Form 990-PF

Department of the Treasury Internal Revenue Service

Return of Private Foundation

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

Do not enter social security numbers on this form as it may be made public. ► Go to www irs gov/Form990PFfor instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

I	CHE	HEYMANN FOUNDATION		34-6	5518714			
		and street (or PO box number if mail is not delivered to	T	3 Telephone number	(see instructions)			
1	1621	O TIMBERWOLF DRIVE		410	9-865-5464			
		O TIMBERWOLF DRIVE	l code			\dashv	41.	9-003-3 404
·						- •	If exemption application pending, check here.	on is
		LAND, OH 43528				_		_
G	Che	ck all that apply: Initial return	Initial return	•	ıblic charit	γļ	1. Foreign organization	ons, check here >
		Final return	Amended ret				2. Foreign organization 85% test, check he	
		Address change	Name change			_	computation	
<u>-</u>	\neg	ck type of organization: X Section 501(_		on 04	[₁	E If private foundation s	
L		ection 4947(a)(1) nonexempt charitable trust	Other taxable pri			\dashv	under section 507(b)(1)(A), check here .
		1	Inting method: X Ca	ash Accr	uar			a 60-month termination
		, , , , , , , , , , , , , , , , , , , ,	her (specify) olumn (d), must be on ca	ach basis \		-	under section 507(b)(1)(B), check here . >
	_	► \$ 2,231,844. (Part I, of Analysis of Revenue and Expenses (The		isii Dasis./				(d) Disbursements
L C	art	total of amounts in columns (b), (c), and (d)	(a) Revenue and expenses per	(b) Net inves		(c)	Adjusted net	for charitable
		may not necessarily equal the amounts in column (a) (see instructions).)	books	income	•		income	purposes (cash basis only)
Т	1	Contributions, gifts, grants, etc , received (attach schedule) .			•			
	2	Check Y if the foundation is not required to						******
	3	attach Sch B					, ,	· · · · · · · · · · · · · · · · · · ·
	4	Dividends and interest from securities	50,517.	5(0,517.			
		Gross rents	/					
		Net rental income or (loss)						
ار		Net gain or (loss) from sale of assets not on line 10	60,589.					
2000		Gross sales price for all 159, 315.						
	7	Capital gain net income (from Part IV, line 2)		. 60	0,589.			
	8	Net short-term capital gain						
	9	Income modifications						1.07
ľ	10a	Gross sales less returns and allowances						
	b	Less. Cost of goods sold .					` \	
	c	Gross profit or (loss) (attach schedule)						
•	11	Other income (attach schedule)			100			
+	12	Total. Add lines 1 through 11	111,106.		L,106.			3 0
	13	Compensation of officers, directors, trustees, etc.	4,699.		2,820.		37037	1,8
ا إِذَ	14	Other employee salaries and wages		*-	NONE		NONE	
"	15	Pension plans, employee benefits	'		NONE		NONE	
1		Legal fees (attach schedule)	2 400		NONE		NONE	2 4
-	Ь	Accounting fees (attach schedule) STMT. 1	2,400.		NONE		NOME	2,4
	_ C	Other professional fees (attach schedule)						<u>, </u>
ا	c 17 18 19 20 21 22 23 24	Interest RECEIVED	1,013.				i	
	18 10	Taxes (attach schedule) (see instructions) 2.	1,013.	_			1	
	19 20	Depreciation (attach schedule) and depletion. Occupants AUG 1.0 .2020						
	∠U 21	Travel, conferences, and meetings			NONE		NONE	
<u>:</u>	4 I 22	Printing and publicable N. UT			NONE		NONE	
	23 23	Other expenses (attach schedule) STMT. 3.	200.					
	24	Total operating and administrative expenses.	,				····	
5	•	Add lines 13 through 23	[*] 8,312.	2	2,820.		NONE	4,28
<u>}</u>	25	Contributions, gifts, grants paid	92,220.					92,22
- 1	26	Total expenses and disbursements Add lines 24 and 25	100,532.	2	2,820.		NONE	96,50
_	27	Subtract line 26 from line 12						
T		Excess of revenue over expenses and disbursements	10,574.					
	ь	Net investment income (if negative, enter -0-)		108	3,286.			
		"Adjusted net income (if negative, enter -0-)						

3.40

E	art ⁰ ll	Balance Sheets	Attached schedules and amounts in the	Beginning of year	End	d of year
_			description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-beari	ng	· · · · · · · · · · · · · · · · · · ·		
	2	Savings and temporary	cash investments	42,372.	51,640	<u> 51,640</u>
	3	Accounts receivable				
		Less: allowance for doub	otful accounts >			
	4					!
		Less: allowance for doub	otful accounts >			
	5					
	6	Receivables due from	officers, directors, trustees, and other			
			ach schedule) (see instructions)			
•	7		eceivable (attach schedule)		-	
		Less allowance for doub	otful accounts NONE			
Assets	8	Inventories for sale or us	:e			
SS	9		eferred charges			_
⋖			government obligations (attac Samu ula			
	1		stock (attach schedule) . STMT .5			1,837,511
	c		bonds (attach schedule) . STMT .7	197,806.	248,072	257,977
	11	Investments - land, building and equipment basis	·		•	•
		Less accumulated deprecia (attach schedule)	tion >			
	12	Investments - mortgage	loans			
	13	Investments - other (atta Land, buildings, and	ch schedule)			<u></u>
	14		>		-	
		(attach schedule)	tion			
	15	Other assets (describe	·)			
	16		completed by all filers - see the			
_	<u> </u>		age 1, item I)	1,586,064.	1,596,606	2,231,844
	17		ccrued expenses			
۰.	18	Grants payable	· • • • • • • • • • • • • • • • • • • •			
Ë	19	Deferred revenue	, 		·· ·	
abilities	20		rs, trustees, and other disqualified persons			
Lia	21		tes payable (attach schedule)			
_	22	Other liabilities (describe	•▶)		· ·	
	23	Total linkillisian /add line	s 17 through 22)		NON	1179
_			FASB ASC 958, check here	· · · · ·	NON	<u>, D</u>
nces		and complete lines 24,				
a	24	Net assets without dono				
뗾	25	Net assets with donor re	Г			
ᅙ	24 25 26 27 28 29 30		bllow FASB ASC 958, check here			†
בָּ		and complete lines 26 thro	<u> </u>			
ᇹ	26	-	ipal, or current funds	1,586,064.	1,596,606	
S	27		land, bldg , and equipment fund		=1	
set	28	•	ated income, endowment, or other funds			
Ą	29	•	balances (see instructions)	1,586,064.	1,596,606	
<u>e</u>	30	Total liabilities and				
2		instructions)	<u></u> . <u></u>	1,586,064.	1,596,606	
P	art III	Analysis of Chan	ges in Net Assets or Fund Balar	nces		
1	Tota	I net assets or fund b	alances at beginning of year - Part I	I, column (a), line 29 (n	nust agree with	
		_	d on prior year's return)			1,586,064.
			line 27a		2	10,574.
			ed in line 2 (itemize) ► SEE STAT		3	38.
4					<u>4</u>	1,596,676.
5			line 2 (itemize) ► 2019 INCOME POSTED			70.
6	Tota	I net assets or fund ba	lances at end of year (line 4 minus li	ne 5) - Part II, column (b)), line 29 6	1,596,606.

Part IV Capital Gains	and Losses for Tax on Inve	estment Income			
(a) List and des	cribe the kind(s) of property sold (for e ick warehouse; or common stock, 200		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr.)	(d) Date sold (mo , day, yr)
1a PUBLICLY TRADED	SECURITIES				
b					
C					<u> </u>
d					
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo ((e) plus (f) mini	
a 159,315.		98,726.			60,589.
b					
С					
d					
e					
Complete only for assets sh	owing gain in column (h) and owned b	by the foundation on 12/31/69.	(1)	Gains (Col. (h) ga	in minus
(2) 5341/ 540/04/00	(j) Adjusted basis	(k) Excess of col. (i)	col.	(k), but not less t	han -0-) or
(i) FMV as of 12/31/69	as of 12/31/69	over col. (j), if any		Losses (from co	l. (h)}
a					60,589.
b					
C					
d					
e					
2 Capital gain net income	or (net capital loss)	ain, also enter in Part I, line 7 oss), enter -0- in Part I, line 7	2		60,589.
If gain, also enter in P		structions. If (loss), enter -0- in			
		luced Tax on Net Investment I	3		
		butable amount of any year in the b	ase perio	d?	Yes X No
	t qualify under section 4940(e). D	or; see the instructions before making	ng anv en	tries.	
(a)			ig dily on	(d)	· · ·
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		Distribution ra (col (b) divided by	col. (c))
2018	97,729.	1,972,393.	<u> </u>		0.049548
2017	81,806.	1,853,006.	ļ		0.044148
2016	87,192.	1,729,212.	ļ		0.050423
2015	87,629.		ļ		0.050209
2014	130,935.	1,833,565.			0.071410
2 Total of line 1, column (q)		2		0.265738
		de the total on line 2 by 5.0, or by			
-		If less than 5 years	3		0.053148
Enter the net value of no	oncharitable-use assets for 2019 fi	rom Part X, line 5	4	2,	072,124.
5 Multiply line 4 by line 3.			5		110,129.
Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		1,083.
7 Add lines 5 and 6			7		111,212.
8 Enter qualifying distribut	tions from Part XII, line 4 greater than line 7, check the box	c in Part VI, line 1b, and complete	8 that part	using a 1% tax	96,500. c rate. See th

	1112414	ICLIOII	S)
Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
			
		2,1	.66.
here and enter 1% of Part I, line 27b			
Part I, line 12, col. (b)			
Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		N	ONE
		2,1	.66.
		Ņ	ONE
		2,1	.66.
Credits/Payments:			
Exempt foreign organizations - tax withheld at source			
Tax paid with application for extension of time to file (Form 8868) 6c NONE			
Backup withholding erroneously withheld			
Total credits and payments. Add lines 6a through 6d		9	48.
		1,2	218.
Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
Enter the amount of line 10 to be: Credited to 2020 estimated tax ► NONE Refunded ► 11			
VII-A Statements Regarding Activities			
During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
participate or intervene in any political campaign?	1a		X
Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			
instructions for the definition	1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
published or distributed by the foundation in connection with the activities.			
Did the foundation file Form 1120-POL for this year?	1c		<u> </u>
Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$			
Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
on foundation managers. > \$			
Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		<u>X</u>
If "Yes," attach a detailed description of the activities.			
Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		<u>X</u>
If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		<u>X</u>
If "Yes," attach the statement required by General Instruction T.			
Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
By language in the governing instrument, or			
• By state legislation that effectively amends the governing instrument so that no mandatory directions that			
conflict with the state law remain in the governing instrument?	6		
Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X	
Enter the states to which the foundation reports or with which it is registered. See instructions OH			
If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	8b		X
***	9		<u>X</u>
Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			Х
	Dues tic foundations that meet the section 4940(e) requirements in Part V, check Tax based on investment income. Subtract line 4 from line 3. if zero or less, enter -0.)	Date of fulling or determination letter Commistic foundations that meet the section 4940(e) requirements in Part V, check All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 27c. All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 27c. All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 27c. All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 27c. All other domestic foundations enter 2% of line 27b. All other domestic foundations only; others, enter -0-)	Direct of fundations that meet the section 4940(e) requirements in Part V, check here ▶ □ and enter 1% of Part I, line 27b

Part	VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11	,	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ▶ THE TRUST COMPANY OF TOLEDO Telephone no. ▶ (419) 865-	<u>546</u>	4	
	Located at ▶ 1630 TIMBERWOLF DRIVE, HOLLAND, OH ZIP+4 ▶ 43528			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		▶	
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority_		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country			
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after		i	
	termination of government service, if terminating within 90 days.)			
ь	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in			
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		Х
	Organizations relying on a current notice regarding disaster assistance, check here			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2019?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			
	6d and 6e) for tax year(s) beginning before 2019?			
	If "Yes," list the years			
Ь	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions.)	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the			
	foundation had excess business holdings in 2019.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		X
	For	ո 99	0-PF	(2019)

Part	VII-B Statements Regarding Activities f	or Which Form 4	720 May Be Req	uired (continued)			
5a	During the year, did the foundation pay or incur any amo	ount to:				Yes	No
	(1) Carry on propaganda, or otherwise attempt to influe	nce legislation (sectio	n 4945(e))?	. Yes X N	lo		
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on,						
	directly or indirectly, any voter registration drive?			Yes X N	lo		
	(3) Provide a grant to an individual for travel, study, or o				lo		
	(4) Provide a grant to an organization other than a						
	section 4945(d)(4)(A)? See instructions	· · · · · · · · ·		Yes X N	lo		
	(5) Provide for any purpose other than religious, cl						
	purposes, or for the prevention of cruelty to children			9#	lo		
b	If any answer is "Yes" to 5a(1)-(5), did any of the	transactions fail to	qualify under the e	xceptions described	ın		Į
	Regulations section 53.4945 or in a current notice regain						
	Organizations relying on a current notice regarding disas	ster assistance, check	here		lack		
c	If the answer is "Yes" to question 5a(4), does the						
_	because it maintained expenditure responsibility for the		-		lo		
	If "Yes," attach the statement required by Regulations se						
6a	Did the foundation, during the year, receive any ful		ectly, to pay premiu	ms			
	on a personal benefit contract?	•		Yes X N	lo		,
ь	Did the foundation, during the year, pay premiums, direct			act?	. 6b		X
	If "Yes" to 6b, file Form 8870.						
7a	At any time during the tax year, was the foundation a pa	rty to a prohibited tax	shelter transaction?.	. Yes X N	lo		
b	If "Yes," did the foundation receive any proceeds or have				. <u>7b</u>		
8	Is the foundation subject to the section 4960 tax on pay	ment(s) of more than	\$1,000,000 in				
	remuneration or excess parachute payment(s) during the			. Yes X N			
[,] Part	Information About Officers, Directo and Contractors	rs, Trustees, Fou	ındation Manageı	rs, Highly Paid Em	ıployees,		
	List all officers, directors, trustees, and foundation	n managers and t	neir compensation	See instructions.			
1	LIST All DIFFCEIS, UNECTOIS, MUSICES, AND IDUNIQUID		icii compensation.				
1		(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expen		
	(a) Name and address	(b) Title, and average hours per week devoted to position			athor all		
TRUST	(a) Name and address COMPANY OF TOLEDO	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	athor all		
TRUST	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans	athor all		
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TRUST 1630	(a) Name and address COMPANY OF TOLEDO FIMBERWOLF DRIVE, HOLLAND, OH 43528 Compensation of five highest-paid employees	(b) Title, and average hours per week devoted to position TRUSTEE 2	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plens and deferred compensation	other all	lowance	-()-
TRUST 1630	(a) Name and address COMPANY OF TOLEDO TIMBERWOLF DRIVE, HOLLAND, OH 43528	(b) Title, and average hours per week devoted to position TRUSTEE 2 (other than those	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation -()- 1 - see instruct (d) Contributions to	other all	one,	-0- enter
TRUST 1630	(a) Name and address COMPANY OF TOLEDO FIMBERWOLF DRIVE, HOLLAND, OH 43528 Compensation of five highest-paid employees	(b) Title, and average hours per week devoted to position TRUSTEE 2 (other than those hours per week and average hours per week and average hours per week	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation -()- (d) Contributions to employee benefit plans and deferred	other all	one,	-0- enter
TRUST 1630	(a) Name and address COMPANY OF TOLEDO FIMBERWOLF DRIVE, HOLLAND, OH 43528 Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position TRUSTEE 2 (other than those)	(c) Compensation (if not paid, enter -0-) 4,699.	(d) Contributions to employee benefit plans and deferred compensation -()- (d) Contributions to employee benefit	ions). If n	one,	-0- enter
TRUST 1630	(a) Name and address COMPANY OF TOLEDO FIMBERWOLF DRIVE, HOLLAND, OH 43528 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position TRUSTEE 2 (other than those hours per week and average hours per week and average hours per week	(c) Compensation (if not paid, enter -0-) 4,699. 4 included on line (c) Compensation	(d) Contributions to employee benefit plans and deferred compensation - () - (d) Contributions to employee benefit plans and deferred compensation	ions). If n	one,	-0- enter
TRUST 1630	(a) Name and address COMPANY OF TOLEDO FIMBERWOLF DRIVE, HOLLAND, OH 43528 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position TRUSTEE 2 (other than those hours per week and average hours per week and average hours per week	(c) Compensation (if not paid, enter -0-) 4,699.	(d) Contributions to employee benefit plans and deferred compensation -()- (d) Contributions to employee benefit plans and deferred	ions). If n	one,	-0- enter
TRUST 1630	(a) Name and address COMPANY OF TOLEDO FIMBERWOLF DRIVE, HOLLAND, OH 43528 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position TRUSTEE 2 (other than those hours per week and average hours per week and average hours per week	(c) Compensation (if not paid, enter -0-) 4,699. 4 included on line (c) Compensation	(d) Contributions to employee benefit plans and deferred compensation - () - (d) Contributions to employee benefit plans and deferred compensation	ions). If n	one,	-0- enter
TRUST 1630	(a) Name and address COMPANY OF TOLEDO FIMBERWOLF DRIVE, HOLLAND, OH 43528 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position TRUSTEE 2 (other than those hours per week and average hours per week and average hours per week	(c) Compensation (if not paid, enter -0-) 4,699. 4 included on line (c) Compensation	(d) Contributions to employee benefit plans and deferred compensation - () - (d) Contributions to employee benefit plans and deferred compensation	ions). If n	one,	-0- enter
TRUST 1630	(a) Name and address COMPANY OF TOLEDO FIMBERWOLF DRIVE, HOLLAND, OH 43528 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position TRUSTEE 2 (other than those hours per week and average hours per week and average hours per week	(c) Compensation (if not paid, enter -0-) 4,699. 4 included on line (c) Compensation	(d) Contributions to employee benefit plans and deferred compensation - () - (d) Contributions to employee benefit plans and deferred compensation	ions). If n	one,	-0- enter
TRUST 1630	(a) Name and address COMPANY OF TOLEDO FIMBERWOLF DRIVE, HOLLAND, OH 43528 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position TRUSTEE 2 (other than those hours per week and average hours per week and average hours per week	(c) Compensation (if not paid, enter -0-) 4,699. 4 included on line (c) Compensation	(d) Contributions to employee benefit plans and deferred compensation - () - (d) Contributions to employee benefit plans and deferred compensation	ions). If n	one,	-0- enter
TRUST 1630	(a) Name and address COMPANY OF TOLEDO FIMBERWOLF DRIVE, HOLLAND, OH 43528 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position TRUSTEE 2 (other than those hours per week and average hours per week and average hours per week	(c) Compensation (if not paid, enter -0-) 4,699. 4 included on line (c) Compensation	(d) Contributions to employee benefit plans and deferred compensation - () - (d) Contributions to employee benefit plans and deferred compensation	ions). If n	one,	-0- enter
TRUST 1630	(a) Name and address COMPANY OF TOLEDO FIMBERWOLF DRIVE, HOLLAND, OH 43528 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position TRUSTEE 2 (other than those hours per week and average hours per week and average hours per week	(c) Compensation (if not paid, enter -0-) 4,699. 4 included on line (c) Compensation	(d) Contributions to employee benefit plans and deferred compensation - () - (d) Contributions to employee benefit plans and deferred compensation	ions). If n	one,	-0- enter
TRUST 1630	(a) Name and address COMPANY OF TOLEDO FIMBERWOLF DRIVE, HOLLAND, OH 43528 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position TRUSTEE 2 (other than those hours per week and average hours per week and average hours per week	(c) Compensation (if not paid, enter -0-) 4,699. 4 included on line (c) Compensation	(d) Contributions to employee benefit plans and deferred compensation - () - (d) Contributions to employee benefit plans and deferred compensation	ions). If n	one,	-0- enter
TRUST 1630	(a) Name and address COMPANY OF TOLEDO FIMBERWOLF DRIVE, HOLLAND, OH 43528 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position TRUSTEE 2 (other than those hours per week devoted to position)	(c) Compensation (if not paid, enter -0-) 4,699. 4 c) Compensation NONE	(d) Contributions to employee benefit plans and deferred compensation - () - (d) Contributions to employee benefit plans and deferred compensation NONE	other all	one,	-0- enter

3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "NON	E."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
IONE	NONE
	,
otal number of others receiving over \$50,000 for professional services	NONE
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1NONE	
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
2	
All other program-related investments See instructions.	
3 NONE	
otal. Add lines 1 through 3	

Form **990-PF** (2019)

Par	X	Minimum Investment Return (All domestic foundations must complete this part. Foreit see instructions.)	gn fou	ndations,
1		market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
		OSES:		2 050 252
		age monthly fair market value of securities	1a	2,059,352.
		age of monthly cash balances	1b	44,327.
C		market value of all other assets (see instructions),	1c	NONE
d		I (add lines 1a, b, and c)	1d	2,103,679.
е		uction claimed for blockage or other factors reported on lines 1a and		
		attach detailed explanation)		11017
2	-	uisition indebtedness applicable to line 1 assets	2	NONE
3		ract line 2 from line 1d	3	2,103,679.
4		deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
		uctions),	4	31,555.
5		value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,072,124.
6		mum investment return. Enter 5% of line 5	6	103,606.
Par	t XI	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foun and certain foreign organizations, check here ▶ and do not complete this part.)	dations	:
1	Mini	mum investment return from Part X, line 6	1	103,606.
2 a	Tax	on investment income for 2019 from Part VI, line 5 2a 2,166.		
b	Incor	me tax for 2019. (This does not include the tax from Part VI.) 2b		
c		lines 2a and 2b	2c	2,166.
3		ibutable amount before adjustments. Subtract line 2c from line 1	3	101,440.
4		overies of amounts treated as qualifying distributions	4	NONE
5		lines 3 and 4	5	101,440.
6		uction from distributable amount (see instructions)	6	NONE
7		ributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
•		1	7	101,440.
Par		Qualifying Distributions (see instructions)		
1	Λ	ounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
' a		enses, contributions, gifts, etc total from Part I, column (d), line 26	10	96,500.
b		ram-related investments - total from Part IX-B	1b	<u> </u>
2		bunts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	10	
2		noses	2	NONE
2		ounts set aside for specific charitable projects that satisfy the:		NONE
3		ability test (prior IRS approval required)	2-	NONE
a		a distribution test (attach the required schedule)	3a 3b	NONE
b		ifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	3D 4	96,500.
4		ifying distributions. Add lines to through 3b. Enter here and on Part V, line 8; and Part XIII, line 4 indications that qualify under section 4940(e) for the reduced rate of tax on net investment income.	4	30,300.
5		·	_	N/A
_		r 1% of Part I, line 27b. See instructions	5 6	96,500.
6		isted qualifying distributions. Subtract line 5 from line 4		
	NOTE	e: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca qualifies for the section 4940(e) reduction of tax in those years.	icuidiin	A Musicus mis toningriou
		quanties for the section state(e) reduction of tax in those years.		

Form 990-PF (2019)

Pai	t XIII Undistributed Income (see instr	uctions)			
		(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from Part XI,	00.645	70010 \$110.10 20 10	2010	101,440.
•	Undistributed income, if any, as of the end of 2019			-	
	Enter amount for 2018 only			92,219.	,
	Total for prior years: 20,20		NONE	7=/3=21	
	Excess distributions carryover, if any, to 2019:		,	***	
	From 2014 NONE				
	From 2015 NONE				
c	From 2016 NONE				
d	From 2017 NONE				1
8	From 2018 NONE				
f	Total of lines 3a through e	NONE			
4	Qualifying distributions for 2019 from Part XII,				
	line 4: ▶ \$96,500.			00 010	
а	Applied to 2018, but not more than line 2a			92,219.	
b	Applied to undistributed income of prior years		NONE		
	(Election required - see instructions)		NONE		· · · · · · · · · · · · · · · · · · ·
C	Treated as distributions out of corpus (Election required - see instructions)	NONE			
	Applied to 2019 distributable amount	NONE			4,281.
	Remaining amount distributed out of corpus	NONE			
5	Excess distributions carryover applied to 2019				
	(If an amount appears in column (d), the same amount must be shown in column (a).)	NONE			NONE
6	Enter the net total of each column as				
	indicated below:				
a	Corpus Add lines 3f, 4c, and 4e. Subtract line 5	NONE			
b	Prior years' undistributed income. Subtract		NONE		
	line 4b from line 2b		NONE		
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)		NONE		
	tax has been previously assessed		110112		
đ	Subtract line 6c from line 6b. Taxable amount - see instructions		NONE		
8	Undistributed income for 2018. Subtract line				
	4a from line 2a. Taxable amount - see instructions				
ī	Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be				
	distributed in 2020				97,159.
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	NONE			
	required - see instructions)	NONE			
8	Excess distributions carryover from 2014 not	NONB			
_	applied on line 5 or line 7 (see instructions)	NOND			<u>, </u>
9	Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	NONB			
10	Analysis of line 9:	1,01,1			
	Excess from 2015 NONE				
	Excess from 2016 NONE				
	Excess from 2017 NONE				
	Excess from 2018 NONE				
	Excess from 2019 · · · NONE	ĺ			
					Form 990-PF (2019)

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Pai	rt XIV Private Op	erating Foundations	s (see instructions a	ind Part VII-A, quest	ion 9)	NOT APPLICABLE
1 a	If the foundation has	received a ruling or o	letermination letter tha	nt it is a private ope	rating	
	foundation, and the ruling	•	•			
	Check box to indicate		is a private operating		n section	4942(j)(3) or 4942(j)(5)
2a	Enter the lesser of the ad-	Tax year		Prior 3 years	10000	(e) Total
	justed net income from Part I or the minimum investment	Tel 2019	(b) 2018	(c) 2017	(d) 2016	
	return from Part X for each					
	year listed				<u> </u>	
b	85% of line 2a		\			
C	Qualifying distributions from Part					
	XII, line 4, for each year listed					
a	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					
3	2d from line 2c	ļ				
•	alternative test relied upon. • •					İ
а	"Assets" alternative test - enter					
	(1) Value of all assets (2) Value of assets qualifying		 		+	
	under section					
h	4942(j)(3)(B)(i) "Endowment" alternative test-					
	enter 2/3 of minimum invest-			\		
	ment return shown in Part X,			•		
c	Ine 6 for each year listed "Support" alternative test - enter					
Ů	(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 sup-					
	port from an exempt organization					
	(4) Gross investment income .					
Pai				only if the found	ation had \$5,0	000 or more in assets at
		uring the year - see				
	Information Regarding			ra than 20/ of the to	tal aantsibutuana	received by the foundation
а	before the close of any					received by the foundation
		y tax your (but only it to	icy mare continuated		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-,,-,,
_	N/A	the foundation who	own 10% or more o	of the stock of a core	poration for an	equally large portion of the
D	ownership of a partner					equally large portion or the
	o o o partico	, , , , , , , , , , , , , , , , , , ,		grand		
	NI / D					
2	N/A Information Regarding	Contribution, Grant,	Gift, Loan, Scholarsh	ip, etc., Programs:		
					ritable organizat	ions and does not accept
	unsolicited requests f	or funds. If the found	ation makes gifts, gra	ants, etc., to individu	als or organization	ons under other conditions,
	complete items 2a, b,				-	
а	The name, address, an	d telephone number o	r email address of the	person to whom app	lications should	be addressed:
			- <u>-</u>			
b	The form in which app	lications should be sul	bmitted and informati	on and materials they	should include:	
	Any submission deadli	ines:				
-	,					
d	Any restrictions or lifactors:	ımitations on awards	, such as by geogr	aphical areas, charit	able fields, kind	ds of institutions, or other

3 Grants and Contributions Paid Dur	If recipient is an individual,	Foundation	n asaro i ayiiioiit	
3 Grants and Contributions Paid Duri Recipient Name and address (home or business)	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipient		
a raid during the year				
SEE STATEMENT 24				92,220.
				,
		:	•	
	l			20 200
Total	· · · · · · · · · · · · · · · · · · ·		▶ 3a	92,220.
b Approved for future payment				
	-			
,				
·				
Total			▶ 3b	<u> </u>

Part XVI-				le con		(e)
Enter gross	amounts unless otherwise indicated.	(a)	(b)	(c)	(d)	Related or exempt function income
1 Program	service revenue:	Business code	Amount	Exclusion code	Amount	(See instructions.)
					-	
						
						
f				- 		
=	and contracts from government agencies					
	ship dues and assessments					
	n savings and temporary cash investments.			14	50,517.	
	al income or (loss) from real estate.					.
	financed property					· · · · · · · · · · · · · · · · · · ·
	lebt-financed property					
	I income or (loss) from personal property					
	vestment income					
•	oss) from sales of assets other than inventory			18	60,589.	
•	me or (loss) from special events · · ·					
	ofit or (loss) from sales of inventory					
	venue: a					
b						
d						
е						
	. Add columns (b), (d), and (e)			L	111,106.	
	dd line 12, columns (b), (d), and (e)				13	111,106.
	eet in line 13 instructions to verify calcu		11 1 4 6 F			
Part XVI-						
Line No.	Explain below how each activit					
▼	accomplishment of the foundation	on's exemp	t purposes (other than	by providing	g funds for such purposes	s). (See instructions.)
						-
				-		
						·-
				•		
			NOT APPLICABI	LE		
						
						
						
			<u> </u>			
						-

Form 990-PF (2019)	34-6518714 Page 13
Part XVII Information Regarding Transfers to and Transfers to an Advanced to the	sactions and Relationships With Noncharitable Exemp
1 Did the organization directly or indirectly engage in any of the	following with any other organization described Yes No
in section 501(c) (other than section 501(c)(3) organization	ons) or in section 527, relating to political
organizations?	
a Transfers from the reporting foundation to a noncharitable exemp	-
(1) Cash	
(2) Other assets	
b Other transactions:	
(1) Sales of assets to a noncharitable exempt organization	
(2) Purchases of assets from a noncharitable exempt organization	
(3) Rental of facilities, equipment, or other assets	_
(4) Reimbursement arrangements	
(5) Loans or loan guarantees	,
(6) Performance of services or membership or fundraising solicite	
c Sharing of facilities, equipment, mailing lists, other assets, or paid	
d If the answer to any of the above is "Yes," complete the follo	• • • • • • • • • • • • • • • • • • • •
	rting foundation. If the foundation received less than fair market nn (d) the value of the goods, other assets, or services received.
(a) Line no (b) Amount involved (c) Name of noncharitable exempt organization	
(c) Name of Honoral and Security Organization (c) Name of Honoral Address Approximation (c) Name of Honoral Addres	(u) Description of transfers, transactions, and sname arrangements
	
	· · · · · · · · · · · · · · · · · · ·
2a Is the foundation directly or indirectly affiliated with, or related	
described in section 501(c) (other than section 501(c)(3)) or in se	ection 527? Yes X No
b If "Yes," complete the following schedule.	

d	•	iffiliated with, or related to, one or mo ection 501(c)(3)) or in section 527?	· • — —				
	(a) Name of organization	(b) Type of organization	(c) Description of relationship				
Sign Here		nined this return, including accompanying schedules and taxpayer) is based on all information of which preparer has 06/25/2020	May the IRS discuss this return with the preparer shown below? See instructions X Yes No.				
 Paid	BRIAN R CRAIG Print/Type preparer's name	Premarity's signature	Date Check I of PTIN				

43604

614-232-7288 Form **990-PF** (2019)

06/25/2020 self-employed P00878518

Phone no

Firm's EIN > 34-6565596

Preparer

Use Only

DOAK PFAFF

Firm's name

▶ ERNST & YOUNG U.S. LLP

OH

Firm's address ► ONE SEAGATE, SUITE 2510

TOLEDO,

FORM	990	PF	,	PΑ	RT	I	-	- 7	/CC	OU	NT	IN	ΙG	F	EE	ES
	· _												. — -			

DESCRIPTION	AND EXPENSES PER BOOKS	NET INVESTMENT INCOME	ADJUSTI NET INCOMI	
TAX PREPARATION FEE (NON-ALLOC	2,400.			
TOTALS	2,400.	NONE		
	=========	==========	========	

FORM	990PF,	PART	I	-	TAXES
=====	======	=====	==	==	=====

REVENUE
AND
EXPENSES
DESCRIPTION
PER BOOKS
FEDERAL TAX PAYMENT - PRIOR YE
FEDERAL ESTIMATES - PRINCIPAL
TOTALS
1,013.

FORM 990PF, PART I - OTHER EXPENSES

REVENUE
AND
EXPENSES
PER BOOKS

DESCRIPTION

OTHER ALLOCABLE EXPENSE-PRINCI

200.

TOTALS

200.

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34-6518714

FORM 990PF,	PART II	- U.S. AND	STATE OBLIGATIONS

DESCRIPTION		ENDING BOOK VALUE
SMALL BUSINESS ADMIN 1998-2 6. GNMA II 2010-167 JE 4.000% 11/ FEDERAL HOME LOAN BANKS 2.47%		34,75 50,00
	TOTALS	84,79

FORM 990PF, PART II - CORPORATE STOCK

DESCRIPTION	ENDING BOOK VALUE
ABBOTT LABORATORIES	40,44
ADR BHP BILLITON LTD SA	24,67
ALPHABET INC-A	25,63
AMERICAN EXPRESS CO	41,38
APACHE CORP	25,55
APPLE INC	30,30
CHEVRON CORP	39,41
CME GROUP INC	24,20
COCA-COLA CO/THE	46,82
COGNIZANT TECH SOLUTIONS CORP-	24,81
DANAHER CORP	30,49
DISNEY WALT CO	25,10
EXPRESS SCRIPTS HOLDING CO	,
EXXON MOBIL CORP	40,22
GILEAD SCIENCES INC	40,68
HONEYWELL INTERNATIONAL INC	37,54
JP MORGAN CHASE & CO	27,88
KELLOGG CO	26,5(
LOWE'S COMPANIES INC	25,53
MCDONALDS CORP	45,44
MCKESSON CORP	38,32
MERCK & CO INC	26,92
MICROCHIP TECHNOLOGY INC	37,70
MICROSOFT CORP	28,89
NATIONAL OILWELL VARCO INC	30,81
NIKE INC-B	41,70
NORFOLK SOUTHERN CORP	39,45
ORACLE CORPORATION	39,98
PEPSICO INC	32,47

FORM 990PF, PART II - CORPORATE STOCK

DESCRIPTION		ENDING BOOK VALUE
PG&E CORPORATION PROCTER & GAMBLE CO QUALCOMM INC SCHLUMBERGER LTD UNITED TECHNOLOGIES CORP VERIZON COMMUNICATIONS INC WELLS FARGO & CO ADVANSIX INC FORTIVE CORP DOWDUPONT INC CIGNA CORP GARRETT MOTION INC RESIDEO TECHNOLOGIES CORTEVA INC DOW INC		42,31 48,25 26,76 39,53 19,35 27,14 21 9,74 17,50 21,21 42 1,22 7,31 12,05
	TOTALS	1,212,10

. THE HEYMANN FOUNDATION

FORM 990PF, PART II - CORPORATE BONDS

		ENDING
DESCRIPTION		BOOK VALUE
WAL-MART STORES INC 4.125% 02/		
MICROSOFT CORP 4.00% 02/08/202		50,00
CAMPBELL SOUP CO 4.250% 04/15/		49,55
QUALCOMM INC 3.000% 05/20/2022		
QUALCOMM INC		48,52
BLACKROCK INC		50,00
CITIBANK NA CD		50,00
	TOTALS	248,07

FORM	990PF,	PART	III	_	OTHER	INCREASES	IN	NET	WORTH	OR	FUND	BALANCES	
DESCI	RIPTION		· 	· - -								AMOUNT	
2018 ROUNI	INCOME DING	POSTE	D IN	1 2	2019								37. 1.
						TOTA	AL					========	38. ====

990PF, PART VII-A LINE 8b - EXPLANATION OF NON-FILING WITH A.G. STMT.

The Ohio Attorney General requires that charitable organizations operating or organized within the State submit an annual registration through an online portal that highlights key information from the Form 990-PF for public disclosure purposes. The Trust completes this registration as required in lieu of furnishing a copy of its Form 990-PF to comply with the specific reporting instructions of the State of Ohio.

RECIPIENT NAME:
SAINT PAUL'S EPISCOPAL CHURCH
ADDRESS:
310 ELIZABETH STREET
MAUMEE, OH 43537
RELATIONSHIP:
NONE
PURPOSE OF GRANT:

FUND CHURCH RELATED ACTIVITIES FOUNDATION STATUS OF RECIPIENT: PC

RECIPIENT NAME:
THE PUTNEY PUBLIC LIBRARY

ADDRESS:

55 MAIN STREET PUTNEY, VT 05346 RELATIONSHIP:

NONE PURPOSE OF GRANT:

PROVIDE BOOKS TO IMPROVE LITERACY

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

HUMAN RESOURCE DEVELOPMENT WARMING

CENTER; PART OF HRDC

ADDRESS:

32 S. TRACY AVENUE BOZEMAN, MT 59718

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

PROVIDE WARMING CENTERS FOR THE COMMUNITY

FOUNDATION STATUS OF RECIPIENT:

PC

RECIP	IENT	NAN	ΊE:	
ST.	MART	CIN	DE	PORRES

ST. MARTIN DE PORRES SHELTER ATTN: ANGIE PETERSON

ADDRESS:

1561 ALASKAN WAY SOUTH

SEATTLE, WA 98134

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

FOR THE ST. JOSEPH WINTER DINNER

FOUNDATION STATUS OF RECIPIENT:

PC

RECIPIENT NAME:

ST. BRIGID'S KITCHEN & PANTRY

ST MICHAEL CATHOLIC CHURCH

ADDRESS:

38 WALNUT STREET

BRATTLEBORO, VT 05301

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

RENOVATION PROJECT

FOUNDATION STATUS OF RECIPIENT:

PC

RECIPIENT NAME:

PUTNEY VOLUNTEER FIRE DEPARTMENT

ATTN: THOMAS GODDARD

ADDRESS:

PO BOX 875

PUTNEY, VT 05346

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SUPPORT OF FIRE DEPARTMENT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID

STATEMENT 12

RECIPIENT NAME:

RELATIONSHIP:

GENERAL

PURPOSE OF GRANT:

ADDRESS:

NONE

PC

EARTH ISLAND INSTITUTE

BERKELEY, CA 94704

2150 ALLSTON WAY, SUITE 460

FOUNDATION STATUS OF RECIPIENT:

3,000.

RECIPIENT NAME:

350.ORG

ADDRESS:

20 JAY ST SUITE 372

BROOKLYN, NY 11201

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 3,000.

RECIPIENT NAME:

UCS USA

ADDRESS:

2 BATTELLE SQUARE

CAMBRIDGE, MA 02138

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL

FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID 4,000.

RECIPIENT NAME:

CHEWONKI FOUNDATION

ADDRESS:

485 CHEWONKI NECK ROAD

WISCASSET, ME 04578-4822

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

FUND PROGRAMS FOR CHILDREN

FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID 1,500.

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RECIPIENT NAME:

UNIVERSITY OF MAINE

ADDRESS:

PO BOX 370

ORONO, ME 04473-0370

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

FUNDRAISING AN ENDOWMENT FBO UNIVERSITY

FOUNDATION STATUS OF RECIPIENT:

PC

RECIPIENT NAME:

RESCUE INC

ADDRESS:

P.O. BOX 593

BRATTLEBORO, VT 05302-9958

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

ASSIST IN PROVIDING HIGH QUALITY HEALTHCARE

FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

THE HOTCHKISS SCHOOL

ADDRESS:

11 INTERLAKEN ROAD

LAKEVILLE, CT 06039

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

FOR SUPPLIES AND ACTIVITIES OF THE SCHOOL

FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID 500. RECIPIENT NAME:

FIDELCO GUIDE DOG FOUNDATION

ATTN: RISA NICOLOSI

ADDRESS:

27 CANNON ROAD

WILTON, CT 06897

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

PROVIDE TRAINING FOR GUIDE DOGS

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 2,000.

RECIPIENT NAME:

COLONIAL DAMES OF AMERICA

ADDRESS:

417 EAST 61ST STREET

NEW YORK, NY 10065

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SUPPORT OF MUSEUM/EDUCATIONAL PURPOSES

FOUNDATION STATUS OF RECIPIENT:

PC

RECIPIENT NAME:

NATURAL RESOURCES DEFENSE COUNCIL INC

ADDRESS:

40 WEST 20TH STREET

NEW YORK, NY 10011

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

FUNDS TO SUPPORT SAFEGUARDING OF THE EARTH

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 6,000.

FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID

1,000.

RECIPIENT NAME: THE NEW SCHOOL PARSONS SOCIETY ANNUAL FUND ADDRESS: 66 WEST 12TH STREET NEW YORK, NY 10011 **RELATIONSHIP:** NONE PURPOSE OF GRANT:

EDUCATE WOMEN AND MEN FROM ALL WALKS OF LIFE

FOUNDATION STATUS OF RECIPIENT: PC

1,000. AMOUNT OF GRANT PAID

RECIPIENT NAME:

INTERNATIONAL RESCUE COMMITTEE

ADDRESS:

PO BOX 6068

ALBERT LEA, MN 56007-9847

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

PROVIDING INTERNATIONAL RELIEF

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 2,050.

RECIPIENT NAME:

WOUNDED WARRIOR PROJECT

ADDRESS:

P.O. BOX 75817

TOPEKA, KS 66675

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

PROVIDE FUNDING FOR WOUNDED WARRIORS

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 1,000.

RECIPIENT NAME:

SPIRIT SERIES INC

ADDRESS:

605 SAN VICENTE BLVD APRT 310

SANTA MONICA, CA 90402

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

PROVIDE CORE LITERACY & VALUES EDUCATION

FOUNDATION STATUS OF RECIPIENT:

PC

1,500. AMOUNT OF GRANT PAID

RECIPIENT NAME:

TUCK SCHOOL OF BUSINESS

ADDRESS:

100 TUCK HALL

HANOVER, NH 03755-9913

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

FINANCIAL ASSISTANCE FOR EDUCATION

FOUNDATION STATUS OF RECIPIENT:

SO - I

AMOUNT OF GRANT PAID 1,000.

RECIPIENT NAME:

OCEAN CONSERVANCY INC

ADDRESS:

PO BOX 96003

WASHINGTON, DC 20090-6003

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SUPPORT OF PROGRAMS

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 2,110.

RECIPIENT NAME:

FRIENDS OF THE EARTH

ADDRESS:

15TH STREET NW NO 1100

WASHINGTON, DC 20005

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

FUNDS FOR PROTECTING ENVIRONMENT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 1,000.

RECIPIENT NAME: CENTER FOR BIOLOGICAL DIVERSITY INC ADDRESS: PO BOX 710 TUSCON, AZ 85702 **RELATIONSHIP:** NONE PURPOSE OF GRANT: FUNDS TO PROTECT ALL SPECIES FROM EXTINCTION FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 1,000. RECIPIENT NAME: THE HEALING BARN ADDRESS: 27731 BRADNER MILLBURY, OH 43447 RELATIONSHIP: NONE PURPOSE OF GRANT: SUPPORT RESCUE AND REHAB PROGRAMS FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 2,000.

RECIPIENT NAME: WOOD COUNTY HUMANE SOCIETY

ADDRESS: 801 VANCAMP ROAD BOWLING GREEN, OH 43402-9332 RELATIONSHIP: NONE PURPOSE OF GRANT:

OPERATIONAL SUPPORT FOR ANIMAL SHELTER

FOUNDATION STATUS OF RECIPIENT:

3,000. AMOUNT OF GRANT PAID

RECIPIENT NAME:

CHERRY STREET MISSION MINISTRIES

ADDRESS:

105 17TH STREET TOLEDO, OH 43604

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

PROVIDE FOOD AND SHELTER FOR THE HOMELESS

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 2,000.

RECIPIENT NAME:

IMPACT WITH HOPE

aka International Services of Hope Inc

ADDRESS:

25182 WEST RIVER ROAD

PERRYSBURG, OH 43551

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

AID IN EMERGENCY RELIEF EFFORTS WORLDWIDE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 2,000.

RECIPIENT NAME:

NATURES NURSERY CENTER FOR

WILDLIFE REHABILITATION AND CONSERVATION

ADDRESS:

PO BOX 2395

WHITEHOUSE, OH 43571

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

FUNDING FOR EDUCATION AND REHAB OF WILDLIFE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 3,000.

RECIPIENT NAME:

MANE IN HEAVEN

ADDRESS:

117 SOUTH COOK ST, STE 237

BARRINGTON, IL 60010

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

PROVIDE THERAPEUTIC BENEFITS TO DISABLED

FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID

RECIPIENT NAME: AMERICAN RED CROSS BOZEMAN ADDRESS: 233 EDELWEIS DRIVE #9 BOZEMAN, MT 59718 RELATIONSHIP: NONE PURPOSE OF GRANT:

PROVIDES COMMPASSIONATE CARE TO THOSE IN NEED FOUNDATION STATUS OF RECIPIENT: PC

14,110. AMOUNT OF GRANT PAID

RECIPIENT NAME: BOULDER OUTDOOR SURVIVAL SCHOOL ADDRESS: 615 N HIGHWAY 12 BOULDER, UT 84716 **RELATIONSHIP:** NONE

PURPOSE OF GRANT: TEACH TRADITIONAL LIVING SKILLS IN NATURE FOUNDATION STATUS OF RECIPIENT: PC

AMOUNT OF GRANT PAID 2,000.

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RECIPIENT NAME:

NATIONAL OUTDOOR LEADERSHIP SCHOOL

ADDRESS:

284 LINCOLN ST

LANDER, WY 82520

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EDUCATION OF WILDERNESS SKILLS & LEADERSHIP

FOUNDATION STATUS OF RECIPIENT:

PC

RECIPIENT NAME:

ST. JOSEPH PARISH

ADDRESS:

732 18TH AVENUE E

SEATTLE, WA 98112

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

WINTER SHELTER

FOUNDATION STATUS OF RECIPIENT:

PC

RECIPIENT NAME:

NORTH CASCADES INSTITUTE

ADDRESS:

810 STATE ROUTE 20

SEDRO-WOOLLEY, WA 98284

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CONSERVE/RESTORE NORTHWEST ENVIRONMENTS

FOUNDATION STATUS OF RECIPIENT:

PC

RECIPIENT NAME:

MEMORIAL SLOAN KETTERING CANCER CENTER
ADDRESS:

1275 YORK AVENUE

NEW YORK, NY 10065

RELATIONSHIP: NONE

PURPOSE OF GRANT:
PREVENTION, TREATMENT & CURE OF CANCER

FOUNDATION STATUS OF RECIPIENT:

RECIPIENT NAME: EARTHJUSTICE

ADDRESS:

50 CALIFORNIA STREET STE 500

SAN FRANCISCO, CA 94111

RELATIONSHIP:

NONE

PURPOSE OF GRANT: PROGRAMS SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

RECIPIENT NAME:

GREENPEACE FUND, INC

ADDRESS:

702 H STREET NW, STE 300 WASHINGTON, DC 20001

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GRANTS TO OTHER ENVIRONMENTAL ORGS.

FOUNDATION STATUS OF RECIPIENT:

PC

TOTAL GRANTS PAID:

92,220.

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