SCANNED JAN 1 3 2022

EXTENDED TO NOVEMBER 16, 2020

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.

For	calendar year 2019 or tax year beginning OCT	31, 2019	, and ending	DEC 31, 2019	Open to Funic inspection
Nar	ne of foundation			A Employer identification	number
=	ARK & SUSAN GRIMME FAMILY			84-3545278	
	nber and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
	6 FAIRWAY DRIVE			513-615-35	55
	or town, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is p	ending, check here
	OUTHGATE, KY 41071			<u> </u>	
G C	heck all that apply.	Initial return of a fo	rmer public charity	D 1 Foreign organizations	, check here
	Final return	Amended return		2 Foreign organizations me check here and attach co	eting the 85% test,
	Address change	Name change	<u> </u>	check here and attach co	mputation
<u> </u>	heck type of organization Section 501(c)(3) ex Section 4947(a)(1) nonexempt charitable trust X			E If private foundation stat	
<u> </u>			X Accrual	under section 507(b)(1)	. ,-
	· 1 —	=	ACCTUAL	F If the foundation is in a 6	
(II		her (specify)	<u> </u>	under section 507(b)(1)	(B), check here
		T		/ > A 1 - 1 - 1 - 1	(d) Disbursements
Г, С	THE TAIL Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net	for charitable purposes (cash basis only)
		150,000.		IBSORDOL VIG.	
	1 Contributions, qifts, grants, etc., received 2 Check for if the foundation is not required to attach Sch. B.	130,000.		Received Lic Bank	
	Interest on savings and temporary			2.12	
	3 cash investments				
	4 Dividends and interest from securities			OCT , y zij/	1
	5a Gross rents	-		0 202	J
	b Net rental income or (loss)	-	<u></u>		
e	52 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all			9gdon, 6 7	
Revenue	D assets on line 6a		0.	- , - ,	-
æ	7 Capital gain net income (from Part IV, line 2)		0.		
ŀ	Net short-term capital gain Income modifications		——————————————————————————————————————		
	Gross sales less returns				
	10a and allowances				
	b Less Cost of goods sold c Gross profit or (loss)				······
	11 Other income				
ľ	12 Total. Add lines 1 through 11	150,000.	0.	0.	
	13 Compensation of officers, directors, trustees, etc	0.	0.	0.	0
	14 Other employee salaries and wages				<u>_</u>
	15 Pension plans, employee benefits				
es	16a Legal fees				
ense	b Accounting fees				
낆	c Other professional fees				
9	17 Interest				
ati	18 Taxes				
힣	19 Depreciation and depletion		•		
盲	20 Occupancy				
P	21 Travel, conferences, and meetings		*****		-
미	22 Printing and publications			~	· · · · · · · · · · · · · · · · · · ·
9	23 Other expenses				
atil	24 Total operating and administrative				
Operating and Administrative Exp	expenses. Add lines 13 through 23	0.	0.	0.	0
ō	25 Contributions, gifts, grants paid	0.			0
- 1	26 Total expenses and disbursements.				
	Add lines 24 and 25	0.	0.	0.	0
\exists	27 Subtract line 26 from line 12:			-	
	Excess of revenue over expenses and disbursements	150,000.			
	b Net investment income (if negative, enter -0-)	·	0.		
	c Adjusted net income (if negative, enter -0-)			0.	

923501 12-17-19 LHA For Paperwork Reduction Act Notice, see instructions.

Г	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	<u></u>
	art	column should be for end-of year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		150,000.	150,000.
	2	Savings and temporary cash investments			
	3	Accounts receivable -			i
	1	Less; allowance for doubtful accounts			
	4	Pledges receivable >	1		
-	1	Less; allowance for doubtful accounts			
	5	Grants receivable			
		Receivables due from officers, directors, trustees, and other			
	ľ	• • • •			
	۱.	disqualified persons	<u> </u>		
	'	Other notes and loans receivable	<u> </u>	·	
	١.	Less: allowance for doubtful accounts			
ets	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
٩	ı	Investments - U.S and state government obligations			
	b	Investments - corporate stock			
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
	1	Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other	•		
	14	Land, buildings, and equipment; hasis			
		Less accumulated depreciation			
	15	Other assets (describe ▶)	1		
	•	Total assets (to be completed by all filers - see the			
	'	instructions. Also, see page 1, item I)	0.	150,000.	150,000.
_	17	Accounts payable and accrued expenses	 	200,0001	1
	18	Grants payable			
	l	Deferred revenue			
Liabilities	19				
Ē	20	Loans from officers, directors, trustees, and other disqualified persons			· · ·
<u></u>	21	Mortgages and other notes payable			
	22	Other liabilities (describe			
			1	^	1
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow FASB ASC 958, check here			
es		and complete lines 24, 25, 29, and 30			ļ
alances	24	Net assets without donor restrictions			
gal	25	Net assets with donor restrictions			
ğ		Foundations that do not follow FASB ASC 958, check here	1		
Fund		and complete lines 26 through 30			
ŏ	26	Capital stock, trust principal, or current funds	0.	0.	
Net Assets or	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
SS	28	Retained earnings, accumulated income, endowment, or other funds	0.	150,000.	
¥.	29	Total net assets or fund balances	0.	150,000.	
ž					
	30	Total liabilities and net assets/fund balances	0.	150,000.	
_			lalamana.		
P	art	III Analysis of Changes in Net Assets or Fund E	oaiances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	29		
		t agree with end-of-year figure reported on prior year's return)	==	11	0.
	•	amount from Part I, line 27a		2	150,000.
		increases not included in line 2 (itemize)		3	130,000.
		nes 1, 2, and 3			150,000.
				⊢	0.
		ases not included in line 2 (itemize)	olumo (h) line 00	5	150,000.
0	ıotal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumii (b), iiile 29	6	
					Form 990-PF (2019)

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(a) List and describe	the kınd(osses for Tax on Ir s) of property sold (for exar ; or common stock, 200 shs	mple, real est		(b)	How acquir - Purchase - Donation	red ((c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a									
b NO	NE								
С									
<u>d</u>									
е		·-··			L_,				<u> </u>
(e) Gross sales price	(f)	Depreciation allowed (or allowable)		ost or other basis expense of sale				(h) Gain or (loss (e) plus (f) minus) (g))
a									
<u>b</u>									
<u>c</u>									
<u>d</u>									
Complete only for assets shown	ות מצוח וח	column (h) and owned by t	he foundatio	n on 12/31/60			(1) (Counc (Col. (h) gour	
Complete only for assets shown							(I) (Gains (Col (h) gain k), but not less thai	minus n -0-) o r
(i) FMV as of 12/31/69		(j) Adjusted basis as of 12/31/69		xcess of col (i) r col (j), if any				Losses (from col. (h))
<u>a</u>	<u> </u>								
b									
C		,							
d									
e					_				
2 Capital gain net income or (net ca	pital loss	If gain, also enter $\{f(loss), enter -0-\}$	in Part I, line in Part I, line	e 7 e 7	}	2			
3 Net short-term capital gain or (los If gain, also enter in Part I, line 8,			d (6):		}				
If (loss), enter -0- in Part I, line 8 Part V Qualification U	ndor 9	Section 4940(e) for	Poduco	d Tay on Not	<u> </u>	estmen	t Inco	ma	
If section 4940(d)(2) applies, leave the Was the foundation liable for the sect if "Yes," the foundation doesn't qualified. 1 Enter the appropriate amount in a	tion 4942 y under s	tax on the distributable am ection 4940(e). Do not com	plete this pa	rt.					X Yes No
(a)		(b)			(c)			T	(d)
Base periód years Calendar year (or tax year beginnii	ng in)	Adjusted qualifying dist	ributions	Net value of no			assets	Distrib (col. (b) div	utión ratio ided by col (c))
2018				+				-	· · · · · · · · · · · · · · · · · · ·
2017 2016				<u> </u>					
2015									
2014									
		· · · · · · · · · · · · · · · · · · ·						2	
2 Total of line 1, column (d)	S voor ba	so period - divide the total o	n line 2 by 5	O or by the number	ar of s	oore.		-	
3 Average distribution ratio for the t the foundation has been in exister	-		in line 2 by 5.	.o, or by the number	ei ui y	/cais		3	
4 Enter the net value of noncharitab	le-use as	sets for 2019 from Part X, I	ine 5					4	
5 Multiply line 4 by line 3								5	
6 Enter 1% of net investment incom	10/10/ of	Part Lline 27h)						6	
7 Add lines 5 and 6	IC (1 /0 UI	1 arti, mig 2/0)						7	
	יוס איסטי	line 4						<u> </u>	_
8 Enter qualifying distributions from If line 8 is equal to or greater than			1b. and com	olete that nart using	n a 1º	% tax rate		8	
See the Part VI instructions					'/				

Form **990-PF** (2019)

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(e), or 4948 - see instructions)		3545278	Page 4
Dates for fulling or determination latter Catach copy of letter if accessary-see instructions 1		see instruc	tions)
a Domestic foundations that meet the section 4947(e)/ requirements in Part V, check here	1a Exempt operating foundations described in section 4940(d)(2), check here ▶ □ and enter "N/A" on line 1.		i
of Part I, line 27b. c. All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b) 2 Tax under section 511 (domestic section 4947(a)(1) trists and taxable foundations only, others, enter -0-) 3 Add lines 1 and 2 3 Add lines 1 and 2 3 Co. 5 Subtile 8 (normal) sax (domestic section 4947(a)(1) trists and taxable foundations only, others, enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Credits/Pyments a 2019 estimated tax payments and 2018 overapyment credited to 2019 6 Exempt foreign organizations - tax withheld at source 7 Total credits and payments. Add line 4 from 1888) 6 Co. 6 Co. 7 Total credits and payments. Add lines 58 through 6d 8 Enter any penalty for underpayment of estimated tax. Check here developed in 1885 and 1885 an			
a All other domestic foundations enter 2% of the 27b Exempt foreign organizations, enter 4% of Part I, line 12, col. (b) 2	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ■ □ and enter 1% □ 1 □		0.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 3 Add lincs 1 and 2 3 Subticle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 5 Tax based on investment income Subtract line 4 from line 3.1 zero or less, enter -0- 5 Total credits and payments and 2018 overpayment credited to 2019 6 Evernit foreign organizations - tax withheld at source 6 B D O . 6 Evernit foreign organizations - tax withheld at source 6 B D O . 7 Total credits and payments. Add kines 6s through 6d 8 Either any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 7 Total credits and payments. Add kines 6s through 6d 8 Either any penalty for underpayment of setimated tax. Check here ☐ if Form 2220 is attached 9 Total credits and payments. Add kines 6s through 6d 8 Either any penalty for underpayment of setimated tax. Check here ☐ if Form 2220 is attached 9 Total credits and payments. Add kines 6s through 6d 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overgald 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overgald 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overgald 11 Tenter the amount of line 10 to the Credited to 2020 distingtion and the payment of line 10 to the Credited to 2020 distingtion and the 10 total lines of lines 11 total lines 2 and 11 total lines 3 and 11 total l	of Part I, line 27b		
3 d	· · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
4 Subtalle A (mcome) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-0) 5 Tax based on investment income Subtract line 4 from line 3.1 zero or less, enter -0- 5 Tax based on investment income Subtract line 4 from line 3.1 zero or less, enter -0- 5 Tax based on investment income Subtract line 4 from line 3.1 zero or less, enter -0- 5 Exempt foreign organizations - tax withheld at source 6 De Exempt foreign organizations - tax withheld at source 6 Tax paid with application for extension of time to file (Form 8688) 6 D. 7 Total credits and payments. Add lines 6s through 6d 8 Enter any penalty for underpayment of estimated tax. Check here if the form 2220 is attached 7 Total credits and payments. Add lines 6s through 6d 8 Enter any penalty for underpayment of estimated tax. Part at an any other total or lines 5 and 8 is more than line 7, enter amount owed 9 Tax due. If the total or lines 5 and 8 is more than line 7, enter amount owed 9 Tax due, If the total or lines 5 and 8 is more than line 7, enter amount owed 9 Tax due, If the total or lines 5 and 8 is more than line 7, enter amount owed 9 Tax due, If the total or lines 5 and 8 is more than line 7, enter the amount overpald 10 Overpayment. If line 7 is more than the total or lines 5 and 8, enter the amount overpald 11 Enter the amount of line 10 to be credited to 2020 solarimated tax. Part VII-A Statements Regarding Activities 1 a Durng the tax year, did the toundation attempt to influence any national, stats, or local legislation or did it participate or intervene in any political campraging Activities 1 a Durng the tax year, did the toundation and the part of the activities and copies of any malterals published or distributed by the foundation in the year (either directly or indirectly) for political epislation or did it participate or intervene in any political expenditure (any) of tax on political expendit	2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		
5 Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0- 6. Credits/Payments 2 2019 estimated bax payments and 2018 overpayment credited to 2019 b Exempt foreign organizations - Lax withheld at source 1 Tax pand with application for extension of time to the (Form 8888) 6 Bax 0 . 1 Tax based any payments. Add lines 5 at through 64 8 Exiter any penalty for underpayment of estimated tax. Check here if if Form 2220 is attached 7 Total credits and payments. Add lines 5 at through 65 8 Eitler any penalty for underpayment of estimated tax. Check here if if Form 2220 is attached 9 Tax doe. If the total of lines 5 and 8 is more than line 7, enter amount oved 10 Total credits and payments. Add lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be: Credited to 2020 estimated tax. ► 12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campagin? 12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campagin? 13 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campagin? 13 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campagin? 14 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campagin? 1 During the tax year, did the foundation attempt to influence any nationals, state, or local legislation or did it participate or intervene in any political campagin? 1 During the tax year, did the foundation file form 1120-POL for this year? 1 During the tax year, did the foundation file form 1120-POL for this year? 1 During the timple that the foundati	3 Add lines 1 and 2		
6 Credits/Payments a 2 019 estimated tax payments and 2018 overpayment credited to 2019 b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)		
a 2019 estimated tax payments and 2018 overpayment credited to 2019 b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld of Total credits and payments. Add innes 6a through 6d c Tax day penalty for underpayment of estimated tax. Check here I of Form 2220 is attached c Tax day enably for underpayment of estimated tax. Check here I of Form 2220 is attached c Tax day enably for underpayment of estimated tax. Check here I of Form 2220 is attached c Tax day enably for underpayment of estimated tax. Check here I of Form 2220 is attached c Tax day enably for underpayment of estimated tax. Check here I of Form 2220 is attached c Tax day enably for underpayment of estimated tax. Check here I of Form 2220 is attached c Tax day enably for underpayment of estimated tax. Check here I of Form 2220 is attached c Tax day enably for underpayment of the form 10 in the 10 in t	5 Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-		0.
Exempt foreign organizations - tax withheld at source c Tax gaid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 8 0. 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 8 0. 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Part VII-A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a During the tax year, did the foundation or foundation and properties of the activities. 1b Did is spend more than \$100 during the year (either directly or indirectly) for political properties of the activities. 1c Did the foundation he Form 11-DP-OL for this year? 1c Did the foundation made any changes, not previously propried to the IRS, in its governing instrument, articles of incoropration, or bylaws, or other similar instruments? If Yes, "attac			1
Tax paid with application for extension of time to fide (Form 8868) d Backup withholding crineously withhold of 3 Enter any penalty for underpayment of estimated tax. Check here I if Form 2220 is attached 8 Enter the amount of line 10 to be; Credited to 2020 estimated tax. 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owed 11 Enter the amount of line 10 to be; Credited to 2020 estimated tax 11 Enter the amount of line 10 to be; Credited to 2020 estimated tax 12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1b Old it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition II is X 1b If the answer is "Yes" to 1a or 18, attach a detailed description of the activities. 1c During the foundation in connection with the activities. 1c During the foundation in connection with the activities. 1c During the foundation in (if any) and by the foundation during the year? 1c During the foundation in the activities. 2 During the foundation in any position of the activities. 2 During the foundation in any activities that have not previously been reported to the IRS? 1f "Yes," attach a detailed description of the activities. 2 During the foundation have uncleaded business gross income of \$1,000 or mor	a 20 to obtained the payment and a visit payment of the control of		Į.
d Backup withholding erroneously withheld 7 Total credits and payments. Add lines & althrough 6d 8 Chet any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 8 0 0 0 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount ower 9 0 0 0 Prayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶			1
7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 8 Total Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than the total of lines 5 and 8, enter the amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of lines 10 to be: Credited to 2020 estimated tax ► Refunded 11 Part VII-A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any ophitical campaign? 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any ophitical campaign? 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any ophitical campaign? 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any ophitical campaign? 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any ophitical campaign. 1b Did it participated on the activities and copies of any materials published or distributed by the foundation of the activities and copies of any materials published or distributed by the foundation of the activities and copies of any materials published or distributed by the foundation during the year? 1c Did the foundation. ► \$ 0. (2) On foundation managers ► \$ 0. (3) On the condation of engaged in any activities that have not previously been reported to the IRS? 1f "Yes," attach a detailed description of the activities. 1f "Yes," attach a detailed description of the activities. 1f "Yes," at	· / / / / / / / / / /-		i
8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached ☐ 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ☐ 9 Tax due. If the total of lines 5 and 8 is more than line 10 ines 5 and 8 is more than line 10 ines 5 and 8 is more than line 10 ines 5 and 8 is more than line 10 ines 5 and 8 is more than line 10 ines 5 and 8 is more than line 10 ines 5 and 8 is more than line 10 ines 5 and 8 is more than line 10 ines 5 and 8 is more than line 10 ines 5 and 8 is more than line 10 ines 5 and 8 is more than than 10 ines 5 and 8 is more than 10 ines 5 and 8 is a state, or local legislation or did it participate or intervene in any political expenditors and copies of any materials published or distributed by the foundation than 10 ines 2 ines 3 ines 2			
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 overpald 11 Enter the amount of line 10 be. Credited to 2020 estimated tax \(\) Refunded \(\) 10 Tax during the tax year, oid the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any ophitical campaign? 1a During the tax year, oid the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any ophitical campaign? 1a During the tax year, oid the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any ophitical campaign? 1a During the tax year, oid the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any ophitical campaign? 1b Did it spend more than \$100 during the year (either directly) for political purposes? See the instructions for the definition of the activities and copies of any materials published or distributed by the foundation in connection with the activities and copies of any materials published or distributed by the foundation in connection with the activities and copies of any materials published or distributed by the foundation of the activities and copies of any materials published or distributed by the foundation of the activities and copies of any materials published or distributed by the foundation. 1b Campaign and the activities and copies of any materials published or distributed by the foundation of the activities and copies of any materials published or distributed or distributed by the foundation during the year? 1c Enter the amount (if any) paid by the foundation during the year for political expenditure tax imposed on foundation numbers. 2			
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Eater the amount of line 10 to be: Credited to 2020 estimated tax ▶ Refunded ▶ 11 Part VII-A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? b Did it spend more than \$100 during the year (either directly) or indirectly) for political purposes? See the instructions for the definition if the namewore in 120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year; (1) On the foundation. ▶ \$ 0 . (2) On foundation managers ▶ \$ 0. Enter the reimbursement (if any) pad by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ 0. Has the foundation manager in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities. 3 Has the foundation manager in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities. 3 Has the foundation manager in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities. 3 Has the foundation manager in any activities that have not previously been reported to the IRS? If "Yes," has if filed a tax return on Form 990-T for this year? If "Yes," has if filed a tax return on Form 990-T for this year? 5 Was there a loundation, termination, dissolution, or substantial contraction during the year? If "Yes," has if filed a tax return on Form 990-T for this year? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV 7 X 8a Enter the states to which the foundation framshed a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General I</i>			
The Enter the amount of line 10 to be: Credited to 2020 estimated tax	 		0.
Part VII-A Statements Regarding Activities	, , , , , , , , , , , , , , , , , , , ,		
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition if the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. c Did the foundation file Form 1120-PDL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ 0 . (2) On foundation managers ▶ \$ 0 . 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? If "Yes," attach the statement required by General Instruction T 8 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: 9 By language in the governing instrument, or 9 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, or 9 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, or 9 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? 7 X 5a Enter the states to which the foundation furnished a copy of Form 990-PF to the Attorney Gen			
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of each state as required by General Instruction G? If "No," attach explanation 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses STMT 1 10 X			
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year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses STMT 1 10 X		0 1	
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses STMT 1 10 X	- ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	 -	$- \overline{\mathbf{x}} \mathcal{L}$
- 11 / 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1			x
	To the diff persons account account account to the following the text year. It is attached account issuing their manies and accresses.		

Pa	irt VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11	1	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 ► MARK J. GRIMME Telephone no. ► 513-63	5-3	555	
• •	Located at ▶ 36 FAIRWAY DRIVE, SOUTHGATE, KY ZIP+4 ▶43			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	-	_	T
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
10	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	<u> </u>		 -
	foreign country			
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required		<u> </u>	<u>'</u>
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
19	During the year, did the foundation (either directly or indirectly).		1.00	1
14	(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?			
	(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)? Yes X No			
				
	(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.) Yes X No	ŀ		
	, , ,			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	<u> </u>		
	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	1		
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	- <u>-</u> -		$\frac{1}{x}$
	before the first day of the tax year beginning in 2019?	10		<u> </u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			İ
	defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			
	6d and 6e) for tax year(s) beginning before 2019?			
	If "Yes," list the years , , , , , , , , , , , , , , , , , , ,			
þ	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			(
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
3a				
	during the year?			İ
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,			
	Schedule C, to determine if the foundation had excess business holdings in 2019.) N/A	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u>X</u>
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that]		لي
	had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		X
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Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be	Required (contin	ued)		
5a During the year, did the foundation pay or incur any amount to:				Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y	es 🗓 No		
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indir				
any voter registration drive?			es 🔀 No 📗		
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y	es X No		1 1
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				
4945(d)(4)(A)? See instructions		,	es 🗓 No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or				1 1
the prevention of cruelty to children or animals?		· -	es 🗓 No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni		ın Regulations	.		لـــــاـ
section 53.4945 or in a current notice regarding disaster assistance? See instr			N/A	5b	
Organizations relying on a current notice regarding disaster assistance, check l			▶□		1 1
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for				1	1 1
expenditure responsibility for the grant?	I.	I/A	es L No		1 1
If "Yes," attach the statement required by Regulations section 53.4945-5(d).					1
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		[TE]		
a personal benefit contract?		Y	es 🗶 No		اـــِـا.
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870.		г	[]		
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y	es X No		<u> </u> !
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b	
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	51,000,000 in remuneration o		ਿਦਾ		
excess parachute payment(s) during the year? Part VIII Information About Officers. Directors. Trust	ana Faundatian Ma		es X No		
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, roundation wa	magers, nigili	y		
List all officers, directors, trustees, and foundation managers and t	heir compensation.				
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to	(e) Exp	pense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	account	t, other ances
SUSAN E. GRIMME	•	SIDENT, &		RY	
36 FAIRWAY DR	,				
SOUTHGATE, KY 41071-3024	0.50	0.	0.		0.
	DIRECOTR & TR	EASURER			
36 FAIRWAY DR					
SOUTHGATE, KY 41071-3024	0.50	0.	0.		0.
		1 1111111111111111111111111111111111111		<u> </u>	
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to	(e) Exp	20000
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit plans and deferred	account	t, other
NONE	devoted to position		compensation	allowa	nces
NONE				1	
				ļ	
				-	
					•
	 			 	
				 _	
				1	
Total number of other employees paid over \$50,000					

	3545.	2/8 Page /
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service		(c) Compensation
NONE		
		_
Total number of others receiving over \$50,000 for professional services	▶	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the		Expenses
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		
1 N/A		
2		
3		
4		, , ,
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1 N/A		
2		
All other program related investments. Con instructions		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		0.
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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations, s	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	0.
	Average of monthly cash balances	1b	150,000.
	Fair market value of all other assets	1c	0.
d	Total (add lines 1a, b, and c)	1d	150,000.
	Reduction claimed for blockage or other factors reported on lines 1a and		
-	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	150,000.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	2,250.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	147,750.
6	Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	1,255.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations, check here in and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	1,255.
2a	Tax on investment income for 2019 from Part VI, line 5	l l	
b	Income tax for 2019. (This does not include the tax from Part VI)]]	
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	1,255.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1,255.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	1,255.
P	art 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	0.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8; and Part XIII, line 4	4	0.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years	qualifies for t	the section

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Part XIII Undistributed Income (se	ee instructions)			
	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2018	2018	2019
1 Distributable amount for 2019 from Part XI,		-		
line 7	·			1,255.
2 Undistributed income, if any, as of the end of 2019		•	_	
a Enter amount for 2018 only	·		0.	
b Total for prior years:	•	_		
,,	-	0.		
3 Excess distributions carryover, if any, to 2019				
a From 2014	ı			
b From 2015				
c From 2016				
d From 2017				
e From 2018				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2019 from				
Part XII, line 4: ►\$ 0.			•	
a Applied to 2018, but not more than line 2a			0.	
b Applied to undistributed income of prior		^		1
years (Election required - see instructions)		0.		<u></u>
c Treated as distributions out of corpus	,			
(Flection required - see instructions)	0.			0.
d Applied to 2019 distributable amount	0.		,	0.
e Remaining amount distributed out of corpus	U •			-
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a))	0.	<u>-</u>		0.
6 Enter the net total of each column as indicated below.				-
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed	-	0.		
d Subtract line 6c from line 6b Taxable				-
amount - see instructions		0.	1	
e Undistributed income for 2018. Subtract line				
4a from line 2a Taxable amount - see instr.			0.	
f Undistributed income for 2019. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2020				1,255.
7 Amounts treated as distributions out of				<u> </u>
corpus to satisfy requirements imposed by			•	
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2014				ł.
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2020.				, -
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:			!	
a Excess from 2015				
b Excess from 2016			•	
c Excess from 2017				
d Excess from 2018				
e Excess from 2019	l			

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		E FAMILY FO		84-35	45278 Page 1
Rart:XIV Private Operating Fo	undations (see ins	structions and Part VII	-A, question 9)	N/A	
1 a If the foundation has received a ruling or o	fetermination letter that	it is a private operating			
foundation, and the ruling is effective for 2	2019, enter the date of t	he ruling	▶		
b Check box to indicate whether the foundate	iion is a private operatin	g foundation described i		4942(j)(3) or 494	42(1)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
investment return from Part X for					
each year listed				/	
b 85% of line 2a		-	· · · · - ·		
c Qualifying distributions from Part XII,		· · · · ·			
line 4, for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of				/	
exempt activities					
e Qualifying distributions made directly				† †	
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon.					
a "Assets" alternative test - enter: (1) Value of all assets					
``			/		
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return					
shown in Part X, line 6, for each year				ļ	
listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest,					
dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)					<u>.</u>
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(III)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income	7				
Part XV Supplementary Inform	nation (Complet	te this part only	f the foundation	had \$5,000 or mo	re in assets
at any time during the	e year-see instr	uctions.)			
1 Information Regarding Foundation	Managers:				
a List any managers of the foundation who h			butions received by the	foundation before the close	of any tax
year (but only if they have contributed mo	re than \$5,000). (See se	ection 507(d)(2).)			
SEE STATEMENT 2					
b List any managers of the foundation who o	own 10% or more of the	stock of a corporation (or an equally large portio	n of the ownership of a par	tnership or
other entity) of which the foundation has a	10% or greater interes	t.			
NONE					
2 Information Regarding Contribution	ı, Grant, Gıft, Loan,	Scholarship, etc., Pr	ograms:		
Check here ► X if the foundation only				ot accept unsolicited reque	sts for funds. If
the foundation makes gifts, grants, etc , to	individuals or organizat	tions under other conditi	ons, complete items 2a, t	o, c, and d.	
a The name, address, and telephone number	r or email address of the	e person to whom applica	ations should be address	ed:	
,		• •			-
b The form in which applications should be	submitted and informati	on and materials they sh	ould include:	* *************************************	
c Any submission deadlines;					
,					
d Any restrictions or limitations on awards, s	such as by geographical	areas, charitable fields.	kinds of institutions, or o	ther factors	
	, 3 -	,	,		

Enter gross amounts unless otherwise indicated	Unrelat	ed business income		ded by section 512, 513, or 514	(e)
1 Program service revenue	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
·	Code		1 0000		
a			 		
		-			, , , , , , , , , , , , , , , , , , ,
d			<u> </u>		· ···
			 		· · · · · · · · · · · · · · · · · · ·
4	_		 		
g Fees and contracts from government agencies			<u> </u>		
•	1		 		
2 Membership dues and assessments			 		
3 Interest on savings and temporary cash					
investments 4 Dividends and interest from securities			1		
		-, -:-	 		
5 Net rental income or (loss) from real estate:			-		
a Debt-financed property	<u> </u>		-		
b Not debt-financed property			-		
6 Net rental income or (loss) from personal					
property					
7 Other investment income			-		
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events	ļ		_		<u> </u>
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
<u> </u>					
					<u> </u>
d	<u> </u>				
е		0			0
e 12 Subtotal. Add columns (b), (d), and (e)		0.		0.	0.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)		0.		0 .	0.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation	ls.)			13	0.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation	ls.)		emp	13	0.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti	es to the Acco	omplishment of Ex		t Purposes	0,
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti Line No. Explain below how each activity for which	es to the Acco	omplishment of Ex		t Purposes	0,
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti	es to the Acco	omplishment of Ex		t Purposes	0.
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e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti Line No. Explain below how each activity for which	es to the Acco	omplishment of Ex		t Purposes	0
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti Line No. Explain below how each activity for which	es to the Acco	omplishment of Ex		t Purposes	0.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti Line No. Explain below how each activity for which	es to the Acco	omplishment of Ex		t Purposes	0.
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e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti Line No. Explain below how each activity for which	es to the Acco	omplishment of Ex		t Purposes	0,
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti Line No. Explain below how each activity for which	es to the Acco	omplishment of Ex		t Purposes	0,
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti Line No. Explain below how each activity for which	es to the Acco	omplishment of Ex		t Purposes	0,
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti Line No. Explain below how each activity for which	es to the Acco	omplishment of Ex		t Purposes	0,

923621 12-17-19

Part XV			sfers to a	nd Transactions	and Relations	hips With Non	charitable	3	
Part XVII Information Regarding Transfers to and Transactions and Relationships Exempt Organizations 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 5 (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash (2) Other assets b Other transactions: (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or s column (d) the value of the goods, other assets, or services received.					market value of the go			X X X X X X X	
(a)Line no	(b) Amount involved	(c) Name of	noncharitable	e exempt organization	(d) Description	n of transfers, transaction	ns, and sharing a	rangemei	nts
ın secti	oundation directly or indirect on 501(c) (other than section " complete the following sche	n 501(c)(3)) or in sec edule.	· ·				Yes	X] No
	(a) Name of org	anızatıon		(b) Type of organization		(c) Description of rel	ationship		
	N/A								
Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge return with the preparer shown below? See instructions of officer or trustee Date Title						er			
Paid Prepare Use Onl		KE & SCHI		PLL	Date 1/1C/20	self- employed Firm's EIN ► 31	,,	11	
	CI	NCINNATI,	OH 45	202		Phone no. (51	.3) 455 Form 99 0		

Schedule B

(Form 990, 990-EZ, or 990-PF)
Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

→ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2019

Name of the organization

Employer identification number

	MARK & SUSAN GRIMME FAMILY FOUNDATION	84-3545278			
Organization	type (check one)				
Filers of:	Section:				
Form 990 or 9	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	501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
=	organization is covered by the General Rule or a Special Rule. section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special R	ule See instructions			
General Rule					
	an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totalinerty) from any one contributor. Complete Parts I and II. See instructions for determining a contributo				
Special Rules	S				
section any o	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				
year,	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				
year, ıs che purpo	in organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled necked, enter here the total contributions that were received during the year for an exclusively religiou ose. Don't complete any of the parts unless the General Rule applies to this organization because it ous, charitable, etc., contributions totaling \$5,000 or more during the year.	nore than \$1,000 If this box s, charitable, etc ,			
but it must ans	organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (iswer "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 Folgoesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)				

Employer identification number

MARK & SUSAN GRIMME FAMILY FOUNDATION

84-3545278

Part I	Contributors (see instructions) Use duplicate copies of Part I if addit	tional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MARK J. GRIMME 36 FAIRWAY DRIVE SOUTHGATE, KY 41071	\$	Person X Payroll Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	SUSAN E. GRIMME 36 FAIRWAY DRIVE SOUTHGATE, KY 41071	\$	Person X 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 Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Occash If for noncash contributions
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
023452 11.08		- \$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

MARK & SUSAN GRIMME FAMILY FOUNDATION

84-3545278

MAICH C	S DODAN GRIMME TIMITH FOUNDATION		3343270
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
		 \$	
(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
002450 11.05			000 000 EZ 000 PEL(0040)

Name of or	rganization				Employer identification number		
MARK 8	& SUSAN GRIMME FAMILY F	OUNDATION			84-3545278		
Part III	Exclusively religious, charitable, etc., contribut from any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional) through (e) and the followin chantable, etc., contributions of \$	a line entry. For or	ganizations			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gi	ft	(d) Desci	ription of how gift is held		
		(e) Transfe	er of gift	· · · · · · · · · · · · · · · · · · ·			
-	Transferee's name, address, a	nd ZIP + 4	Rel	lationship of tran	sferor to transferee		
(a) No.							
from Part I	(b) Purpose of gift	(c) Use of gi	ft	(d) Descr	iption of how gift is held		
-	(e) Transfer of gift						
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee				sferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gi	ft	(d) Descr	iption of how gift is held		
-							
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of				sferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of git	gift (d) Desc		iption of how gift is held		
		(e) Transfe	r of gift				
	Transferee's name, address, ar		atıonship of tran	sferor to transferee			
					<u></u>		

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT	1
NAME OF CONTRIBUTOR	ADDRESS		
MARK J. GRIMME	36 FAIRWAY DRIVE SOUTHGATE, KY 41071		
SUSAN E. GRIMME	36 FAIRWAY DRIVE SOUTHGATE, KY 41071		
FORM 990-PF	PART XV - LINE 1A LIST OF FOUNDATION MANAGERS	STATEMENT	2

NAME OF MANAGER

SUSAN E. GRIMME MARK J. GRIMME