COVID-19

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. Open to Public Inspection Internal Revenue Service For calendar year 2019 or tax year beginning , and ending Employer identification number Name of foundation THE LYNDON & HELEN M SCHMID FOUNDATION CHARITABLE 61-1349891 Number and street (or P O. box number if mail is not delivered to street address) Room/suite Telephone number (see instructions) 2225 LEXINGTON ROAD 502-451-0600 City or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here LOUISVILLE 40206 G Check all that apply Initial return Initial return of a former public chanty 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change Check type of organization: X 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 I Fair market value of all assets at J Accounting method: X Cash 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) 1,092,120 line 16) ▶ \$ (Part I, column (d), must be on cash basis.) (d) Disbursements Part | Analysis of Revenue and Expenses (The total of (b) Net investment (c) Adjusted net for chantable xpenses per books amounts in columns (b), (c), and (d) may not necessarily equal income ілсоте Durboses the amounts in column (a) (see instructions).) cash basis only) Contributions, gifts, grants, etc., received (attach schedule) 1 Check ► X If the foundation is not required to attach Sch. B 2 137 137 137 3 Interest on savings and temporary cash investments 32,034 32,034 32.034 4 Dividends and interest from securities Gross rents 5a Net rental income or (loss) भुद्धिसम्बद्धाः स्ट्र -24,035 District Butting Net gain or (loss) from sale of assets not on line 10 Received U Bank - USB Gross sales price for all assets on line 6a 58,676 035 Capital gain net income (from Part IV, line 2) O Net short-term capital gain ÜÜÏ T 19 ZUZII q Income modifications 10a Gross sales less returns and allowances Ogden. b Less Cost of goods sold C Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 8,136 32,171 32,171 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc. Other employee salaries and wages 14 15 Pension plans, employee benefits Legal fees (attach schedule) 16a STMT 2 6,000 3,000 3,000 Accounting fees (attach schedule) 12,286 6,143 6,143 Other professional fees (attach schedule) 231 116 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings Printing and publications 22 717 STMT 1,435 717 23 Other expenses (att. sch.) Total operating and administrative expenses. 19,952 9,976 9,975 Add lines 13 through 23 45,208 45,208 25 Contributions, gifts, grants paid 9,975 65,160 9,976 45,208 Total expenses and disbursements. Add lines 24 and 25 26 27 Subtract line 26 from line 12: -57,024 Excess of revenue over expenses and disbursements 22,195 Net investment income (if negative, enter -0-)

For Paperwork Reduction Act Notice, see instructions.

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

Form 990-PF (2019)

22,196

	Part III : Analysis of Changes in Net Assets or Fund Balances		
1	Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with		
	end-of-year figure reported on prior year's return)	1	934,062
2	Enter amount from Part I, line 27a	2	-57,024
3	Other increases not included in line 2 (itemize) ▶	3	
4	Add lines 1, 2, and 3	4	877,038
	Decreases not included in line 2 (itemize) ▶	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) – Part II. column (b), line 29	6	877,038

Form 990-PF (2019)

Part VI instructions

Form	990-PF (2019) THE LYNDON & HELEN M SCHMID 61-1349891				age 4
Pa	rt VII Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	inst	ruct	ions	<u>) </u>
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ and enter "N/A" on line 1.	, -			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			4	144
_	here ▶ and enter 1% of Part I, line 27b				,]
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of		1		•
·	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				144
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)				0
4	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-				144
5	Tax based on investment meeting capaciting vision into an about the contract of the contract o				
6	Credits/Payments 2019 estimated tax payments and 2018 overpayment credited to 2019 [6a] 1,182			•	
а					ł
b	Exempt foreign organizations – tax withheld at source				ı
C	Tax paid with application for extension of time to file (Form 8868)				ı
d	Backup withholding erroneously withheld				
7	Total credits and payments. Add lines 6a through 6d			1,1	102
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8				
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				738
11	Enter the amount of line 10 to be Credited to 2020 estimated tax ▶ 738 Refunded ▶ 11				
Pa	rt 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	L		Yes	No
	participate or intervene in any political campaign?	L	1a	l	<u>X</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the				
	Instructions for the definition	L	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				1
	published or distributed by the foundation in connection with the activities.	<u>.</u>	٠	<u>.</u>	<u>. </u>
c	Did the foundation file Form 1120-POL for this year?	- 1	1c		X
ď	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	. [
•	(1) On the foundation > \$ (2) On foundation managers. > \$	- 1	Ì	I	ı
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	Ι,	[- 1
-	on foundation managers > \$	٦			İ
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	-	2		X
2	If "Yes," attach a detailed description of the activities.	⊢	- .+	<i>.</i> .	<u> </u>
•	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles	- 1		٠. ا	ĺ
3		-	3		<u> </u>
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	⊢	4a		<u>x</u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year? If "Yes." has it filed a tax return on Form 990-T for this year? N/2				
b		^^	4b 5		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	·· ├	-		
	If "Yes," attach the statement required by General Instruction T.				•
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	X	
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	F	7	Х	 ;
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶	1			1
	KY	.		.	1
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	_			لييـ
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	L	8b		X
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 instructions for Part XIV. If "Yes,"				
	complete Part XIV	. L	9		<u>x</u> 2
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	- F			
	names and addresses	}	10		X
			_	0-PF	(2019)

Part VII-A Statements Regarding Activities (continued) 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	Yes	No X
meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	x	x
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	х	X
	х	
I I	Х	
person had advisory privileges? If "Yes," attach statement. See instructions	X	X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		
Website address ► N/A		
14 The books are in care of ▶ ERNIE SAMPSON Telephone no ▶ 502-451-2225 LEXINGTON RD	060	0
Located at ▶ LOUISVILLE KY ZIP+4 ▶ 40206		
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		
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?	<u> </u>	X
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of		
the foreign country ▶		<u> </u>
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?	٠ .	
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	ι,	۔
disqualified person? Yes X No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	٠.	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		١,
(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	۰, ۰,	·
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		ļ
Organizations relying on a current notice regarding disaster assistance, check here		ŀ
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? N/A 1c		
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		ļ
operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines		
6d and 6e) for tax year(s) beginning before 2019?		i
If "Yes," list the years ▶ 20 , 20 , 20 , 20 .	,	1
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		<u> </u>
all years listed, answer "No" and attach statement – see instructions.)		ļ
c 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	•	٠.
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		
at any time dunng 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>	
foundation had excess business holdings in 2019.)	ļ	L
4a Did the foundation invest during the year any amount in a manner that would jeopardize its chantable purposes?	<u> </u>	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		
chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	On-Di	X

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Pa	art VII-B Statements Regarding Activities for Which Form	4720 May Be I	Required (con	tinued)		
5a	Dunng the year did the foundation pay or incur any amount to:			[<u> Y</u>	es No
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945	i(e))?	🔲 Y	es X No	_	
	(2) Influence the outcome of any specific public election (see section 4955); or to ca					
	directly or indirectly, any voter registration drive?		🗌 Y	es X No	.	
	(3) Provide a grant to an individual for travel, study, or other similar purposes?			es X No		
	(4) Provide a grant to an organization other than a charitable, etc., organization desc	cribed in	· · · · -	_	1	
	section 4945(d)(4)(A)? See instructions		D Y	es X No	1	
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or edit		_		'	
	purposes, or for the prevention of cruelty to children or animals?		. 🗌 Y	es X No		1 :
b	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the	he exceptions descr	nbed	_		
	in Regulations section 53.4945 or in a current notice regarding disaster assistance?	See instructions		N/A	5b	
	Organizations relying on a current notice regarding disaster assistance, check here			▶∐∣	1	
С	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the	ne tax	. —		-	
	because it maintained expenditure responsibility for the grant?		N/A 📙 Y	es No		
	If "Yes," attach the statement required by Regulations section 53.4945-5(d).					
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay pro-	remiums				
	on a personal benefit contract?		LJ Y	es 🗓 No		
þ	Did the foundation, during the year, pay premiums, directly or indirectly, on a person	al benefit contract?			6b	X
	If "Yes" to 6b, file Form 8870.			I		
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter	transaction?	📙 ۲	es X No		
b	If "Yes," did the foundation receive any proceeds or have any net income attributable		····· · · ·	n/a	7b	
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000		П.	es X No	}	
	remuneration or excess parachute payment(s) during the year?		· · · · · · · · · · · · · · · · · · ·		i	
Pa	art VIII Information About Officers, Directors, Trustees, Fo	oundation Man	nagers, Highly	Paid Employ	yees,	
	and Contractors	** · · · · · · · · · · · · · · · · · ·	42			
1 1	List all officers, directors, trustees, and foundation managers and their compe	nsation. See instri	uctions.	(A) Contribution to		
		(b) Title, and average	(c) Compensation (If not paid,	(d) Contributions to employee benefit	(e) Exper	rse account,
	(a) Name and address	hours per week devoted to position	enter -0-)	plans and deferred compensation	other a	dlowances
	TOUTANTI D	DDBCTDENW		comportation.		
	RNEST A. SAMPSON LOUISVILLE	PRESIDENT 0.00	o	0		0
	OF CHANG LOUISUTIES	SECRETARY	J			
		0.00	٥	0		0
	225 LEXINGTON ROAD KY 40206 CLLEY CARSON LOUISVILLE	TREASUER				
	225 LEXINGTON ROAD KY 40206	0.00	o	0		0
	25 HIGHLIGION ROLD					
2	Compensation of five highest-paid employees (other than those included on	line 1 – see instru	ctions). If none, e	enter		
	"NONE."					
		(b) Title, and average		(d) Contributions to		
	(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred		nse account, allowances
		devoted to position		compensation		
NC	DNE					
		ļ			<u> </u>	
			<u> </u>			
					-	
<u> </u>	I	1	L			0
ota	I number of other employees paid over \$50,000		·····		990	-PF (2019)

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▶

All other program-related investments. See instructions

Total, Add lines 1 through 3

.

Adjusted qualifying distributions. Subtract line 5 from line 4

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

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

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6

Pa	art XIII Undistributed Income (see instructions	3)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2018 from Part XI,	Corpus	Years pnor to 2018	2018	2019
	line 7				49,095
2	Undistributed income, if any, as of the end of 2019:				
а	Enter amount for 2018 only				
b					
3	 	W 1 , 10,	* * * * * * * * * * * * * * * * * * *	s graphic cut	٠, ,
а	From 2014 1,712	,	, ~	,	
b	From 2015 3.212				
С	From 2016 1,164	Section 1 = 1 km/s			
d	From 2017	SHOTE E	• •	- • I	ļ ·
е	From 2018 1,877				[
f	Total of lines 3a through e	7,965			
4	Qualifying distributions for 2019 from Part XII,				
	line 4· ▶ \$45,208				
а	Applied to 2018, but not more than line 2a				
b	Applied to undistributed income of prior years	,			
	(Election required – see instructions)				i
c	Treated as distributions out of corpus (Election				J
	required - see instructions)				
d	Applied to 2019 distributable amount				45,208
	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2019				
	(If an amount appears in column (d), the same				
	amount must be shown in column (a).)	3,887			3,887
6	Enter the net total of each column as				
	indicated below:				!
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	4,078		•	İ
	Prior years' undistributed income. Subtract				
	line 4b from line 2b				Ì
C	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				Ì
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
đ	Subtract line 6c from line 6b. Taxable				
	amount - see instructions				
e	Undistributed income for 2018. Subtract line				
	4a from line 2a. Taxable amount see				į
	instructions				<u> </u>
f	Undistributed income for 2019. Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2020				0
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				İ
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)				
8	Excess distributions carryover from 2014 not				
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2020.				
	Subtract lines 7 and 8 from line 6a	4,078	·		2
10	Analysis of line 9				ŀ
а	Excess from 2015 1,037				
b	Excess from 2016 1,164				
С	Excess from 2017				ľ
đ	Excess from 2018 1,877				
_	Evenes from 2010				

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

NONE

factors:

DAA

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year HARBOR HOUSE OF LOUISVILLE 2231 LOWER HUNTERS TRACE PAID NONE QUALITY CARE FOR ADULTS LOUISVILLE KY 40216 HILDEGARD HOUSE 114 ADAMS STREET NONE PAID **ELDERLY** 2,208 HOSPITALITY SERVICE FOR THE LOUISVILLE KY 40206 HOLSTON UNITED METHODIST 404 HOLSTON DRIVE NONE PAID **GENERAL PURPOSE** 2,000 GREENEVILLE TN 37743 HOME OF THE INNOCENTS NONE PAID 1100 E. MARKET STREET FUND THE PASS 2,000 **PROGRAM** LOUISVILLE KY 40206 **HOSPARUS** NONE PAID 3532 EPHRAIM MCDOWELL DR. GRIEF SUPPORT **PROGRAM** COMMUNITY LOUISVILLE KY 40205 HOSPICE & PALLATIATIVE CARE NONE PAID 3532 EPHRAIM MCDOWELL DR **COUNSELING & EDUCATION** LOUISVILLE KY 40205 BEREAVEMENT KENTUCKY OPERA 323 W BROADWAY NONE PAID INTRODUCE AUDIENCES TO OPERATIC ART 2,000 LOUISVILLE KY 40202 KENTUCKY SCHOOL FOR THE BLIND NONE PAID 214 HARDEMAN AVE LOUISVILLE KY 40206 GENERAL OPERATING SUPPORT KET PAID NONE 560 COOPER DRIVE FUND FOR EXCELLENCE LEXINGTON KY 40502 KIDS FOR PEDIATRIC THERAPIES NONE PAID 982 EASTERN PARKWAY TREAT CHILDREN WITH DISABILITIES LOUISVILLE KY 40217 Total b Approved for future payment N/A ▶ 3b **Total**

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year ALZHEIMER'S ASSOCIATION 225 N. MICHIGAN AVE FL 17 NONE PAID CHICAGO IL 60601 RESEARCH AND SUPPORT PROGRAMS AMERICAN PRINTING HOUSE FOR BLIND PAID 1839 FRANKFORT AVE. NONE LOUISVILLE KY 40206 MATERIALS FOR READING AND SUPPORT AMERICAN RED CROSS NONE PAID 2025 E STREET NW WASHINGTON DC 20006 CRITICAL DISASTER RELIEF **SERVICES** BALL STATE UNIVERSITY PAID 2000 W UNIVERSITY AVE NONE ALMA MATER MUNCIE IN 47306 CHURCH BARDSTOWN ROAD PRESBYTERIAN PAID NONE 1722 BARDSTOWN ROAD DEVELOP COMMUNITY COURTYARD LOUISVILLE KY 40205 BELLERMINE UNIVERSITY NONE PAID 2001 NEWBURG ROAD 2,000 CAPITAL CAMPAIGN/BELLARMINE CTR LOUISVILLE KY 40205 BIG BROTHERS BIG SISTERS OF KY NONE PAID 1519 GARDINER LANE SUPPORT CHILDREN IN THE COMMUNITY LOUISVILLE KY 40218 BLUE APPLE PLAYERS NONE P.O. BOX 4261 PAID LOUISVILLE KY 40204 DRAMA FOR LEARNING; DRAMA FOR LIFE BOYS & GIRLS HAVEN PAID 2301 GOLDSMITH LANE NONE 1,000 LOUISVILLE KY 40218 SUPPORT CHILDREN IN THE COMMUNITY BUNBURY THEATRE COMPANY NONE PAID 604 S. THIRD STREET TEACH IND. ABOUT DOM. VIOLENCE LOUISVILLE KY 40202 45,208 ▶ 3a Total b Approved for future payment N/A 3b ightharpoonsTotal

Part XV | Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year THE CENTER FOR WOMEN AND FAMILIES 927 S 2ND STREET NONE PAID 2,000 ROOM FOR DOMESTIC VIOLENCE **VICTIMS** LOUISVILLE KY 40203 WELLSPRING NONE PAID PO BOX 1927 HOUSING **PROGRAMS** LOUISVILLE KY 40201 YOUNGLIFE - WOODFORD COUNTY PAID 226 ASHBY CIRCLE NONE TO TEENS VERSAILLES KY 40383 OUTREACH 2,020 CRESENT HILL LIBRARY PAID 2762 FRANKFORT AVE NONE **GENERAL PURPOSE** 1,000 LOUISVILLE KY 40206 SUPPLIES OVER SEAS PAID NONE 1500 ARLINGTON AVE SUPPORT 5,000 **OPERATIONAL** LOUISVILLE KY 40206 ▶ 3a Total b Approved for future payment N/A **▶** 3b **Total**

Supplementary Information (continued) -Part XV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient show any relationship to Purpose of grant or status of Amount any foundation manager contribution recoverit Name and address (home or business or substantial contributor Paid during the year KOSAIR 982 EASTERN PARKWAY PAID NONE SUPPORT OUTREACH AND PREVENTION PROG LOUISVILLE KY 40233 LITTLE SISTERS OF THE POOR NONE PAID 15 AUDUBON PLAZA DRIVE ST. JOSEPH'S GREEN INT PROJECT 2,000 LOUISVILLE KY 40202 LOUISVILLE ORCHESTRA 323 W BROADWAY #700 NONE PAID LOUISVILLE KY 40202 GENERAL **PURPOSE** 2,000 **MARYHURST** NONE PAID 210 E MADISON ST LAGRANGE KY 40031 SUPPORT FOR SHELTER MASONIC HOMES OF KENTUCKY 3761 JOHNSON HALL DRIVE NONE PAID MASONIC HOME KY 40041 SPECIALIZED HEALTH SERVICES ROCKY MOUNTAIN CHILDREN'S LAW CENTE NONE PAID 1325 S COLORADO BLVD DENVER CO 80222 GENERAL PURPOSE 5,000 SECOND HARVEST 1020 JERICHO DRIVE NONE PAID **GENERAL PURPOSE** KINGSPORT TN 37663 SHELTER FOR WOMEN & CHILDREN PAID 530 KLUTEY PARK PLAZA DRI NONE HENDERSON KY 42420 TEMP HOMELESS SHELTER ST JOE'S CHILDREN'S HOME 2823 FRANKFORT AVE. NONE PAID GENERAL **PURPOSE** 1,000 LOUISVILLE KY 40206 ST. JOHN'S CENTER FOR HOMELESS MEN 700 E. MUHAMMAD ALI BLVD. PAID MAINTENANCE FUND 1,000 LOUISVILLE KY 40206 ▶ 3a Total Approved for future payment N/A **▶** 3b Total

Supplementary Information (continued) Part XV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year CASA NONE PAID 301 SHELBY STREET **PURPOSE** KINGSPORT TN 37660 **GENERAL** 1,000 CHAMPIONS FOR CHILDREN 5813 GLEN PARK ROAD NONE PAID HELP CHILDREN IN NEED 7,980 LOUISVILLE KY 40222 CLARKSVILLE ELEMENTARY 700 N. RANDOLPH AVE. NONE PAID **GENERAL** SUPPORT CLARKSVILLE IN 47129 DARE TO CARE 5803 FERN VALLEY ROAD NONE PAID EMERGENCY FOOD ASSISTANCE LOUISVILLE KY 40228 **ELDERSERVE** NONE PAID 411 E MUHAMMAD ALI BLVD 1,000 OUALITY OF LIFE SERVICES FOR ELDERLY LOUISVILLE KY 40202 FAMILY & CHILDREN'S PLACE 2818 GRANT LINE RD STE 5 NONE PAID 1,000 JUVENILE TREATMENT **PROGRAM** NEW ALBANY IN 47150 FOSTER YOUTH IN ACTION 2140 SHATTUCK AVE STE 504 NONE PATD BERKELEY CA 94704 BUILD SKILLS FOR FOSTER YOUTH FOUNDATION OF HOPE MINISTRIES NONE PAID 3305 MOUNT SHASTA WAY OF FOOD FOR FOOD BANK LOUSIVILLE KY 40241 PURCHASE GIRL SCOUNTS OF KENTUCKIANS PAID NONE 2115 LEXINGTON ROAD BUILD GIRLS OF COURAGE AND CHARCTER LOUISVILLE KY 40206 GIRLS, INC. NONE PAID 1100 GIRLS PLACE CLUB **PURPOSE** 2,000 KINGSPORT TN 37660 **GENERAL** Total b Approved for future payment N/A ▶ 3b Total

Part XVI-A	Analysis of Income-Producing Ac	tivities			····	
	ounts unless otherwise indicated.		d business income	Excluded	by section 512, 513, or 514	
·		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
1 Program ser		<u> </u>		╁		
				 		
				-		
				├		
				 		
e				 		
T		<u> </u>		<u> </u>		
	d contracts from government agencies					
•	dues and assessments	<u></u>		-	1.27	
	avings and temporary cash investments	<u> </u>		14	137	
	nd interest from securities			14	32,034	
	come or (loss) from real estate.	<u> </u>		 		- 1
	anced property	<u> </u>		}		
	t-financed property			 		
	come or (loss) from personal property			 		
7 Other investr				 		
8 Gain or (loss	s) from sales of assets other than inventory					-24,035
9 Net income of	or (loss) from special events		7	├ ──-		
	or (loss) from sales of inventory	<u></u>		 		
	ue: a			├		
						
		ļ		 		
				 		
θ				 	00 171	04.005
	d columns (b), (d), and (e)	L	0	Ll	32,171	
	ne 12, columns (b), (d), and (e)				13	8,136
	n line 13 instructions to verify calculations.)					
Part XVI-B						
Line No.	Explain below how each activity for which income is					
N/A	accomplishment of the foundation's exempt purpose	s (other than by	providing tunds for su	ich purpo	ses). (See instructions)	
M/A						
				_		
			_,,,			
				-		
				_		· · · · · ·
						·
		 -				
			· · · · · · · · · · · · · · · · · · ·		-	
			 			
				_		
				_		
						

Form 990-PF (20		ON & HELEN M SC		61-1349891			Page 1:
Part XVII	Information Reg Organizations	arding Transfers To a	nd Transaction	ons and Relationships W	ith Noncharital	ble Ex	cempt
1 Did the org		ectly engage in any of the follow	wing with any othe	r organization described		[·	Yes No
-	·	n 501(c)(3) organizations) or in	= -	_			
organization	ns?						
a Transfers f	from the reporting founda	ition to a nonchantable exempt	organization of				
(1) Cash						1a(1)	X
(2) Other	assets					1a(2)	X
b Other trans	sactions:						
• •		ble exempt organization				1b(1)	X
• •		inchantable exempt organization				1b(2)	X
		or other assets				1b(3)	X
	ursement arrangements		•••			1b(4)	X
	or loan guarantees					1b(5)	X
		embership or fundraising solicita			• •	1b(6)	X
•	• •	iling lists, other assets, or paid		(h) should always about the for ma	l	1c	
		· · · · · · · · · · · · · · · · · · ·		(b) should always show the fair ma foundation received less than fair in			
	-	- · · · ·		goods, other assets, or services re			
(a) Line no	(b) Amount involved	(c) Name of nonchantable exer		(d) Description of transfers, tr		rangement	
N/A	(2) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(4,7000000000000000000000000000000000000		(-),			
	+	 					·
							
							
							
	- 						-
	· · · · · · · ·					-	
	1						
2a is the found	dation directly or indirectl	y affiliated with, or related to, or	ne or more tax-exe	empt organizations			
	•	han section 501(c)(3)) or in sec			F	☐ Yes	X No
	mplete the following sch	, , , ,				_	
	(a) Name of organization		organization	(c) Descrip	tion of relationship		
N/A							
		it I have examined this return, including repare (other than taxpayer) is based of		iles and statements, and to the best of my	knowledge and belief, it is	true,	
Contact, a	and designed bedatabotted p	openor your and it inspects to based (an audimondii oi wi	and proposed has any renomicage	May the IRS discu		
Sign		n . \mathcal{L}			with the preparer s	shown belo	
Here	7 ~ -	T MAIN	, 1	0-13-2020 PRES	L	<u> </u>	۳۰۰ ب
	()~~	VOV	_	PRES	IDENT		<u> </u>
Sig	nature or onicer or trustee)		Date	Title			
Pnnt/T	ype preparer's name	·	Preparer's signatur	ne e	Date	,	Check if
Paid -						s	self-employed
Preparer DOUG	YORK, CPA		DOUG YORK	, CPA	03/24		
	name ► RODE	TER MOSS & CO, 1	PLLC		PTIN P 00	3822	:28

47150

812-945-5236 Form 990-PF (2019)

Firm's EIN ▶ 35-1663728

Phone no

Use Only

Firm's address ▶

301 E. ELM STREET

NEW ALBANY, IN

3/24/2020 1:53 PM

C1318 THE LYNDON & HELEN M SCHMID
61-1349891 Federal Statements

FYE: 12/31/2019

		Description	on			How Receive		Wh So	om old		Da Acqu
Date Sold		Sale Price		Cost		Expense		Depreciation		Net Gain / Loss	 S
	\$	58,676	\$	82,711	\$	PURCHASI	Ξ = \$_		\$_	-24,0	<u>35</u>
TOTAL	\$	58,676	\$	82,711	\$	0	\$_ =	0	\$_	-24,0	35
	Sta	atement 2	- For	m 990-PF, P	art I	. Line 16b - A	\cc	ounting Fees			_
	Descrip	otion		<u></u>		Net		Adjusted		Charitable	
				Total		Investment	_	Net	_	Purpose	
CCOUNTING			\$	6,000	\$	3,000	\$	3,000	\$		
TOTAL			\$	6,000	\$	3,000	\$	3,000	\$		0
	Staten	nent 3 - Fo	orm 9	90-PF. Part	I. Lir	ne 16c - Othe	r P	rofessional Fe	es		_
	Descrip										
				···-		Net		Adjusted		Charitable Purpose	
ANAGEMENT				Total		Net Investment	_	Adjusted Net		Charitable Purpose	·
ANAGEMENT TOTAL	Descrip		\$\$	···-		Net	- \$- \$	Adjusted	\$ s		
	Descrip	otion	\$ \$	Total 12,286 12,286	\$_ \$_ \$_	Net Investment 6,143 6,143	\$ \$	Adjusted Net 6,143 6,143	\$_		0
	Descrip FEES	otion Staten	\$ \$	Total 12,286 12,286	\$_ \$_ \$_	Net Investment 6,143	\$ \$	Adjusted Net 6,143 6,143	\$_		0
	Descrip	otion Staten	\$ \$	Total 12,286 12,286 4 - Form 990	\$ \$ }_PF ,	Net Investment 6,143 6,143 Part I, Line 1	\$ \$	Adjusted Net 6,143 6,143 Taxes Adjusted	\$_		0
TOTAL	Descrip FEES Descrip	otion Staten	\$ \$	Total 12,286 12,286	\$ \$ }_PF ,	Net Investment 6,143 6,143 Part I. Line 1	\$ \$	Adjusted Net 6,143 6,143 Taxes	\$_	Purpose	0
TOTAL	Descrip FEES Descrip	otion Staten	\$ \$	Total 12,286 12,286 4 - Form 990	\$ \$ }_PF ,	Net Investment 6,143 6,143 Part I, Line 1	\$ \$	Adjusted Net 6,143 6,143 Taxes Adjusted	\$_	Purpose Charitable	0
TOTAL	Descrip FEES Descrip	otion Staten	\$\$ \$nent 4	Total 12,286 12,286 4 - Form 990 Total	\$\$ \$ }-PF.	Net Investment 6,143 6,143 Part I. Line 1 Net Investment	\$ \$ \$	Adjusted Net 6,143 6,143 Taxes Adjusted Net	\$ \$	Purpose Charitable	0
TOTAL	Descrip Descrip	Staten Otion	\$ \$ ment	Total 12,286 12,286 4 - Form 990 Total 231 231	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Net Investment 6,143 6,143 Part J. Line 1 Net Investment	\$ \$ \$ 8 -	Adjusted Net 6,143 6,143 6,143 Taxes Adjusted Net 115 115	\$ \$	Purpose Charitable	
TOTAL	Descrip Descrip	Statem Otion	\$ \$ ment	Total 12,286 12,286 4 - Form 990 Total 231 231	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Net	\$ \$ \$ 8 -	Adjusted Net 6,143 6,143 7 Taxes Adjusted Net 115 115 115	\$ \$	Purpose Charitable Purpose	
TOTAL	Descrip Descrip PAID	Statem Otion	\$ \$ ment	Total 12,286 12,286 4 - Form 990 Total 231 231	\$\$\$\$\$	Net Investment 6,143 6,143 Part I, Line 1 Net Investment 116 116	\$ \$ \$ 8 -	Adjusted Net 6,143 6,143 6,143 Taxes Adjusted Net 115 115	\$ \$	Purpose Charitable	

Federal Statements

FYE: 12/31/2019

61-1349891

Statement 5 - Form 990-PF, Part I, Line 23 - Other Expenses (continued)

Description

Description								
		Total		Net estment	A0	djusted Net	Chari Purp	
EXPENSES	\$		ċ		ċ		ċ	
INSURANCE	Ş		Ş		ş		Ş	
OFFICE EXPENSE		1,325		662		662		
		110		55		55		
TOTAL	\$	1,435	\$	717	\$	717	\$	0

Statement 6 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Description

•	 Beginning of Year	 End of Year	Basis of Valuation	 Fair Market Value
INVESTMENTS - STOCKS				
	\$ 916,363	\$ 832,649	COST	\$ 1,047,730
TOTAL	\$ 916,363	\$ 832,649		\$ 1,047,730

Statement 7 - Form 990-PF, Part VII-A, Line 8b - Not Filing with Attorney General **Explanation**

Description

ACCORDING TO THE KY ATTORNEY GENERAL'S OFFICE, FORM 990-PF DOES NOT HAVE TO BE FILED WITH THEIR OFFICE WHEN THERE IS NO PUBLIC SOLICITATION FOR FUNDS. THERE IS NO PUBLIC SOLICITATION OF FUNDS BY THE LYNDON & HELEN M SCHMID FOUNDATION.

Statement 8 - Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

Description

REQUESTS SHOULD BE MADE ON THE TAX EXEMPT ORGANIZATION'S LETTERHEAD AND PROVIDE THE FOLLOWING INFORMATION: PUBLIC OR PRIVATE FOUNDATION STATUS, INCLUDING IRS CODE SECTION UNDER WHICH THE EXEMPT ORGANIZATION OPERATES; THE SPECIFIC AMOUNT(S) OF FUNDS REQUESTED: AND SPECIFICALLY HOW THE FUNDS WILL BE USED.

Form 990-PF, Part XV, Line 2c - Submission Deadlines

$\overline{}$			4.	
- 1 1	200	nn	TIO	n

NONE

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- C1318 THE LYNDON & HELEN M SCHMID

Federal Statements

FYE: 12/31/2019

61-1349891

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Statement 9 - Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

Description

INSTITUTIONS OF HIGHER LEARNING, HOSPITALS AND MEDICAL FACILITIES, RECOGNIZED RELIGIOUS ENTITIES AND CHURCHES, INSTITUTIONS OR ASSOCIATIONS DEDICATED FOR THE RELIEF OF THE POOR, SUCH AS HABITAT FOR HUMANITY, AND OTHER SIMILAR OF LIKE ORGANIZATIONS.

Form	990-PF	Underdistribution and Excess D	istributions for Part XIII	2019
		For calendar year 2019, or tax year beginning	, ending	1. Sec. 1.
Name				
THE	LYNDON	& HELEN M SCHMID	Em	ployer Identification Number :
CHAI	RITABLE	FOUNDATION	61	L-1349891

Undistributed Income Carryovers Form 990-PF, Part XIII

	Pri	or Undistributed In	come	<u>[</u>	Next Yea	г Саптуоver
Tax Year	Nontaxable or Previously Taxed	Taxable in 2019	Total per Year	Current Year Decreases	Nontaxable or Previously Taxed	Taxable in 2020
Years prior		1				発
20 15						6.4.
20 16						Re 2
20 17					<u> </u>	
2018					<u></u>	
2019			49,095	49,095	,	
otal Carryover	to Next Year					

^{*} Carryover amount includes 4942(a) amounts

Excess Distribution Carryovers Form 990-PF, Part XIII

		Current Year	Next Year
	Preceding Tax Year Excess Distributions	Decreases	Сапуочег
2014	1,712	1,712	27
2015	3,212	2,175	1,037
2016	1,164		1,164
2017			
2018	1,877		1,877
Current Ye	ear Excess Distribution Generated (20	119)	0
Total Carry	over to Next Year		4,078

Jd066 mg		Two Y	ear Comparison Report	on Report			2018 & 2019
	ndar year 20	For calendar year 2019, or tax year b	eginning	, ending			
Name THE LYNDON & HELEN M SCHMID		CHARITA	ABLE FOUNDATION			Тах 61	Taxpayer Identification Number 61-1349891
			1	2019	6	Differences	Seo
	Reven	Revenue and expenses per books	Net investment income	Revenue and expenses per books	Net investment income	Revenue and expenses per books	Net investment income
1. Contributions, gifts, grants, and similar amounts received	1.						
2. Interest on savings and temporary cash investments	2.			137	137	137	137
	6	31,644	31,644	32,034	32,034	390	390
4. Gross rents 5. Net gain or (loss) from sale of assets	4, 10,	-4,028		-24,035		-20,007	
	9		150				-150
7. Gross profit or (loss)	7.						
8. Other income	89						
9. Total. Add lines 1 through 8	6	27,616	31,794	8,136	32,171	-19,480	377
	10.						
	11.						
ee D	13.	18,632	9,316	18,286	9,143	-346	-173
	14						
15. Taxes	15.	214	107	231	116	17	6
	16.						
	12-						
	28	896	484	1,435	717		233
	9	51,183		45,208	- 1	2/6/2-	
20. Total expenses and disbursements. Add lines 10 through 19	70	70,997	~!	65,160	-		69
	21.	-43,38I	77,88/	-51,024	22,195	-13, 643	308
22. Excise Tax	2 2		219		444		225
. xet en	27 72						
	25.		219		444		225
	26.		1,401		1,182		-219
	27.						
28. Other Payments	28.						
29. Total payments and credits	.62		1,401		1,182		-219
30. Balance due / (Overpayment)	30.		-1,182		-738		444
31. Overpayment credited to next year	31.		1,182		738	-	-444
32. Penalty	32.						
33. Net due / (Refund)	33.		0		0		
	Ä	934,062		877,038		0	
35.	35.	0		0		0	
0 36 104 2000				-			

Form 990PF		—	ax Return History	tory			2019
Name THE LYNDON & HELEN M CHARITABLE FOUNDATION		SCHMID	KEPOIL IOI MOLE LEGGIL IIISOOLGAI MIDOIMADON			Тах — 61	Taxpayer Identification Number 61-1349891
1	-	2015		2016	91	2017	
	~	Revenue and expenses per books	Net investment income	Revenue and expenses per books	Net investment income	Revenue and expenses per books	Net investment income
1. Contributions, gifts, grants, and similar amounts received	-						
7	2.						
3. Dividends and interest from securities	က်	16,562	16,562	17,279	17,279	16,375	16,375
4. Gross rents	4 u	36.732		10,389	آ د	242,172	
	j 6		8,146	. I	6,229		780
	F						•
8. Other income	8						- 1
9. Total. Add lines 1 through 8	6	53,294	24,708	27,668	23,508	258,547	17,155
	9						
	= ;						
12. Pension plans, employee benefits	2 5	23.920	11.960	22.560	11.280	20.527	10,263
	4						
	15.	298	149	360	180	122	61
16. Deprecation and depletion	16.						
17. Occupancy	17.						
18. Other expenses	18.			328	164	2,268	1,134
19.	19.	51,700		47,100		45,641	
x 20. Total expenses and disbursements. Add lines 10 through 19	20.	75,918	12,109	70,348	11,624	68,558	11,458
7.	21.	-22,624	12,599	-42,680	11,884	189,989	5,697
22. Exase Tax	22.		126		238	• •	114
23. Section 511 Tax	ន						
•	24.					,	
	25.		126		238	-	114
1	26.		1,879		1,753		1,515
27. Foreign tax withheld	27.					-	
	28.						
29. Total payments and credits	8		1,879		1,753		1,515
30. Balance due / (Overpayment)	30.		0		0		0
31. Overpayment credited to next year	31.		1,753		1,515		1,401
32. Penalty	32.					*	
33. Net due / (Refund)	33.		0		0	-	0
ਲ	8	830,134		787,454		977,443	
है 35. Total liabilities	35.	0		0		0	
					The second second second		