Form **990-PF** Department of the Treasury Internal Revenue Service RECEIVED

SEP 2 1 2020

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

Do not enter social security numbers on this form as it may be matter by the Foundation.

Go to www.irs.gov/Form990PF for instructions and the latest-information.

	For	calen	dar year 2019 or tax year beginn	ing			, and e	nding		
	Nar	me of	foundation		_				A Employer identification	number
	S	EAI	AMAN FAMILY FOUNDATION TRUST					34-1770650		
	Nun	iber a	nd street (or PO box number if mail is no	ot delivered to street a	ddress)			Room/suite	B Telephone number	
	_1	00	VENTURE BOULE	VARD					330-262-11	11
<u>, </u>	City	y or to	own, state or province, country, ar	d ZIP or foreign p	ostal co	de			C If exemption application is p	ending, check here
3/	W	00	STER, OH 44691							
10	G	heck	all that apply Initial r	eturn		Initial return of a fo	ormer public o	harity	D 1 Foreign organizations	s, check here
	/		Final re	eturn		Amended return				
•			Addres	s change		Name change			Foreign organizations me check here and attach co	mputation
	H C	Check	type of organization: X Se	ection 501(c)(3) ex	empt pr	ivate foundation		ρ_0	E If private foundation sta	tus was terminated
		Se	ction 4947(a)(1) nonexempt chari	table trust	Other ta	xable private founda	ition	<u> </u>	under section 507(b)(1)	
	l Fa	air ma	rket value of all assets at end of y	ear J Accounti	ng meth	od 🗶 Cash	Accr	ual	F If the foundation is in a	60-month termination
	(fr	rom F	art II, col (c), line 16)		ther (spe		_		under section 507(b)(1)	(B), check here
		\$	4,784,86	2 . (Part I, colun	nn (d), n	nust be on cash bas	s)			
	Pa	art I	Analysis of Revenue and Expen (The total of amounts in columns (b), (c	Ses) Revenue and	(b) Net in		(c) Adjusted net	(d) Disbursements for charitable purposes
			necessarily equal the amounts in colur	nn (a))	exp	ienses per books	inco	ime	income	(cash basis only)
		1	Contributions, gitts, grants, etc.,	received		270,084.			N/A	<u> </u>
		2	Check I if the foundation is not req	uired to attach Sch. B	L					
		3	Interest on savings and temporary cash investments							!
		4	Dividends and interest from secu	rities		84,555.	8	<u>4,555.</u>	`	STATEMENT 1
		5a	Gross rents							1
		b	Net rental income or (loss)	_						
	41	6a	Net gain or (loss) from sale of assets no			170,499.				
	ž	b	Gross sales price for all assets on line 6a	<u>46,067.</u>						
	Reven	7	Capital gain net income (from Part IV, lin	ne 2)			17	0,499.		
t	<u>~</u>	8	Net short-term capital gain							
		9	Income modifications							
		10a	Gross sales less returns and allowances							
`		b	Less Cost of goods sold							<u> </u>
i		C	Gross profit or (loss)						·	
:		11	Other income			25.	0.5	0.		STATEMENT 2
-		12	Total. Add lines 1 through 11		<u> </u>	525,163.	25	5,054.		<u> </u>
5		13	Compensation of officers, directors, true			0.		0.		0.
3		14	Other employee salaries and wag							
		15	Pension plans, employee benefits							
	(23)	4	Legal fees							
,		1	Accounting fees							<u> </u>
ı	N		Other professional fees	,	<u> </u>					
	N		Interest	amra 3		2 512		207	<u>.</u>	
1	N	18	Taxes	STMT 3		2,512.		297.		0.
	₩		Depreciation and depletion					-		,
	泛	20	Occupancy		<u> </u>				-	
	~ ₹	21	Travel, conferences, and meeting	S	<u> </u>				-	
	₩.	22	Printing and publications	CMMM 4		10 400		0 200		200.
	8262 JAN 8 7 2021	23	Other expenses	STMT 4	<u> </u>	19,409.	<u> </u>	9,209.		200.
	7	24	Total operating and administrati			21,921.	1	9,506.		200.
	500	٠.	expenses. Add lines 13 through	۷٥		183,878.	<u> </u>	.,500.		183,878.
	-1	25	Contributions, gifts, grants paid		\vdash	103,070.	.			103,070.
$\sqrt{11}$	~	26	Total expenses and disbursemen	its.		205,799.	1	9,506.		184,078.
以	2	07	Add lines 24 and 25		 	203,133.	<u></u>	,,,,,,,,,,		102,070.
+			Subtract line 26 from line 12			319,364.				[{
29999			Excess of revenue over expenses and d			<u>J1J,JU4.</u>	23	5,548.		<u> </u>
Ŏ			Net investment income (if negative		 		د ع	J, J = U •	N/A	
Δ		<u> </u>	Adjusted net income (if negative, e	ner •u•)					44/44	<u>'</u>

923501 12-17-19 LHA For Paperwork Reduction Act Notice, see instructions.

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Fo	rm 99	00-PF (2019) SEAMAN FAMILY FOUNDATION	N TRUST	34-	1770650 Page 2
	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	f year
뜨	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	168,016.	244,666.	244,666.
	3	Accounts receivable ▶			
		Less allowance for doubtful accounts		 	
	4	Pledges receivable ►	. 		
		Less allowance for doubtful accounts			
	1	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
ş	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
ď	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock STMT 5	1,942,627.	2,185,374.	4,540,196.
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment basis		<u></u>	
		Less accumulated depreciation			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers - see the			
_		instructions. Also, see page 1, item l)	2,110,643.	2,430,040.	4,784,862.
	17	Accounts payable and accrued expenses			1
	18	Grants payable			<u> </u>
S	19	Deferred revenue			
Ĭ	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable			
_	22	Other liabilities (describe)			•
				,	
_	23	Total liabilities (add lines 17 through 22)	0.	0.	<u> </u>
		Foundations that follow FASB ASC 958, check here			ļ
es	١.,	and complete lines 24, 25, 29, and 30			
lances		Net assets without donor restrictions			
Bal	25	Net assets with donor restrictions			
P		Foundations that do not follow FASB ASC 958, check here			
Ē		and complete lines 26 through 30.	0.	0.]
S	26	Capital stock, trust principal, or current funds	0.	0.	
Set	27	Paid-in or capital surplus, or land, bldg., and equipment fund	2,110,643.	2,430,040.	
As	28	Retained earnings, accumulated income, endowment, or other funds	2,110,643.	2,430,040.	<u>_</u>
Net Assets or Fund Ba	29	Total net assets or fund balances	2,110,043.	2,430,040.	<u>_</u>
_	30	Total liabilities and net assets/fund balances	2,110,643.	2,430,040.	1
Ξ				27-0070-01	 '
LP	art	Analysis of Changes in Net Assets or Fund Ba	liances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	29		
	(mus	t agree with end-of-year figure reported on prior year's return)	1	2,110,643.	
2	Ente	amount from Part I, line 27a	2	319,364.	
3	Othe	r increases not included in line 2 (itemize) NONDIVIDEND	DISTRIBUTIONS	3	33.
4	Add	ines 1, 2, and 3		4	2,430,040.
5	Decr	eases not included in line 2 (itemize)		5	0.
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 29	6	2,430,040.
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184,078.

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.

8 Enter qualifying distributions from Part XII, line 4

Part VI Excise Tax Based on Investment Income (Section			<u>34 − 1 / /</u> 48 - see		րոց tions)	ge 4
1a Exempt operating foundations described in section 4940(d)(2), check here		· · · · · · · · · · · · · · · · · · ·				
Date of ruling or determination letter (attach copy of let						
b Domestic foundations that meet the section 4940(e) requirements in Part V, check	_	· L !	1	- 4	711	<u> </u>
of Part I, line 27b						_(
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations	s, enter 4% of Part I, line	12. col. (b)				}
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundation	•	'''			C	<u>.</u>
3 Add lines 1 and 2			3	4	1,711	<u>. </u>
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundation	ns only, others, enter -0-)	4		- 0	<u>.</u>
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter		ĺ	5	4	1,711	<u>. </u>
6 Credits/Payments						
a 2019 estimated tax payments and 2018 overpayment credited to 2019 -	6a	2,240.				
b Exempt foreign organizations - tax withheld at source	6b	0.				- 1
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	2	2,240	J.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 23	220 is attached	[8		C	<u>.</u>
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		▶ [9		2,471	<u>. </u>
O Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount of	verpaid	▶ [10			_
1 Enter the amount of line 10 to be Credited to 2020 estimated tax		Refunded 🕨	11			
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 j	participate or intervene i	n		Yes N	lo
any political campaign?				1a	2	X
b Did it spend more than \$100 during the year (either directly or indirectly) for politi	ical purposes? See the in	structions for the definit	tion	1b	2	<u> </u>
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities an	id copies of any materials	published or			Ī	- [
distributed by the foundation in connection with the activities					_	
c Did the foundation file Form 1120-POL for this year?				1c	2	X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed of	during the year					1
(1) On the foundation \blacktriangleright \$ (2) On foundation	managers ▶ \$	0.				1
e Enter the reimbursement (if any) paid by the foundation during the year for politics managers. ▶ \$ 0 •	al expenditure tax impose	ed on foundation				
2 Has the foundation engaged in any activities that have not previously been reporte	ed to the IRS?			2	7	X
If "Yes," attach a detailed description of the activities						_j
3 Has the foundation made any changes, not previously reported to the IRS, in its go	overning instrument, artic	cles of incorporation, or		i	_	
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the chair	nges			3	7	X
4a Did the foundation have unrelated business gross income of \$1,000 or more durin	ng the year?			4a	7	X
b If "Yes," has it filed a tax return on Form 990-T for this year?			N/A	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during	the year?			5	7	X
If "Yes," attach the statement required by General Instruction T					1	\neg
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) s	atisfied either				İ	
By language in the governing instrument, or						
By state legislation that effectively amends the governing instrument so that no	mandatory directions tha	t conflict with the state	law			
remain in the governing instrument?				6	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Y	es," complete Part II, col.	(c), and Part XV		7	Х	_
						Ī
8a Enter the states to which the foundation reports or with which it is registered. See OH	instructions.					
	E to the Attended Comment	(or designate)		<u> </u>	_	
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-P	r to the Attorney General			0.	X	
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-P of each state as required by General Instruction G2 If "No," attach explanation	r to the Attorney General			8b		
of each state as required by General Instruction G? If "No," attach explanation) or 4942(j)(5) for calen	dar	80		\exists
	ning of section 4942(j)(3) or 4942(j)(5) for calen	dar	9		

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Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be R	equired _{(contin}	ued)		
5a During the year, did the foundation pay or incur any amount to				Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			es X No		
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire			•	}
any voter registration drive?			es X No		1
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	es X No		1
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				
4945(d)(4)(A)? See instructions			es X No	-	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f			- [
the prevention of cruelty to children or animals?			es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	·	in Regulations			
section 53.4945 or in a current notice regarding disaster assistance? See instri			N/A L	ib	<u> </u>
Organizations relying on a current notice regarding disaster assistance, check h					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi					
expenditure responsibility for the grant?	ľ	1/A Y	es L No		1
If "Yes," attach the statement required by Regulations section 53.4945-5(d)					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		es X No		
a personal benefit contract?		Y6			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		<u> -</u>	Sb	^ ,
If "Yes" to 6b, file Form 8870.	sheltor transpetion?	v.	es X No		
7a At any time during the tax year, was the foundation a party to a prohibited tax s			/-	,,	
b If "Yes," did the foundation receive any proceeds or have any net income attribu			14/A -	'b	
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	1,000,000 in reinuneration of		es X No]
excess parachute payment(s) during the year? Part VIII Information About Officers, Directors, Truste	es Foundation Mar		S A NO	<u> </u>	
Paid Employees, and Contractors	ses, i oundation ivial	lagers, riigiliy			
1 List all officers, directors, trustees, and foundation managers and the	neir compensation.				
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Exp account,	ense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	account, allowa	other nces
RICHARD N SEAMAN	TRUSTEE		- Sampansanan		
WOOSTER, OH	'				
	1.00	0.	0.		0.
KIMBERLY A SEAMAN	TRUSTEE				
WOOSTER, OH					
·	1.00	0.	0.		0.
JUDITH G SEAMAN	TRUSTEE				
WOOSTER, OH					
	1.00	0.	0.		0.
			İ		
]				
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans	(e) Exp account,	ense other
(a) Name and address of each employee paid more than \$50,000	devoted to position	(C) Compensation	and deferred compensation	allowa	
NONE					
			I		
<u> </u>					
				•	
	1				
	<u> </u>				
			1		
Total number of other employees paid over \$50,000					0
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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service		(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities	<u> </u>	0
	$\dot{\overline{}}$	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 N/A	_	
I A/A	\dashv	
	\dashv	
2		
	\neg	
3		
	_	
4 <u> </u>		
	_	
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	\neg	Amount
1 N/A		
1	\dashv	
	7	
2		
All other program-related investments. See instructions.		
3		
	_	
	_	
	\dashv	
Takel Add lines 1 through 2	_	0.
Total. Add lines 1 through 3	For	m 990-PF (2019)
	1 011	(2013)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	idations,	, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
•	Average monthly fair market value of securities	1a	3,868,916.
b	Average of monthly cash balances	1b	182,193.
c		1c	
d	Total (add lines 1a, b, and c)	1d	4,051,109.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.	1	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	4,051,109.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	60,767.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,990,342.
6	Minimum investment return. Enter 5% of line 5	6	199,517.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations, check here ▶ ☐ and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	199,517.
2a	Tax on investment income for 2019 from Part VI, line 5		
ь	Income tax for 2019. (This does not include the tax from Part VI)		•
C	Add lines 2a and 2b	2c	4,711.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	194,806.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	194,806.
6	Deduction from distributable amount (see instructions)	_ 6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	194,806.
P	art 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	184,078.
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		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	184,078.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	184,078.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q 4940(e) reduction of tax in those years.	ualifies fo	or the section

34-1770650 SEAMAN FAMILY FOUNDATION TRUST Form 990-PF (2019) Page 9 Part XIII Undistributed Income (see instructions) (a) (b) (c) (d) Corpus Years prior to 2018 2018 2019 1 Distributable amount for 2019 from Part XI, 194,806. line 7 2 Undistributed income, if any, as of the end of 2019 0. a Enter amount for 2018 only b Total for prior years 0. 3 Excess distributions carryover, if any, to 2019 152,768. a From 2014 154,360. **b** From 2015 129,043. c From 2016 27,059. d From 2017 54,484. e From 2018 517,714 ! Total of lines 3a through e 4 Qualifying distributions for 2019 from 184,078. Part XII, line 4 ► \$ 0 a Applied to 2018, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus 0 (Election required - see instructions) 184,078 d Applied to 2019 distributable amount 0. e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount 10,728. 10,728 must be shown in column (a)) 6 Enter the net total of each column as indicated below: 506,986. a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract line 4b from line 2b 0 . c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously 0. assessed d Subtract line 6c from line 6b. Taxable 0. amount - see instructions e Undistributed income for 2018. Subtract line

- e Undistributed income for 2018 Subtract line 4a from line 2a. Taxable amount see instr.
- f Undistributed income for 2019 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020
- 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)
- 8 Excess distributions carryover from 2014 not applied on line 5 or line 7
- 9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a
- 10 Analysis of line 9:

nialysis of files.	
a Excess from 2015	154,360.
b Excess from 2016	129,043.
c Excess from 2017	27,059.
d Excess from 2018	54,484.
e Excess from 2019	

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0.

0.

142,040.

364,946.

0.

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Part XIV Private Operating F	oundations (see in	structions and Part VII	A, question 9)	N/A	
1 a If the foundation has received a ruling of	r determination letter that	t it is a private operating			
foundation, and the ruling is effective fo	r 2019, enter the date of t	the ruling	▶ <u></u>		
b Check box to indicate whether the found	dation is a private operatir	ng foundation described in		4942(j)(3) or 49	42(1)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
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				<u>/</u>	
d Amounts included in line 2c not		!	/		
used directly for active conduct of					
exempt activities		<u> </u>			
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			\vee		
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,	/	ł'			
dividends, rents, payments on	/				
securities loans (section	/				
512(a)(5)), or royalties) (2) Support from general public	 /				
and 5 or more exempt	1 /				
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from	/				
an exempt organization	/				
(4) Gross investment income	8				
Part XV Supplementary Info	rmation (Comple	te this part only it	the foundation I	had \$5,000 or more	e in assets
at any time during t	he year-see instr	uctions.)			
1 Information Regarding Foundation	n Managers:	· · · · · · · · · · · · · · · · · · ·			
a List any managers of the foundation wh	o have contributed more	than 2% of the total contr	butions received by the t	foundation before the close	of any tax
year (but only if they have contributed r	nore than \$5,000). (See s	ection 507(d)(2).)			
SEE STATEMENT 6					
b List any managers of the foundation wh			or an equally large portio	n of the ownership of a par	tnership or
other entity) of which the foundation ha	s a 10% or greater interes	st.			
NONE					
2 Information Regarding Contribution					
Check here 🕨 🗶 If the foundation of					sts for funds. If
the foundation makes gifts, grants, etc.				 	
a The name, address, and telephone num	ber or email address of th	e person to whom applica	itions should be address	ed	
h. The farm in which controls to be idd h	a cubanted and reformat	ván and matavala thay ah	auld in aludat		
b The form in which applications should be	e submitted and informat	ion and materials they sit	oula include.		
c Any submission deadlines					
d Any restrictions or limitations on award	e cuch as hy geographica	il areas, charitable fielde (kinds of institutions or o	ther factors	
a Any resultations of inflitations off award	o, audii aa uy yeuyiapiillo	n areas, enarnable licius, l	amos or msututions, or o	and lactura	
•					

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or Foundation show any relationship to Amount any foundation manager or substantial contributor status of contribution Name and address (home or business) recipient a Paid during the year AKRON CHILDRENS HOSPITAL FOUNDATION NONE CHARITABLE 50,000. AKRON, OH ANIMAL CARE CENTER OF ST JOHN NONE CHARITABLE ST JOHN, VI 2,000. BEAVER CREEK RELIGIOUS FOUNDATION NONE CHARITABLE 500. BEAVER CREEK, CO BOB WOODRUFF FOUNDATION NONE CHARITABLE 2,000. NEW YORK, NY BOWLING GREEN STATE UNIVERSITY NONE CHARITABLE BOWLING GREEN, OH 1,000. SEE CONTINUATION SHEET(S) 183,878. ▶ 3a Total **b** Approved for future payment NONE Total

Form 990-PF (2019)

SEAMAN FAMILY FOUNDATION TRUST

Name and address (home or business) show any relationship to any volumental manager of substantial contributor of contributor of substantial contributor of contributor of substantial contributor of contributor of contributor of contributor of contributor of contributor of contributor of contributor of contributor of contributor of contributor	3 Grants and Contributions Paid During the		1		
Name and address (home of business) of substantial contributor preparation of substa		If recipient is an individual, show any relationship to		Purpose of grant or	Amount
REBENCASTLE, IN CAMPING AND EDUCATION FOUNDATION NOME CENCINNATI, OH CENCI	Name and address (home or business)	or substantial contributor		CONTIDUCTOR	
CAMPING AND EDUCATION FOUNDATION COLLEGE OF WOOSTER NONE COLLEGE OF WOOSTER NONE COARTITABLE COARTITABL	DEPAUW UNIVERSITY	NONE	₽C	EDUCATIONAL	
CINCINNATI, OH CENTRAL AMERICA MEDICAL OUTREACH NONE PC CHARITABLE COLLEGE OF WOOSTER NONE PC CHARITABLE CHARITABLE COLLEGE OF WOOSTER NONE PC CHARITABLE	GREENCASTLE, IN				1,00
CENTRAL AMERICA MEDICAL OUTREACH NONE PC CHARITABLE COLLEGE OF WOOSTER NONE PC CHARITABLE COLLEGE OF WOOSTER NONE PC CHARITABLE	CAMPING AND EDUCATION FOUNDATION	NONE	PC	· ·	
COLLEGE OF WOOSTER NONE PC CHARITABLE COLLEGE OF WOOSTER NONE PC CHARITABLE	CINCINNATI, OH				15,00
COLLEGE OF WOOSTER NONE PC CHARITABLE 10 DANA-FARBER CANCER INSTITUTE NONE PC CHARITABLE PC CHARITABLE PARKVIEW ELEMENTARY SCHOOL NONE PC CHARITABLE PC CHARITABLE 1 DOMINICAN SISTERS OF HOPE NONE PC CHARITABLE CHARITABLE PC CHARITABLE 1 ANOSTER, OH PC CHARITABLE CHARITABLE CHARITABLE PC CHARITABLE CHARITABLE PC CHARITABLE CHARITABLE PC CHARITABLE PC CHARITABLE CHARITABLE PC CHARITABLE CHARITABLE CHARITABLE PC CHARITABLE	CENTRAL AMERICA MEDICAL OUTREACH	NONE	₽C	CHARITABLE	
COLLEGE OF WOOSTER NONE PC CHARITABLE DANA-FARBER CANCER INSTITUTE NONE PC CHARITABLE	DRRVILLE, OH				3,00
DANA-FARBER CANCER INSTITUTE NONE PC CHARITABLE 2 PARKVIEW ELEMENTARY SCHOOL NONE PC EDUCATIONAL WOOSTER, OH PREDERICKSBURG LIBRARY NONE PC CHARITABLE 1 DOMINICAN SISTERS OF HOPE NONE PC CHARITABLE CHARITABLE WOOSTER, OH 2 HEALTHNETWORK FOUNDATION NONE PC CHARITABLE CHARITABLE 2 CHARITABLE CHARITABLE 2 CHARITABLE CHARITABLE 2	COLLEGE OF WOOSTER	NONE	₽C		
PARKVIEW ELEMENTARY SCHOOL NONE PC EDUCATIONAL PREDERICKSBURG LIBRARY NONE PC CHARITABLE DOMINICAN SISTERS OF HOPE NONE DOSSINING, NY NONE PC CHARITABLE	WOOSTER, OH				10,00
PARKVIEW ELEMENTARY SCHOOL NOOSTER, OH PREDERICKSBURG LIBRARY NONE PREDERICKSBURG, OH 1 DOMINICAN SISTERS OF HOPE NONE PC CHARITABLE DOSSINING, NY NONE PC CHARITABLE SOSSIRING, NY LABBITAT FOR HUMANITY NONE PC CHARITABLE CHARITABLE SOSSTER, OH 2 HEALTHNETWORK FOUNDATION NONE PC CHARITABLE 2 CHARITABLE CHARITABLE 2	DANA-FARBER CANCER INSTITUTE	NONE	₽C	CHARITABLE	
WOOSTER, OH PREDERICKSBURG LIBRARY NONE PC CHARITABLE DOMINICAN SISTERS OF HOPE DOSSINING, NY HABITAT FOR HUMANITY NONE PC CHARITABLE CHARITABLE CHARITABLE PC CHARITABLE CHARITABLE PC CHARITABLE CHARITABLE PC CHARITABLE 2	BROOKLINE, MA				2,00
FREDERICKSBURG LIBRARY NONE PC CHARITABLE 1 DOMINICAN SISTERS OF HOPE NONE PC CHARITABLE	PARKVIEW ELEMENTARY SCHOOL	NONE	₽C	EDUCATIONAL	
PREDERICKSBURG, OH DOMINICAN SISTERS OF HOPE NONE PC CHARITABLE DISSINING, NY HABITAT FOR HUMANITY NONE PC CHARITABLE	NOOSTER, OH				70
DOMINICAN SISTERS OF HOPE NONE PC CHARITABLE	FREDERICKSBURG LIBRARY	NONE	₽C	CHARITABLE	
ABITAT FOR HUMANITY NONE PC CHARITABLE WOOSTER, OH HEALTHNETWORK FOUNDATION NONE PC CHARITABLE CHAGRIN FALLS, OH	FREDERICKSBURG, OH				1,20
HABITAT FOR HUMANITY NONE PC CHARITABLE ACCUMULATION NONE PC CHARITABLE CHAGRIN FALLS, OH 2	DOMINICAN SISTERS OF HOPE	NONE	₽C	CHARITABLE	
WOOSTER, OH 2 HEALTHNETWORK FOUNDATION NONE PC CHARITABLE CHAGRIN FALLS, OH 2	OSSINING, NY			 	10
HEALTHNETWORK FOUNDATION NONE PC CHARITABLE CHAGRIN FALLS, OH	ABITAT FOR HUMANITY	NONE	₽C	CHARITABLE	
CHAGRIN FALLS, OH	NOOSTER, OH				2,00
	HEALTHNETWORK FOUNDATION	NONE	PC	CHARITABLE	
Total from continuation sheets					2,00 128,37

Part XV Supplementary Information Grants and Contributions Paid During the		-	<u> </u>	
Recipient	If recipient is an individual.			_
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
HOLMES COUNTY EDUCATION FOUNDATION	none	₽C	CHARITABLE	
MILLERSBURG, OH				1,000
MOCA HOUSE RECOVERY CENTER	NONE	PC	CHARITABLE	
WOOSTER, OH				800
MONTESSORI SCHOOL OF WOOSTER	NONE	PC	CHARITABLE	
WOOSTER, OH	,			3,000
NOBLE NETWORK OF CHARTER SCHOOLS	NONE	PC	CHARITABLE	
CHICAGO, IL	-		1	5,000
NATAS UPPER MIDWEST FOUNDATION	NONE	PC	CHARITABLE	
EDEN PRAIRIÉ, MN				100
OHIO LIFECARE HOSPICE	NONE	₽C	CHARITABLE	
WOOSTER, OH				100
PEOPLE TO PEOPLE MINISTRIES	NONE	₽C	CHARITABLE	
WOOSTER, OH			-	1,000
SALVATION ARMY OF WOOSTER	NONE	₽C	CHARITABLE	
WOOSTER, OH			***	1,000
ST CLARE OF ASSISI	NONE	₽C	CHARITABLE	
EDWARDS, CO				500
OHIO UNIVERSITY FOUNDATION	NONE	PC	EDUCATIONAL	
ATHENS, OH				250
Total from continuation sheets			1	

SEAMAN FAMILY FOUNDATION TRUST

3 Grants and Contributions Paid During the Y				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	•
VINITARIAN INTERPRETATION FOR THE PROPERTY OF	1017			
UNITARIAN UNIVERSALIST FELLOWSHIP OF WAYNE COUNTY	NONE	PC	CHARITABLE	
WOOSTER, OH				2,00
UNITED WAY OF WAYNE AND HOLMES COUNTY	NONE	PC	CHARITABLE	
WOOSTER, OH				30,00
		ļ		
VIOLA STARTZMAN FREE CLINIC	NONE	PC	CHARITABLE	
WOOSTER, OH				1,500
	}			
WINNETKA COMMUNITY HOUSE	NONE	PC	CHARITABLE	
WINNETKA, IL				500
740 - 1 - 1				
WAYNE COUNTY COMMUNITY FDN	NONE	PC	CHARITABLE; JR FAIR	
			EXPANSION	
WOOSTER, OH		ļ		10,250
WINNERS CIRCLE CHARITIES	NONE	PC	CHARITABLE	
JUPITER, FL		_	_	25,000
WOMEN'S ADVISORY BOARD - COLLEGE OF	NONE	PC	CHARITABLE	
WOOSTER				
WOOSTER, OH				750
WOOSTER FIRST PRESBYTERIAN CHURCH	NONE	₽C	CHARITABLE	
HOODIEN TINDI INDDITENTAL CHONCI			CHARTAGOS	
WOOSTER, OH				7,500
HEIFER INTERNATIONAL	NONE	₽C	CHARITABLE	
LITTLE ROCK, AR				1,128
NON, AL			-	1,120
	1			
Total from continuation sheets				

Part XVI-A	Analysis	s of Incom	e-Producing	Activities

Enter gross amounts unless other	erwise indicated.	Unrelate	ed business income		ded by section 512, 513, or 514	(e)
1 Program service revenue		(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
•		Code	<u> </u>	1000	· · · · · ·	
a b				1		
c		-				
_		-				
				1		-
1		-		1	_	
g Fees and contracts from g	novernment agencies	-		†		
2 Membership dues and assess				1		- n u
3 Interest on savings and temp						
investments	,					
4 Dividends and interest from s	securities			14	84,555.	
5 Net rental income or (loss) fr				1		· - · - · - · - · - · · - · · - · · - ·
a Debt-financed property						, , , , , , , , , , , , , , , , , , , ,
b Not debt-financed propert	v					
6 Net rental income or (loss) fr	•					
property	- · • • · · · · · · · · · · · · · · · ·					
7 Other investment income						
8 Gain or (loss) from sales of a	ssets other		_			
than inventory				18	170,499.	
9 Net income or (loss) from sp	ecial events					
O Gross profit or (loss) from sa						
1 Other revenue.	•					
a TAX REFUND						25.
b						
	······································					 -
e						
2 Subtotal. Add columns (b), (c	d), and (e)		0.		255,054.	25,
3 Total. Add line 12, columns ((b), (d), and (e)				13	255,079
See worksheet in line 13 instruc	tions to verify calculations)					
Part XVI-B Relation	onship of Activities	to the Acco	mplishment of Ex	empt	Purposes	
	ow each activity for which inc exempt purposes (other that			A contrib	uted importantly to the accomp	olishment of
				T TO	OUNDATION BUS	INESS
11111111111	THE TRANSPORT	1112 1101	CILLE COULDE		OUNDITION DOD!	THE DO
		•				
						 .
					 	

923621 12-17-19

Form 990	$\overline{}$		N FAMILY						<u>1770650</u>	Pa	ige 13
Part	XVII	Information Re		sfers to a	nd T	ransactions a	nd Relationsl	hips With None	charitable		
		Exempt Organ							- ,	13.6	
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c)							tion 501(c)		Yes	No	
	(other than section 501(c)(3) organizations) or in section 527, relating to political organizations?										
a Transfers from the reporting foundation to a noncharitable exempt organization of:							1-45		- <u>x</u> -		
(1) Cash							1a(1)	-	X		
(2) Other assets b Other transactions							1a(2)				
		of assets to a noncharita	able everant arganiza	ition					1b(1)		X
		nases of assets from a no	·						1b(1)		X
٠.		il of facilities, equipment,	·	oi yanizanon					1b(3)		X
٠,		bursement arrangements							1b(4)		X
٠,		s or loan guarantees							1b(5)		Х
		rmance of services or me	embership or fundrar	ising solicitatio	ns				1b(6)		Х
		f facilities, equipment, ma	•	=		s			1c		Х
d If th	he ansv	ver to any of the above is	"Yes," complete the	following sche	edule. (Column (b) should al	ways show the fair	market value of the g	oods, other ass	ets,	
or s	services	s given by the reporting f	oundation. If the fou	indation receive	ed less	than fair market valu	ue in any transactio	n or sharing arranger	nent, show in		
col	umn (d) the value of the goods,	other assets, or serv	vices received.							
(a) Line ni	•	(b) Amount involved	(c) Name o		e exem	pt organization	(d) Description	on of transfers, transaction	ns, and sharing arri	angemer	atı
	_		<u> </u>	N/A							
											
			 								
	-		 				+				
	——										
	-		 				+				
	-						+				
	+							•		-	
	+							· · · · · · · · · · · · · · · ·			
	+		1				1				
	\top		†								
2a Ist	he four	ndation directly or indirec	tly affiliated with, or	related to, one	or mo	re tax-exempt organ	zations described				
ın s	section	501(c) (other than section	on 501(c)(3)) or in se	ection 527?					Yes	X	No
<u>b lf "\</u>	Yes," co	emplete the following sch					· · · · · · · · · · · · · · · · · · ·				
		(a) Name of org	ganization		(b) 1	ype of organization		(c) Description of re	lationship		
		N/A			<u> </u>						
					-		ļ				
					├		1				
							-				
	Under	penalties of perjury, I declare	that I have examined this	s return uncluding	accom!	nanying schedules and st	tatements, and to the h	est of my knowledge			
Sign		lief, it is true, correct, and con							May the IRS o	prepare	¥
Here						1			shown below		No
	Sign	ature of officer or trustee	 8			Date	Title		- <u> </u>] 140
Print/Type preparer's name Preparer's sign			ignatur		Date	Check If	PTIN				
				'	<u>.</u>			self- employed			
Paid		KAREN B. C	OONEY	KAREN	в.	COONEY	03/23/20		P00285	983	
Prepa		Firm's name ► MEA						Firm's EIN ► 3			
Use C	Only							1			

Firm's address ▶ 1375 EAST NINTH STREET, SUITE 1800

CLEVELAND, OH 44114-1790

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.
➤ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2019

Name of the organization

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

S	SEAMAN FAMILY FOUNDATION TRUST	<u>34</u> -1770650
Organization type (check	one)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
• •	n is covered by the General Rule or a Special Rule . (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	e See instructions
General Rule		
_ •	ion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling my one contributor. Complete Parts I and II. See instructions for determining a contributor's	•
Special Rules		
sections 509(a)(1	ion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, stor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount EZ, line 1 Complete Parts I and II	or 16b, and that received from
year, total contri	non described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a butions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educately to children or animals. Complete Parts I, II, and III	
year, contribution is checked, enter purpose Don't c	ion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a exclusively for religious, charitable, etc., purposes, but no such contributions totaled may here the total contributions that were received during the year for an exclusively religious complete any of the parts unless the General Rule applies to this organization because it ble, etc., contributions totaling \$5,000 or more during the year	ore than \$1,000 If this box s, charitable, etc ,
but it must answer "No" o	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Foon Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Foot the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Name of organization

Employer identification number

SEAMAN FAMILY FOUNDATION TRUST

34-1770650

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	SEAMAN CORPORATION 1000 VENTURE BOULEVARD WOOSTER, OH 44691	\$ <u>188,982.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	RICHARD N. SEAMAN 1000 VENTURE BOULEVARD WOOSTER, OH 44691	\$155,433	Person X Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	JUDITH SEAMAN 1000 VENTURE BOULEVARD WOOSTER, OH 44891	\$ <u>24,053.</u>	Person X Payroll
(a) No.	, (b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part If for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Omegash Complete Part II for noncash contributions)

Name of organization

Employer identification number

SEAMAN FAMILY FOUNDATION TRUST

34-1770650

art II	Noncash Property (see instructions) Use duplicate copies of P		-1770650
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
2	AEP COMMON SHARES		
2		\$\$.	11/20/19
(a) No. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
3	AEP COMMON SHARES		
		\$24,053.	11/20/19
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		 	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
.		Ψ	-
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_			
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-			

923454 11-06-19

FORM 990-PF	DIVIDENDS	AND INT	EREST	FROM SECT	JRITIES ;	STATEMENT 1
SOURCE	GROSS AMOUNT	CAPITA GAINA DIVIDE	S .	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOMI	
SCHWAB ACCOUNTS	84,555.		0.	84,55	84,555	•
TO PART I, LINE 4	84,555.		0.	84,55	84,555	•
FORM 990-PF		OTHER	INCO	ME	;	STATEMENT 2
DESCRIPTION				(A) VENUE BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
TAX REFUND		-		25.	0.	
TOTAL TO FORM 990-P	F, PART I,	LINE 11		25.	0.	
FORM 990-PF		T	AXES			STATEMENT `3
		<u>. </u>				
DESCRIPTION		(A) EXPENSES PER BOOK		(B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAX PAID NET INVESTMENT INCOM	ME TAX	29 2,21		297 0		0.
TO FORM 990-PF, PG	1, LN 18 —	2,51		297		0.
FORM 990-PF		OTHER	FYDF	'NGFG		STATEMENT 4
DESCRIPTION		(A) EXPENSES PER BOOK		(B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT FEES OHIO FILING FEE	_	19,08 20 12	0.	19,084 0 125	•	0. 200. 0.
OTHER STOCK FEES TO FORM 990-PF, PG	– 1 I.N 23	19,40		19,209		
10 loid 990 ff, FG	=		 = =			= ======

FORM 990-PF CORPORATE STOCK		STATEMENT 5
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
EQUITIES HELD IN BROKERAGE ACCOUNTS	2,185,374.	4,540,196.
TOTAL TO FORM 990-PF, PART II, LINE 10B	2,185,374.	4,540,196.

FORM 990-PF	PART XV - LINE 1A	STATEMENT 6
	LIST OF FOUNDATION MANAGERS	

NAME OF MANAGER

RICHARD N SEAMAN JUDITH G SEAMAN