SCANNED JAN 1 2 2022

Return of Private Foundation

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

OMB No 1545-0047

Department of the Treasury

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

► Go to www.irs.gov/Form990PF for instructions and the latest information. Internal Revenue Service Open to Public Inspection For calendar year 2019 or tax year beginning 2019, and ending Name of foundation A Employer Identification number LORCH FAMILY FOUNDATION, INC. 46-3873179 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see Instructions) **4203 MACHUPE DRIVE** 502-889-2663 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here **LOUISVILLE, KY 40241** G Check all that apply: \mathbf{V} Initial return Initial return of a former public chanty D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test Address change ☐ Name change check here and attach computation H Check type of organization: Section 501(c)(3) exempt private foundation If private foundation status was terminated under section 507(b)(1)(A), check here ▶ 🗀 ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation Fair market value of all assets at J If the foundation is in a 60-month termination under section 507(b)(1)(B), check here . end of year (from Part II, col. (c), ☐ Other (specify) ▶□ line 16) ▶ \$ 172,607 (Part I, column (d), must be on cash basis.) Part I Analysis of Revenue and Expenses (The total of (d) Disbursements for charitable (a) Revenue and (b) Net investment (c) Adjusted net amounts in columns (b), (c), and (d) may not necessarily equal purposes (cash basis only) books the amounts in column (a) (see instructions)) Contributions, gifts, grants, etc., received (attach schedule) 100,000 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 5a Gross rents Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10a Gross sales less returns and allowances Less: Cost of goods sold . . . Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) ก 12 Total. Add lines 1 through 11 100,000 13 Compensation of officers, directors, trustees, etc. Operating and Administrative Expenses 14 Other employee salaries and wages . 15 Pension plans, employee benefits 16a Legal fees (attach schedule) 200 Accounting fees (attach schedule) n Other professional fees (attach schedule) 17 a 18 Taxes (attach schedule) (see instructions) O Depreciation (attach schedule) and depretion 19 O 20 Occupancy . 21 0 22 0 23 Other expenses (attach schedule) Total operating and admir strative Add lines 13 through 29 24 200 25 Contributions, gifts, grants paid 16,750 26 Total expenses and disbursements. Add lines 24 and 25 16.950 Subtract line 26 from line 12: Excess of revenue over expenses and disbursements 83,050 Net investment income (if negative, enter -0-) 0

For Paperwork Reduction Act Notice, see instructions.

Adjusted net income (if negative, enter -0-)

Cat No 11289X

Form **990-PF** (2019)

Pa	art II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	89,557	172,607	172,607
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶		3	r
	ļ	Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Oţher notes and loans receivable (attach schedule) ▶			
		Less: allowance for doubtful accounts ▶			
ध	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U.S and state government obligations (attach schedule)			
	b	Investments - corporate stock (attach schedule)			
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment. basis ▶	,		
		Less: accumulated depreciation (attach schedule) ▶			· · · · · · · · · · · · · · · · · · ·
	12	Investments-mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe ▶)			
	16	Total assets (to be completed by all filers-see the			
		instructions. Also, see page 1, item I)	89,557	172,607	172,607
_	17	Accounts payable and accrued expenses	00,000		11-100
	18	Grants payable			
Liabilities	19	Deferred revenue			
≝	20	Loans from officers, directors, trustees, and other disqualified persons			
æ	21	Mortgages and other notes payable (attach schedule)			
3	22	Other liabilities (describe ►)			
	23	Total liabilities (add lines 17 through 22)	0	0	
S		Foundations that follow FASB ASC 958, check here ▶ □			,
Fund Balances		and complete lines 24, 25, 29, and 30.			1
an	24	Net assets without donor restrictions	89,557	172,607	
За	25	Net assets with donor restrictions	05,007	172,007	
5		Foundations that do not follow FASB ASC 958, check here ▶ □			,
5		and complete lines 26 through 30.			
	26	Capital stock, trust principal, or current funds			ļ
Ş	27	Paid-in or capital surplus, or land, bldg., and equipment fund		· · · · · - · · · · · · · · · · · · · ·	
ě	28	Retained earnings, accumulated income, endowment, or other funds			
SS	29	Total net assets or fund balances (see instructions)	89,557	172,607	
ţ	30	Total liabilities and net assets/fund balances (see	03,007	172,007	
Net Assets		instructions)	89,557	172,607	
	rt III	Analysis of Changes in Net Assets or Fund Balances	03,357	172,007	
_		al net assets or fund balances at beginning of year-Part II, colu	mn (a) line 29 (mus	t agree with	
'		of year figure reported on prior year's return)			89,557
2		er amount from Part I, line 27a			83,050
3		er ıncreases not ıncluded in line 2 (ıtemıze) ▶			03,030
4	L Add	l lines 1, 2, and 3		4	172,607
5		reases not included in line 2 (itemize) ▶			172,007
	Tota	al net assets or fund balances at end of year (line 4 minus line 5)—I	Part II. column (b) lir	ne 29 6	172,607
		and the state of t		1 9	- 000 DE :::::

Part	V Capital Gains an	d Losses for Tax on Investm	ent Income				
	(a) List and describe the k 2-story brick wareho	(b) How acquired P-Purchase D-Donation	(c) Date ac (mo , day		(d) Date sold (mo , day, yr)		
1a	N/A						
<u>b</u>							
<u>c</u>		····					
<u>d</u>							
е				I			<u> </u>
····	(e) Gross sales price		other basis nse of sale			in or (loss) (f) minus (g))	
a							
b							
<u>c</u>				-			
<u>d</u>							
е	O	anne see a selement (b) and see and	L. M farmalakan	10/01/60		•	
	Complete only for assets sn	owing gain in column (h) and owned					l (h) gain minus
	(i) FMV as of 12/31/69	(i) Adjusted basis as of 12/31/69		s of col (i) (j), if any			t less than -0-) or from col (h))
a							
<u>b</u>							
<u>c</u>							
<u>d</u>							
<u>e</u>		<u> </u>					
2	Capital gain net income of	orinei cabiiai iossi 📝 🖰 🦠	also enter in Pa , enter -0- in Paı		2		
3	If gain, also enter in Part	un or (loss) as defined in sections t I, line 8, column (c). See instru	ctions. If (loss)	, enter -0- ın)			
					3		
Part		der Section 4940(e) for Reduring to the section 4940(e) for Reduring to the section of the secti				-	
Was t		ve this part blank. e section 4942 tax on the distribu qualify under section 4940(e). Do			oase period	1?	☐ Yes ☑ No
1		ount in each column for each yea			aking any e	entries.	
Calı	(a) Base penod years endar year (or tax year beginning in	(b)		(c) f noncharitable-use as		Dis	(d) stribution ratio divided by col (c))
	2018		5,500	5	4,241	,	0.286
	2017		7,167		4,741		0.694
	2016		9,500		2,577		0.755
	2015		8,167	1	0,691		0.764
	2014		1,667		3,760		0.443
	Total of line 1, column (d)			. 2		2.942
3	Average distribution ratio	o for the 5-year base period—div			by		
	·	foundation has been in existence					0.588
4	Enter the net value of no	ncharitable-use assets for 2019 f	rom Part X, line	5	. 4		93,789
5	Multiply line 4 by line 3				. 5		55,148
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		. 6		
7	Add lines 5 and 6				. 7		55,148
8		ions from Part XII, line 4			. 8	L	16,750
		eater than line 7, check the box in			that part us	sing a	1% tax rate. See the

_		_
Daa	Δ	-

Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see i	nstrı	ıctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			0
	here ► □ and enter 1% of Part I, line 27b			- 1
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			0
3	Add lines 1 and 2			0
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		·	<u> </u>
6	Credits/Payments:			
a b	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 0 Exempt foreign organizations—tax withheld at source 6b 0			
C	Tax paid with application for extension of time to file (Form 8868) 6c 0			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments. Add lines 6a through 6d			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			<u>_</u>
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10			0
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ Refunded ▶ 11			0
Part	VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a	L	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		•
	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.			
C	Did the foundation file Form 1120-POL for this year?	1c		<u> </u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	}		
е	(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. > \$	ł		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	_	 _
	If "Yes," attach a detailed description of the activities.	Ĩ		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes.	3		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		
b	If "Yes." has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		
•	If "Yes," attach the statement required by General Instruction T.	<u> </u>		1
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			1
	• 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	~	
7	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	~	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶]
	KENTUCKY			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		<u> </u>	
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	~	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes,"		,	
10	complete Part XIV	9	 	
10	names and addresses	10	,	
		m 99		(2019)
				,,,

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		•
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		•
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address NA	13	V	
14		2-889-	2663	
	Located at ► 4203 MACHUPE DRIVE, LOUISVILLE, KY ZIP+4 ►	4024	1	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here		. 1	▶ □
	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 over a bank, securities, or other financial account in a foreign country?.	16	Yes	No
	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 ☑ 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? \square Yes \square No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions .	1b		
	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		<u>_</u>
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 ▶ 20 , 20 , 20 , 20			
b	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		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 20, 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
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	<u></u>		
4-	foundation had excess business holdings in 2019.)	3b 4a		
4a b	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	-+d		1
•	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		

Par	Statements Regarding Activities	for V	Vhich Form	4720	May Be F	tequire	ed (conti	nued)			
5a	During the year, did the foundation pay or incur	any am	ount to:							Yes	No
	(1) Carry on propaganda, or otherwise attempt t	o influe	ence legislatio	on (sec	tion 4945(e))? .	☐ Yes	✓ No			,
	(2) Influence the outcome of any specific public		on (see sect	ion 495	55); or to c	arry on,	,				
	directly or indirectly, any voter registration dr	ive?					☐ Yes	✓ No			
	(3) Provide a grant to an individual for travel, stu	dy, or	other similar	purpos	es?		☐ Yes	✓ No			
	(4) Provide a grant to an organization other than section 4945(d)(4)(A)? See instructions			-			l ∏Yes	₽ No			
	(5) Provide for any purpose other than religious							140			
	purposes, or for the prevention of cruelty to						□Yes	₽ No			
b	If any answer is "Yes" to 5a(1)-(5), did any of the						otions de				
	in Regulations section 53.4945 or in a current no								5b		
	Organizations relying on a current notice regardi	na disa	ster assistan	ce. che	ck here			▶□			
С	If the answer is "Yes" to question 5a(4), does t	-							·		
	because it maintained expenditure responsibility				•			□No			
	If "Yes," attach the statement required by Regula	ations s	section 53.49	45-5(d)	١.				1		
6a	Did the foundation, during the year, receive any					emiums	;		1		
	on a personal benefit contract?						Yes	₽ No	1		
b	Did the foundation, during the year, pay premiun	ns, dire	ctly or indire	ctly, on	a persona	l benefi	t contract	? .	6b		~
_	If "Yes" to 6b, file Form 8870.	.,	, ,	,,							
7a	At any time during the tax year, was the foundation	a party	to a prohibit	ed tax s	helter trans	action?	☐Yes	☑ No			
	If "Yes," did the foundation receive any proceed								7b		
8	Is the foundation subject to the section 4960 ta										-
	remuneration or excess parachute payment(s) de	aring th	ie year?				☐ Yes	✓ No	Ì		
Par	t VIII Information About Officers, Direc	tors, 1	rustees, F	ounda	tion Man	agers,	Highly I	Paid E	mploy	ees,	
	and Contractors										
1	List all officers, directors, trustees, and found	ation r	nanagers ar	nd their	compens	ation. S	See instr	uctions	i.		
	(a) Name and address	hou	e, and average rs per week ed to position	er week (If not paid,		(d) Contributions to employee benefit plans and deferred compensation			(e) Expense account, other allowances		
SEE A	TTACHED STATEMENT				· · · · · · · · · · · · · · · · · · ·						
	· · · · · · · · · · · · · · · · · · ·										
	***************************************					1					
							•				
2	Compensation of five highest-paid employed	s (oth	er than tho	se incl	uded on li	ine 1-	see instr	uctions	s). If no	one, o	enter
	"NONE."										
			(b) Title, and a	verage			(d) Contrib				
	(a) Name and address of each employee paid more than \$50,00	Ю	hours per v	veek	(c) Compe	nsation	employee plans and		(e) Expe	nse acc allowan	
			devoted to p	OSITION			compen	sation			
NONE											
						_					
							<u> </u>				
						-					
			<u> </u>		<u> </u>						
						· ·					
							<u> </u>				
Total	number of other employees paid over \$50,000 .	<u> </u>	<u> </u>	· · ·				. ▶		0	
-					· 		-	F	om 99	0-PF	(2019)

Pari	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid En and Contractors (continued)	•
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
NONE		
	number of others receiving over \$50,000 for professional services	0
Par	IX-A Summary of Direct Charitable Activities	,
	the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of anizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1	N/A	
2		
3		
4		i
	IX-B Summary of Program-Related Investments (see instructions)	<u> </u>
	scribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	NA	ł
2		
_	other program-related Investments See instructions	
3		
		1
		
√otal	. Add lines 1 through 3	1

Part	· · · · · · · · · · · · · · · · · · ·	ign founda	ations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	95,217
C	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	95,217
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	95,217
4	Cash deemed held for charitable activities. Enter $11/2\%$ of line 3 (for greater amount, see		
	instructions)	4	1,428
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	93,789
6	Minimum investment return. Enter 5% of line 5	6	4,689
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations, check here ► ✓ and do not complete this part.)	oundation	ıs
1	Minimum investment return from Part X, line 6	11	
2a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	····
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	
Part	XII Qualifying Distributions (see instructions)	•	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	16,750
b	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	0
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	0
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	16,750
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b. See instructions	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	16,750
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whether	the foundation

Part	XIII Undistributed Income (see instruction	ons)			
		(a) Corpus	(b) Years pnor to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from Part XI, line 7			,	
2	Undistributed income, if any, as of the end of 2019:				
а	Enter amount for 2018 only				
b	Total for prior years: 20, 20, 20				
3	Excess distributions carryover, if any, to 2019:	İ			
а	From 2014	,			
Ь	From 2015				
ď	From 2016	1		r.	,
e	From 2017				
f	Total of lines 3a through e				
4	Qualifying distributions for 2019 from Part XII, line 4: ▶ \$				
а	Applied to 2018, but not more than line 2a .				
b	Applied to undistributed income of prior years (Election required—see instructions)				and the season of the season o
С	Treated as distributions out of corpus (Election				
d	required—see instructions)				
e	Remaining amount distributed out of corpus			****** * ***	
5	Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same				
6	amount must be shown in column (a).) Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b	Prior years' undistributed income. Subtract line 4b from line 2b			***************************************	
С	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				
е	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(y)(3) (Election may be required—see instructions)				
8	Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions).		1 " 11	-	<u>.</u>
9	Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a		,		
10	Analysis of line 9.				
а	Excess from 2015	,			
b	Excess from 2016				•
C	Excess from 2017			11 4	1
d	Excess from 2018	, and the second	_		}
е	Excess from 2019	I) i		I

Form Of	IO DE /2010)					Page 10
Part	0-PF (2019) XIV Private Operating Founda	tions (see instru	tions and Part V	II-A question 9)		Page 10
	If the foundation has received a ruling					
	foundation, and the ruling is effective for					
b	Check box to indicate whether the four	ndation is a private	operating foundatio	n described in sec	tiến 🗹 4942(j)(3)	or 4942(j)(5)
2 a	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	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
	each year listed	0			o	0
	85% of line 2a	0	0	0	O	0
С	Qualifying distributions from Part XII, line 4, for each year listed		4= ===	/		
d	Amounts included in line 2c not used directly	16,750	15,500	17,167	9,500	58,917
u	for active conduct of exempt activities .	o	,,,,,	o	o	0
_	Qualifying distributions made directly					
•	for active conduct of exempt activities.					
	Subtract line 2d from line 2c	16,750	15,500	17,167	9,500	58,917
3	Complete 3a, b, or c for the				<u> </u>	
	alternative test relied upon:	park		_		
а	"Assets" alternative test—enter:			1		
	(1) Value of all assets					<u>.</u>
	(2) Value of assets qualifying under			1		
	section 4942(j)(3)(B)(i)	- A				
Ь	"Endowment" alternative test—enter 2/3 of minimum investment return shown in/	<i>'</i>				
	Part X, line 6, for each year listed	ŀ				
С	"Support" alternative test—enter					
•	(1) Total support other than gross					
	investment income (interest,]			
	dividends, rents, payments on					
	securities loans (section 512(a)(5)), or royalties		}			
	(2) Support from / general public					
	and 5 or more exempt organizations as provided in					
	section 4942(j)(3)(B)(iii)	,,				
	(3) Largest amount of support from		1			
	an exempt organization					
	(4) Gross investment income XV Supplementary Information	n (Complete thi	a more only if the	o foundation bo	d \$5 000 or mor	o in acceto at
Part	any time during the year-			e roundation na	a \$5,000 or mor	e in assets at
4	Information Regarding Foundation		3. <u>/</u>	 		·
a	List any managers of the foundation		ted more than 2%	of the total contrib	outions received by	the foundation
_	before the close of any tax year (but o					·
MICHA	EL LORCH					
	List any managers of the foundation	who own 10% or	more of the stock	of a corporation	(or an equally large	e portion of the
	ownership of a partnership or other er	ntity) of which the f	oundation has a 10	0% or greater inter	est.	
NONE						
2	Information Regarding Contribution					
	Check here ▶ ☐ If the foundation					
	unsolicited requests for funds. If the fo complete items 2a, b, c, and d. See in	_	jiπs, grants, etc., to	o individuals or org	anizations under o	tner conditions,
			of the name	to uhom omlinati		
	The name, address, and telephone nu	imper or email add	ress or the person	to whom applicati	ons snould be add	resseu:
	H FAMILY FOUNDATION, INC.	502-889-26	E2			
	IACHUPE DRIVE, LOUISVILLE, KY 40241 The form in which applications should			aterials they shou	ld include:	
_						
PAPER	R FORM WITH REQUEST, REASON FOR F	REQUEST, AND CO	MMUNITY BENEFIT.			
	Any submission deadlines:					
NONE						
d	Any restrictions or limitations on av	vards, such as by	geographical are	as, charitable fiel	ds, kinds of institu	utions, or other
	factors:					
NONE						

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation show any relationship to any foundation manager Purpose of grant or status of Amount contribution recipient Name and address (home or business) or substantial contributor Paid during the year **Centerstone of Kentucky** 10101 Linn Station Rd, Louisville, KY 40223 501(c)3 Program support-behav. health 500 **Neighborhood House** 201 N. 25th St, Louisville, KY 40212 501(c)3 Program support-poverty 500 The Morton Center 1028 Barret Avenue, Louisville, KY 40204 501(c)3 Program support-addiction 500 The Healing Place 1030 West Market St, Louisville, KY 40202 501(c)3 Program support-addiction 1.000 **Spirit of Louisville Foundation** 1918 Mellwood Ave, Louisville, KY 40206 501(c)3 Program support-volunteers 500 Louisville Zoo 1100 Trevilian Way, Louisville, KY 40213 501(c)3 500 Program support-**Dare to Care Food Bank** 5803 Fern Valley Rd, Louisville, KY 40228 501(c)3 Program support-hunger 500 **Volunteers of America** 570 South Fourth Street, Louisville, KY 40202 501(c)3 Program support-underserved 250 Beacon House 963 South 2nd St, Louisville, KY 40203 501(c)3 Program support-addiction 500 **ElderServe** 501(c)3 215 W. Breckinridge St, Louisville, KY 40203 Program support-aging adults 2,500 Sunrise Children's Services 300 Hope St, P.O. Box 726, Mt. Washington, KY 40047 501(c)3 Program support-children 1,250 **NelCASA (CASA of Nelson County)** P.O. Box 726, Bardstown, KY 40004 501(c)3 Program support-court advocates 1,250 **Kentucky Humane Society** 1000 Lyndon Lane, Suite B, Loulsville, KY 40222 501(c)3 Program support-animal welfare 2,000 Uniting Partners for Women and Children 425 S 2nd Street, Louisville, KY 402020 501(c)3 Program support-homelessness 2,500 Seniorcare Experts, Inc. 501(c)3 145 Thierman Lane, Louisville, KY 40207 Program support-aging adults 2,500 3a 16,750 Approved for future payment Total 3b

Pai	rt XVI	-A Analysis of Income-Producing Ac	tivities				
Enter gross amounts unless otherwise indicated.			Unrelated bu	isiness income	Excluded by secti	on 512, 513, or 514	(e)
			(2)	/b)	(c)	(4)	Related or exempt
			(a) Business code	(b) Amount	Exclusion code	(d) Amount	function income
1	Progr	ram service revenue:	Dasiness code	ranount	Exclusion code	Anount	(See instructions.)
	а						· - · · · · · · · · · · · · · · · · · ·
	~ –						
	<u>ا</u> _		· · · · · · · · · · · · · · · · · · ·				
	d _						
	• _						
	f						
	g F	ees and contracts from government agencies		··· ··· ··· · · · · · · · · · · · · ·	ļ		
2		bership dues and assessments					
3	Intere	est on savings and temporary cash investments		_			
4	Divid	ends and interest from securities					
5	Netn	ental income or (loss) from real estate:			,		- 4
		ebt-financed property					
		ot debt-financed property			1	······································	
6		ental income or (loss) from personal property			†		
7		r investment income			 		
_		or (loss) from sales of assets other than inventory					
8							
9		ncome or (loss) from special events					
10		s profit or (loss) from sales of inventory					
11	Othe	r revenue: a					
	b _						
	c _						
	d						
	е _						
12	Subto	otal. Add columns (b), (d), and (e)		•			
		otal. Add columns (b), (d), and (e)	L	<u> </u>	<u> </u>	13	
13	Total	otal. Add columns (b), (d), and (e) I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to venfy calculation				13	·
13 See	Total	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to venfy calculation	s.)			13	
13 See Pa	Total works	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to venfy calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the
13 See Pal Lin	Total works rt XVI	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to venfy calculation	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Pal Lin	Total works rt XVI e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to venfy calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Pal Lin	Total works rt XVI e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to venfy calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Pal Lin	Total works rt XVI e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to venfy calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Pal Lin	Total works rt XVI e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to venfy calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Pal Lin	Total works rt XVI e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to venfy calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Pal Lin	Total works rt XVI e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to venfy calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Pal Lin	Total works rt XVI e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to venfy calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Pal Lin	Total works rt XVI e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to venfy calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Pal Lin	Total works rt XVI e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to venfy calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Pal Lin	Total works rt XVI e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to venfy calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Pal Lin	Total works rt XVI e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to venfy calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Pal Lin	Total works rt XVI e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to venfy calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Pal Lin	Total works rt XVI e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to venfy calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Pal Lin	Total works rt XVI e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to venfy calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Pal Lin	Total works rt XVI e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to venfy calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Pal Lin	Total works rt XVI e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to venfy calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Pal Lin	Total works rt XVI e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to venfy calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Pal Lin	Total works rt XVI e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to venfy calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Pal Lin	Total works rt XVI e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to venfy calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Pal Lin	Total works rt XVI e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to venfy calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Pal Lin	Total works rt XVI e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to venfy calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Pal Lin	Total works rt XVI e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to venfy calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Pal Lin	Total works rt XVI e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to venfy calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Pal Lin	Total works rt XVI e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to venfy calculation Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)

Form **990-PF** (2019)

Part 2	KVII	Informatio Organizati	n Regarding Tran ons	sfers to	and Tran	saction	ns and F	Relationshi	ps W	ith N	oncha	aritable	е Ех	mpt
a	in se orgar Trans	ection 501(c) (on sations? sfers from the report of the series of the se	directly or indirectly on the control of the contro	501(c)(3)	organizatio	ons) or	in sect	ion 527, rel					Yes	No
	• •	ash										1a(1)		
		ther assets .										1a(2)		'
		r transactions:												
	(1) S	ales of assets to	a noncharitable exe	mpt orga	anization .							1b(1)		<u></u>
	(2) P	urchases of asse	ets from a noncharita	able exen	npt organiza	tion .						1b(2)		V
	(3) R	ental of facilities	, equipment, or othe	r assets								1b(3)		~
	(4) R	eimbursement a	rrangements									1b(4)		~
			rantees									1b(5)		~
		•	ervices or membersh									1b(6)		~
			quipment, mailing lis	-	-				•		•	1c	<u> </u>	-
			of the above is "Yes							 d alw	 ave ehr		fair m	
			ther assets, or servi											
			on or sharing arrange											
(a) Line		(b) Amount involved	(c) Name of nonch				,	nption of transfe						
(a) Line	110 (D) Amount involved	(c) Name of nonci	iantable ext	empi organizati		(a) Desc	ription or transfe	rs, trai	ISaction	is, and si	nanng arr	angem	ents
	-													
									-					
	$\neg \uparrow$													
														
	\dashv				····									
														
	-+								-		•			
			· · · · · · · · · · · · · · · · · · ·					· · · · · · · · · · · · · · · · · · ·						
	ᆜ			76 P. A. I.	***			·		 ;				
			ectly or indirectly af									_		_
			501(c) (other than se		(C)(3)) or in s	ection :	02// .		• •			☐ Ye	es ⊻] No
<u> </u>	lf "Ye	<u> </u>	e following schedule.											
		(a) Name of organ	nization		(b) Type of org	anızatlon			(c) Des	scription	n of relati	onship		
												_		
	•								•	-				
			I declare that I have examine							best of	my knowl	edge and	belief, r	is true,
Sign	сопе	ct. and complete Decl	laration of preparer (other the	an taxpayer)	is based on all in	formation	of which prej	parer has any kno	wledge		May the	IRS disc.	ree thre	return
Here		/5.5		1	7/12/20	TRE	ASURER				with the	preparer s	shown t	elow?
	Sian	ature of officer or tru	stee	<u></u>	Date	Title			See instru			uctions	∏Yes	□No
	3.0	Print/Type preparer		Preparer	's signature			Date				PTIN		
Paid		, po proparer		, Sparer	- 5-5			1			c lif			
Prepa		<u> </u>						.l		Ь	mployed	L		
Use C	e Only Firm's name									EIN >	·		-	
		Firm's address ▶						_	Phone	e no				

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

Name of the organization		Employer identification number
LORCH FAMILY FOUNDATION	, INC.	46-3873179
Organization type (check or	ne):	
Filers of:	Section:	
	_	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	_	
	4947(a)(1) nonexempt charitable trust not treated as a private for	undation
	_	
	527 political organization	
	_	
Form 990-PF	✓ 501(c)(3) exempt private foundation	
	_	
	4947(a)(1) nonexempt charitable trust treated as a private foundate	ition
	_	
	501(c)(3) taxable private foundation	
	covered by the General Rule or a Special Rule.	
, ,,,), (8), or (10) organization can check boxes for both the General Rule a	and a Special Rule. See
instructions.		
General Rule		
	filing Form 990, 990-EZ, or 990-PF that received, during the year, con	3
,	r property) from any one contributor. Complete Parts I and II. See inst	ructions for determining a
contributor's total co	ontributions.	
Special Rules		
	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 3	
	ections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 9)	
	that received from any one contributor, during the year, total contribution, during the year, total contribution and the second of the second	
\$5,000; or (2) 2% of	the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line	1. Complete Parts I and II.
	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that	
	he year, total contributions of more than \$1,000 exclusively for religiou	
literary, or education	nal purposes, or for the prevention of cruelty to children or animals. Co	ompiete Parts I, II, and III.
_		
	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that	
	he year, contributions exclusively for religious, charitable, etc., purpos	
	d more than \$1,000. If this box is checked, enter here the total contrib	
	in exclusively religious, charitable, etc., purpose. Don't complete any c	
	es to this organization because it received nonexclusively religious, cha	
totaling \$5,000 or m	ore during the year	> \$
	t isn't covered by the General Rule and/or the Special Rules doesn't fi	
990-EZ, or 990-PF), but it mu	ust answer "No" on Part IV, line 2, of its Form 990; or check the box or	n line H of its Form 990-EZ or on its

Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization	Employer identification number
LORCH FAMILY FOUNDATION, INC.	46-3873179

LORCH F	AMILY FOUNDATION, INC.		46-3873179
Part I	Contributors (see instructions). Use duplicate co	pies of Part I if additional space is	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_1	MICHAEL LORCH 4203 MACHUPE DRIVE LOUISVILLE, KY 40241	\$ 100,000	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ \$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		s	Person

Name of organization Employer identification number LORCH FAMILY FOUNDATION, INC. 46-3873179 Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. Part II (a) No. (c) FMV (or estimate) (b) (d) from Description of noncash property given **Date received** (See instructions.) Part I (a) No. (c) (d) FMV (or estimate) from Description of noncash property given Date received Part I (See instructions.) (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given **Date received** Part I (See instructions.) (a) No. (c) (b) (d) FMV (or estimate) from **Date received** Description of noncash property given (See instructions.) Part I (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given **Date received** Part I (See instructions.) (a) No. (c) (d) FMV (or estimate) from Description of noncash property given **Date received** Part I (See instructions.)

Name of org	ganization		Employer identification number
	MILY FOUNDATION, INC.		46-3873179
Part III	(10) that total more than \$1,000 for the following line entry. For organiza contributions of \$1,000 or less for t	or the year from any one contra ations completing Part III, enter the year. (Enter this information	tions described in section 501(c)(7), (8), or ibutor. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc., once. See instructions.)
(a) A) a	Use duplicate copies of Part III if ad	ditional space is needed.	
(a) No. from Part i	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee
(a) No			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee
			•••••••••••••••••••••••••••••••••••••••
			·
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
, aiti			
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee
ſ	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		

2019

FEDERAL STATEMENTS LORCH FAMILY FOUNDATION, INC.

Page 1 46-3873179

Statement 1 Form 990-PF, Part I, Line 16A

		(A)	(B) Net	(C)	(D)
		Expenses	Investment	Adjusted	Charitable
		Per Books	Income	Net Income	Purposes
LEGAL FEES		\$200	\$0	\$0	\$0
	TOTAL	\$200	\$0	\$0	\$0

Statement 2 Form 990-PF, Part VII-A, Line 10

Michael Lorch 4203 Machupe Drive, Louisville, KY 40241

FEDERAL STATEMENTS LORCH FAMILY FOUNDATION, INC.

Statement 3 Form 990-PF, Part VIII, Line 1

	(B) Title, and average		(D) Contributions to employee	(E) Evponto acrount
(A) Name and address	hours per week	(C) Compensation	benefit plans and deferred	other allewance
	devoted to position		compensation	Office allowalices
Michael Lorch	President	0	0	0
4203 Machupe Drive, Louisville, KY 40241	1.00			
David Goff	Secretary	0	0	0
3155 Mary Jo Blvd., Bardstown, KY 40004	1.00			
Brian Lower	Treasurer	0	0	0
1148 Blossom Way, Corydon, IN 47112	1.00			
Elisa Messex	Director	0	0	0
3111 Morning Park Ct., Louisville, KY 40220	1.00			
Joseph Lorch	Director	0	0	0
9118 Island Creek, Sellersburg, IN 47172	1.00			
Vivi Humphrey	Director	0	0	0
108 Norwood Drive #4, Louisville, KY 40222 1.00	1.00			