------------------------|-------------------------------------|-----------|
| Name and address (home or business)   |  |                                      |                                     |           |
| <b>a Paid during the year</b>   |  |                                      |                                     |           |
| Starlite Enterprises<br>400 East High Ave PO Box 1054<br>New Philadelphia, OH 44663 | N/A  | Public                               | Sustaining support                  | 10,000    |
| The Salvation Army of Stark County<br>315 6th Street NE<br>Massillon, OH 44646      | N/A  | Public                               | Sustaining support                  | 10,000    |
| Tunnel Hill Community Center<br>PO Box 84<br>Stone Creek, OH 43840                  | N/A  | Public                               | Sustaining support                  | 5,000     |
| <b>Total . . . . .</b>  |  |                                      | ► 3a                                | 2,216,998 |

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|--|---|--------------------------------|----------------------------------|-----------|
| Name and address (home or business)  |   |                                |                                  |           |
| <b>a Paid during the year</b>  |   |                                |                                  |           |
| Tusc Co - Auburn Township<br>11010 East Washington Street<br>Auburn Township, OH 44023   | N/A   | Public                         | Sustaining Support               | 10,000    |
| Tusc Co - Bucks Township<br>Bucks Township<br>New Philadelphia, OH 43804                 | N/A   | Public                         | Sustaining Support               | 10,000    |
| Tusc Co Council for Church & Community<br>1458 Fifth St NW<br>New Philadelphia, OH 44663 | N/A   | Public                         | T-4-C & Character Formation      | 20,000    |
| <b>Total . . . . .</b>   |   |                                | ► 3a                             | 2,216,998 |

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|---|--|--------------------------------------|-------------------------------------|-----------|
| Name and address (home or business)   |  |                                      |                                     |           |
| <b>a Paid during the year</b>   |  |                                      |                                     |           |
| Tuscarasas Co Farm Bureau<br>2146 E High Ave<br>New Philadelphia, OH 44663            | N/A  | Public                               | Sustaining Support                  | 5,000     |
| Tuscarawas Center for the Arts<br>461 Robinson Dr SE<br>New Philadelphia, OH 44663    | N/A  | Public                               | Sustaining support for the arts     | 10,000    |
| Tuscarawas Clinic for Working<br>Uninsured<br>614 N Tuscarawas Ave<br>Dover, OH 44622 | N/A  | Public                               | Sustaining support                  | 10,000    |
| <b>Total . . . . .</b>  |  |                                      | ► 3a                                | 2,216,998 |

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|--|---|--------------------------------|----------------------------------|-----------|
| Name and address (home or business)  |   |                                |                                  |           |
| <i>a Paid during the year</i>  |   |                                |                                  |           |
| Tuscarawas Co Challenger Little League<br>PO Box 475<br>New Philadelphia, OH 44663 | N/A   | Public                         | Sustaining Support               | 3,000     |
| Tuscarawas Co University Fdn<br>330 University Dr NE<br>New Philadelphia, OH 44663 | N/A   | Public                         | Performing Arts Proj.            | 10,000    |
| Tuscarawas Co Trail Commission<br>125 E High Ave<br>New Philadelphia, OH 44663     | N/A   | Public                         | Sustaining Support               | 10,000    |
| <b>Total . . . . .</b>   |   |                                | ► 3a                             | 2,216,998 |

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|---|--|--------------------------------------|-------------------------------------|-----------|
| Name and address (home or business)   |  |                                      |                                     |           |
| <b>a Paid during the year</b>   |  |                                      |                                     |           |
| Tuscarawas Co YMCA600 Monroe St<br>Dover, OH 44622  | N/A  | Public                               | Capital Campaign                    | 50,000    |
| Tuscarawas County Amateur Radio<br>2295 Reiser Ave SE<br>New Philadelphia, OH 44663           | N/A  | Public                               | Sustaining Support                  | 5,000     |
| Tuscarawas County Historical Society<br>300 University Drive NE<br>New Philadelphia, OH 44663 | N/A  | Public                               | Sustaining support                  | 5,000     |
| <b>Total . . . . .</b>  |  |                                      | ► 3a                                | 2,216,998 |

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|--|--|--------------------------------------|-------------------------------------|-----------|
| Name and address (home or business)  |  |                                      |                                     |           |
| <b>a Paid during the year</b>  |  |                                      |                                     |           |
| Tuscarawas County Humane Society<br>1432 Tall Timber Rd NE<br>New Philadelphia, OH 44663 | N/A  | Public                               | Sustaining Support                  | 5,000     |
| Tuscarawas Philharmonic PO Box 406<br>New Philadelphia, OH 44663                         | N/A  | Public                               | Sustaining support                  | 5,000     |
| Twin City Hospital Capital Fund<br>819 N First St<br>Dennison, OH 44621                  | N/A  | Public                               | Support for medical assistance      | 20,000    |
| <b>Total . . . . .</b>   |  |                                      | ► 3a                                | 2,216,998 |

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|--|--|--------------------------------------|-------------------------------------|-----------|
| Name and address (home or business)  |  |                                      |                                     |           |
| <b>a Paid during the year</b>  |  |                                      |                                     |           |
| Union Hospital<br>659 Boulevard<br>Dover, OH 44622                             | N/A  | Public                               | Sustaining support                  | 10,000    |
| United Way Inc - Tuscarawas Co<br>204 W High Ave<br>New Philadelphia, OH 44663 | N/A  | Public                               | Sustaining support                  | 40,000    |
| United Way of Gr Stark Co<br>401 Market Ave N 300<br>Canton, OH 44702          | N/A  | Public                               | Sustaining Support                  | 60,000    |
| <b>Total . . . . .</b>   |  |                                      | ► 3a                                | 2,216,998 |

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|--|---|--------------------------------|----------------------------------|-----------|
| Name and address (home or business)                          |   |                                |                                  |           |
| <i>a Paid during the year</i>                                |   |                                |                                  |           |
| University Hospitals<br>1320 Mercy Dr NW<br>Canton, OH 44708 | N/A   | Public                         | Sustaining support               | 200,000   |
| University of Findlay<br>1000 N Main St<br>Findlay, OH 45840 | N/A   | Public                         | Sustaining support               | 5,000     |
| Wheels of Hope<br>9800 Morges Dr SE<br>Waynesburg, OH 44688  | N/A   | Public                         | Sustaining Support               | 5,000     |
| <b>Total . . . . .</b>                                       |   |                                | ► 3a                             | 2,216,998 |

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

| Recipient  | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount    |
|--|---|--------------------------------|----------------------------------|-----------|
| Name and address (home or business)  |   |                                |                                  |           |
| <b>a Paid during the year</b>  |   |                                |                                  |           |
| York Volunteer Fire Department<br>1576 Stonecreek Rd<br>New Philadelphia, OH 44663 | N/A   | Public                         | Sustaining Support               | 10,000    |
| <b>Total . . . . .</b>   |   |                                | ► 3a                             | 2,216,993 |

## TY 2019 Accounting Fees Schedule

**Name:** Doris & Floyd Kimble Foundation

**EIN:** 34-1622273

| Category        | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|-----------------|--------|-----------------------|---------------------|---------------------------------------|
| Accounting fees | 18,207 | 9,103                 |                     | 9,103                                 |

## TY 2019 Investments Corporate Bonds Schedule

**Name:** Doris & Floyd Kimble Foundation

**EIN:** 34-1622273

### Investments Corporate Bonds Schedule

| Name of Bond    | End of Year Book Value | End of Year Fair Market Value |
|-----------------|------------------------|-------------------------------|
| Corporate bonds | 6,910,678              | 7,049,502                     |

## TY 2019 Investments Corporate Stock Schedule

**Name:** Doris & Floyd Kimble Foundation

**EIN:** 34-1622273

### Investments Corporation Stock Schedule

| Name of Stock | End of Year Book Value | End of Year Fair Market Value |
|---------------|------------------------|-------------------------------|
| Common stocks | 14,811,803             | 22,676,027                    |

## TY 2019 Investments - Other Schedule

**Name:** Doris & Floyd Kimble Foundation

**EIN:** 34-1622273

### Investments Other Schedule 2

| <b>Category/ Item</b>         | <b>Listed at Cost or<br/>FMV</b> | <b>Book Value</b> | <b>End of Year Fair<br/>Market Value</b> |
|-------------------------------|----------------------------------|-------------------|--|
| Other investments             | AT COST                          | 1,600,000         | 2,675,210                                |
| WLR Recovery Fund             | AT COST                          | 32,278            | 55,343                                   |
| Encap Flat Rock               | AT COST                          | 35,708            | 377,978                                  |
| AP Energy Infrastructure Fund | AT COST                          | 3,150,856         | 3,918,007                                |

**TY 2019 Land, Etc.  
Schedule**

**Name:** Doris & Floyd Kimble Foundation  
**EIN:** 34-1622273

| <b>Category / Item</b> | <b>Cost / Other Basis</b> | <b>Accumulated Depreciation</b> | <b>Book Value</b> | <b>End of Year Fair Market Value</b> |
|------------------------|---------------------------|---------------------------------|-------------------|--------------------------------------|
| Building - Antrim      | 11,421,537                | 0                               | 11,421,537        | 11,421,537                           |
| Equipment              | 2,477,668                 | 2,477,668                       | 0                 |                                      |
| Office Equipment       | 40,424                    | 40,424                          | 0                 |                                      |
| Vehicles               | 368,072                   | 349,818                         | 18,254            | 18,254                               |

## TY 2019 Other Expenses Schedule

**Name:** Doris & Floyd Kimble Foundation  
**EIN:** 34-1622273

## Other Expenses Schedule

| Description        | Revenue and Expenses per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|--------------------|--------------------------------|-----------------------|---------------------|---------------------------------------|
| General insurance  | 7,838                          | 3,919                 |                     | 3,919                                 |
| Licenses & permits | 382                            | 0                     |                     | 382                                   |
| Supplies           | 1,464                          | 146                   |                     | 1,318                                 |
| Misc. Expense      | 946                            | 0                     |                     | 946                                   |
| Telephone          | 806                            | 0                     |                     | 806                                   |
| Service Charge     | 312                            | 156                   |                     | 156                                   |
| Office Supplies    | 5,237                          | 0                     |                     | 5,237                                 |
| Travel Expense     | 158                            | 0                     |                     | 158                                   |
| Repairs            | 311                            | 0                     |                     | 311                                   |
| Postage            | 173                            | 0                     |                     | 173                                   |

## Other Expenses Schedule

| Description  | Revenue and Expenses per Books | Adjusted Net Income | Disbursements for Charitable Purposes |
|--------------|--------------------------------|---------------------|---------------------------------------|
| Amortization | 10,989                         | 10,989              | 0                                     |

## TY 2019 Other Income Schedule

**Name:** Doris & Floyd Kimble Foundation**EIN:** 34-1622273**Other Income Schedule**

| Description               | Revenue And Expenses Per Books | Net Investment Income | Adjusted Net Income |
|---------------------------|--------------------------------|-----------------------|---------------------|
| WLR Recovery IV Investors | 1,334                          | 1,334                 | 1,334               |
| AT MLP Fund               | -70,511                        | -70,511               | -70,511             |
| Encap Flatrock            | -85,925                        | -85,925               | -85,925             |

## TY 2019 Other Professional Fees Schedule

**Name:** Doris & Floyd Kimble Foundation

**EIN:** 34-1622273

| <b>Category</b> | <b>Amount</b> | <b>Net Investment Income</b> | <b>Adjusted Net Income</b> | <b>Disbursements for Charitable Purposes</b> |
|-----------------|---------------|------------------------------|----------------------------|--|
| Investment fees | 213,828       | 213,828                      |                            | 0  |

## TY 2019 Taxes Schedule

**Name:** Doris & Floyd Kimble Foundation

**EIN:** 34-1622273

| <b>Category</b>  | <b>Amount</b> | <b>Net Investment Income</b> | <b>Adjusted Net Income</b> | <b>Disbursements for Charitable Purposes</b> |
|------------------|---------------|------------------------------|----------------------------|--|
| Ohio filing fees | 200           | 0                            |                            | 200  |
| Foreign Taxes    | 7,913         | 7,913                        |                            | 0  |