## 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.

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SCANNED "ALL & EUE!	

		Revenue Service	➤ Go to	www.irs.	gov/Fo	m990PFlor instr	uctions and th	e latest inf	ormati	on. O	pen to Public Inspection
Fo	r ca	lendar year 2019	or tax year begin		·		07 , 2018				12/31, 20 19
Name of foundation KITE FAMILY FOUNDAT					ION					<b>Employer identi</b>	
AGENT				· • • • • • • • • • • • • • • • • • • •		0,0 12111		,		84	-2255662
$\overline{}$			number if mail is not o	lelivered to	street a	ddress)	*******	Room/suite	. B		er (see instructions)
		•									
	PΩ	BOX 630858						!		ς.	13-534-5310
			country, and ZIP or for	eign posta	l code		<del></del>	<u> </u>	_		10 001 0010
	•		••	•					c	If examplion applic	etlon rs
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_		ck all that apply:	X Initial retui	'n	-T	Initial return	of a former p	uhlic char	ity -		
Ŭ	0.,0	on an arat apprix	Final return		<b>-</b>	Amended re		ADUO GUAL		<ol> <li>Foreign organization</li> <li>Foreign organization</li> </ol>	•••
			Address ch	-	<b> </b>	Name chang				85% test, phuck	here and attach
H	Che	ck type of organiz	ration: X Secti		c)(3) e					computation .	
ï			onexempt charitable			)ther taxable pr		ال مم	E		n status was terminated
누		market value o	<del></del>			method: X C		rual	┸┥		b)(1)(A), check here . >
•		of year (from Par			_	pecify)	asis [] Acc	ituai	F		in a 60-month termination b)(1)(9), check here
			512,669.			(d), must be on c	ach bools )			under action acry	off the france vere .
ŀ			enue and Expens			<del>````</del>	nau heara'i				(d) Disbursements
	الكبت	total of amounts i	n columns (b), (c), ai	nd (d)	143	Revenue and openses per	(b) Net inve		(c)	Adjusted net	for charitable
		may not necessari column (a) (see in	ily equal the amount	s In	"	books	incon	ne e		Income	purposes (cash basis only)
-	1			hadridas	<b></b>	463,661.	<del> </del>	<del></del>		<del></del>	
	2	Chook   If th	ts, etc., received (attach so o foundation is not requ	uired to		=00,001.	<del> </del>				<del> </del>
	3	atta	ch Sch. B.				<del>                                     </del>				<del> </del>
	-		id temporary cash inve rest from securities			<u></u>	<del></del>			<del></del>	<del> </del>
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	5a L		· · · · · · · · · · · · · · · · · · ·		<del></del>	<del></del>				CLIVITI	±
۵.			(loss)			<del></del>	<u> </u>	18			
Ž	o a	Gross sales price for a	n sele of assets not on l all	ina 10		<del></del>		<u>                                      </u>	<del>- JU</del>	<del>∟ 1 7 2020</del>	<del>                                      </del>
Revenue	~	assets on line 6a		: 21		· · · · · · · · · · · · · · · · · · ·	i	<u> </u>			118
Re	7	· -	come (from Part IV, I	ï			ļ	<del>-    </del>	ÒG	DEN. UT	# =
	8	•	ital gain ons			<del></del>	<u> </u>	· · ·	=	DEIN, OI	
	9 10a	Gross sales less return	ns i	• • • •		·				<del></del>	<del> </del>
		and allowances	•			······································				······································	
4			s) (attach schedule)			<del></del>				<del> </del>	<del> </del>
J	11	•	ch schedule)						• • • •		<del> </del>
- [	12		through 11			463,661.		<del></del>			<del>                                     </del>
ᅥ	13		cers, directors, trustees,			103,001.					
S	14		laries and wages					NONE		NON	<del> </del>
힑	15		oloyee benefits					NONE		NON	<del></del>
			schedule)					110111		NOM	1
Administrative Expens			ttach schedule)							·····	<del> </del>
9	•		fees (attach schedul								
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Ξ	19		h schedule) and der	·	····	·					<del></del>
Ë	20	·	· · · · · · · · · · · ·	1							
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5	23		tach schedule)					.,011		HOM	
=	23 24	•	d administrative ex								
era	-7		gh 23					NONE		NON	4
Ā	25		grants paid				· · · · · · · · · · · · · · · · · · ·	2102113		NOM	1
- 1	25 26_	· -	ursoments. Add lines 24	1		····		NONE		NONI	
_	<del>-y</del> - 27	Subtract line 26 fro		- JIIU KU		····		TOME		MOM	<del> </del>
١	د, ع		er expanses and disbut	******		463,661.					
ļ			come (if negative, er			407,001,					<del> </del>
١			come (il negative, er me (if negative, ente								<del> </del>
븘			ne (il negative, ente Act Notice, see inst				<u> </u>	L			Form <b>990-PF</b> (2019)
٠.		HEUUGUON		. 46110113.	•						rom 334-FF (2019)

Form 990-PF (2019)

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463,661.

463,661.

5 Decreases not included in line 2 (itemize) ▶

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

Pai	t IV Capital Gains	and Losses for Tax on Inv	estment Income			
		scribe the kind(s) of property sold (for sick warehouse; or common stock, 200		(b) How acquired P · Purchase	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a		D - Ponation				
b						
Ċ						
d						
<u>e</u>						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo ((e) plus (f) min	
<u>a</u>		· · · · · · · · · · · · · · · · · · ·				
<u>b</u>			<u> </u>	ļ		
<u>c</u>			<del>                                     </del>	<b></b>	·····	
d				ļ	<del></del>	
8	<del></del>	owing gain in column (h) and owned	by the foundation on 12/31/69		0: 10:141	•
		(j) Adjusted basis	(k) Excess of col. (i)		Gains (Col. (h) ga (k), but not less t	
	(f) FMV as of 12/31/69	as of 12/31/69	over col. (j), if any		Losses (from co	
a				l		
b						
<u>c</u>				ļ		·····
d						
<u>e</u>			<u> </u>	ļ		
2	Capital gain net income	or (net capital loss) J ~~~	gain, also enter in Part I, line 7			
3		ا ۱۱ ) ain or (loss) as defined in sections	loss), enter -0- in Part I, line 7	2		
•			structions. If (loss), enter -0- in }			
				3		
Par	Qualification U	nder Section 4940(e) for Rec	duced Tax on Net investment la	ncome	N/	'A
Was		·	butable amount of any year in the b	ase perio	d?	Yes No
1			ar; see the instructions before making	anu an	trice	<del></del>
<u>.</u>	(a)	(b)	le)	ig any en	(d)	
Cele	Base period years ndar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		Distribution re (col. (b) divided by	
	2018				, , , , , , , , , , , , , , , , , , , ,	
	2017					
	2018					
	2015					
	2014		1			
2	Total of line 1, column (	d)		2		
3			de the total on line 2 by 5.0, or by	1 _		
	the number of years the	toundation has been in existence	if less than 5 years	3	• • • •	
4	Enter the net value of no	encharitable-use assets for 2019 f	from Part X, line 5 , ,	4		
5	Multiply line 4 by line 3.	5	<u> </u>	···		
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)	J	6		
7	Add lines 5 and 6			7		
8	Enter qualifying distribut If line 8 is equal to or g Part VI instructions.	ions from Part XII, line 4 reater than line 7, check the box	x in Part VI, line 1b, and complete	8 that part	using a 1% tax	rate. See the

				O-PF (2019) 84-2255662
15}	ection	e instru	948 - see	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948
		-		compt operating foundations described in section 4940(d)(2), check here
				ate of ruling or determination letter (attach copy of letter if necessary - see instructions)
NONE	]		1	omestic foundations that meet the section 4940(e) requirements in Part V, check
				are > and enter 1% of Part I, line 27b
				other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of
				art I, line 12, col. (b)
NONE	]		2	ax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)
NONE			3	dd lines 1 and 2 ,
NONE			4	ubtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)
NONE	]		5	ax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0
				redits/Payments:
				D19 estimated tax payments and 2018 overpayment credited to 2019 6a
				kempt foreign organizations - tax withheld at source
				ex paid with application for extension of time to file (Form 8868)
				ackup withholding erroneously withheld
NONE	1		7	otal credits and payments. Add lines 6a through 6d
	•		· · · · · · · · · · · · · · · · · · ·	nter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8
NONE				ex due. If the total of lines 5 and 8 is more than line 7, enter amount owed
10111	<u>·</u>		<del></del>	verpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.
		<del></del>		nter the amount of line 10 to be: Credited to 2020 estimated tax
			<u>'''  </u>	/II-A Statements Regarding Activities
No	Yes	.	or did It	uring the tax year, did the foundation attempt to influence any national, state, or local legislation or d
X	163	1a		
<del>  ^</del>				articipate or intervene in any political campaign?
٠,		16		d it spend more than \$100 during the year (either directly or indirectly) for political purposes? See
				naminan fan den definisten
<b>├</b> ^		ļ		structions for the definition
<u>x</u>		ļ		the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any mat
			materials	the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any mat ablished or distributed by the foundation in connection with the activities.
		ļ	materials	the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any mat ublished or distributed by the foundation in connection with the activities.  In the foundation file Form 1120-POL for this year?
			materials	the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any mat ublished or distributed by the foundation in connection with the activities. If the foundation file Form 1120-POL for this year?
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х		1c	materials mposed	the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any mat ablished or distributed by the foundation in connection with the activities.  In the foundation file Form 1120-POL for this year?  In the amount (if any) of tax on political expanditures (acction 4955) imposed during the year:    On the foundation.   \$
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X	X	1c 2 4a 4b 5 7 7 8b	mposed  mposed  nt, articles  tions that  d Part XV	the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any matablished or distributed by the foundation in connection with the activities.  In the foundation file Form 1120-POL for this year?  Inter the amount (if any) of tax on political expanditures (acction 4955) imposed during the year:  On the foundation. S  [2] On foundation managers. S  [2] On foundation managers. S  [3] On the reimbursement (if any) paid by the foundation during the year for political expanditure tax imposes the reimbursement (if any) paid by the foundation during the year for political expanditure tax imposes the foundation ongaged in any activities that have not previously been reported to the IRS?  "Yes," attach a detailed description of the activities.  In the foundation made any changes, not previously reported to the IRS. In its governing instrument, are incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes
X	X	1c 2 3 4a 4b 5 5 6 7	mposed  mposed  ations that  d Part XV  g General  42(j)(3) or  if "Yes,"	the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any matablished or distributed by the foundation in connection with the activities.  In the foundation file Form 1120-POL for this year?  Inter the amount (if any) of tax on political expanditures (acction 4955) imposed during the year:  On the foundation. S  [2] On foundation managers. S  Iter the reimbursament (if any) paid by the foundation during the year for political expanditure tax imposes the reimbursament (if any) paid by the foundation during the year for political expanditure tax imposes foundation managers. S  In the foundation ongaged in any activities that have not previously been reported to the IRS?  "Yes," attach a detailed description of the activities.  In the foundation made any changes, not previously reported to the IRS. In its governing instrument, are incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes.  If the foundation have unrelated business gross income of \$1,000 or more during the year?  The shall filled a tax return on Form 990-T for this year?  The shall filled a tax return on Form 990-T for this year?  The shall filled a tax return on Form 990-T for this year?  The shall filled a tax return on Form 990-T for this year?  The shall filled a tax return on Form 990-T for this year?  The shall filled a tax return on Form 990-T for this year?  The shall filled a tax return on Form 990-T for this year?  The shall filled a tax return on Form 990-T for this year?  The shall filled a tax return on Form 990-T for this year?  The the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.  By language in the governing instrument, or  By state legislation that affectively amends the governing instrument so that no mandatory directions of the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Partier the states to which the foundation reports or with wh
X	X	1c 2 3 4a 4b 5 5 6 7	mposed  mposed  ations that  d Part XV  g General  42(j)(3) or  if "Yes,"	the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any matablished or distributed by the foundation in connection with the activities.  In the foundation file Form 1120-POL for this year?  Inter the amount (if any) of tax on political expanditures (acction 4955) imposed during the year:  On the foundation. S  [2] On foundation managers. S  [2] On foundation managers. S  [3] On the reimbursement (if any) paid by the foundation during the year for political expanditure tax imposes the reimbursement (if any) paid by the foundation during the year for political expanditure tax imposes the foundation ongaged in any activities that have not previously been reported to the IRS?  "Yes," attach a detailed description of the activities.  In the foundation made any changes, not previously reported to the IRS. In its governing instrument, are incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes
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Par	t 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			
	meening of section 512(b)(13)? If "Yes," attach schedule, See Instructions	11		Х
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		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ▶ N/A		·	·
14	The books are in care of ► JAMES E. KITE, JR. Telephone no. ► (513) 534	-574	9	
	Located at ► 8500 SLEEPY HOLLOW DR., CINCINNATI, OH ZIP+4 ► 45263			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		🕨	·LJ
	and enter the amount of tax-exempt interest received or accrued during the year		i	
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	ĺ		
Day	the foreign country	<u> </u>		
	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required		Yes	No
•-	File Form 4720 if any Item is checked in the "Yes" column, unless an exception applies.		163	140
18	During the year, did the foundation (either directly or indirectly):  (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	1		
	(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			
	disquelified 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?			
	(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		1	
	termination of government service, if terminating within 90 days.}			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fall to qualify under the exceptions described in		1	
	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	i		
¢	Did the foundation engage in a prior year in any of the acts described in 1s, other than excepted acts, that	į l		
	were not corrected before the first day of the tax year beginning in 2019?	1c		X
2	Taxes on failure to distribute income (section 4842) (does not apply for years the foundation was a private			
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
8	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? Yes X No  If "Yes," list the years ▶	1		
<b>.</b>	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
IJ	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions.)	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	•	]		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		- }	
	at any time during the year?		ļ	
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		- 1	
	foundation had excess business holdings in 2019.)	3ь		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u>X</u>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		ļ	••
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	46		X

NONE Form 990-PF (2019)

3	Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE	я •
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(e) Compensation
OM		MOM
ON		NONE
	number of others receiving over \$50,000 for professional services	NON
	IX-A Summary of Direct Charitable Activities	<del>_</del>
Org	the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of inlations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N(	NE	
_		
<sub>2</sub> –		
<b>~</b>		
_		
3 _		
_		
4		
_		
	IX-B Summary of Program-Related Investments (see instructions)	Amount
1 N(	ribs the two largest program-related investments made by the foundation during the tax year on fines 1 and 2.	Anoun
_		
_		
2_		
_		
All	ther program-related investments. See instructions.	
3 <u>N(</u>	NE	
_		
	Add lines 1 through 3	·····

Pai	Minimum Investment Return (All domestic foundations must complete this part. For see Instructions.)	eign foundat	ions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а		. 1a	512,669.
b	Average of monthly cash balances	. 1b	NONE
C	Fair market value of all other assets (see instructions)	. 1c	NONE
d	Total (add lines 1a, b, and c)	. 1d	512,669.
e			
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	. 2	NONE
3	Subtract line 2 from line 1d		512,669.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions),,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	. 4	7,690.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4		504,979.
6	Minimum investment return. Enter 5% of line 5		5,949.
Par	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for and certain foreign organizations, check here  and do not complete this part.)		
1	Minimum investment return from Part X, line 6	11	5,949,
-	Tax on investment income for 2019 from Part VI, line 5		3,747,
28		"	
b	The state of the s	-   2c	NONE
_ c			5,949.
3 4	Distributable amount before adjustments. Subtract line 2c from line 1		<del></del>
-	Recoveries of amounts treated as qualifying distributions		NONE
5	Add lines 3 and 4	1 1	5,949.
6	Deduction from distributable amount (see instructions)		NONE
	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1		5,949.
Par	rt XII. Qualifying Distributions (see instructions)	•	
1	Amounts paid (Including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	. 1a	
b			
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes		NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
а		. 3a	NONE
b		3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4		NONE
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		NONE
	Enter 1% of Part I, line 27b. See Instructions		
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	NONE
-	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when o		
	qualifies for the section 4940(e) reduction of tax in those years.	oiculating Wi	ierile: riik lõnudanot

Form 990-PF (2019)

Page 9

Pai	t XIII Undistributed Income (see instr	uctions)		•	
1	Distributable amount for 2019 from Part XI,	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
-	line 7				5,949.
2	Undistributed income, if any, as of the end of 2019:				
	Enter amount for 2018 only.	1		NONE	
	Total for prior years: 20,20,20		NONE	2,102,12	<del></del>
	Excess distributions carryover, if any, to 2019:		110112		<del> </del>
	From 2014 NONE		1		
	From 2015 NONE				
	From 2016 NONE		i		
	From 2017 NONE		<b>!</b>	i	
	From 2018 NONE			Ì	
_	Total of lines 3s through e	NONB			• • • • • • • • • • • • • • • • • • • •
	Qualifying distributions for 2019 from Part XII,			· · · · · · · · · · · · · · · · · · ·	
	line 4: ► S NONE			NOVE	
8	Applied to 2018, but not more than line 2a ,			NONE	<del> </del>
b	Applied to undistributed income of prior years (Election required - see instructions)		NONE		
c	Treated as distributions out of corpus (Election				
	required - see instructions) ,	NONE			<del></del>
	Applied to 2019 distributable amount				NONE
	Remaining amount distributed out of corpus  Excess distributions carryover applied to 2019	NONE			· · · · · · · · · · · · · · · ·
•	(If an amount appears in column (d), the same amount must be shown in column (a),)	NONE			NONE
6	Enter the net total of each column as indicated below:				
a	Corpus Add lines 3f, 4c, and 4e. Subtract line 5	NONE			
þ	Prior years' undistributed income Subtract				
	line 4b from line 2b		NONE		
C	Enter the amount of prior years' undistributed	İ	<b>f</b>		
	income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		NONE		
d	Subtract line 6c from line 6b. Taxable				<del> </del>
-	amount - see instructions		NONE		
8	Undistributed income for 2018. Subtract line				***************************************
	48 from line 2a. Taxable amount - see instructions			NONE	
,	Undistributed income for 2019. Subtract lines				
•	4d and 5 from line 1. This amount must be				
	distributed in 2020				5,949.
7	Amounts treated as distributions out of corpus			1	
	to satisfy requirements imposed by section			1	
	170(b)(1)(F) or 4942(g)(3) (Election may be			†	
	required - see instructions)	NONB			
8	Excess distributions carryover from 2014 not		]		
	applied on line 5 or line 7 (see instructions)	NONE			
9	Excess distributions carryover to 2020.	27027		İ	
	Subtract lines 7 and 8 from line 6a	NONE	<del></del>		
	Analysis of line 9:	ŀ			
	Excess from 2015 NONE  Excess from 2016 NONE	İ			
		ļ			
	Excess from 2017 NONE  Excess from 2018 NONE			1	
	Excess from 2019 NONE	j		1	
	TYCES HOW TO 13 · · ·   MONEY				

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

c Any submission deadlines:

Form	990-FF (2019)			04-2233002	S 11
	t XV Supplementary Information	/oantinued			Page 1
3	Grants and Contributions Paid Duri	ng the Vear or Ann	royad far	Entura Paumant	
	Grants and Contributions Paid Durl Reciplent Name and address (home or business)	If reopient is an Individual.	Foundation	Tuture rayment	1
	Name and address (home or business)	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
	Peid during the year	or substantial contributor	recipient		
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Part XVI-	A Analysis of Income-Produ	ucing Acti	ivities			
	amounts unless otherwise indicated.		ated business income (b)	Excluded by	y section 512, 513, or 514 (d)	(e) Related or exempt function income
1 Program	service revenue:	Business code	Amount	Exclusion code	Amount	(See instructions.)
a				<u> </u>		···
ь	· · · · · · · · · · · · · · · · · · ·			1		
				<u> </u>		
	· · · · · · · · · · · · · · · · · · ·					
1						
g Fees	and contracts from government agencies					
2 Member	ship dues and assessments			<u> </u>		
3 Interest o	n savings and temporary cash investments -		•			
4 Dividend	is and interest from securities					
5 Net rent	al income or (loss) from real estate:					·
a Debt	-financed property					· · · · · · · · · · · · · · · · · · ·
<b>b</b> Not o	debt-financed property			ļ		<u> </u>
6 Not ronta	al income or (loss) from personal property			<u> </u>		·
	vestment income					
8 Gain or (i	oss) from sales of assets other than inventory					
9 Net inco	me or (loss) from special events					
10 Gross pr	ofit or (loss) from sales of inventory			ļ		··-
11 Other re	venue. a					· · · · · · · · · · · · · · · · · · ·
ь						
d						
e						
	. Add columns (b), (d), and (e)			ļ		
13 Total. A	dd line 12, columns (b), (d), and (e)		. <b></b>		13	
	eet in line 13 instructions to verify calcu		· · · · · · · · · · · · · · · · · · ·			
Part XVI-	B Relationship of Activities	to the A	complishment of Ex	cempt Pur	poses	
Line No.	Explain below how each activit		•			•
▼	accomplishment of the foundation	on's exemp	t purposes (other than l	by providing	funds for such purposes	s). (See instructions.)
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Part 2	K VIII	Organizations	egarding trans	iters to and Iran	sactions	and Helationsn	ips with Nonchar	Table	EXE	mpt
1 D	id the	<del> </del>	ly or indirectly e	ngage in any of the	following	with any other org	anization described		'es	No
		_	•	601(c)(3) organization				. [		
o	rganiz	ations?						. }	ļ	
аΤ	3 Transfers from the reporting foundation to a noncharitable exempt organization of:							. 1	1	
1,	1) Cas	h	- - , • • • • • • •					1a(1)		_X_
(2	2) Oth	er assets						1a(2)	ı	X
b O	ther t	ransactions:								
{:	I) Sale	es of assets to a non-	charitable exemp	t organization			<i>.</i>	16(1)		X
										<u></u>
				• •						X
									$\neg \uparrow$	X
		_								X
		<del>-</del>								X
			_	-					o	X
			•				should always show		ir m	
							dation received less			
							is, other assets, or se			
(a) Line		(b) Amount involved	<del></del>	ncharitable exempt organiz			sfers, transactions, and shari			
<u> </u>		(1),	(0) 110.110 07 110	To the state of th	-	(a) Description of train	01010, d 0110000x101101, D1100 01101	ug mann	3011101	
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		for a second second				<del> </del>				
				iated with, or related				٦	-	3
				on 501(c)(3)) or in si	ection 527	77		Yes	LX.	No
<u> </u>	Yes,	complete the follow			<del> </del>					
	—	(a) Name of organization	·	(b) Type of args	nization		(c) Description of relations	nip 		
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	Courses	ponakies of perjuly, declaration of	re that I have exemine preparer (otiler than tax)	d this return, including accor sayer) is based on gli Informatic	mpanying school	odules and statements, and	to the best of my knowledge	and boli	of, it	is true,
Sign	<b>.</b>	/////	1201/55	1/1/1/1	0.00	6	May the IRS	discuss	this	return
Here	<b>//</b>		127	6/292	UZ P	1261183		arer_sho		elow?
	Sign	ature of officer or trustee		Date	Ti	itle <sup>/</sup>	See instructions	· [X]	/es	No
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Paid		Print/Type preparer's ner	THE	Preparer's signature	1	Date	Check If P	ΠN		
		SHARRON COOK		round	Con	FUIT	COO self-employed I	0054	<u>526</u>	0
Prepa		firm's name ►FI	FTH THIRD B	ANK N.A.				6768		
Use C	nly	Firm's address > P	O BOX 63085	8						
				ОН	4526	63-0858	Phone no. 800-33	6-67	82	
								n 990-		2019}

## 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

Employer identification number

KITE FAMILY FOUNDATIO	N C/O FIFTH THIRD BANK,	84-2255662					
Organization type (check one):							
Filers of:	Section:						
Form 990 or 990-EZ 501(c)( ) (enter number) organization							
4947(a)(1) nonexempt charitable trust not treated as a private foundation							
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation	ion					
	501(c)(3) taxable private foundation						
Check if your organization is covered	ered by the General Rule or a Special Rule.	<del> </del>					
Note: Only a section 501(c)(7), (instructions.	8), or (10) organization can check boxes for both the General Rule and a S	pecial Rule. See					
General Rule							
	ng Form 990, 990-EZ, or 990-PF that received, during the year, contribution property) from any one contributor. Complete Parts I and II. See instruction ributions.						
Special Rules							
regulations under secti 13, 16a, or 16b, and th	scribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/ions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 on the received from any one contributor, during the year, total contributions are amount on (I) Form 990, Part VIII, line 1h; or (II) Form 990-EZ, line 1. Co	or 990-EZ), Part II, line of the greater of (1)					
contributor, during the	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.						
contributor, during the contributions totaled me during the year for an of General Rule applies to	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 totaling \$5,000 or more during the year						
990-EZ, or 990-PF), but it must a	't covered by the General Rule and/or the Special Rules doesn't file Sched inswer "No" on Part IV, line 2, of its Form 990; or check the box on line Ho tify that it doesn't meet the filing requirements of Schedule B (Form 990,	of its Form 990-EZ or on its					

9E1251 1.000

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

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
KITE FAMILY FOUNDATION C/O FIFTH THIRD BANK,

Employer Identification number 84-2255662

Part I	Contributors (see instructions). Use duplicate cop	ies of Part I if additional space is r	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	JAMES E KITE JR.  8500 SLEEPY HOLLOW DR.  CINCINNATI, OH 45243	\$ 463,661.	Person  Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b> \$</b>	Person Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	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 Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2019) Name of organization KITE FAMILY FOUNDATION C/O FIFTH THIRD BANK,

Employer identification number

84-2255662

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

		•	dea.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u> </u>	415 SHARES JP MORGAN CHASE & CO		
1_	1400 SHARES THERMO FISHER SCIENTIFIC INC	- -	
		_ \$\$ <u></u> \$	12/15/2019
(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
<u></u>		    \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FIMV (or estimate) (See instructions.)	(d) Date received
		<b>\$</b>	<del></del>
(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 II - CORPORATE STOCK 

DESCRIPTION

415 SHARES JPMORGAN CHASE & CO 1400 SHARES THERMO FISHER

ENDING BOOK VALUE ENDING

FMV 1

53,622. 410,039.

57,851. 454,818.

463,661.

TOTALS

512,669.

Ø

STATEMENT

13

HQU403 5889 05/14/2020 18:41:37

KITE FAMILY FOUNDATION C/O FIFTH THIRD BANK,

84-2255662

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

NAME AND ADDRESS

JAMES E KITE JR. 8500 SLEEPY HOLLOW DR. CINCINNATI, OH 45243