Form 990-PF

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. Department of the Treasury ► Go to www.irs gov/Form990PFfor instructions and the latest information. Open to Public Inspection For calendar year 2019 or tax year beginning , 2019, and ending Name of foundation A Employer identification number DREES HOMES FOUNDATION, INC. C/O FIFTH THIRD BANK AS AGENT FOR TRUSTEE 81-1255960 umber and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) \$211 GRANDVIEW DRIVE 859-578-4200 ty or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here. . FORT MITCHELL, KY 41017 Check all that apply. Initial return Initial return of a former public charity 1 Foreign organizations, check here . Final return Amended return 2 Foreign organizations meeting the 85% test, check here and attach Address change Name change computation Check type of organization: | X | Section 501(c)(3) exempt private foundation If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here . Fair market value of all assets at J Accounting method: X Cash If the foundation is in a 60-month termination end of year (from Part II, col. (c), line Other (specify) under section 507(b)(1)(B), check here . > 9,988,774. (Part I, column (d), must be on cash basis) (d) Disbursements Part | Analysis of Revenue and Expenses (The (a) Revenue and for charitable (b) Net investment (c) Adjusted net total of amounts in columns (b), (c), and (d) expenses per ıncome income purposes may not necessarily equal the amounts in books (cash basis only) column (a) (see instructions)) Contributions, gifts, grants, etc , received (attach schedule) . 1,663,653 if the foundation is not required to attach Sch B. Interest on savings and temporary cash investments. 194,715 193,027 STMT Dividends and interest from securities . Gross rents Net rental income or (loss) -32.111Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 287,447 Capital gain net income (from Part IV, line 2) . Net short-term capital gain. Income modifications 1Óa Gross sales less returns and allowances Less: Cost of goods sold Gross profit or (loss) (attach schedule) 5 STMT 11 Other income (attach schedule) . . 826 027 12 Total. Add lines 1 through 11 . . . 13 Compensation of officers, directors, trustees, etc. NONE NONE 14 Other employee salaries and wages NONE NONE 15 Pension plans, employee benefits . 16a Legal fees (attach schedule) . 1,175 588 NONE 588 Accounting fees (attach schedule) STMT 3 MANATERINE Other professional fees (attach scheding, 4. 27,036 27,036 C 17 Taxes (attach schedule Regions 6,514 3,585 18 19 Depreciation (at 20 Occupancy . NONE NONE 21 Travel, conferen NONE NONE 22 Printing and publications erating 24 Lattach Scholle NSTMI 15 15 Other expenses Total operating and administrative 34,740 31,209 NONE 603. Add lines 13 through 23. 747<u>,500</u>. 747,500 O 25 Contributions, gifts, grants paid . . 782,240 31,209 NONE 748,103 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12. 1,044,022 Excess of revenue over expenses and disbursements 161,818 **b** Net investment income (if negative, enter -0-)

c Adjusted net income (if negative, enter -0-). JSA For Paperwork Reduction Act Notice, see instructions. GFQ975 5889 07/23/2020 09:17:35

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Ť		11 (2013)			1233300	
Ρ	art li	Balance Sheets	description column should be for end-of-year	Beginning of year (a) Book Value	(b) Book Value	of year
_			amounts only (See instructions)			(c) Fair Market Value
			ing	191,722.	321,822.	321,822
			cash investments	1,989,705.	1,275,003.	1,275,003
			<u> </u>			
			otful accounts ▶			
	4	Pledges receivable ▶_				
		Less allowance for doub	otful accounts ▶			-
	5	Grants receivable				
	6	Receivables due from	officers, directors, trustees, and other			
		disqualified persons (att	ach schedule) (see instructions)			
	7	Other notes and loans re	eceivable (attach schedule) 🕨,			
		Less allowance for doub	otful accounts NONE			
ţ	8	Inventories for sale or us	se			
Assets	9	Prepaid expenses and d	eferred charges			
څ	10a	Investments - U S and state	government obligations (attach schedule)			
	ь	Investments - corporate	stock (attach schedule)	5,206,887.	6,532,853.	
			bonds (attach schedule)	834,870.	1,136,235.	1,124,669
	11	Investments - land, building and equipment basis				
		Less accumulated deprecia (attach schedule)				
			loans			
			ch schedule)			
		Land, buildings, and equipment basis	>			
		Less accumulated deprecia	ntron			
	15	Other assets (describe)			
			completed by all filers - see the			
				8,223,184.	9,265,913.	9,988,774
			ccrued expenses	0/220/2011	2/200/220	1
						, <u>İ</u>
ပ္သ						<u> </u>
ĕI			rs, trustees, and other disqualified persons.		<u></u>	
Liabilities		•	ites payable (attach schedule)	-		
			(attach schedule)		-	<u> </u>
	~-	Other habilities (describe	· · · · · · · · · · · · · · · · · · ·			<u>-</u> -
	23	Total liabilities (add line	s 17 through 22)		NONE	
┪			FASB ASC 958, check here		NONE	· ;
nces		and complete lines 24,				1
Ĕ		•				Ì
ë			r restrictions			
D			estrictions			· · · · · · · · · · · · · · · · · · ·
5		and complete lines 26 thro	ollow FASB ASC 958, check here			ł
or Fund Bala		-		0 222 104	0 265 012	1
0			ipal, or current funds	8,223,184.	9,265,913.	<u> </u>
뙁	27	•	land, bldg, and equipment fund			<u> </u>
SS		- -	ated income, endowment, or other funds	0 222 104	0.265.012	
ונ			I balances (see instructions)	8,223,184.	9,265,913.	
Set			net assets/fund balances (see	0 222 104	0 265 012	
			ages in Not Assets or Fund Polor	8,223,184.	9,265,913.	1
_	art III		nges in Net Assets or Fund Balan			
1			palances at beginning of year - Part II		-	0 000 404
_			d on prior year's return)			8,223,184.
			line 27a	• • • • • • • • • • • • • • • • • • • •	 	1,044,022.
			led in line 2 (itemize) ► ROUNDING		3	2.
					 	9,267,208.
5	Decr	reases not included in	line 2 (itemize) ► RETURN OF CAPITAL	adjustment	5	1,295.

9,265,913. Form **990-PF** (2019)

6

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

	1996-FF (2019)					Page 3	
Par		s and Losses for Tax on Inv	·····	T /63			
	(a) List and de 2-story b	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)			
1 a	PUBLICLY TRADED	SECURITIES		D - Donation	_		
b							
d							
e							
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo		
	287,447.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	319,558.		,	-32,111.	
<u>a</u> b	······································		315,550.			-52,111.	
	•						
c							
							
<u>e</u>		l nowing gain in column (h) and owned b	by the foundation on 12/31/69				
	Complete only for assets si	· · · · · · · · · · · · · · · · · · ·	<u> </u>		Gains (Col. (h) ga (k), but not less t		
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		Losses (from co	l. (h))	
<u>a</u>						<u>-32,111.</u>	
b					 		
<u>c</u>							
<u>d</u>							
е							
2	Capital gain net income	Or ingt capital local	ain, also enter in Part I, line 7 oss), enter -0- in Part I, line 7	2		-32,111.	
3	Net short-term capital g	ain or (loss) as defined in sections	· · · · · · · · · · · · · · · · · · ·				
		art I, line 8, column (c). See ins					
	-			3			
Par			uced Tax on Net Investment Ir	come			
Was		the section 4942 tax on the distrib	outable amount of any year in the ba	ase period	j?	Yes X No	
If "Y		't qualify under section 4940(e). D					
1_		nount in each column for each yea	r; see the instructions before makin	g any ent			
Cale	(a) Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	,	(d) Distribution rat (col. (b) divided by		
	2018	774,437.	6,764,171.			0.114491	
	2017	250,124.	4,399,338.			0.056855	
	2016	•					
	2015						
	2014						
						,	
2	Total of line 1, column (d)		2		0.171346	
3		io for the 5-year base period - divid					
	_	foundation has been in existence		3		0.085673	
	the number of years the	Touridation has been in existence	in loss than 5 years				
4	Enter the net value of no	oncharitable-use assets for 2019 fr	om Part X, line 5	4	8,	166,534.	
5	Multiply line 4 by line 3.			5	5 699,651.		
6	Enter 1% of net investm	ent income (1% of Part I, line 27b)		6		1,618.	
				7			
7	Add lines 5 and 6			7		701,269.	
8		tions from Part XII, line 4	in Part VI, line 1b, and complete t	that part		748,103. rate. See the	

orm 9	990-PF (2019)		<u>81-1255960</u>				age 4
<u>Part</u>	Excise Tax Based on Investment Income (Section 4)	940(a), 494	10(b), 4940(e), or	4948 - see	instru	ctions	s)
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 le	tter if necessary	/ - see instructions)				
	Domestic foundations that meet the section 4940(e) requirements in Pa		(1		1,6	18.
	here X and enter 1% of Part I, line 27b		ح				
	All other domestic foundations enter 2% of line 27b. Exempt foreig			<u></u>			
	Part I, line 12, col (b)	-					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable f	foundations or	nly; others, enter -0-)	2		N	IONE
	Add lines 1 and 2		•	3		1,6	
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable f			4			ONI
	Tax based on investment income. Subtract line 4 from line 3 If zero or less,			5		1,6	18
	Credits/Payments:	,					
	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	1,751.				
	Exempt foreign organizations - tax withheld at source	1 1	NONE	-1 1			
	Tax paid with application for extension of time to file (Form 8868)		NONE	1 1			
	Backup withholding erroneously withheld			1			•
	Total credits and payments Add lines 6a through 6d			7		1,7	51
	Enter any penalty for underpayment of estimated tax. Check here if Fc			8			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed						
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amo					1	33
	Enter the amount of line 10 to be: Credited to 2020 estimated tax		133. Refunded ▶				3 5
	VII-A Statements Regarding Activities		<u> 155. Haramada p</u>	1 ** [
	During the tax year, did the foundation attempt to influence any	national sta	te or local legiclativ	on or did it		Yes	No
	participate or intervene in any political campaign?		- · · · · · · · · · · · · · · · · · · ·		1a	103	
	Did it spend more than \$100 during the year (either directly of						
					1b		2
	Instructions for the definition						
		or the activit	les and copies of a	iny materials	1 1		
	published or distributed by the foundation in connection with the activities				1c		
	Did the foundation file Form 1120-POL for this year?				10		
	Enter the amount (if any) of tax on political expenditures (section 4955) impo	_	year:			.	
	(1) On the foundation > \$ (2) On foundation mai				,		
	Enter the reimbursement (if any) paid by the foundation during the	year for po	itical expenditure tax	imposed	1	. 1	
	on foundation managers \$						
	Has the foundation engaged in any activities that have not previously been re	eported to the	IRS?		2		
	If "Yes," attach a detailed description of the activities				1 1		
	Has the foundation made any changes, not previously reported to						
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a col				3	\longrightarrow	
	Did the foundation have unrelated business gross income of \$1,000 or more				4a	\longrightarrow	
	If "Yes," has it filed a tax return on Form 990-T for this year?				4b	\longrightarrow	—,
5	Was there a liquidation, termination, dissolution, or substantial contraction d	uring the year	1		5		
1	If "Yes," attach the statement required by General Instruction T				ľ	i	
6	Are the requirements of section 508(e) (relating to sections 4941 through	4945) satisfie	d either:		[-	- 1	
	By language in the governing instrument, or						
	By state legislation that effectively amends the governing instru		·			<u> </u>	
	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 ye	ar? If "Yes," co	mplete Part II, col (c),	and Part XV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered KY	d. See instructi	ons ►				
b i	If the answer is "Yes" to line 7, has the foundation furnished a co	opy of Form	990-PF to the Atto	rney General	<u>, </u>		
	(or designate) of each state as required by General Instruction G? If "No," attac				8b		
	Is the foundation claiming status as a private operating foundation						
	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019						
	complete Part XIV				9		>
	Did any persons become substantial contributors during the tax ye			listing their			
	Did any persons become substantial contributors during the tax yo	call II TES,	STMT 8	nauny men	10	x	

	Statements Regarding Activities (continued)		т.	
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			Ι.
	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	1		١,
40	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?	13	X	<u> </u>
14	Website address ► N/A The books are in care of ► DREES HOMES FOUNDATION, INC. Telephone no ► (859) 578	420		
14	Located at 211 GRANDVIEW DRIVE, FORT MITCHELL, KY ZIP+4 41017	<u>-420</u>	<u>U</u>	
16	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			1 1
13	and enter the amount of tax-exempt interest received or accrued during the year		• • •	· Ш
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		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of	-	' 	
	the foreign country			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<u> </u>		
	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):			- 4
	(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? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Ves X No		i	
	(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)?	ľ l		1
	(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		.	- [
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			لــــ
_	were not corrected before the first day of the tax year beginning in 2019?	1c	\longrightarrow	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)): At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			ì
a	6d and 6e) for tax year(s) beginning before 2019?			- 1
	If "Yes," list the years	. 1		- 1
ь	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	i. İ	İ	- 1
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	_		1
	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			Ī
	>			
3а	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	. 1		J
	at any time during the year?	.	- 1	1
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or			- 1
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			1
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of		ļ	ì
	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	\longrightarrow	
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	\longrightarrow	<u> X</u>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		-	لپ-
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b m 990)-PF	X (2019)
	For	・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・	/ T T T	(2019)

NONE

NONE

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NONE

NONE

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	ighest-paid independent contractors for professional services. See instructions. If none, enter "NONE	."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		NONE
		,
lotal numb	er of others receiving over \$50,000 for professional services	NONE
Part IX-A	Summary of Direct Charitable Activities	
	ndation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of is 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
1NONE		
2		
All other pro	gram-related investments. See instructions	
3NONE		
•		

<u>P</u> ar	Minimum Investment Return (All domestic foundations must complete this part. For see instructions.)	eign founda	ations,
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	6,967,883.
	Average of monthly cash balances		1,323,014.
	Fair market value of all other assets (see instructions)		NONE
d			8,290,897.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
_	1c (attach detailed explanation)	\dashv \downarrow	NONE
2	Acquisition indebtedness applicable to line 1 assets		NONE
3	Subtract line 2 from line 1d	•	8,290,897.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see	i i	124,363.
_	instructions)	h + + + + + + + + + + + + + + + + + + +	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4		8,166,534.
6	Minimum investment return. Enter 5% of line 5		408,327.
Par	TXI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations, check here ▶ and do not complete this part.)	indations	
1	Minimum Investment return from Part X, line 6	1	408,327.
2 a	Tax on investment income for 2019 from Part VI, line 5 2a 1,618		
b		7	
C		2c	1,618.
3	Distributable amount before adjustments Subtract line 2c from line 1		406,709.
4	Recoveries of amounts treated as qualifying distributions		NONE
5	Add lines 3 and 4		406,709.
6	Deduction from distributable amount (see instructions)		NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1		406,709.
Par	t 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	748,103.
	Program-related investments - total from Part IX-B		
2			
	purposes	1	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	NONE
	Cash distribution test (attach the required schedule)		NONE
4	Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8; and Part XIII, line 4		748,103.
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	1 1	1,618.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		746,485.
-	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when c		-
	qualifies for the section 4940(e) reduction of tax in those years.		

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Pai	t XIII Undistributed Income (see instr	ructions)			
	Distributable amount for 2019 from Part XI,	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
	line 7				406,709.
2	Undistributed income, if any, as of the end of 2019			, -	
а	Enter amount for 2018 only			NONE	
b	Total for prior years 20,20,20		NONE		
	Excess distributions carryover, if any, to 2019:				
	From 2014 NONE				
b	From 2015 NONE				
C	From 2016 NONE				
	From 2017				
	From 2018 438,560.				
	Total of lines 3a through e	469,078.			1
4	Qualifying distributions for 2019 from Part XII,]
	line 4 ▶ \$ 748,103.				
а	Applied to 2018, but not more than line 2a			NONE	
Ь	Applied to undistributed income of prior years				
	(Election required - see instructions)		NONE		
c	Treated as distributions out of corpus (Election				
	required - see instructions)	NONE			
d	Applied to 2019 distributable amount				406,709.
	Remaining amount distributed out of corpus	341,394.			
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:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	810,472.			<u> </u>
b	Prior years' undistributed income Subtract				ļ
	line 4b from line 2b		NONE		<u> </u>
C	Enter the amount of prior years' undistributed income for which a notice of deficiency has		1		ļ
	been issued, or on which the section 4942(a)				
	tax has been previously assessed		NONE		
d	Subtract line 6c from line 6b Taxable		NONE		
	amount - see instructions		NONE		
٠	4a from line 2a Taxable amount - see			NONE	
	instructions			NONE	I
f	Undistributed income for 2019 Subtract lines				
	4d and 5 from line 1. This amount must be distributed in 2020				NONE
_					
,	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be				
	required - see instructions)	NONB			1
R	Excess distributions carryover from 2014 not				
•	applied on line 5 or line 7 (see instructions)	NONE			1
9	Excess distributions carryover to 2020.				ì
	Subtract lines 7 and 8 from line 6a	810,472.			
10	Analysis of line 9:				
а	Excess from 2015 NONE				
b	Excess from 2016 NONE				ļ
C	Excess from 2017				
d	Excess from 2018 438,560.				1
е	Excess from 2019 341,394.				ļ

Form **990-PF** (2019)

SEE ATTACHED STATEMENT FOR LINE 2

JSA
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Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual show any relationship to any foundation manager Foundation Amount status of recipient contribution Name and address (home or business) or substantial contributor a Paid during the year CHILDREN'S HOME OF NORTHERN KENTUCKY 200 HOME ROAD COVINGTON KY 41011 NONE PC GENERAL SUPPORT 100,000. CHILDREN'S INC NONE PC 333 MADISON AVE CONVINGTON KY 41011 GENERAL SUPPORT 250,000. GATEWAY COMMUNITY & TECHNICAL COLLEGE NONE PC 790 THOMAS MORE PKWY EDGEWOOD KY 41017 GENERAL SUPPORT 100,000. LIFE LEARNING CENTER 20 W 18TH ST COVINGTON KY 41011 NONE PC GENERAL SUPPORT 50,000. PREVENTION FIRST PC 2100 SHERMAN AVE CINCINNATI OH 45212 NONE PROGRAM SUPPORT 7,500. ACUE 85 BROAD ST. NEW YORK NY 10004 NONE PC PROGRAM SUPPORT 25,000. ST. ELIZABETH FOUNDATION 1 MEDICAL VILLAGE DRIVE EDGEWOOD KY 41017 NONE PC PROGARAM SUPPORT 200,000. UNIVERSITY OF CINCINNATI FOUNDATION UNIVERSITY HALL CINCINNATI OH 45221 NONE PC PROGRAM SUPPORT 15,000. 747,500. За b Approved for future payment **Total**

Part XVI	-A Analysis of Income-Produ	ucing Acti	ivities			
	amounts unless otherwise indicated.		ated business income	Excluded by	section 512, 513, or 514	(e)
-	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
•	TI SELVICE LEVELIDE				_	(See instructions.)
		,				
					_	
f						<u>_ ,</u>
g Fees	and contracts from government agencies					
2 Membei	rship dues and assessments					
3 Interest o	on savings and temporary cash investments -			1.4	104 515	170175
	ds and interest from securities		_	14	194,715.	NONE
	tal income or (loss) from real estate:					. <u>.</u>
	t-financed property					
	debt-financed property					
	al income or (loss) from personal property					
	vestment income			18	-32,111.	
	ome or (loss) from special events · · ·			- 	02/222	
	rofit or (loss) from sales of inventory					
11 Other re	·					_
ь <u>ЕХ</u>	KCISE TAX REFUND					5.
c						
d						
е						
	Add columns (b), (d), and (e)				162,604.	5.
	dd line 12, columns (b), (d), and (e)				13	162,609.
Part XVI-	B Relationship of Activities		samplishment of Ev	omnt Dur	20000	
Line No. ▼	Explain below how each activity accomplishment of the foundation					
			·-			
					 	
				-		-
				•••		
			• • • • • • • • • • • • • • • • • • • •			
						 .
			NOT APPLICABLE	<u> </u>	·	
						_
	-				- .	
						
						
						
						· · · · · · · · · · · · · · · · · · ·
						Form 990-PF (2019)

Form 99	90-PF (26	019)				81-1255960				Pa	ge 13
Part	XVII Š	Information Re Organizations	egarding Trans	fers to and Transaction	ons and	Relationships	With	Nonchai	ritable	e Ex	emp
1 [Did the	organization direct	ly or indirectly e	ngage in any of the follow	ing with a	ny other organiz	ation de	escribed		Yes	No
i	n sect	ion 501(c) (other	than section 5	501(c)(3) organizations) o	r in sect	ion 527, relati	ng to	political			
c	organiz	ations?									
a 1	ransfe	rs from the reporting	g foundation to a	noncharitable exempt orga	nization of	f:					
(1) Cas	h							1a(1)		X
(2) Oth	er assets							1a(2)		Х
ь (Other t	ransactions:									
(1) Sale	es of assets to a non	charitable exemp	ot organization					1b(1)		Х
ĺ	2) Pur	chases of assets from	m a noncharitable	e exempt organization					1b(2)		Х
				ssets							Х
											Х
		-									Х
		_		or fundraising solicitations							Х
			-	other assets, or paid emplo							Х
	-		_	" complete the following						fair m	
		•		es given by the reporting t				-			
٧	alue ii	n any transaction or	r sharing arrange	ment, show in column (d)	the value	of the goods, o	ther as	sets, or se	ervices	rece	eived
(a) Line	e no	(b) Amount involved	(c) Name of nor	ncharitable exempt organization	(d) Des	scription of transfers,	transactio	ns, and shar	ıng arra	ngeme	nts
		•									
						•					
			-								
							-				
							•				
											
									-		
							-				
d	lescrib	ed in section 501(c) complete the follow	(other than section ving schedule.	ated with, or related to, on 501(c)(3)) or in section			· · · ·	[es X	No
		(a) Name of organization	n	(b) Type of organization		(c) D	Description	of relations	hip		
								-			
											
	Т										
				d this return, including accompanying payer) is based on all information of whice			e best of	my knowledge	e and b	elief, it	is true,
Sign		1.10		1 1	.		Ľ	May the IRS	discus	this	return
Here		may		1/28/2020	Presia	lent		vith the pre	parer s	hown _t	
IICIE	Signa	ature of officer or trustee		Date /	Title		s	ee instructions	s X	Yes	No
	L									_	
Paid		Print/Type preparer's nar	me	Preparer's signature		Date	Check	` ''	TIN		
ı alu D		KARA NUNNELL	EY	Jan man		07/23/202	20 self-e	mployed]	2006	3525	6

45263-0858

513-534-7130 Form **990-PF** (2019)

Firm's EIN ► 31-0676865

Phone no

Paid Preparer

Use Only

Firm's address ▶ P O BOX 630858

► FIFTH THIRD BANK N.A.

CINCINNATI,

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

Department of the Treasury Internal Revenue Service Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990for the latest information. OMB No 1545-0047

2019

Employer identification number

DREES HOMES FOUNDATION, INC. C/O FIFTH THIRD 81-1255960 Organization type (check one): Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$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. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on 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).

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

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

Name of organization
DREES HOMES FOUNDATION, INC. C/O FIFTH THIRD

Employer identification number 81-1255960

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. -Part-l-(a) (d) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 1 RALPH A. DREES Х Person **Payroll** 22A LINDEN HILL DRIVE 1,163,653. Noncash (Complete Part II for CRESCENT SPRINGS, KY 41017 noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 2 THE DREES COMPANY Person **Payroll** 211 GRANDVIEW DRIVE 500,000. Noncash (Complete Part II for FORT MITCHELL, KY 41017 noncash contributions.) (b) (c) (d) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (c) (d) (a) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions) (c) (d) (a) (b) **Total contributions** Type of contribution Name, address, and ZIP + 4 No. Person **Payroll** Noncash (Complete Part II for noncash contributions) (d) (c) (a) (b) Name, address, and ZIP + 4 **Total contributions** Type of contribution No Person **Payroll** Noncash (Complete Part II for noncash contributions)

Name of organization
DREES HOMES FOUNDATION, INC. C/O FIFTH THIRD

Employer identification number

81-1255960

Part-II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1_	SEE ATTACHED		
		\$	12/26/2019
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

NET INVESTMENT INCOME	1 1 1 1	11,996.	34,477.		58,006.	15,486.	66,721.	6,341.	1 1 1 1 1 1 1 1	193,027.	
REVENUE AND EXPENSES PER BOOKS	1 1 1 1 1 1 1	11,996.	34,477.	1,688.	58,006.	15,486.	66,721.	6,341.	1 1 1 1 1 1 1	194,715.	
DESCRIPTION	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	USGI REPORTED AS NONQUALIFIED DIVIDENDS	FOREIGN DIVIDENDS	NONDIVIDEND DISTRIBUTIONS	DOMESTIC DIVIDENDS	NONQUALIFIED FOREIGN DIVIDENDS '	NONQUALIFIED DOMESTIC DIVIDENDS	SECTION 199A DIVIDENDS		TOTAL	

FORM 990PF, PART I - OTHER INCOME

REVENUE
AND
EXPENSES
DESCRIPTION PER BOOKS
----EXCISE TAX REFUND

TOTALS

5.

FORM 990PF, PART I - ACCOUNTING FEES

DESCRIPTION TAX PREPARATION FEE (NON-ALLOC	EXPENSES PER BOOKS	NET INVESTMENT INCOME 	ADJUSTED NET INCOME	CHARITABLE PURPOSES
TOTALS	1,175.		NONE	

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NET INVESTMENT INCOME	27,036. 27,036. ===========
REVENUE AND EXPENSES PER BOOKS	27,036.
	INVESTMNT MNGMNT FEES (NON-DED
	NT FEE
CON	r MNGM
DESCRIPTION	/ESTMN1
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FORM 990PF, PART I - TAXES

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	NET	INVESTMENT	INCOME	!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!			3,585.	! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! !	3,585.	
REVENUE	AND	EXPENSES	PER BOOKS		2,346.	583.	3,585.		6,514.	
			DESCRIPTION	\$ 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	PRIOR YEAR EXCISE TAX PAID	EXCISE TAX ESTIMATE	FOREIGN TAXES ON QUALIFIED FOR		TOTALS	

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REVENUE	AND	EXPENSES	PER BOOKS	
			DESCRIPTION	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

CHARITABLE PURPOSES	15.	15.
EXPENSES PER BOOKS	15.	TOTALS 15.

OTHER MISC. EXPENSES

9

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

The Attorney General of Kentucky does not have a filing requirement.

FORM 990PF, PART VII-A - NEW SUBSTANTIAL CONTRIBUTORS

NAME AND ADDRESS

RALPH A. DREES 22A LINDEN HILL DRIVE CRESCENT SPRINGS, KY 41017

THE DREES COMPANY 211 GRANDVIEW DRIVE FORT MITCHELL, KY 41017 FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

OFFICER NAME:

LYNN M. HEMMER

ADDRESS:

1059 WALD COURT

PARK HILLS, KY 41011

TITLE:

TREASURER & DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:

PHILIP A. DREES

ADDRESS:

510 GRAVES AVE., SUITE 211

ERLANGER, KY 41017

TITLE:

VICE PRESIDENT, SECRETARY & DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:

BARBARA DREES JONES

ADDRESS:

640 RIVERSHORE DRIVE

HEBRON, KY 41048

TITLE:

PRESIDENT

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:

SUSAN A. PANOUSHEK

ADDRESS:

636 RIVERSHORE DRIVE

HEBRON, KY 41048

TITLE:

DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

OFFICER NAME:

DAVID G. DREES

ADDRESS:

22 B LINDEN HILL DRIVE

CRESCENT SPRINGS, KY 41017

TITLE:

DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:

IRMALEEN DREES

ADDRESS:

22 A LINDEN HILL DRIVE

CRESCENT SPRINGS, KY 41017

TITLE:

DIRECTOR

OFFICER NAME:

RALPH DREES -

ADDRESS:

22 A LINDEN HILL DRIVE

CRESCENT SPRINGS, KY 41017

TITLE:

DIRECTOR

10

RECIPIENT NAME:

BARBARA DREES-JONES

ADDRESS:

211 GRANDVIEW DRIVE

FORT MITCHELL, KY 41017

RECIPIENT'S PHONE NUMBER: 859-578-4200

FORM, INFORMATION AND MATERIALS:

WRITTEN REQUETS ARE REVIEWED BY THE SELECTION COMMITTEE

SUBMISSION DEADLINES:

NONE, ROLLING DEADLINE

RESTRICTIONS OR LIMITATIONS ON AWARDS:

NONE