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OMB No. 1545-0052

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 <u>www.irs.gov/Form990PF</u> for instructions and the latest information. 2019

Open to Public Inspection

	calor	ndar year 2019, or tax year beginning 01-01-20)10 ar	ad on	ding 12-31-	2010	
		indation	, al	iu en		entification numbe	ur .
		L FOUNDATION			34-6516968	sittineactor manibe	
	ber and	d street (or P.O. box number if mail is not delivered to street address)	Room/suite		B Telephone nu	mber (see instructio	ns)
P	J BUX S	3303			(330) 650-6302		
		n, state or province, country, and ZIP or foreign postal code 44334	1		C If exemption	application is pendin	g, check here
- CH	eck al	that apply:	former public charity		D 1 . Foreign ord	ganizations, check he	ere 🗔
	icell ai	Final return Amended return	rormer public chartey			ganizations meeting	▶ ∟
		Address change Name change				k here and attach co	
1 Ch	eck ty	∇ pe of organization: \square Section 501(c)(3) exempt private	foundation			indation status was f n 507(b)(1)(A), chec	
	ection		e private foundation		ander section	1 307 (3)(1)(1), 61100	
of '	/ear (f	xet value of all assets at end from Part II, col. (c), ▶\$ 19,424,642 J Accounting method: □ Other (specify) (Part I, column (d) must	Cash Accrus	a		ntion is in a 60-mont n 507(b)(1)(B), chec	
Pa	rt I	Analysis of Revenue and Expenses (The total	(-) B				(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	(a) Revenue and expenses per books	(b)	Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)					
	2	Check ▶ ☑ if the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities	563,807		555,362		
	5a	Gross rents					
	ь	Net rental income or (loss)	1 005 206	1			
KIE	6a	Net gain or (loss) from sale of assets not on line 10	1,005,296	<u> </u>			
Revenue	b	Gross sales price for all assets on line 6a 3,697,562					
ă	7	Capital gain net income (from Part IV, line 2)			1,061,576		
	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances	<u> </u>				
	b c	Less: Cost of goods sold	<u> </u>				
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	1,569,103		1,616,938		
	13	Compensation of officers, directors, trustees, etc.	1,303,103		0		(
	14	Other employee salaries and wages		<u> </u>			`
Ņ	15	Pension plans, employee benefits					
1Se	16a	Legal fees (attach schedule)					
<u>a</u>	b	Accounting fees (attach schedule)					
E E	С	Other professional fees (attach schedule)					
ĘĘ	17	Interest					
Operating and Administrative Expenses	18	Taxes (attach schedule) (see instructions)	% 5,450		0		(
Ξ	19	Depreciation (attach schedule) and depletion					
Ę	20	Occupancy					
₹	21	Travel, conferences, and meetings					
a	22	Printing and publications					
<u> </u>	23	Other expenses (attach schedule)	6,634		6,634		(
rat	24	Total operating and administrative expenses.					
<u>ಹ</u>	25	Add lines 13 through 23	12,084		6,634		046.000
_	25	Contributions, gifts, grants paid	946,000	<u> </u>			946,000
	26	Total expenses and disbursements. Add lines 24 and 25	958,084		6,634		946,000
	27	Subtract line 26 from line 12:					
	а	Excess of revenue over expenses and disbursements	611,019				
	b	Net investment income (if negative, enter -0-)			1,610,304		
	С	Adjusted net income (if negative, enter -0-)					

Attached schedules and amounts in the description column

Receivables due from officers, directors, trustees, and other

Less: allowance for doubtful accounts ▶

Investments—mortgage loans

Land, buildings, and equipment: basis

instructions. Also, see page 1, item I)

and complete lines 24, 25, 29 and 30.

Net assets without donor restrictions . . . Net assets with donor restrictions . . .

and complete lines 26 through 30.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize) -

Enter amount from Part I, line 27a

Other assets (describe

Other liabilities (describe -_

Grants payable

Prepaid expenses and deferred charges

Investments—land, buildings, and equipment: basis ▶

Less: accumulated depreciation (attach schedule) ▶ _____

Total assets (to be completed by all filers—see the

disqualified persons (attach schedule) (see instructions)

Investments—U.S. and state government obligations (attach schedule)

Investments—corporate bonds (attach schedule)

Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable (attach schedule).

Foundations that do not follow FASB ASC 958, check here 🕨 🗹

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

Analysis of Changes in Net Assets or Fund Balances

Paid-in or capital surplus, or land, bldg., and equipment fund

Foundations that follow FASB ASC 958, check here ▶

Less: accumulated depreciation (attach schedule) ▶

Other notes and loans receivable (attach schedule)

Beginning of year

353,302

6,239,949

2,031,223

1,636,957

13,486,130

13,486,130

13,486,130

13,486,130

0

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Page 2

161,593

11,163,512

2,286,435

2,757,643

2,373

19,424,642

End of year

136,606

6,663,649

2,237,160

2,004,275

14,097,149

14,097,149

14,097,149

14,097,149

13,486,130

14,097,149

14.097.149

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611,019

1

2

3

4

5

6

2,373

•	Accete	

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Part II

5

6

7

8

9

10a

b

C

11

12

13 14

15

16

17

18

19 20

21

22 23

24

25

28

30

Part III

2

3

Liabilities

Balances

Fund

ŏ 26

Assets 27

Net 29

Page **3**

	e the kind(s) of property sold (e.g., rehouse; or common stock, 200 shs		(b) How acquired P—Purchase D—Donation	;	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1aSee Additional Data Table	9					
b						
С						
d						
e						
	(f)		(g)		(1	h)
(e) Gross sales price	Depreciation allowed (or allowable)	Cost or	other basis ense of sale		Gain o	r (loss)) minus (g)
a See Additional Data Table	e					
b						
c						
d						
e						
Complete only for assets	showing gain in column (h) and ow	ned by the foundation	on 12/31/69			I)
(i)	(j) Adjusted basis		(k) of col. (i)		Gains (Col. (I col. (k), but not	h) gain minus less than -0-) or
F.M.V. as of 12/31/69	as of 12/31/69	over col	. (j), if any		Losses (fro	om col.(h))
a See Additional Data Table	e					
b						
c						
d						
e						
· -	gain or (loss) as defined in sections 1 rt I, line 8, column (c) (see instruction	ons). If (loss), enter -0		} 3	3	1,061,576
	Jnder Section 4940(e) for Re				ne	
(For optional use by domestic p	rivate foundations subject to the sec	ction 4940(a) tax on ne	t investment ind	come.)		
If section 4940(d)(2) applies, le	eave this part blank.					
	e section 4942 tax on the distributal ot qualify under section 4940(e). Do			iod?	∐ Y€	es 🔽 No
1 Enter the appropriate am	nount in each column for each year;	see instructions before	making any en	tries.		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab	le-use assets	(c	(d) Distribution raticol. (b) divided by co	
2018	928,326		18,229,171		·	0.050925
2017	772,286		18,048,416			0.042790
2016	1,333,996		18,162,993			0.073446
2015	1,162,308		20,979,493			0.055402
2014	645,587		18,235,002			0.035404
2 Total of line 1, column (d)			2		0.257967
3 Average distribution ratio	for the 5-year base period—divide t	the total on line 2 by 5	.0, or by the			
	dation has been in existence if less		–	3		0.051593
	ncharitable-use assets for 2019 from	•	<u> </u>	4		18,594,765
5 Multiply line 4 by line 3	(40) (50) 7 (10)		· · · · · -	5		959,360
	ent income (1% of Part I, line 27b)		_	6		16,103
			· · · · -	7		975,463
8 Enter qualifying distributi If line 8 is equal to or gre instructions.	ons from Part XII, line 4 , eater than line 7, check the box in Pa	art VI, line 1b, and com	plete that part i	8 using a	1% tax rate. Se	946,000 e the Part VI
						rm QQN_PF (201)

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श्च		ing Activities for Which	Form 4720 May Be	Required (continued)				
ā	During the year did the foundation p	·					Yes	No
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?				✓ No			
	(2) Influence the outcome of any sp	ecific public election (see sect	tion 4955); or to carry					
	on, directly or indirectly, any vot	er registration drive?		· · 🔲 Yes	✓ No			
	(3) Provide a grant to an individual (for travel, study, or other sim	ilar purposes?	☐ Yes S	☑ No			
	(4) Provide a grant to an organization	on other than a charitable, etc	, organization described		<u> </u>			
	in section 4945(d)(4)(A)? See in	structions		· · □ v •	⊘ No			
	(5) Provide for any purpose other th	an religious, charitable, scien	tific, literary, or	· · · · Yes	✓ No			
	educational purposes, or for the		* * * * * * * * * * * * * * * * * * * *	— —	,			
b	If any answer is "Yes" to $5a(1)-(5)$,	•		centions described in	⊻ No			
_	Regulations section 53.4945 or in a c	•				5b		
	Organizations relying on a current no			_	_,			
_	If the answer is "Yes" to question 5a			[_			
C	•	• • •	•		_			
	tax because it maintained expenditu	, ,		''	⊔ No			
	If "Yes," attach the statement requir	· -						
ia	Did the foundation, during the year,	receive any funds, directly or	indirectly, to pay premi	ums on				
	a personal benefit contract?			· 🗌 Yes	Z No │			
b	Did the foundation, during the year,	pay premiums, directly or ind	lirectly, on a personal be		[6b		No
	If "Yes" to 6b, file Form 8870.							
'a	At any time during the tax year, was	the foundation a party to a p	prohibited tax shelter tra	nsaction?	✓ No			
b	If "Yes", did the foundation receive a	iny proceeds or have any net	income attributable to the	ne transaction?	<u>- </u>	7b		
3	Is the foundation subject to the secti	ion 4960 tax on payment(s) o	of more than \$1,000,000	in remuneration or	Γ			
	excess parachute payment during th				.			
					✓ No L			
Pai	and Contractors	fficers, Directors, Trust	lees, roundation Ma	magers, migniy Paid	Employ	ees,		
_								
1	List all officers, directors, trustee				1			
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans a			se acc	
	(-,	devoted to position	-0-)	deferred compensation		her al	lowand	es
ee A	Additional Data Table							
								,,
2	Compensation of five highest-pai	d employees (other than ti	nose included on line :		none, en	ter "	NONE.	
- \ I	Name and address of each employee :	(b) Title, and average		(d) Contributions to employee benefit	(a) F	vnanc	se acco	unt
u ,	more than \$50,000	nours per week	(c) Compensation	plans and deferred			owance	
	. ,	devoted to position		compensation				
ONE								
ota	I number of other employees paid ove	r \$50,000	<u></u> .					
					Forr	n 99 0	D-PF (2019

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Part VIII Information About Officers, Directors, Truste and Contractors (continued)	es, Foundation Managers, Highly Pa	aid Employees,
3 Five highest-paid independent contractors for professional se	ervices (see instructions). 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	· · · · · · · · · · · · · · · · · · ·	0
List the foundation's four largest direct charitable activities during the tax year. Includ	e relevant statistical information such as the numbe	r of l
organizations and other beneficiaries served, conferences convened, research papers I	produced, etc.	Expenses
1		
2		
3		
4		_
Part IX-B Summary of Program-Related Investments (s	see instructions)	
Describe the two largest program-related investments made by the foundation dur	<u> </u>	Amount
1 N/A		0
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		0
		Form 990-PF (2019)

2a |

2b

32,206

2c

3

4

5

6

7

1a

1b

2

3a 3b

4

5

929,738

32,206

897,532

897.532

897.532

946,000

946,000

946,000

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Distributable amount before adjustments. Subtract line 2c from line 1.

Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . .

Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

income. Enter 1% of Part I, line 27b. See instructions.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Tax on investment income for 2019 from Part VI, line 5.

Income tax for 2019. (This does not include the tax from Part VI.). . .

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

the section 4940(e) reduction of tax in those years.

1

2a

3

4 5

6

1

2

3

4

5

b

Part XII

a From 2014. **b** From 2015. c From 2016. . .

d From 2017.

e From 2018.

4 Qualifying distributions for 2019 from Part XII, line 4: ▶ \$ 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 (Election required—see instructions).

d Applied to 2019 distributable amount. e Remaining amount distributed out of corpus

same amount must be shown in column (a).)

5 Excess distributions carryover applied to 2019. (If an amount appears in column (d), the

a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5

6 Enter the net total of each column as

b Prior years' undistributed income. Subtract c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. **d** Subtract line 6c from line 6b. Taxable amount —see instructions e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions 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 (see instructions) . . .

9 Excess distributions carryover to 2020.

10 Analysis of line 9: a Excess from 2015. . .

b Excess from 2016. . c Excess from 2017. . . .

d Excess from 2018. . .

e Excess from 2019. . .

Subtract lines 7 and 8 from line 6a

indicated below:

897,532

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P	art XIII	Undistributed Income (see instruc	ctions)
1	Distributabl	e amount for 2019 from Part XI, line 7	
2	Undistribute	ed income, if any, as of the end of 2019:	

1	Distributable amount fo	or 2019	fro
2	Undistributed income,	if any, a	s
а	Enter amount for 2018	only.	
b	Total for prior years:	20	. ,

om Part XI, line 7 of the end of 2019: Excess distributions carryover, if any, to 2019:

173.958 27,215 f Total of lines 3a through e.

(a)

Corpus

201.173

48.468

249,641

249,641

173,958

27,215

48.468

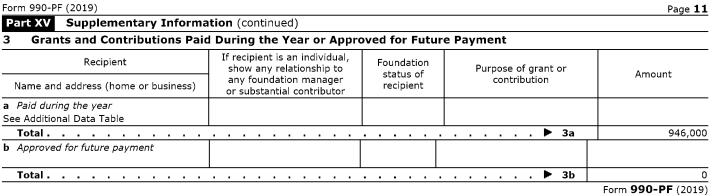
(b)

Years prior to 2018

(c)

2018

	Part XIV Private Operating Found	lations (see instru	ictions and Part \	/II-A, question 9)		
1a	If the foundation has received a ruling or defoundation, and the ruling is effective for 20			erating		
b	Check box to indicate whether the organizat	tion is a private opera	ating foundation des	scribed in section \Box] 4942(j)(3) or 🗆] 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Iotai
	year listed					
b	85% of line 2a					
С	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					
е	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:					
а						
	(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.					
С						
_	(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					
DE	Supplementary Information			foundation had	\$5,000 or more	in
	assets at any time during ti		ructions.)			
1 a	Information Regarding Foundation Man List any managers of the foundation who ha		than 2% of the tota	l contributions receiv	ed by the foundatio	n
	before the close of any tax year (but only if	they have contribute	ed more than \$5,00	0). (See section 507	(d)(2).)	
b	List any managers of the foundation who ow ownership of a partnership or other entity)				arge portion of the	
2	Information Regarding Contribution, G	ant, Gift, Loan, Sch	olarship, etc., Pr	ograms:		
	Check here ▶ ☐ if the foundation only ma			_	does not accept	
	unsolicited requests for funds. If the foundation	ation makes gifts, gra	nts, etc. to individu			
	other conditions, complete items 2a, b, c, a	nd d. See instruction	s	-		
a	The name, address, and telephone number	or e-mail address of	the person to whom	n applications should	be addressed:	
	MICHAEL O'NEIL JR					
	PO BOX 5303					
	FAIRLAWN, OH 44334 (330) 668-6500					
b	The form in which applications should be su	bmitted and informat	ion and materials t	hey should include:		
_	WRITTEN REQUESTS-NO SPECIAL FORMAT			- 		
c	: Any submission deadlines:				<u> </u>	<u> </u>
	NONE					
d	Any restrictions or limitations on awards, su	ich as by geographica	al areas, charitable	fields, kinds of institu	utions, or other	
	factors:					
	DIL DIE					



iter gross	amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
_	n service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions.)
f						
_	and contracts from government agencies					
	rship dues and assessments					
	nds and interest from securities			14	563,807	
	ntal income or (loss) from real estate:				200,007	
a Debt-	financed property					
	ebt-financed property					
	ntal income or (loss) from personal property					
	nvestment income					
invento	` ,			18	1,005,296	
Net inc	ome or (loss) from special events:					
	profit or (loss) from sales of inventory					
Other I	revenue: a					
	<u> </u>					
			0		1,569,103	
	(-), (-),					
Total.	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)			13	B	1,569,10:
(See w	orksheet in line 13 instructions to verify calcu -B Relationship of Activities to the	lations.) le Accomplisi	nment of Exem	pt Purposes		
(See wo	orksheet in line 13 instructions to verify calcu	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XVI-A contribut	ted importantly to	, ,
(See wo art XVI ne No.	Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the foundation of the found	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XVI-A contribut	ted importantly to	, ,
(See wo art XV ne No.	Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the foundation of the found	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XVI-A contribut	ted importantly to	, ,
(See wo art XVI ne No.	Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the foundation of the found	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XVI-A contribut	ted importantly to	, ,
(See wo art XVI ne No.	Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the foundation of the found	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XVI-A contribut	ted importantly to	, ,
(See wo art XVI ne No.	Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the foundation of the found	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XVI-A contribut	ted importantly to	, ,
(See wo art XVI ne No.	Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the foundation of the found	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XVI-A contribut	ted importantly to	, ,
(See wo art XV ne No.	Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the foundation of the found	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XVI-A contribut	ted importantly to	, ,
(See wo art XV ne No.	Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the foundation of the found	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XVI-A contribut	ted importantly to	, ,
(See wo art XV ne No.	Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the foundation of the found	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XVI-A contribut	ted importantly to	, ,
(See wo Irt XVI 1e No.	Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the foundation of the found	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XVI-A contribut	ted importantly to	, ,
(See wo art XV ne No.	Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the foundation of the found	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XVI-A contribut	ted importantly to	, ,
(See wo art XVI ne No.	Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the foundation of the found	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XVI-A contribut	ted importantly to	, ,
(See wo art XV ne No.	Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the foundation of the found	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XVI-A contribut	ted importantly to	, ,
(See wo	Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the foundation of the found	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XVI-A contribut	ted importantly to	, ,

Fo	rm 990-Pl	(2019)			Pa	ge 13
	Part XV	Information Re Exempt Organi	garding Transfers To and Transactions and Relationships With Nonch zations	aritable		
1			directly engage in any of the following with any other organization described in section 5 organizations) or in section 527, relating to political organizations?	01	Yes	No
a	Transfer	s from the reporting foun	dation to a noncharitable exempt organization of:			
	(1) Cas	sh		1a(1)		No
				1a(2)		No
Ł	Other tr	ansactions:				
	(1) Sal	es of assets to a nonchari	itable exempt organization	1b(1)		No
	(2) Pur	chases of assets from a r	oncharitable exempt organization	1b(2)		No
	(3) Rei	ntal of facilities, equipmer	nt, or other assets	1b(3)		No
	(4) Rei	mbursement arrangemen	ts	1b(4)		No
	(5) Loa	ns or loan guarantees.		1b(5)		No
	(6) Perf	ormance of services or m	embership or fundraising solicitations	1b(6)		No
c	Sharing	of facilities, equipment, n	nailing lists, other assets, or paid employees	1c		No
	of the g	oods, other assets, or ser	is "Yes," complete the following schedule. Column (b) should always show the fair mark vices given by the reporting foundation. If the foundation received less than fair market ngement, show in column (d) the value of the goods, other assets, or services received. (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and	value	ingemer	nts
_						
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2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527?							

b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

May the IRS discuss this 2020-11-13 return

Sign Here with the preparer shown Signature of officer or trustee Title Date PTIN Print/Type preparer's name Preparer's Signature Date Check if self-P01444017 employed ▶ 🔲 ROSALIND EDWARDS Paid

Preparer Use Only

Firm's name ▶

Firm's address ▶

CBIZ MHM LLC 4040 EMBASSY PARKWAY SUITE 100

AKRON, OH 44333

(see instr.) 🗹 Yes 🗆 No

Firm's EIN ▶34-1513062

Phone no. (330) 668-6500

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (d) (b) (c) How acquired (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) Date acquired Date sold P-Purchase (mo., day, yr.) (mo., day, yr.) D-Donation Р 2019-02-25 2019-02-25 TRANSPORTATION SYSTEMS HOLDINGS INC 0.5210 SHS WABTEC CORP Ρ 2018-02-28 2019-03-29 3,000 SHS PHILADELPHIA PA PENNSYLVANIA GENERAL OBLIGATION Р 2009-08-18 2019-08-01 53,821.343 SHS VANGUARD 500 INDEX FUND Ρ 1999-12-27 2019-08-08 4,000 SHS MASSACHUSETTS ST STATE GENERAL OBLIGATION NONCALLABLE Ρ 2009-08-18 2019-10-01 Ρ 125,000 SHS BROWARD CNTY FL ARPT SYS REV AIRPORT REVENUE CALLABLE 2009-08-19 2019-11-21 Ρ 5,030 SHS CELGENE CORP 2009-08-18 2019-11-22 Р 2019-10-22 100,000 SHS ANTERO RESOURCES 2019-03-14 1,500 SHS CAMPBELL SOUP Ρ 2019-03-28 2019-06-12 1451.65 SHS CENTER CST BRKFLD MLP EN INF Р 2019-10-30 2019-11-07 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 887 887 0 -2 38 40 35,000 35,000 0 1,037,686 343,088 694,598 40,000 40,000 0 125,000 123,822 1,178 543,391 130,918 412,473 75,494 102,054 -26,560 63,931 59,789 4,142 9,452 11,106 -1,654 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col. (h) gain minus col. (k), but not less than -0-) or (i) F.M.V. as of 12/31/69 Adjusted basis Excess of col. (i) **(I)** Losses (from col.(h)) (j) as of 12/31/69 (k) over col. (j), if any 0 -2 0 694,598 1,178 412,473 -26,560 4,142 -1,654

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (d) (b) (c) How acquired (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) Date acquired Date sold P-Purchase (mo., day, yr.) (mo., day, yr.) D-Donation Ρ 2018-04-26 2019-03-14 100,000 SHS CHENIERE ENERGY P 5250 250 SHS CORTEVA INC Ρ 2019-01-25 2019-06-17 750 SHS DOW INC Р 2019-04-02 2019-09-30 250 SHS DUPONT DE NEMOURS INC Ρ 2019-01-25 2019-06-17 500 SHS EMERSON ELECTRIC CO Ρ 2019-10-09 2019-12-06 Ρ 2,500 SHS GOODYEAR TIRE & TUBBER 2019-08-09 2019-10-18 Ρ 3,000 SHS HEWLETT PACKARD ENTERPRISE 2018-07-06 2019-01-30 Р 2019-07-29 4,000 SHS KEYCORP NEW 2018-12-24 2,000 SHS KEYCORP 5.65% SER-F Ρ 2018-07-23 2019-03-15 3,500 SHS NEWELL BRANDS INC Ρ 2019-10-09 2019-11-20 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 100,646 100.006 640 6,356 7,574 -1,218 35,458 43,131 -7,67318,416 21,706 -3,290 37,086 32,432 4,654 30,901 6,701 37,602 46,411 45,390 1,021 73,083 69,341 3,742 49,303 50,000 -697 66,782 62,202 4,580 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col. (h) gain minus col. (k), but not less than -0-) or (i) F.M.V. as of 12/31/69 Adjusted basis Excess of col. (i) **(I)** Losses (from col.(h)) (j) as of 12/31/69 (k) over col. (j), if any 640 -1,218-7,673 -3,290 4,654 6,701 1,021 3,742 -697 4,580

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (d) (b) (c) How acquired (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) Date acquired Date sold P-Purchase (mo., day, yr.) (mo., day, yr.) D-Donation Ρ 2018-06-08 2019-04-22 1,000 SHS SPDR S&P REGIONAL BANKING ETF 102 SHS UNIT FT S&P DIV AR TGT 25 3Q18 Ρ 2019-07-25 2019-10-11 144 SHS UNIT FT TGT HIGH QUAL DIV 3Q18 Р 2019-02-26 2019-10-11 21.484 SHS WABTEC CORP Ρ 2019-02-26 2019-06-17 26.2 SHS ADVANSIX INC Ρ 2016-01-27 2019-01-30 Ρ 100,000 SHS AMERICAN AIR REGS 5500 2016-05-11 2019-10-01 Ρ 100,000 SHS ARCONIC INC 2016-04-19 2019-01-18 Р 2019-09-09 4,000 SHS BANK OF AMERICA CORP 2016-11-18 7853.207 SHS CENTER CST BRKFLD MLP EN INF Ρ 2019-10-30 2019-11-07 Ρ 2017-03-10 2019-07-17 1,500 SHS CITIGROUP INC NEW Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) -13,071 53,205 66.276 1,075 1,015 60 1,387 1,325 62 1,428 1,677 -249 801 339 462 100,000 100,000 0 102,122 101,507 615 100,000 102,983 -2,983 49,375 69,555 -20,180 102,782 94.823 7,959 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col. (h) gain minus col. (k), but not less than -0-) or (i) F.M.V. as of 12/31/69 Adjusted basis Excess of col. (i) **(I)** Losses (from col.(h)) (j) as of 12/31/69 (k) over col. (j), if any -13,071 60 62 -249 462 0 615 -2,983 -20,180 7,959

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (d) (b) (c) How acquired (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) Date acquired Date sold P-Purchase (mo., day, yr.) (mo., day, yr.) D-Donation 250 SHS CORTEVA INC Р 2017-10-05 2019-06-17 250 SHS DOW INC Ρ 2017-10-05 2019-09-30 250 SHS DUPONT DE NEMOURS INC Р 2017-10-05 2019-06-17 4,880 SHS FIRST TRUST SR FLOAT RT 2022 Ρ 2016-12-21 2019-06-06 65.5 SHS GARRETT MOTION INC Ρ 2016-01-27 2019-01-30 Ρ 500 SHS INTL BUSINESS MACHINES CORP 2018-01-03 2019-07-18 Ρ 1,000 SHS KRAFT HEINZ CO 2018-03-28 2019-12-06 Р 2017-01-24 2019-01-18 4,000 SHS MORGAN STANLEY 5.85% 108.5 SHS RESIDEO TECHNOLOGIES INC Ρ 2016-01-27 2019-01-30 Ρ 2016-05-18 2019-01-16 100,000 SHS ROYAL BK SCOTLND Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 6,356 9,193 -2,837 11,819 17,951 -6,132 18,416 26,344 -7,92842,486 48.650 -6,164 1,001 686 315 72,124 75,438 -3,314 30,717 62,229 -31,512 100,055 100,000 55 2,214 1,828 386 98,799 99,158 -359 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col. (h) gain minus col. (k), but not less than -0-) or (i) F.M.V. as of 12/31/69 Adjusted basis Excess of col. (i) **(I)** Losses (from col.(h)) (j) as of 12/31/69 (k) over col. (j), if any -2,837 -6,132-7,928-6,164315 -3,314-31,512 55 386 -359

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (d) (b) (c) How acquired (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) Date acquired Date sold P-Purchase (mo., day, yr.) (mo., day, yr.) D-Donation Р 2017-06-06 2019-03-20 2,000 SHS THE FINANCIAL SEL SECT SPDR FD 5,014 SHS UNIT FT S&P DIV AR TGT 25 3Q18 Ρ 2018-09-25 2019-10-11 5,077 SHS UNIT FT TGT HIGH QUAL DIV 3Q18 Р 2018-09-25 2019-10-11 13.8 SHS ADVANSIX INC D 2014-10-02 2019-01-30 180 SHS AIR PROD & CHEM INC D 2014-10-02 2019-04-29 34.5 SHS GARRETT MOTION INC D 2014-10-02 2019-01-30 57.5 SHS RESIDEO TECHNOLOGIES INC D 2014-10-02 2019-01-30 2014-10-02 2019-01-30 90 SHS VERSUM MATERIALS D 1,000 SHS BLACKSTONE GROUP INC CL A Ρ 2019-12-06 2018-12-07 4,000 SHS COMPASS DIVERS HLDS 7.25% Ρ 2019-07-25 2019-11-13 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 52,293 47,234 5,059 52,848 50,168 2,680 48,905 50,206 -1,301422 422 36,247 22,936 13,311 527 527 1,173 1,173 3,288 3,288 50,043 37,015 13,028 97,817 93,462 4,355 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col. (h) gain minus col. (k), but not less than -0-) or (i) F.M.V. as of 12/31/69 Adjusted basis Excess of col. (i) **(I)** Losses (from col.(h)) (j) as of 12/31/69 (k) over col. (j), if any 5,059 2,680 -1,301 422 13,311 527 1,173 3,288 13,028 4,355

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (d) (b) (c) (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) How acquired Date acquired Date sold P-Purchase (mo., day, yr.) (mo., day, yr.) D-Donation 2,000 SHS THE CARLYLE GROUP LP Ρ 2019-08-13 2019-10-18 2,037.65 SHS UNIT FT CAP STR BUY-WRITE Ρ 2019-01-01 2019-12-25 CAPITAL GAINS DIVIDENDS Ρ Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Cost or other basis Gain or (loss) Depreciation allowed (or allowable) (q) plus expense of sale (h) (e) plus (f) minus (g) (f) 53,493 44.601 8,892 2,038 2,038 284 284 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col. (h) gain minus col. (k), but not less than -0-) or (i) F.M.V. as of 12/31/69 Adjusted basis Excess of col. (i) **(I)** Losses (from col.(h)) (i) as of 12/31/69 (k) over col. (j), if any 8,892 2,038

284

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation MG O'NEIL JR PRESIDENT & DIRECTOR 119 N HIGHLAND AVE 0.00 AKRON, OH 44303 SHAWN O'NEIL VICE PRESIDENT & DIRECTOR 3756 BUTTERFIELD DRIVE AKRON, OH 44303 JANETTE COOK SECRETARY & DIRECTOR 2586 FALMOUTH ROAD

AKRON, OH 44319	0.00			
DR NANCY O'CONNOR	DIRECTOR	0	0	
675 DELAWARE AVENUE AKRON, OH 44303	0.00			
SEAN O'CONNOR	DIRECTOR	0	0	1
675 DELAWARE AVENUE	0.00			

0.00

0.00

TREASURER & DIRECTOR

AKRON, OH 44313

1744 FIXLER ROAD

WADSWORTH, OH 442818412

JULIE O'NEIL

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business)

or substantial contributor

	or substantial contributor			
a Paid during the year				
AKRON ART MUSEUM1 S HIGH ST AKRON, OH 44308		501(C)(3)	GENERAL SUPPORT	3,000

AKRON, OH 44308			
AKRON CHILDREN'S MUSEUM 216 S MAIN ST AKRON, OH 44308	501(C)(3)	GENERAL SUPPORT	10,000

AKRON CHILDREN'S MUSEUM 216 S MAIN ST AKRON, OH 44308	501(C)(3)	GENERAL SUPPORT	10,000
AKRON SYMPHONY 92 NORTH MAIN STREET AKRON OH 44308	501(C)(3)	GENERAL SUPPORT	3,000

AKRON, OH 44308			
AKRON SYMPHONY 92 NORTH MAIN STREET AKRON, OH 44308	501(C)(3)	GENERAL SUPPORT	3,000

AKRON SYMPHONY 92 NORTH MAIN STREET AKRON, OH 44308	501(C)(3)	GENERAL SUPPORT	3,000
Total	 	▶ 3a	946,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business)

or substantial contributor

Total .

a Paid during the year			
AKRON YMCA 50 SOUTH MAIN STREET SUITE LL 100 AKRON, OH 44308	501(C)(3)	GENERAL SUPPORT	20,000

AKRON, OH 44308			
AKRON ZOO500 EDGEWOOD AVE AKRON, OH 44307	501(C)(3)	GENERAL SUPPORT	5,0
ALZHEIMER'S ASSOCIATION	501(C)(3)	GENERAL SUPPORT	5,0

AKRON, OH 44307	301(0)(3)	GENERAL SUFFORT	3,000
ALZHEIMER'S ASSOCIATION 70 W STREETSBORO ST SUITE 201 HUDSON, OH 44236	501(C)(3)	GENERAL SUPPORT	5,000

000

946,000

■ 3a

ALZHEIMER'S ASSOCIATION 70 W STREETSBORO ST SUITE 201 HUDSON, OH 44236	501(C)(3)	GENERAL SUPPORT	5,00

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business)

	or substantial contributor			
a Paid during the year				
AMERICAN RED CROSS		501(C)(3)	GENERAL SUPPORT	18,000

2025 E STREET NW WASHINGTON, DC 20006	, ,, ,		
ASCPA424 EAST 92ND ST	501(C)(3)	GENERAL SUPPORT	15,

ASCPA424 EAST 92ND ST NEW YORK, NY 10128	501(C)(3)	GENERAL SUPPORT	15
WASHINGTON, DC 20006			

ASCPA424 EAST 92ND ST NEW YORK, NY 10128	501(C)(3)	GENERAL SUPPORT	15,000
AUTISM SPEAKS	501(C)(3)	GENERAL SUPPORT	10,000

NEW TORK, NT 10128			
AUTISM SPEAKS 4700 ROCKSIDE ROAD SUITE 420 INDEPENDENCE, OH 44131	501(C)(3)	GENERAL SUPPORT	10,000

946,000

■ 3a

UTISM SPEAKS 700 ROCKSIDE ROAD SUITE 420 NDEPENDENCE. OH 44131	
NDEFERREE, OFF THISE	

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business)

or substantial contributor

a Paid during the year			
BLESSED TRINITY CHURCH 300 EAST TALLMADGE AVENUE AKRON, OH 44310	501(C)(3)	GENERAL SUPPORT	5,000

AKRON, OH 44310			
BLUECOATS2060 WEST NIMICILA ROAD CLINTON, OH 44216	501(C)(3)	GENERAL SUPPORT	10,000
BOY SCOUTS OF AMERICA	501(C)(3)	GENERAL SUPPORT	5,000

CLINTON, OH 44216	501(C)(3)	GENERAL SUPPORT	10,000
BOY SCOUTS OF AMERICA 1601 S MAIN ST AKRON, OH 443090068	501(C)(3)	GENERAL SUPPORT	5,000

BOY SCOUTS OF AMERICA 1601 S MAIN ST AKRON, OH 443090068	501(C)(3)	GENERAL SUPPORT	5,000
Total	 	<u> </u> ▶ 3a	946,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

or substantial contributor

Name and address (home or business)

Total .

a Paid during the year			
CASE WESTERN RESERVE UNIVERSITY 10900 EUCLID AVENUE CLEVELAND, OH 441067035	501(C)(3)	GENRAL SUPPORT	10,000

CATHOLIC CHARITIES812 BIRUTA ST AKRON, OH 44307	501(C)(3)	GENERAL SUPPORT	
CHILD GUIDANCE AND FAMILY SOLUTIONS	501(C)(3)	GENERAL SUPPORT	

CATHOLIC CHARITIES812 BIRUTA ST AKRON, OH 44307	501(C)(3)	GENERAL SUPPORT	5,000
CHILD GUIDANCE AND FAMILY SOLUTIONS 18 N FORGE ST	501(C)(3)	GENERAL SUPPORT	12,000

AKRON, OH 44307			
CHILD GUIDANCE AND FAMILY SOLUTIONS 18 N FORGE ST	501(C)(3)	GENERAL SUPPORT	12,00

CHILD GUIDANCE AND FAMILY	501(C)(3)	GENERAL SUPPORT	12,000
SOLUTIONS 18 N FORGE ST			
AKRON, OH 44304			

18 N FORGE ST AKRON, OH 44304		
SOLUTIONS		

946,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business)

or substantial contributor

Total .

a Paid during the year			
CHRIST CHILD SOCIETY INC PO BOX 13411 AKRON, OH 443348811	501(C)(3)	GENERAL SUPPORT	10,000

AKKUN, UH 443340011			
CIVIC THEATRE182 SOUTH MAIN ST AKRON, OH 443081358	501(C)(3)	GENERAL SUPPORT	25,000
CLEVELAND ORCHESTRA	501(C)(3)	GENERAL SUPPORT	10.000

AKRON, OH 443081358	301(C)(3)	GENERAL SOFFORT	25,000
CLEVELAND ORCHESTRA 11001 EUCLID AVE CLEVELAND. OH 44106	501(C)(3)	GENERAL SUPPORT	10,000

			l .
CLEVELAND ORCHESTRA 11001 EUCLID AVE CLEVELAND, OH 44106	501(C)(3)	GENERAL SUPPORT	10,000
			1

946,000

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Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient

Name and address (nome or business)	or substantial contributor			
a Paid during the year				
CONSERVANCY FOR CUYAHOGA		501(C)(3)	GENERAL SUPPORT	10,000

NATIONAL PARKS 1403 W HINESHILL RD PENINSULA, OH 44264			
COVENANT HOUSE HEADQUARTERS	501(C)(3)	GENERAL SUPPORT	2,000

PENINSULA, OH 44264			
COVENANT HOUSE HEADQUARTERS 461 EIGHTH AVE NEW YORK, NY 10001	501(C)(3)	GENERAL SUPPORT	2,000
DALIGHTERS OF DIVINE CHARITY	501(C)(3)	GENERAL SUPPORT	15,000

COVENANT HOUSE HEADQUARTERS 461 EIGHTH AVE NEW YORK, NY 10001	501(C)(3)	GENERAL SUPPORT	2,000
DAUGHTERS OF DIVINE CHARITY 39 N PORTAGE PATH	501(C)(3)	GENERAL SUPPORT	15,000

461 EIGHTH AVE NEW YORK, NY 10001			
DAUGHTERS OF DIVINE CHARITY 39 N PORTAGE PATH AKRON, OH 44303	501(C)(3)	GENERAL SUPPORT	15,000

DAUGHTERS OF DIVINE CHARITY 39 N PORTAGE PATH AKRON, OH 44303	501(C)(3)	GENERAL SUPPORT	15,000
Total	 	▶ 3a	946,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business)

	or substantial contributor			
a Paid during the year				
DOCTORS WITHOUT BORDERS (MSF USA) 333 7TH AVENUE		501(C)(3)	GENERAL SUPPORT	10,000

ı	NEW YORK, NY 10001				
	DOMINICAN SISTERS OF PEACE 2320 AIRPORT DRIVE COLUMBUS, OH 43219		501(C)(3)	GENERAL SUPPORT	15,
1		l			

DOMINICAN SISTERS OF PEACE 2320 AIRPORT DRIVE COLUMBUS, OH 43219	501(C)(3)	GENERAL SUPPORT	15,000
DYSTONIA MEDICAL RESEARCH FOUNDATION 1 E UPPER WACKER DR 2810	501(C)(3)	GENERAL SUPPORT	5,000

COLUMBUS, OH 43219			
DYSTONIA MEDICAL RESEARCH FOUNDATION 1 E UPPER WACKER DR 2810	501(C)(3)	GENERAL SUPPORT	5,000

946,000

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution

▶ 3a

946,000

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

any foundation manager

or substantial contributor

Name and address (home or business)

517 WEST EXCHANGE STREET

AKRON, OH 44302 Total .

a Paid during the year			
EARTH ISLAND INSTITUTE 2150 ALLSTON WAY 460 BERKELEY, CA 94704	501(C)(3)	GENERAL SUPPORT	10,000
FRANCISCAN WORKS 8001 N LINCOLN AVE 705	501(C)(3)	GENERAL SUPPORT	1,000

BEITHELETY GIT STITCT			
FRANCISCAN WORKS 8001 N LINCOLN AVE 705 SKOKIE, IL 60077	501(C)(3)	GENERAL SUPPORT	1,000
GENNESARET INC	501(C)(3)	GENERAL SUPPORT	5,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

▶ 3a

946,000

any foundation manager

or substantial contributor

Name and address (home or business)

AKRON, OH 44320 Total .

a Paid during the year			
GOOD NEIGHBORS 1453 GOODYEAR BLVD AKRON, OH 44305	501(C)(3)	GENERAL SUPPORT	20,000
GREY NUNS OF THE SACRED HEART 14500 BUSTLETON AVENUE PHILADELPHIA, PA 19116	501(C)(3)	GENERAL SUPPORT	10,000

	I .			
GREY NUNS OF THE SACRED HEART 14500 BUSTLETON AVENUE PHILADELPHIA, PA 19116		501(C)(3)	GENERAL SUPPORT	10,0
HABITAT FOR HUMANITY		501(C)(3)	GENERAL SUPPORT	10,0

14500 BUSTLETON AVENUE PHILADELPHIA, PA 19116	501(C)(3)	GENERAL SUPPORT	10,000
HABITAT FOR HUMANITY 2301 ROMIG RD	501(C)(3)	GENERAL SUPPORT	10,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business)

a Paid during the year			
HATTIE LARLHAM FOUNDATION 9772 COUNTY HIGHWAY 155 MANTUA, OH 44255	501(C)(3)	GENERAL SUPPORT	10,000

ANTUA, OH 44255		
RAM FARMPO BOX 157 RAM, OH 44234	501(C)(3)	GENERAL SUPPORT

or substantial contributor

HIRAM FARMPO BOX 157 HIRAM, OH 44234	501(C)(3)	GENERAL SUPPORT	5,000
HOSPITALITY HOUSE OF CHARLOTTE	501(C)(3)	GENERAL SUPPORT	5,000

HIRAM, OH 44234	301(0)(3)	GENERAL SOLLOKI	3,000
HOSPITALITY HOUSE OF CHARLOTTE 1400 SCOTT AVE	501(C)(3)	GENERAL SUPPORT	5,000

HOSPITALITY HOUSE OF CHARLOTTE	501(C)(3)	GENERAL SUPPORT	5,000
1400 SCOTT AVE			
CHARLOTTE, NC 28203			

1400 SCOTT AVE CHARLOTTE, NC 28203		
Total	 ▶ 3a	946,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

946,000

any foundation manager

or substantial contributor

Name and address (home or business)

Total .

	or substantial contributor			
a Paid during the year				
IBH3445 S MAIN ST AKRON, OH 44319		501(C)(3)	GENERAL SUPPORT	25,000
IMMACULATE CONCEPTION OF MARY PARISH 2101 SEVENTEENTH STREET SW		501(C)(3)	GENERAL SUPPORT	10,000

IMMACULATE CONCEPTION OF MARY PARISH 2101 SEVENTEENTH STREET SW AKRON, OH 443193028	501(C)(3)	GENERAL SUPPORT	1
KEEP AKRON BEAUTIFUL	501(C)(3)	GENERAL SUPPORT	

PARISH 2101 SEVENTEENTH STREET SW AKRON, OH 443193028			,-
KEEP AKRON BEAUTIFUL	501(C)(3)	GENERAL SUPPORT	3,0

2101 SEVENTEENTH STREET SW AKRON, OH 443193028			
KEEP AKRON BEAUTIFUL 850 EAST MARKET ST	501(C)(3)	GENERAL SUPPORT	3,000

AKRON, OH 443193028			
KEEP AKRON BEAUTIFUL	501(C)(3)	GENERAL SUPPORT	3,000

KEEP AKRON BEAUTIFUL	501(C)(3)	GENERAL SUPPORT	3,000
850 EAST MARKET ST			
AKRON, OH 44305			

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

a Paid during the year			
KEVIN GUEST HOUSE782 ELLICOTT ST	501(C)(3)	GENERAL SUPPORT	10,000

BUFFALO, NY 14203

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

LA AMISTAD1650 N PARK AVE MAITLAND, FL 32751	501(C)(3)	GENERAL SUPPORT	10,000
LEAGUE OF WOMEN VOTERS	501(C)(3)	GENERAL SUPPORT	1,000

•			
LEAGUE OF WOMEN VOTERS 380 MINEOLA AVE	501(C)(3)	GENERAL SUPPORT	1,000
AKRON, OH 44320			

380 MINEOLA AVE AKRON, OH 44320	301(0)(3)	GENERAL SUFFORT	
		İ	

Total .

or substantial contributor

946,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of

946,000

any foundation manager

or substantial contributor

Name and address (home or business)

Total .

a Paid during the year			
LEUKEMIA LYMPHOMA SOCIETY 3 INTERNATIONAL DRIVE SUITE 200 RYE BROOK, NY 10573	501(C)(3)	GENERAL SUPPORT	25,000
LITTLE SISTERS OF THE POOR 4291 RICHMOND RD	501(C)(3)	GENERAL SUPPORT	10,000

LITTLE SISTERS OF THE POOR 4291 RICHMOND RD CLEVELAND, OH 44122	501(C)(3)	GENERAL SUPPORT	10,0
LOYOLA RETREAT HOUSE INC	501(C)(3)	GENERAL SUPPORT	15,0

4291 RICHMOND RD CLEVELAND, OH 44122	501(C)(3)	GENERAL SUPPORT	10,
LOYOLA RETREAT HOUSE INC	501(C)(3)	GENERAL SUPPORT	15,

4291 RICHMOND RD CLEVELAND, OH 44122	,,,,		ŕ
LOYOLA RETREAT HOUSE INC	501(C)(3)	GENERAL SUPPORT	15,000

CLEVELAND, OH 44122			
LOYOLA RETREAT HOUSE INC 700 KILLINGER RD	501(C)(3)	GENERAL SUPPORT	15,000

LOYOLA RETREAT HOUSE INC	501(C)(3)	GENERAL SUPPORT	15,000
700 KILLINGER RD			
CLINTON, OH 44216			

CLINTON, OH 44216			
700 KILLINGER RD	` ^` /		
LOTOLA KETKLAT HOUSE INC		I GENERAL SOLLOKI	

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

▶ 3a

946,000

any foundation manager

or substantial contributor

Name and address (home or business)

Total .

a Paid during the year			
MAGICAL THEATRE COMPANY 565 W TUSCARAWAS AVE BARBETON, OH 44203	501(C)(3)	GENERAL SUPPORT	10,000
METRO PARKS FOUNDATION	501(C)(3)	GENERAL SUPPORT	20,000

METRO PARKS FOUNDATION 975 TREATY LINE RD AKRON, OH 44313	501(C)(3)	GENERAL SUPPORT	20
MISSIONARIES OF SACRED HEART	501(C)(3)	GENERAL SUPPORT	5

975 TREATY LINE RD AKRON, OH 44313	,,,,		,
MISSIONARIES OF SACRED HEART PO BOX 270 305 S LAKE ST AURORA, IL 605070270	501(C)(3)	GENERAL SUPPORT	5,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

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

any foundation manager

or substantial contributor

Name and address (home or business)

a Paid during the year			
MOBILE MEALS INC 1063 S BROADWAY ST AKRON, OH 44311	501(C)(3)	GENERAL SUPPORT	5,000
ONE-IN-SIX FOUNDATION	501(C)(3)	GENERAL SUPPORT	3,000

OUR LARY OF THE WAYGIRE	E04 (C) (D)	CENERAL CURRORE	
ONE-IN-SIX FOUNDATION 106 SOUTH MAIN ST AKRON, OH 44308	501(C)(3)	GENERAL SUPPORT	
7 ii (i (i i i i i i i i i i i i i i i			

106 SOUTH MAIN ST AKRON, OH 44308	(-)(-)		-,-
OUR LADY OF THE WAYSIDE 38135 COLORADO AVE	501(C)(3)	GENERAL SUPPORT	5,0

AKRON, OH 44308			
OUR LADY OF THE WAYSIDE 38135 COLORADO AVE	501(C)(3)	GENERAL SUPPORT	5,0
AVON OH 44011			

OUR LADY OF THE WAYSIDE	501(C)(3)	GENERAL SUPPORT	5,000
38135 COLORADO AVE AVON, OH 44011			
,,			

Total	 	▶ 3a	946,000
38135 COLORADO AVE AVON, OH 44011	, , , ,		·

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business)

a Paid during the year			
PARALYZED VETERANS OF AMERICA 801 EIGHTEENTH ST NW WASHINGTON, DC 20006	501(C)(3)	GENERAL SUPPORT	5,000

SHINGTON, DC 20006		
ER MAURIN CENTER 6 SOUTH MAIN ST	501(C)(3)	GENERAL SUPPORT

or substantial contributor

Total .

PETER MAURIN CENTER 1096 SOUTH MAIN ST	501(C)(3)	GENERAL SUPPORT	5,000
AKRON, OH 44301			

1096 SOUTH MAIN ST AKRON, OH 44301	301(0)(3)	CENTERVIE SONT OILT	3
RAHAB MINISTRIESPO BOX 13866	501(C)(3)	GENERAL SUPPORT	15

AKRON, OH 44301			
RAHAB MINISTRIESPO BOX 13866 AKRON, OH 443348811	501(C)(3)	GENERAL SUPPORT	15,000

RAHAB MINISTRIESPO BOX 13866 AKRON, OH 443348811	501(C)(3)	GENERAL SUPPORT	15,000

946,000

■ 3a

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

946,000

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

any foundation manager

or substantial contributor

Name and address (home or business)

a Paid during the year			
REGINA HEALTH CENTER 5232 BROADVIEW RD RICHFIELD, OH 44286	501(C)(3)	GENERAL SUPPORT	25,000
RESURGE INTERNATIONAL	501(C)(3)	GENERAL SUPPORT	5 000

RESURGE INTERNATIONAL 145 N WOLFE RD SUNNYVALE, CA 94086	501(C)(3)	GENERAL SUPPORT	5,
RONALD MCDONALD HOUSE OF AKRON	501(C)(3)	GENERAL SUPPORT	10,

145 N WOLFE RD SUNNYVALE, CA 94086	(-)(-)		_,-
RONALD MCDONALD HOUSE OF AKRON 245 LOCUST ST	501(C)(3)	GENERAL SUPPORT	10,0

145 N WOLFE RD SUNNYVALE, CA 94086	(-)(-)		2,222
RONALD MCDONALD HOUSE OF AKRON 245 LOCUST ST	501(C)(3)	GENERAL SUPPORT	10,000

RONALD MCDONALD HOUSE OF AKRON	501(C)(3)	GENERAL SUPPORT	10,000
245 LOCUST ST			
AKRON, OH 44302			

RONALD MCDONALD HOUSE OF AKRON	501(C)(3)	GENERAL SUPPORT	
245 LOCUST ST			
AKRON OH 44202			

AKRON, OH 44302		
245 LOCUST ST		

Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

or substantial contributor

	or substantial continuation			
a Paid during the year				
ROSIE'S THEATRE KIDS445 W 45TH ST NEW YORK, NY 10036		501(C)(3)	GENERAL SUPPORT	5,000

11211 101111,111 10050			1
ROTARY CAMP (AKRON)	501(C)(3)	GENERAL SUPPORT	t
4460 REX LAKE DRIVE			
AKRON, OH 44319			

4460 REX LAKE DRIVE AKRON, OH 44319			·
SACRED HEART450 DENNISON AVE	501(C)(3)	GENERAL SUPPORT	10,00

AKRON, OH 44319			
SACRED HEART450 DENNISON AVE	501(C)(3)	GENERAL SUPPORT	10,000

SACRED HEART450 DENNISON AVE AKRON, OH 44312	501(C)(3)	GENERAL SUPPORT	10,000
			1

AKRON, OH 44312	501(C)(3)	GENERAL SUPPORT	10,0
Total	 	▶ 3a	946,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or husiness)

Name and address (nome or business)	or substantial contributor			
a Paid during the year				
SETON HILL UNIVERSITY		501(C)(3)	GENERAL SUPPORT	15,000

1 SETON HILL DR GREENSBURG, PA 15601			
SHRINERS HOSPITALS FOR CHILDREN 2900 ROCKY POINT DR	501(C)(3)	GENERAL SUPPORT	10,000

CREENSBORG/17C 13001			
SHRINERS HOSPITALS FOR CHILDREN 2900 ROCKY POINT DR TAMPA, FL 33607	501(C)(3)	GENERAL SUPPORT	10,0
SISTERS OF CHARITY OF SAINT	501(C)(3)	GENERAL SUPPORT	5,0

SHRINERS HOSPITALS FOR CHILDREN 2900 ROCKY POINT DR TAMPA, FL 33607	501(C)(3)	GENERAL SUPPORT	10,000
SISTERS OF CHARITY OF SAINT ELIZABETH PO BOX 476	501(C)(3)	GENERAL SUPPORT	5,000

TAMPA, FL 33607			
SISTERS OF CHARITY OF SAINT ELIZABETH PO BOX 476 CONVENT STATION, NJ 07961	501(C)(3)	GENERAL SUPPORT	5,000

SISTERS OF CHARITY OF SAINT ELIZABETH PO BOX 476 CONVENT STATION, NJ 07961	501(C)(3)	GENERAL SUPPORT	5,000
Total	 	▶ 3a	946,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year			
SISTERS OF SAINT JOSEPH 577 CAREW STREET SPRINGFIELD, MA 01104	501(C)(3)	GENERAL SUPPORT	10,000

SPRINGFIELD, MA 01104			
SISTERS SERVANTS OF THE IMMACULATE HEART OF MARY 1140 KING RD IMMACULATA, PA 193450200	501(C)(3)	GENERAL SUPPORT	10,000

IMMACULATE HEART OF MARY 1140 KING RD IMMACULATA, PA 193450200	501(C)(3)	GENERAL SUPPORT	10,000
SMILE TRAIN	501(C)(3)	GENERAL SUPPORT	10,000

1140 KING RD IMMACULATA, PA 193450200			
SMILE TRAIN 41 MADISON AVENUE 28TH FLOOR NEW YORK, NY 10010	501(C)(3)	GENERAL SUPPORT	10,000

	,			
	SMILE TRAIN 41 MADISON AVENUE 28TH FLOOR NEW YORK, NY 10010	501(C)(3)	GENERAL SUPPORT	10,000
1				

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

946,000

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

any foundation manager

or substantial contributor

Name and address (home or business)

a Paid during the year			
SPRING LAKE RANCH 1169 SPRING LAKE RD CUTTINGSVILLE, VT 05738	501(C)(3)	GENERAL SUPPORT	5,000
ST BERNARD'S MEALS	501(C)(3)	GENERAL SUPPORT	25,000

	ST BERNARD'S MEALS 44 UNIVERSITY AVE AKRON, OH 44308	501(C)(3)	GENERAL SUPPORT	25,1
1	ST 10SEPH'S HOME FOR THE ELDERLY	501(C)(3)	GENERAL SUPPORT	5 1

44 UNIVERSITY AVE AKRON, OH 44308	(-)(-)		
ST JOSEPH'S HOME FOR THE ELDERLY 140 SHEPARDS LN 1	501(C)(3)	GENERAL SUPPORT	5,0

KRUN, OH 44306			
T JOSEPH'S HOME FOR THE ELDERLY 40 SHEPARDS LN 1	501(C)(3)	GENERAL SUPPORT	5,000

OT DOOL IT ON THE ELDERE	l l	301(0)(3)	021121012 0011 0111	0,000
140 SHEPARDS LN 1				
TOTOWA, NJ 07512				
				<i></i>

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

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

any foundation manager

or substantial contributor

Name and address (home or business)

	or substantial contributor			
a Paid during the year				
ST JUDE CHILDREN'S RESEARCH HOSPITAL 262 DANNY THOMAS PLACE MEMPHIS, TN 38105		501(C)(3)	GENERAL SUPPORT	10,000
ST MARY'S CHURCH750 S MAIN ST		501(C)(3)	GENERAL SUPPORT	10,000

MEMPHIS, TN 38105			
ST MARY'S CHURCH750 S MAIN ST AKRON, OH 44311	501(C)(3)	GENERAL SUPPORT	10,0
ST MARY'S ELEMENTARY SCHOOL	501(C)(3)	GENERAL SUPPORT	10,0

ST MARY'S CHURCH750 S MAIN ST AKRON, OH 44311	501(C)(3)	GENERAL SUPPORT	10,000
ST MARY'S ELEMENTARY SCHOOL 750 S MAIN ST AKRON, OH 44311	501(C)(3)	GENERAL SUPPORT	10,000

AKRON, OH 44311			
ST MARY'S ELEMENTARY SCHOOL 750 S MAIN ST AKRON, OH 44311	501(C)(3)	GENERAL SUPPORT	10,000
Total	 	▶ 3a	946,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to contribution status of

946,000

▶ 3a

any foundation manager

Name and address (home or business)

,	or substantial contributor			
a Paid during the year				
ST VINCENT DE PAUL CHURCH 15 NORTH MAPLE STREET AKRON, OH 44303		501(C)(3)	GENERAL SUPPORT	20,000

AKRON, OH 44303			
ST VINCENT DE PAUL PARISH SCHOOL 15 NORTH MAPLE STREET AKRON, OH 44303	501(C)(3)	GENERAL SUPPORT	15,

ST VINCENT DE PAUL PARISH SCHOOL 15 NORTH MAPLE STREET AKRON, OH 44303	501(C)(3)	GENERAL SUPPORT	15,000
ST VINCENT DE PAUL SOCIETY 15 NORTH MAPLE STREET	501(C)(3)	GENERAL SUPPORT	20,000

AKRON, OH 44303			
ST VINCENT DE PAUL SOCIETY 15 NORTH MAPLE STREET AKRON, OH 44303	501(C)(3)	GENERAL SUPPORT	20,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

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

any foundation manager

or substantial contributor

Name and address (home or business)

a Paid during the year			
ST VINCENT DE PAUL ST SEBASTIAN 476 MULL AVE AKRON, OH 44320	501(C)(3)	GENERAL SUPPORT	20,000
ST VINCENT ST MARY HIGH SCHOOL	501(C)(3)	GENERAL SUPPORT	5,000

ST VINCENT ST MARY HIGH SCHOOL 15 NORTH MAPLE STREET AKRON, OH 44303	501(C)(3)	GENERAL SUPPORT	5,0
STAN HYWET HALL AND GARDENS	501(C)(3)	GENERAL SUPPORT	6,0

15 NORTH MAPLE STREET AKRON, OH 44303			
STAN HYWET HALL AND GARDENS 714 N PORTAGE PATH	501(C)(3)	GENERAL SUPPORT	

AKRON, OH 44303			
STAN HYWET HALL AND GARDENS 714 N PORTAGE PATH	501(C)(3)	GENERAL SUPPORT	

, ,			
STAN HYWET HALL AND GARDENS 714 N PORTAGE PATH AKRON, OH 44303	501(C)(3)	GENERAL SUPPORT	6,000

714 N PORTAGE PATH AKRON, OH 44303	(-)(-)		-,
Total	 	▶ 3a	946,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

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

any foundation manager

or substantial contributor

Name and address (home or business)

a Paid during the year			
STEWART'S CARING PLACE 2955 W MARKET ST SUITE R AKRON, OH 44333	501(C)(3)	GENERAL SUPPORT	3,000
SUMMIT COUNTY HISTORICAL SOCIETY	501(C)(3)	GENERAL SUPPORT	1,000

AKRON, OH 44333			
SUMMIT COUNTY HISTORICAL SOCIETY 550 COPLEY RD AKRON, OH 44320	501(C)(3)	GENERAL SUPPORT	1,000
THE CHRISTOPHERS	501(C)(3)	GENERAL SUPPORT	1,000

550 COPLEY RD AKRON, OH 44320	301(0)(3)	OLIVEIVAE SOLI OKT	1,000
THE CHRISTOPHERS 5 HANOVER SQUARE 11TH FLOOR NEW YORK, NY 10004	501(C)(3)	GENERAL SUPPORT	1,000

AKRON, OH 44320			
THE CHRISTOPHERS 5 HANOVER SQUARE 11TH FLOOR NEW YORK, NY 10004	501(C)(3)	GENERAL SUPPORT	1,000
Total	 	▶ 3a	946,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

	or substantial continuator			
a Paid during the year				
UNICEF125 MAIDEN LANE		501(C)(3)	GENERAL SUPPORT	

or substantial contributor

Total .

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

NEW YORK, NY 10038			
UNITED WAY OF SUMMIT COUNTY 90 NORTH PROSPECT STREET	501(C)(3)	GENERAL SUPPORT	10,

UNITED WAY OF SUMMIT COUNTY 90 NORTH PROSPECT STREET AKRON, OH 443041273	501(C)(3)	GENERAL SUPPORT	10,000
URSULINE SISTERS2600 LANDER RD	501(C)(3)	GENERAL SUPPORT	15,000

20,000

AKRON, OH 443041273			
URSULINE SISTERS2600 LANDER RD	501(C)(3)	GENERAL SUPPORT	15,0

,			
URSULINE SISTERS2600 LANDER RD PEPPER PIKE, OH 44124	501(C)(3)	GENERAL SUPPORT	

	i		•	
URSULINE SISTERS2600 LANDER RD		501(C)(3)	GENERAL SUPPORT	
PEPPER PIKE, OH 44124				

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business)

or substantial contributor

Total .

	or substantial contributor			
a Paid during the year				
VILLAGE NETWORKPO BOX 518 SMITHVILLE, OH 44677		501(C)(3)	GENERAL SUPPORT	5,000

VILLAGE OF ST EDWARD FOUNDATION 3131 SMITH RD FAIRLAWN, OH 44333	501(C)(3)	GENERAL SUPPORT	2,000

3131 SMITH RD FAIRLAWN, OH 44333	,,,,		,
VIOLA STARTSMAN FREE CLINIC	501(C)(3)	GENERAL SUPPORT	5,000

FAIRLAWN, OH 44333			
VIOLA STARTSMAN FREE CLINIC 1874 CLEVELAND RD WOOSTER OH 44691	501(C)(3)	GENERAL SUPPORT	5,000

WOOSTER, OH 44691	VIOLA STARTSMAN FREE CLINIC	501(C)(3)	GENERAL SUPPORT	5,000
WOOSTER, OH 44691	1874 CLEVELAND RD			
	WOOSTER, OH 44691			

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or husiness)

Name and address (nome or business)	or substantial contributor			
a Paid during the year				
WEATHERVANE COMMUNITY PLAYHOUSE		501(C)(3)	GENERAL SUPPORT	2,000

1301 WEATHERVANE LN AKRON, OH 443135186			
WELL AKRON647 EAST MARKET STREET AKRON, OH 44305	501(C)(3)	GENERAL SUPPORT	5,000
WOMENS AUXILLARY BOARD OF	501(C)(3)	GENERAL SUPPORT	5,000

WELL AKRON647 EAST MARKET STREET AKRON, OH 44305	501(C)(3)	GENERAL SUPPORT	5,000
WOMENS AUXILLARY BOARD OF CHILDRENS SERVICES PO BOX 2253 STOW. OH 44224	501(C)(3)	GENERAL SUPPORT	5,000

WELL AKRON647 EAST MARKET STREET AKRON, OH 44305	501(C)(3)	GENERAL SUPPORT	5,00
WOMENS AUXILLARY BOARD OF CHILDRENS SERVICES PO BOX 2253	501(C)(3)	GENERAL SUPPORT	5,00

Total .

ARRON, OH 44305			
WOMENS AUXILLARY BOARD OF CHILDRENS SERVICES PO BOX 2253 STOW, OH 44224	501(C)(3)	GENERAL SUPPORT	5,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

10,000

946,000

▶ 3a

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

a Paid during the year			
WORLD VISION 34834 WEYERHAEUSER WAY SOUTH FEDERAL WAY, WA 98001	501(C)(3)	GENERAL SUPPORT	10,000

VORLD WILDLIFE FUND .250 24TH STREET NW VASHINGTON, DC 20037	501(C)(3)	GENERAL SUPPORT	

any foundation manager

or substantial contributor

Name and address (home or business)

WASHINGTON, DC 20037			
WOUNDED WARRIOR PROJECT 4899 BELFORT RD STE 300	501(C)(3)	GENERAL SUPPORT	5,000

WOUNDED WARRIOR PROJECT	501(C)(3)	GENERAL SUPPORT	5
4899 BELFORT RD STE 300			
JACKSONVILLE, FL 32256			

Wite Hiller of the Edds			
WOUNDED WARRIOR PROJECT	501(C)(3)	GENERAL SUPPORT	5,0
4899 BELFORT RD STE 300			
I A CUCONUTLLE EL DODEC			

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

a Paid during the year			
COLEMAN PROFESSIONAL SERVICES 5982 RHODES RD	501(C)(3)	GENERAL SUPPORT	5,000

KENT, OH 44240

or substantial contributor

Name and address (home or business)

	(-) (-)		
GRACE HOUSEMISSING AKRON, OH 99999	501(C)(3)	GENERAL SUPPORT	15,000

E01(C)(2)	CENERAL CURRORT	
501(C)(3)	GENERAL SUPPORT	

NAMI4301 WILSON BLVD STE 100 ARLINGTON, VA 22203	501(C)(3)	GENERAL SUPPORT	5,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

946,000

▶ 3a

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

any foundation manager

or substantial contributor

Name and address (home or business)

a Paid during the year			
VALOR HOME VETERAN FAMILY SERVICES 1121 EXETER RD AKRON, OH 44306	501(C)(3)	GENERAL SUPPORT	10,000
INTERNATIONAL RESCUE COMMITTEE	E01(C)(2)	CENEDAL SUDDODT	20,000

INTERNATIONAL RESCUE COMMITTEE 501(C)(3)	
PO BOX 6068 ALBERT LEA, MN 560079847	GENERAL SUPPORT 20,0

INTERNATIONAL RESCUE COMMITTEE PO BOX 6068 ALBERT LEA, MN 560079847	501(C)(3)	GENERAL SUPPORT	20,000
FIRST GLANCE943 KENMORE BLVD	501(C)(3)	GENERAL SUPPORT	10,000

ALBERT LEA, MN 560079847			
FIRST GLANCE943 KENMORE BLVD KENMORE, OH. 44314	501(C)(3)	GENERAL SUPPORT	10,000

ALBERT LEA, MN 5600/984/			
FIRST GLANCE943 KENMORE BLVD KENMORE, OH 44314	501(C)(3)	GENERAL SUPPORT	10,000

FIRST GLANCE943 KENMORE BLVD	501(C)(3)	GENERAL SUPPORT	10,0
KENMORE, OH 44314			

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 status of contribution

Purpose of grant or contribution

(or substantial contributor			
a Paid during the year				
CMJ USAPO BOX 443 AMBRIDGE, PA 15003		501(C)(3)	GENERAL SUPPORT	5,000

5,000

946,000

■ 3a

AMBRIDGE, PA 15003	301(0)(3)	SEITER VIE SOFT SIKT	•
MISSING GRANT FOR CHECK #1861 MISSING AKRON, OH 99999	501(C)(3)	GENERAL SUPPORT	ţ

any foundation manager

Name and address (home or business)

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491321013780
TY 2019 Investments Corporat	e Bonds Sche	edule
Name: N	MG O'NEIL FOUND	IDATION

2,286,435

2,237,160

EIN: 34-6516968 **Investments Corporate Bonds Schedule** Name of Bond End of Year Book End of Year Fair **Value** Market Value

CORPORATE BONDS

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491321013780						
TY 2019 Investments Corporate Stock Schedule									
Name:	MG O'NEIL FOUND	DATION							
FTN.	24 (51(000								

11,163,512

6,663,649

EIN: 34-0310900		
Investments Corporation Stock Schedule		
Name of Stock	End of Year Book Value	End of Year Fair Market Value
		

COMMON EQUITY SECURITIES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491321013780			
TY 2019 Investments Government Obligations Schedule						
Name:	MG O'NEIL FO	UNDATION				
EIN:	34-6516968					
US Government Securities - End of Year Book Value:		0				
US Government Securities - End of Year Fair Market Value:		0				
State & Local Government Securities - End of Year Book Value:		136,606				
State & Local Government Securities - End of Year Fair Market Value:		161,593				

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		_
TV 2010 Investments - Other	Schodulo	

Name: MG O'NEIL FOUNDATION

ETN: 34-6516968

EIN: 54-0510900				
Investments Other Schedule 2				
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value	
MORGAN STANLEY CLOSED END FUNDS	AT COST	256,639	258,636	
PUTNAM MUTUAL FUND	AT COST	772,385	772,604	
CLOSED END EQUITY MUTUAL FUND	AT COST	445,885	1,143,890	
BLACKSTONE K1	AT COST	47,942	83,910	
UNIT INVESTMENT TRUSTS	AT COST	152,681	168,373	
COMPASS DIVERSIFIED K1	AT COST	125,000	128,200	
ENERGY TRANSFER OPER	AT COST	100,000	101,280	
MPLX LP K1	AT COST	103,743	100,750	

Description

As Filed Data -

DEPOSIT IN TRANSIT

Other Assets Schedule

EIN: 34-6516968

Book Value

Beginning of Year -End of Year - Book

Value

2,373

DLN: 93491321013780

End of Year - Fair

Market Value

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	93491321013780		
TY 2019 Other Expenses Schedule						
Name:	Name: MG O'NEIL FOUNDATION					
EIN:	34-6516968					
Other Expenses Schedule						
Description	Revenue and	Net Investment	Adjusted Net	Disbursements for		

Other Expenses Schedule	ı.		1	·
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT FEES	115	115		0

6,519

TRUSTEE FEES

efile GRAPHIC print - DO NOT PR	OCESS	As Filed Data	-	DLI	N: 93491321013780			
TY 2019 Taxes Schedule								
	N = = -	MC OINELL E	OUNDATION					
Name: MG O'NEIL FOUNDATION								
EIN: 34-6516968								
Category	А	mount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			
OHIO		200	0		0			
FEDERAL TAXES		5,250	0		0			