Form 990-PF

## EXTENDED TO APRIL 15, 2021 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

2005

2019
Open to Public Inspection

		▶ Go to www.	rs.gov/Form990PF for instr	uctions and the latest info	rmation.	Open to Public Inspection
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		, <u> g</u>		,		number
AY	T. KES	T OLD NEWSBOYS G	OODFELDOWC E	TEN	i zamproyor identification	number
EM	ORTAL S	CHOLARSHIP FUND		VED )	34-1668082	
			address O	Zoom/surte	·	
			6 APR 28		1 -	73
		··· · · ·				
-			dostal code		If exemption application is pe	ending, check here
		<del></del>	- USUEN	<del>V. U. J.</del>		
Check	k all that apply	=	<u> </u>	ormer public charity	1. Foreign organizations	, cneck nere
	4	=	=		2. Foreign organizations med	eting the 85% test.
				•	check here and attach cor	mputation
_		,		(1)'}	E If private foundation stat	tus was terminated
				ation	under section 507(b)(1)	(A), check here 🕨 🔃
air m	arket value of all	· · · · · · · · · · · · · · · · · · ·	· —	Accrual	F If the foundation is in a 6	60-month termination
rom i	Part II, col. (c), I				under section 507(b)(1)	(B), check here 🕨 🗶
<b>\$</b>		374,815. (Part I, colur	mn (d), must be on cash bas	is.)		
art I	Analysis of R		(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
			expenses per books	income	income	for charitable purposes (cash basis only)
1	Contributions.	gifts, grants, etc., received	61,597.			
2						
3	Interest on saving	s and temporary				
4			4.049.	4.049.	4.049.	
1						
1		or (local				
1 -			10 75/		<u> </u>	
)	Gross sales orice		10,/34.			·
, b	assets on line 6a			10 754		<u> </u>
7	=	. 1		10,/54.		
] °		· · / / / / / / / / / / / / / / / / / /			•	· · · · · · · · · · · · · · · · · · ·
9	Gross sales less o					
10a	and allowances					
b	Less Cost of goo	ds sold				
C	Gross profit or	(loss)				· ·· · · · · · · · · · · · · · · · · ·
11	Other income					
12	Total. Add line	s 1 through 11		14,803.	4,049.	
13	Compensation of	officers, directors, trustees, etc	0.	0.	0.	0.
14	Other employe	e salaries and wages		· · · · · · · · · · · · · · · · · · ·		
15						
1 '		· •				
h	•	S		····		
	•					
			· · · · · · · · · · · · · · · · · · ·			***
12		STMT 1	100.	n.	100.	0.
10					100.	•
13	*	in achienon .			-	•
		nees and mastings	<del>  .  </del>			•
			h			
3)					2 044	
23	Other expenses		3,044.	U •	3,044.	0.
24				^	2 4 4 4	^
1	•		3,144.	U.	3,144.	0.
25	Contributions,	gifts, grants paid	42,620.			42,620.
26	Total expense:	s and disbursements.				
L	Add lines 24 ar	nd 25	45,764.	. 0.	3,144.	42,620.
27				· ·		
1			30,636.	. <u></u>		
1		•		14,803.		
1					905.	
	Check   Chec	me of foundation  AY T. KES'  IEMORIAL S.  mber and street (or P O b  2 5 7 APPLE'  y or town, state or pr  OLEDO, OH  Check all that apply  Check type of organiz  Section 4947(a)(1  air market value of all  rom Part II, col. (c), ii  art I Analysis of R  (The total of ame necessarily eque  1 Contributions, 2 Check Contributions, 3 cash investments 4 Dividends and 5a Gross rents 5 Net rental income 6a Net gain or (loss) 6 Gross sales price 6a Net gain or (loss) 7 Capital gain net ir 8 Net short-term 9 Income modific 10a and allowances 6 Net short-term 9 Income modific 110a and allowances 6 Coross profit or 11 Other income 12 Total. Add line 13 Compensation of 14 Other employe 15 Pension plans, 16a Legal fees 6 Cother profession 17 Interest 18 Taxes 19 Depreciation and 20 Occupancy 21 Travel, confere 22 Printing and put 23 Other expenses 24 Total operating expenses. Add 25 Contributions, 26 Total expenses Add lines 24 and 27 Subtract line 20 a Excess of revenue b Net investmen	calendar year 2019 or tax year beginning  JUN  me of foundation  LAY T. KEST OLD NEWSBOYS G  IEMORIAL SCHOLARSHIP FUND  mber and street (or PO box number if mail is not delivered to street at the street of the st	me of foundation  AY T. KEST OLD NEWSBOYS GOODFELROW  IEMORIAL SCHOLARSHIP FUND  me of foundation  AY T. KEST OLD NEWSBOYS GOODFELROW  IEMORIAL SCHOLARSHIP FUND  May and steel for PO box number if mail is not delivered to street address  OLEDO, OH 43615  Check all that apply Initial return  Address change  Check type of organization: X Section 501(c)(3) exempt private foundation  Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation  air market value of all assets at end of year Section 501(c)(3) exempt private foundation  The control of the foundation of t	The control of the states of t	acalendar year 2019 or tax year beginning

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

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329,693.

4 Add lines 1, 2, and 3

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

See the Part VI instructions.

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RAY T. KEST OLD NEWSBOYS GOODFELLOW

Form 990-PF (2019) MEMORIAL SCHOLARSHIP FUND		<u>4-16680</u>		Page 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4		<u>B - see ins</u>	truction	1S)
1a Exempt operating foundations described in section 4940(d)(2), check here X and enter "N/A" on line 1.	)			1
Date of ruling or determination letter: 06/01/93 (attach copy of letter if necessary-see instructions)	tions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1	% } <u>L</u>	1	N/A	
of Part I, line 27b				- 1
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, c	ol. (b) J			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		2		
3 Add lines 1 and 2		3		
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		4		
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5		0.
6 Credits/Payments:				1
a 2019 estimated tax payments and 2018 overpayment credited to 2019 6a	0.			
b Exempt foreign organizations - tax withheld at source	0.			
c Tax paid with application for extension of time to file (Form 8868)	0.			1
d Backup withholding erroneously withheld	0.			
7 Total credits and payments. Add lines 6a through 6d		7		0.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached .		8		0.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶	9		0.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	- ▶	10		
11 Enter the amount of line 10 to be: Credited to 2020 estimated tax	Refunded -	11		
Part VII-A Statements Regarding Activities			15.	T
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it partic	cipate or intervene in	-	Yes	No
any political campaign?		-	1a	X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instruc		n  ∟	1b	X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials pub	lished or	}		
distributed by the foundation in connection with the activities.		-		لـــاـ
c Did the foundation file Form 1120-POL for this year?		-	10	X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	•			1 t
(1) On the foundation. ▶ \$ 0 . (2) On foundation managers. ▶ \$				1 1
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	ı foundatıon			
managers. ► \$0.		-	<u> </u>	-
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?		-	2	X
If "Yes," attach a detailed description of the activities.				1 1
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	of incorporation, or	-	<del>_</del> -	<b>├</b> ₩
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		}-	3	X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		N/A	4a	+^-
b If "Yes," has it filed a tax return on Form 990-T for this year?		<b>"</b> /^	4b	X
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?		F	-	+
If "Yes," attach the statement required by General Instruction T.				1 1
Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		į		1 1
<ul> <li>By language in the governing instrument, or</li> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that cor</li> </ul>	offect with the state la	.,		1 1
	illiot with the state ia	"  -	6 X	-
remain in the governing instrument?  7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c),	and Part VV	ŀ	7 X	+
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c),	allu rait AV	<u> </u>	<del>'   **</del>	1
8a Enter the states to which the foundation reports or with which it is registered. See instructions.				
OH				1 1
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or	designate)		1	[ ]
of each state as required by General Instruction G2 If "No," attach explanation	aosignato;	-	8b X	1
10.40(2)(2)	4942(1)(5) for calend	,		
year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV	-15-12())(O) for calcilor	··  -	9 X	1
and the state of t	ad addresses	F	10	x
Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names an	io 400 63363	Form	990-PF	

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X

3b

4a

N/A

during the year?

b If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Schedule C, to determine if the foundation had excess business holdings in 2019.)

had not been removed from jeopardy before the first day of the tax year beginning in 2019?

### RAY T. KEST OLD NEWSBOYS GOODFELLOW

Form 990-PF (2019) MEMORIAL SCHOLARSHIP FUND	34-1668	082 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation M Paid Employees, and Contractors (continued)	anagers, Highly	
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		
		<u> </u>
Total number of others receiving over \$50,000 for professional services	<u> </u>	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 info number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	rmation such as the	Expenses
114 STUDENTS IN THE TOLEDO AREA WERE GRANTED SCHO	LARSHIPS TO	
ASSIST THEM IN THEIR PURSUIT OF HIGHER EDUCATION	•	
		42,620.
2		
3		
4		
Davidy Blooms		<del></del>
Part IX-B Summary of Program-Related Investments	-d0	Amaust
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 a	III Z	Amount
1 N/A		
2	<del></del>	
	<del></del>	
All other program-related investments. See instructions.		
3		
· · · · · · · · · · · · · · · · · · ·		
Total. Add lines 1 through 3	<b>&gt;</b>	0.
		m <b>990-PF</b> (2019)

Part X Minimum Investment Return (All domestic foundations must complete thi	s part. Foreign foundations, s	ee instructions )
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a Average monthly fair market value of securities	1a	330,872. 37,817.
b Average of monthly cash balances	1b	37,817.
c Fair market value of all other assets	1c	
d Total (add lines 1a, b, and c)	1d_	368,689.
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation)	0.]	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	368,689.
4 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	5,530.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	363,159.
6 Minimum investment return. Enter 5% of line 5	6	18,158.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private ope	erating foundations and certain	
foreign organizations, check here 🕨 🗓 and do not complete this part.)		
1 Minimum investment return from Part X, line 6	1	
2a Tax on investment-income for 2019 from Part VI, line 5		
b Income tax for 2019. (This does not include the tax from Part VI.)		
c Add lines 2a and 2b	2c	
3 Distributable amount before adjustments. Subtract line-2e-from-line. 1	3	
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and-4	5	
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	A Alma Canada
Part XII Qualifying Distributions (see instructions)	<b></b>	
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		40.500
a Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	42,620.
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:		
a Suitability test (prior IRS approval required)	3a	
<b>b</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	42,620.
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	42,620.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating who 4940(e) reduction of tax in those years.	ether the foundation qualifies for t	he section
		Form 990-PF (2010)

Form **990-PF** (2019)

Form 990-PF (2019) Page 9 Undistributed Income (see instructions) Part XIII N/A (b) (c) (d) Years prior to 2018 2018 2019 Corpus 1 Distributable amount for 2019 from Part XI, 2 Undistributed income, if any, as of the end of 2019 a Enter amount for 2018 only b Total for prior years: 3 Excess distributions carryover, if any, to 2019: a From 2014 **b** From 2015 c From 2016 d From 2017 e From 2018 f Total of lines 3a through e 4 Qualifying distributions for 2019 from Part XII, line 4: ►\$ a Applied to 2018, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2019 distributable amount e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a) ) 6 Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c and 4e Subtract line 5 b Prior years' undistributed income. Subtract line 4b from line 2b 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 d Subtract line 6c from line 6b. Taxable amount - see instructions e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount - see instr. f Undistributed income for 2019, Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover/from 2014 not applied on line 5 or line / Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a 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 Form **990\PF** (2019) 923581 12-17-19

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APPLICATION MUST BE SUBMITTED BY OCTOBER 31ST

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors: SCHOLARSHIPS GRANTED BASED ON NEEDS AND ACADEMIC PERFORMANCE

Form 990-PF (2019) MEMORIAL SCHOLARSHIP FUND

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Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount any foundation manager or substantial contributor status of contribution Name and address (home or business) recipient a Paid during the year EDUCATION CASSANDRA FERNANDEZ NONE N/A 3,326. TOLEDO, OH ELIZABETH STARR NONE N/A EDUCATION 280. TOLEDO, OH IVY SOTO NONE N/A EDUCATION 469. TOLEDO, OH NONE N/A EDUCATION KYLEE STEWART TOLEDO OH 437. MACKENZIE FORBES NONE N/A EDUCATION 197. TOLEDO, OH SEE CONTINUATION SHEET(S) 42,620. **▶** 3a Total b Approved for future payment GEORGE CLAYTON NONE N/A EDUCATION 3,235. TOLEDO, OH NONE N/A EDUCATION TREYQUAN EUBANKS 5,000. TOLEDO, OH KYLE RAY NONE N/A EDUCATION 3,136. TOLEDO, OH SEE CONTINUATION SHEET(S) **▶** 3b 66,371. Total Form 990-PF (2019)

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star arace amounts unless athonius indicated	Unrelated	business income	Exclu	ded by section 512, 513, or 514	(0)
nter gross amounts unless otherwise indicated.	(a)	(b)	(c) Exclu-	(d)	(e) Related or exempt
Drogram and revenue	Business code	Amount	sion	Amount	function income
Program service revenue					
a		· · · · · · · · · · · · · · · · · · ·	+		
			1 -		
d		· ·			
е	<del></del>				
1	_	· · · · ·			
g Fees and contracts from government agencies	_				·
Membership dues and assessments					
Interest on savings and temporary cash					
investments					
Dividends and interest from securities			14	4,049.	
Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal					
property			igspace		
Other investment income .	<u> </u>	··			<u>.</u>
Gain or (loss) from sales of assets other				40 == (	
than inventory			18	10,754.	
Net income or (loss) from special events			-		
Gross profit or (loss) from sales of inventory			+		<del></del>
Other revenue					
a			+		· · · · · · · · · · · · · · · · · · ·
b			+		
·			+-+	·····	
			1 !		
d	_	·	1 1		
e		0.		14.803.	(
eSubtotal. Add columns (b), (d), and (e)		0.		14,803.	14.803
e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)		0.		14,803.	4 4 4 4 4
e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations.	.)			13	14,803
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Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations.  Tart XVI-B Relationship of Activities  The No. Explain below how each activity for which in	s to the Accom	nplishment of Ex	empt	13 Purposes	14,803
e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ie worksheet in line 13 instructions to verify calculations.  Relationship of Activities	s to the Accom	nplishment of Ex	empt	13 Purposes	14,80
e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ie worksheet in line 13 instructions to verify calculations.  ART XVI-B Relationship of Activities ine No.  Explain below how each activity for which in	s to the Accom	nplishment of Excolumn (e) of Part XVI-A	empt	13 Purposes	14,803
e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ie worksheet in line 13 instructions to verify calculations.  ART XVI-B Relationship of Activities ine No.  Explain below how each activity for which in	s to the Accom	nplishment of Excolumn (e) of Part XVI-A	empt	13 Purposes	14,80
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e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ie worksheet in line 13 instructions to verify calculations.  ART XVI-B Relationship of Activities ine No.  Explain below how each activity for which in	s to the Accom	nplishment of Excolumn (e) of Part XVI-A	empt	13 Purposes	14,80
e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.  ART XVI-B Relationship of Activities ne No.  Explain below how each activity for which in	s to the Accom	nplishment of Excolumn (e) of Part XVI-A	empt	13 Purposes	14,80
e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.  ART XVI-B Relationship of Activities ne No.  Explain below how each activity for which in	s to the Accom	nplishment of Excolumn (e) of Part XVI-A	empt	13 Purposes	14,80
e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ie worksheet in line 13 instructions to verify calculations.  ART XVI-B Relationship of Activities ine No.  Explain below how each activity for which in	s to the Accom	nplishment of Excolumn (e) of Part XVI-A	empt	13 Purposes	14,80
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations.  Tart XVI-B Relationship of Activities  The No. Explain below how each activity for which in	s to the Accom	nplishment of Excolumn (e) of Part XVI-A	empt	13 Purposes	14,80
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations.  Part XVI-B Relationship of Activities sine No. Explain below how each activity for which in	s to the Accom	nplishment of Excolumn (e) of Part XVI-A	empt	13 Purposes	14,803
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  ee worksheet in line 13 instructions to verify calculations.  Part XVI-B  Relationship of Activities  ine No.   Explain below how each activity for which in	s to the Accom	nplishment of Excolumn (e) of Part XVI-A	empt	13 Purposes	14,80

#### RAY T. KEST OLD NEWSBOYS GOODFELLOW

34-1668082 MEMORIAL SCHOLARSHIP FUND Form 990-PF (2019) Page 13 Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (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 1a(1) X (2) Other assets 1a(2) b Other transactions. (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees 1b(5) (6) Performance of services or membership or fundraising solicitations 1b(6) 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 value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements (a) Line no N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X Yes in section 501(c) (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule. (c) Description of relationship (b) Type of organization (a) Name of organization OLD NEWSBOYS GOODFELLOW SEE STATEMENT 4 501(C)(3) ASSOCIATION Under penalties of pergury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge May the IRS discuss this return with the preparer shown below? See instr Sign Here TREASURER X Yes Signature of officer or trustee Title PTIN Print/Type preparer's name Preparer's signature Date Check self- employed Paid WILLIAM M. SCOTT SCOTT P01537115 WILLIAM M. 04/12/21 **Preparer** Firm's EIN ► 41-0746749 Firm's name > CLIFTONLARSONALLEN LLP **Use Only** 

Phone no.

(419) 244-3711

Form 990-PF (2019)

Firm's address ▶ ONE SEAGATE, SUITE 2650

TOLEDO, OH 43604

# RAY T. KEST OLD NEWSBOYS GOODFELLOW MEMORIAL SCHOLARSHIP FUND

34-1668082

3 Grants and Contributions Paid During the		т		L
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	- Continuous	
AMANDA LOPEZ	NONE	N/A	EDUCATION	
TOLEDO, OH				5,00
COMEDO, On				
A'NAEJAH ABDULLAH	NONE	N/A	EDUCATION	
TOLEDO, OH				2,95
	V20.17		EDVICAMION	
ANDREW LEHMAN	NONE	N/A	EDUCATION	
TOLEDO, OH				1,78
ARIANA STONE	NONE	N/A	EDUCATION	
TOLEDO, OH				90
CINCERE BLACKBURN	NONE	N/A	EDUCATION	
TOLEDO, OH				4,20
DELSHAWN AKPAN	NONE	N/A	EDUCATION	
TOLEDO, OH				4,39
JASMINE MILLER	NONE	N/A	EDUCATION	
TOLEDO, OH				99
LILY CHAMBERLIN	NONE	N/A	EDUCATION	
TOLEDO, OH			-	1,28
SONIA ACHALEKE	NONE	N/A	EDUCATION	
TOLEDO, OH				5,00
TAELYNNE WEDGE	NONE	N/A	EDUCATION	
TOLEDO, OH		<u></u>		5,00 37,91

## RAY T. KEST OLD NEWSBOYS GOODFELLOW

MEMORIAL SCHOLARSHIP FUND 34-1668082 Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager Foundation status of Purpose of grant or contribution Amount Name and address (home or business) recipient or substantial contributor N/A NONE EDUCATION VIVIAN RABLE 2,755. TOLEDO, OH GEORGE CLAYTON NONE N/A EDUCATION 1,765. TOLEDO, OH N/A EDUCATION NONE KYLE RAY 1,864. TOLEDO, OH

Total from continuation sheets

MEMORIAL SCHOLARSHIP FUND

3 Grants and Contributions Approved for Fe		· · · · · · · · · · · · · · · · · · ·		
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
ALANA BELCHER	NONE	N/A	EDUCATION	:
TOLEDO, OH				5,00
BENICIO BONILLA	NONE	N/A	EDUCATION	
TOLEDO, OH				5,00
DEON COLBERT	NONE	N/A	EDUCATION	
POLEDO, OH		<u> </u>		5,00
DANIEL FOX	NONE	N/A	EDUCATION	
TOLEDO, OH				5,00
MARIO PURIFIE JR	NONE	N/A	EDUCATION	
TOLEDO, OH				5,00
AVIONNA BURWELL	NONE	N/A	EDUCATION	
POLEDO, OH				5,00
SARAH GOODMAN	NONE	N/A	EDUCATION	
FOLEDO, OH				5,00
SEHAM ABUTAHA	NONE	N/A	EDUCATION	
roledo, oh				5,00
JESSICA SHARP	NONE	N/A	EDUCATION	
POLEDO, OH				5,00
RUSSELL CHAPMAN	NONE	N/A	EDUCATION	
FOLEDO, OH  Total from continuation sheets				5,00 55,00

34-1668082

## RAY T. KEST OLD NEWSBOYS GOODFELLOW

MEMORIAL SCHOLARSHIP FUND 34-1668082 Supplementary Information Part XV Grants and Contributions Approved for Future Payment (Continuation) If recipient is an individual, show any relationship to any foundation manager Recipient Foundation status of recipient Purpose of grant or contribution Amount Name and address (home or business) or substantial contributor N/A EDUCATION GABRIELLE MCCLUSKEY NONE TOLEDO, OH 5,000.

Total from continuation sheets

### '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

RAY T. KEST OLD NEWSBOYS GOODFELLOW MEMORIAL SCHOLARSHIP FUND

Employer identification number

34-1668082

Organization type (check one).					
Filers of	:	Section:			
Form 99	or 990-EZ	501(c)( ) (enter number) organization			
		4947(a)(1) nonexempt charitable trust not treated as a private foundation			
		527 political organization			
Form 99	)-PF	X 501(c)(3) exempt private foundation			
		4947(a)(1) nonexempt charitable trust treated as a private foundation			
		501(c)(3) taxable private foundation			
		covered by the <b>General Rul</b> e or a <b>Special Rule.</b> 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions			
General	Rule				
X	•	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions			
Special	Rules				
	sections 509(a)(1) a any one contributo	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 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 r, 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, line 1 Complete Parts I and II			
	year, total contribu	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the ty to children or animals. Complete Parts I, II, and III			
	year, contributions is checked, enter h purpose. Don't con	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., inplete any of the parts unless the General Rule applies to this organization because it received nonexclusively etc., contributions totaling \$5,000 or more during the year.			
but it mu	ıst answer "No" on	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to be filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).			

LHA 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

RAY T. KEST OLD NEWSBOYS GOODFELLOW

MEMORIAL SCHOLARSHIP FUND

**Employer identification number** 

34-1668082

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	al space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	OLD NEWSBOYS GOODFELLOW ASSOCIATION PO BOX 2032 TOLEDO, OH 43603	\$50,000.	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
2	MATTHEW AND KATE LIEGEL  7 ALPINE DRIVE  MORRISTOWN, NJ 07960	\$5,000.	Person X Payroll
(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 (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

RAY T. KEST OLD NEWSBOYS GOODFELLOW MEMORIAL SCHOLARSHIP FUND

34-1668082

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	art 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
		     \$	
<del></del>			
(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) FMV (or estimate) (See instructions)	(d) Date received
		<u> </u>	
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
—		<del></del>	
		\$	
(a) No. from	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
Part I			
3453 11-06-		\$	990, 990-EZ, or 990-PF) (

Employer identification number

RAY	T.	KEST	OLD	NEWSBOYS	GOODFELLOW
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	AL SCHOLARSHIP FUND	OF ELLOW	34-1668082				
Part III	Exclusively religious, charitable, etc., contribut	) through (e) and the following line entry charitable, etc., contributions of \$1,000 or less	on 501(c)(7), (8), or (10) that total more than \$1,000 for the year				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		(e) Transfer of gift					
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
-		(e) Transfer of gift					
	Transferee's name, address, a		Relationship of transferor to transferee				
(a) Na							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
-		(e) Transfer of gift					
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
(a) No.							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
-	(e) Transfer of gift						
_	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				

FORM 990-PF  DESCRIPTION	TAXES		STATEMENT 1	
	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OHIO CHARITABLE REGISTRATION	100.	0.	100.	0.
TO FORM 990-PF, PG 1, LN 18	100.	0.	100.	0.
•				
FORM 990-PF	OTHER E	XPENSES	rs	TATEMENT 2
	(A) EXPENSES	(B) NET INVEST-	(C) ADJUSTED	(D) CHARITABLE
FORM 990-PF  DESCRIPTION	(A)	(B)	(C)	(D)
DESCRIPTION BANK FEES	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
DESCRIPTION BANK FEES PRINTING/POSTAGE	(A) EXPENSES PER BOOKS  175. 518.	(B) NET INVEST- MENT INCOME  0. 0.	(C) ADJUSTED NET INCOME  175. 518.	(D) CHARITABLE PURPOSES  0. 0.
DESCRIPTION BANK FEES	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES

FORM 990-PF OTHER	RINVESTMENTS		STATEMENT 3
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
AMERICAN FUNDS NEW PERSPECIVE FUND	COST	20,006.	27,901.
AMERICAN FUNDS GROWTH FUND OF AMERICA CLASS C	COST	40,755.	52,034.
AMERICAN FUND CAPITAL WORLD GROWTH & INCOME FUND CLASS C	COST	17,927.	22,511.
AMERICAN FUND AMCAP FUND CLASS C AMERICAN FUND WASHINGTON MUTUAL	COST COST	38,583.	47,899.
INVESTORS FD CL C AMERICAN FUNDS BOND FUND OF	COST	35,990.	42,511.
AMERICAN CLASS C AMERICAN FUNDS GLOBAL BALANCE FUND	COST	49,839.	53,992.
A AMERICAN FUNDS INCOME FUND OF	COST	26,609.	26,338.
AMERICA CLASS C AMERICAN FUND BALANCED FUND CLASS A	COST	37,892. 28,695.	39,183. 29,049.
TOTAL TO FORM 990-PF, PART II, LINE	13	296,296.	341,418.

AFFILIATION WITH TAX-EXEMPT ORGANIZATIONS 990-PF PART XVII, LINE 2, COLUMN (C)

STATEMENT 4

NAME OF AFFILIATED OR RELATED ORGANIZATION

OLD NEWSBOYS GOODFELLOW ASSOCIATION

DESCRIPTION OF RELATIONSHIP WITH AFFILIATED OR RELATED ORGANIZATION

THE ASSOCIATION FUNDS THE SCHOLARSHIP FUND THROUGH ANNUAL DONATIONS.