990-PF

**Return of Private Foundation** 

or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0047

Department of the Treasury

▶ Do not enter social security numbers on this form as it may be made public?

inten	ilai never	Go to www.irs.gov/Form990PF to	or instructions and t	ne lates	st intormation	on. COO (Cesal)	to Fublic Inspection
		dar year 2019 or tax year beginning JULY	1 , 2019	9, and e		JUNE 30 er identification numbe	, 20 20
Nam	e of four	ndation		•	A Employe		;r
		& JANE NORD FAMILY FUND	16	(aka	D. Talashan	34-1465569	
Num	iber and	street (or P O box number if mail is not delivered to street address)	. Room	/suite	B · Telephon	ne number (see instructi	
	<u>. BOX </u>		,			440-774-3812	
City	or town,	state or province, country, and ZIP or foreign postal code .			C If exempt	tion application is pend	ing, check here ▶ 🔲
$\overline{}$		OH 44074	<del></del>				_
G	Check		of a former public	cnarity	D 1. Foreigi	n organizations, check	here ► 📙
•	,	, Final return Amended				n organizations meeting	
	Chl	Address change Name change Name change type of organization Section 501(c)(3) exempt p		OA.		here and attach compu	_
		type of organization				foundation status was 07(b)(1)(A), check here	terminated under
		narket value of all assets at J Accounting method				•	_
-		f year (from Part II, col. (c),	U Casii □ A	Cruai		ndation is in a 60-montl ction 507(b)(1)(B), checl	
	line 16		e on cash basis )		5.165. 55.	onon oo (o)( ) ( ) ( ) ( onoo	
	art I	Analysis of Revenue and Expenses (The total of					'(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per		investment	(c) Adjusted net	for charitable purposes
		the amounts in column (a) (see instructions) )	books	u u	come	income	(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	1,675,000				
	2	Check ► ☐ If the foundation is not required to attach Sch B		250.4			
•	3	Interest on savings and temporary cash investments	23,097		23,097		2.00
	4	Dividends and interest from securities .	943,771		943,771		17.66.24 E. 1
	5a	Gross rents				,	
	b	Net rental income or (loss)			7.5 St. 52		72.5
ē	6a	Not gain or (loss) from sale of assets not on line 10	7,220,500	Lighte			1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000
Ē	b	Gross sales price for all assets on line 6a 21,669,469		2.50	and Francisco	A ESSERE (S	
Revenue	7	Capital gain net income (from Part IV, line 2) .		Marianaini ar 10000	7,220,589		المتحدد
Œ	8	Net short-term capital gain				NOV	8 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
	<b>,</b> 9	Income modifications	water to de a compression de la compression de l		e area	NOV Y	2-3-2020 To
	10a	Gross sales less returns and allowances	Mary Court Court of the	A French Marie	MANAGEMENT	000 100 100 100 100 100 100 100 100 100	COLOR MONTH CONTRACTOR
	b	Less Cost of goods sold	and the state of t	Minimo van (san Har Da Haria			
	11	Gross profit or (loss) (attach schedule) Other income (attach schedule)	234,821	Schill Contains	221,416		
	12	Total. Add lines 1 through 11	10,097,278		8,408,873		
	13	Compensation of officers, directors, trustees, etc	10,031,210	•	0,400,070		F. 1. 7. 64 7. 64 7. 64 7. 64 7. 64 7. 64 7. 64 7. 64 7. 64 7. 64 7. 64 7. 64 7. 64 7. 64 7. 64 7. 64 7. 64 7.
ë	14	Other employee salaries and wages	- i				
ű	15	Pension plans, employee benefits					
Expenses	16a	Legal fees (attach schedule) STATEMENT 3	18,939		0		18,939
	b	Accounting fees (attach, schedule) . STATEMENT 4	17,571		8,786		8,785
ïve	С	Other professional fees (attach schedule) STATEMENT 5	116,286	`	110,136		6,150
Ē	17	Interest				, <u> </u>	,
<u>is</u>	18	Taxes (attach schedule) (see instructions) STATEMENT 6	60,925		0		0
Ė	19	Depreciation (attach schedule) and depletion					
ģ	20	Occupancy		,			
ğ	21	Travel, conferences, and meetings	1,186		0		1,186
Operating and Administrat	22	Printing and publications	495		0		495
ng	23	Other expenses (attach schedule) STATEMENT 7	925		335		590
áti	24	Total operating and administrative expenses. Add lines 13 through 23	016 207		110 257		36,145
ĕ	25	Contributions, gifts, grants paid	216,327 3,750,000	W. 2004	119,257		3,750,000
ō	26	Total expenses and disbursements. Add lines 24 and 25	3,966,327	ALTERNATION OF THE PARTY	119,257	me w market alman service and considered and analysis	3,786,145
	27	Subtract line 26 from line 12:	0,300,327		,		
	a a	Excess of revenue over expenses and disbursements	6,130,951				
	b	Net investment income (if negative, enter -0-)	7.45		8,289,616	2	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	c	Adjusted net income (if negative, enter -0-)	1 1 2 2 4 4		(		

1 0111	1 330-1 1	(2019)			raye Z
Pa	art II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing			
	2	Savings and temporary cash investments	2,712,458	1,602,881	1,602,881
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			graphe Información Chillianniana Inchiliannian
		Less: allowance for doubtful accounts ▶			
ts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
ĕ	10a	Investments—U.S and state government obligations (attach schedule)	-		
	b	Investments—corporate stock (attach schedule) .STATEMENT 8	11,721,107	17,154,980	69,733,385
	С	Investments—corporate bonds (attach schedule) .STATEMENT 9	3,667,625	4,820,714	4,988,219
	11	Investments—land, buildings, and equipment basis ▶		7,77,90	
		Less. accumulated depreciation (attach schedule) ▶	,		
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule) . STATEMENT 10	3,160,588	3,814,154	3,573,345
	14	Land, buildings, and equipment basis ▶			4
		Less <sup>-</sup> accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe ►)			
	16	Total assets (to be completed by all filers—see the			
		instructions Also, see page 1, item l)	21,261,778	27,392,729	79,897,830
	17	Accounts payable and accrued expenses			
Ś	18	Grants payable			
iţi	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
<u>.</u>	21	Mortgages and other notes payable (attach schedule)			Rep (2014) September 1
_	22	Other liabilities (describe ►)			
_	23	Total liabilities (add lines 17 through 22)	0	0	
Fund Balances		Foundations that follow FASB ASC 958, check here			
Ĕ	04	and complete lines 24, 25, 29, and 30.			
ä	24	Net assets without donor restrictions	-		ATTOCKHOMOMOMOM WYCHAIA ACCOMINGOMOMOM WYCHAIA
9	25	Net assets with donor restrictions			
Ĕ		Foundations that do not follow FASB ASC 958, check here ►			
_	26	and complete lines 26 through 30.  Capital stock, trust principal, or current funds	100.050	190,252	and the second second
ō	27	Capital stock, trust principal, or current funds	190,252	190,232	4
ets	28	Retained earnings, accumulated income, endowment, or other funds	21,071,526	27,202,477	
SS	29	Total net assets or fund balances (see instructions)	21,261,778	27,392,729	SACLE AND REPROPERSIONAL PROPERTY ASSESSMENT AND ASSESSMENT ASSESS
t A	30	Total liabilities and net assets/fund balances (see	21,201,110	21,392,129	
Net Assets or	30	instructions)	21,261,778	27 392 729	
	rt III	Analysis of Changes in Net Assets or Fund Balances	21,201,770	21,002,120	a Statute and a constitution of a feministration of the
		Il net assets or fund balances at beginning of year—Part II, colu	ımn (a), line 29 (mus	st agree with	
•		of-year figure reported on prior year's return)		1	21,261,778
2				2	6,130,951
3				<del></del>	0,.00,00
		lines 1, 2, and 3		4	27,392,729
5	Decr	reases not included in line 2 (itemize) ▶		5	0
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5)-	Part II, column (b), li	ne 29 <b>6</b>	27,392,729
					AAA DE

Part	V Capital Gains and	d Losses for Tax o	n Investment	Income				
		nd(s) of property sold (for exise, or common stock, 200			(b) How acquired P—Purchase D—Donation		e acquired day, yr)	(d) Date sold (mo , day, yr )
1a	PUBLICLY TRADED SECUI	RITIES			Р	VAI	RIOUS	VARIOUS
b								
C						ļ		<u> </u>
d						ļ		<del></del>
е	··					<u> </u>		
	(e) Gross sales price	(f) Depreciation allo (or allowable)			other basis nse of sale			or (loss) minus (g))
a	21,669,469				14,448,880	ļ		7,220,589
þ							<del></del>	
<u>c</u>		<del></del>				<del> </del>		
<u>d</u>								
е	Complete only for assets sho	owing gain in column (h)	and owned by the	foundation	on 12/31/69			
	Complete only for assets sho				s of col (i)			(h) gain minus less than -0-) <b>or</b>
	(i) FMV as of 12/31/69	<ul><li>(j) Adjusted bas as of 12/31/69</li></ul>			(j), if any			om col (h))
а								<del></del>
<u>_</u>				-			•	
c								
d								
е								
2	Capital gain net income of	r (net capital loss)	If gain, also			2		7,220,589
3	Net short-term capital gai	n or (loss) as defined	• •					
•	If gain, also enter in Part	I, line 8, column (c).	See instruction	s. If (loss)	, enter -0- ın l			
	_ · · · · · ·				1	3		
Part	V Qualification Und	ler Section 4940(e	) for Reduced	Tax on N	let Investment	Incom	ne	
	he foundation liable for the s," the foundation doesn't of Enter the appropriate amo	qualify under section	4940(e). Do not	complete t	his part.			☐ Yes ☑ No
Calc	(a) Base period years endar year (or tax year beginning in	(b)			(c) f nonchantable-use a		Disti	(d) ribution ratio ivided by col (c))
Cale	2018	<del>,                                    </del>	3,270,885		64 94	1,569		.0367%
	2017		3,404,353			7,085		.2522%
	2016		2,556,771			20,993		.5076%
	2015		2,153,823	-		7,436		.1017%
	2014		2,233,640			5,676	4	.9465%
2	Total of line 1, column (d)					<del></del>	2	24.8448%
3	Average distribution ratio the number of years the f	for the 5-year base poundation has been in	period—divide to n existence if les	he total on s than 5 ye	line 2 by 5 0, or ears		3	4.9690%
4	Enter the net value of nor						4	71,583,731
5	5 Multiply line 4 by line 3				·  -	5	3,556,967	
6	Enter 1% of net investme	nt income (1% of Par	t I, line 27b) .			·	6	82,896
7	Add lines 5 and 6					.	7	3,639,863
8	Enter qualifying distribution						8	3,786,145
	If line 8 is equal to or great	ater than line 7, chec	k the box in Part	t VI, line 1t	o, and complete	that par	t using a 1	% tax rate. See the
	Part VI instructions	<u> </u>						000 05
								Form <b>990-PF</b> (2019

Form 99	0-PF (2019)		, Р	age 4	
Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see	instru	ctior	ns)	
1a b	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.  Date of ruling or determination letter (attach copy of letter if necessary—see instructions)  Domestic foundations that meet the section 4940(e) requirements in Part V, check			2,896	
С	here ► ✓ and enter 1% of Part I, line 27b				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			0	
3.	Add lines 1 and 2		8	<u> 2,896</u>	,
4	Subtitle A (income) 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. If zero or less, enter -0	7600 S. WESO	8	<u>2,896</u>	
6	Credits/Payments:				
a	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 81,000	11.4			
b	Exempt foreign organizations—tax withheld at source		<b>.</b>		
С	Tax paid with application for extension of time to file (Form 8868) 6c 0  Backup withholding erroneously withheld		46		
_d		214414		4 000	
7	Total credits and payments. Add lines 6a through 6d		- 8	1,000 0	
8 9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  10			<u>1,896</u>	
11	Enter the amount of line 10 to be. Credited to 2020 estimated tax   Refunded				
	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	1a	Yes	No ✓	
b	participate or intervene in any political campaign?			<u> </u>	
	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.				
С	Did the foundation file <b>Form 1120-POL</b> for this year?	1c	Maria Maria		
ď	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	1	323		
•	(1) On the foundation. ▶ \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
	on foundation managers. ► \$ N/A				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		✓_	
	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.	3		<b>✓</b>	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	1		
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	<b>✓</b>		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by <i>General Instruction T</i> .	5	2000	<b>✓</b>	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.				
U	By language in the governing instrument, or				
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	7		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	1		
8а	Enter the states to which the foundation reports or with which it is registered. See instructions			2.4	
	ОНЮ				
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) of each state as required by <i>General Instruction G?</i> If "No," attach explanation	8b	<b>/</b>		,
.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,"	252			
	complete Part XIV	9		✓	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		<b>✓</b>	

Pa	ırt V	II-A Sta	atements Regarding Activities (continued)	<u> </u>			
				•		Yes	No
11			during the year, did the foundation, directly or indirectly, own a controlled e ection 512(b)(13)? If "Yes," attach schedule. See instructions	ntity within the	11		1
12		-	dation make a distribution to a donor advised fund over which the foundation of	or a disqualified			
			dvisory privileges? If "Yes," attach statement See instructions		12		<u> </u>
13			ation comply with the public inspection requirements for its annual returns and exemp	tion application?	13	✓	
٠			ess • ericjanenordfnd.net	<b>b</b> ' 44		2040	
14			e in care of ► VIRGINIA BARBATO, PRESIDENT Telephone	no. ►	0-774- 4407		
45			► P.O. BOX 546, OBERLIN, OHIO ZII  (a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —chec		7701	·	<b></b>
15			amount of tax-exempt interest received or accrued during the year		1		
16	A	t any time d	luring calendar year 2019, did the foundation have an interest in or a signature of	other authority		Yes	No
			securities, or other financial account in a foreign country?		16	2006004-02	<b>√</b>
•			uctions for exceptions and filing requirements for FinCEN Form 114. If "Yes," en	ter the name of			
D٥			ountry ► N/A ratements Regarding Activities for Which Form 4720 May Be Require	d	\$100 Mag	Care with	Zeco.H
			20 if any item is checked in the "Yes" column, unless an exception applies.	<u> </u>		Yes	No
12			ear, did the foundation (either directly or indirectly):			3.2	
			the sale or exchange, or leasing of property with a disqualified person?	☐ Yes ☑ No			
`	į.	2) Borrow m	noney from, lend money to, or otherwise extend credit to (or accept it from) a				
		•	ed person?	☐ Yes ☑ No			
			oods, services, or facilities to (or accept them from) a disqualified person?				
	(4	4) Pay comp	pensation to, or pay or reimburse the expenses of, a disqualified person?	✓ Yes			
	(;		any income or assets to a disqualified person (or make any of either available for it or use of a disqualified person)?	☐ Yes ☑ Ño			
	10		pay money or property to a government official? (Exception. Check "No" if the	L Tes E NO			
	le	ngree to p foundation	n agreed to make a grant to or to employ the official for a period after				
٠			on of government service, if terminating within 90 days.)	☐ Yes 🗸 No			
t	b If	any answe	er is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exception	ns described in	3.		
•			section 53 4941(d)-3 or in a current notice regarding disaster assistance? See ins	tructions N/A	1b	i estrata	<b>√</b>
•			s relying on a current notice regarding disaster assistance, check here		7.5		
•			dation engage in a prior year in any of the acts described in 1a, other than excreted before the first day of the tax year beginning in 2019?	epted acts, that	1c		<b>✓</b>
2			ure to distribute income (section 4942) (does not apply for years the foundation	n was a private	A.	42	<b>22</b> 31
_			indation defined in section 4942(j)(3) or 4942(j)(5)):				
â			tax year 2019, did the foundation have any undistributed income (Part XIII, lines		2		
		•	r tax year(s) beginning before 2019?	∐Yes ☑ No			
٠,			he years ► 20 , 20 , 20 ~, 20	etion 4942(a)(2)			
			correct valuation of assets) to the year's undistributed income? (If applying secti				
٠,			d, answer "No" and attach statement - see instructions.)	N/A	2b	SCAP-BOX A-L	1
` (	c , If	the provisio	ons of section 4942(a)(2) are being applied to any of the years listed in 2a, list the	years here.		7	
	>	20 , 2	20 , 20 , 20 ,				
38			dation hold more than a 2% direct or indirect interest in any business enterprise				
_			uring the year?	Yes    ✓ No			
t	b If	"Yes," did	it have excess business holdings in 2019 as a result of (1) any purchase by the persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period a	e toundation or			
	<u>م</u>	iisquaiilleu p Commissione	er under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or	(3) the lapse of			
	tl	he 10-, 15	, or 20-year first phase holding period? (Use Form 4720, Schedule C, to c	letermine if the		1	72.0
	fo	oundation ha	ad excess business holdings in 2019.)	N/A	3b		1
48	a D	oid the found	ation invest during the year any amount in a manner that would jeopardize its charif	table purposes?	4a		<b>✓</b>
, d	b D	old the found	lation make any investment in a prior year (but after December 31, 1969) that cou	ild jeopardize its			
	С	naritable purj	pose that had not been removed from jeopardy before the first day of the tax year be	ginning in 20197	4b '		<u> </u>

Part	VII-B	Statements Regarding Activities	s for V	Vhich Form	4720	May Be R	equire	ed (conti	nued)			
5a	During	the year, did the foundation pay or incur								1772	Yes	No
	(1) Car	ry on propaganda, or otherwise attempt	to influe	ence legislatio	on (sect	tion 4945(e	))? .	☐ Yes	✓ No			
	(2) Influ	uence the outcome of any specific publi	c electi	on (see sect	ion 495	55); or to ca	arry on,					
	dire	ectly or indirectly, any voter registration di	rive?					☐ Yes	✓ No		2.00.1	
	(3) Pro	vide a grant to an individual for travel, stu	idy, or	other similar ;	purpos	es?		☐ Yes	✓ No			
	(4) Pro	vide a grant to an organization other tha	n a cha	rıtable, etc.,	organız	ation desc	ribed in					
		tion 4945(d)(4)(A)? See instructions				•		☐ Yes	✓ No	<b>**</b>	24.2	
		vide for any purpose other than religious					cational					
		poses, or for the prevention of cruelty to						☐Yes	✓ No	1174 044 644		
þ		answer is "Yes" to 5a(1)–(5), did <b>any</b> of th							scribed	1100	26	
`		ilations section 53 4945 or in a current no					ee instri	uctions	•	5b		<b>✓</b>
	_	zations relying on a current notice regard	_									
С		inswer is "Yes" to question 5a(4), does					the tax	_				
		e it maintained expenditure responsibility		_	•		•	Yes	✓ No	3.5		
_		" attach the statement required by Regul										
6a		foundation, during the year, receive any	tunds,	directly or in	directly	, to pay pre	emiums	_				
	•	ersonal benefit contract?	•					∐Yes	_ (√) No	ACCEPTANCE OF THE PARTY OF THE		
b		foundation, during the year, pay premiur	ns, aire	ctly or indire	ctiy, on	a personal	benerii	contract	,	6b	£1.50%	<b>€2</b> %:5%2d
7.		' to 6b, file Form 8870		, to a probabit	ad tay a	haltar trans	aatian?	□ vos	[7] No			
		ime during the tax year, was the foundation " did the foundation receive any proceed								7b	E AZE	
8		oundation subject to the section 4960 ta								<b>*</b>	Same	#35N
U		eration or excess parachute payment(s) d	-	- : :				☐Yes	<b>⊘</b> No			2/2
Part	VIII	Information About Officers, Direct									ees.	# 600 Aug
		and Contractors		•		(					•	
_1	List all	officers, directors, trustees, and found	lation r	managers an	d their	compens	ation. S	See instru	ections			
		(a) Name and address	(b) Title	e, and average rs per week		mpensation not paid,		Contribution yee benefit		(e) Expe		
				ed to position		ter -0-)		erred compe		otner a	allowan	ces
	ginia Ba		Preside	ent & Trustee/						·		
		berlin, OH 44074	1.5 Hot	irs		-0-			-0-			-0-
<del></del>	nly McCl		Treasu						_			_
		Oberlin, OH 44074	Trustee	e/ 1.0 Hours		<u>-0-</u>			-0-			-0-
	hard No		1	ary & Trustee/		•			^			_
	rly Berk	berlin, OH 44074	1.0 Hou	urs		-0-			-0-	_		<u>-0-</u>
		Derlin, OH 44074	Tructor	e/ 1.0 Hours		-0-			٠٥.			٠٠.
2		ensation of five highest-paid employed			se incli		ne 1—:	see instr	uction	s). If no	one,	enter
	"NONE		• • •							•	•	
				(b) Title, and a	verage			(d) Contribu		4.5		•
(	a) Name a	nd address of each employee paid more than \$50,00	00	hours per v	veek	(c) Comper	nsation	employee plans and o	deferred		nse acc allowan	
				devoted to pr	Janion			compens	sation			
NONE		<u></u>										
	<del>-</del> -					]						
								_				
			<b>-</b>				1					
		_ <del></del>		<u> </u>		<del></del>		_		<del>-</del>		
		·										
					_			<u>.                                    </u>				
		·····							Ì			
Total r	number	of other employees paid over \$50,000				٠	l		▶	N	ONE	
		, , , , , , , , , , , , , , , , , , , ,	<del></del>					_		orm <b>99</b>		(2019)

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)  3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE."							
3	Five highest-paid independent contractors for professional services. Sec	e instructions. If none, enter "NON	E."				
	(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 .		NONE				
Part		<u> </u>	NONE				
	the foundation's four largest direct charitable activities during the tax year. Include relevant st	attetical information such as the number of	I				
	ne roundation's rour largest direct charitable activities during the tax year include relevant statical and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses				
1 N	/A						
			~				
2							
_							
3							
		•••••••					
_							
4			ļ				
Part	X-B Summary of Program-Related Investments (see instruct	ions)	<u> </u>				
_	ribe the two largest program-related investments made by the foundation during the tax year or		Amount				
1 N							
' '							
2							
Ali of	her program-related investments. See instructions						
3 <u>N</u>	<u>/A</u>		1				
ı otal.	Add lines 1 through 3	<u> </u>	NONE				

0

0

0

3,703,249

Form 990-PF (2019) Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, Part X see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., 1a 68,853,417 1b **b** Average of monthly cash balances . . . . . . . . . . . . . . . . 3,820,421 1c Fair market value of all other assets (see instructions) . . . . . . . 0 1d Total (add lines 1a, b, and c) . . . . . 72,673,838 Reduction claimed for blockage or other factors reported on lines 1a and 2 2 Acquisition indebtedness applicable to line 1 assets . . . 0 3 72,673,838 Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see instructions) 1,090,107 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 71,583,731 6 3,579,187 Distributable Amount (see instructions) (Section 4942(i)(3) and (i)(5) private operating foundations and certain foreign organizations, check here ▶ □ and do not complete this part.) Minimum investment return from Part X, line 6 . . 1 3,579,187 2a Tax on investment income for 2019 from Part VI, line 5 . . . . . 82,896 Income tax for 2019. (This does not include the tax from Part VI) 2b 2c 82,896 Distributable amount before adjustments. Subtract line 2c from line 1. 3 3,496,291 Recoveries of amounts treated as qualifying distributions . 4 0 3,496,291 Add lines 3 and 4 . . . . . . . . . . . . . . . . . Deduction from distributable amount (see instructions) . . . 6 7 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, 3,496,291 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: Expenses, contributions, gifts, etc —total from Part I, column (d), line 26 1a 3,786,145 1b Program-related investments—total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., Amounts set aside for specific charitable projects that satisfy the. 3 За a Suitability test (prior IRS approval required) . . . **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 3,786,145 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. . . . . . Enter 1% of Part I, line 27b. See instructions 82,896

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

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

Form **990-PF** (2019)

6

Undistributed Income (see instructions) Part XIII Years prior to 2018 2018 2019 Distributable amount for 2019 from Part XI. line 7. . . . . . . . . . . . . 3,496,291 Undistributed income, if any, as of the end of 2019. a Enter amount for 2018 only . . . . . . **b** Total for prior years: 20 \_\_\_\_ , 20 \_\_\_\_ , 20 Excess distributions carryover, if any, to 2019 From 2014 . . . . . From 2015 95,755 From 2016 221,501 From 2017 115,657 From 2018 Total of lines 3a through e Qualifying distributions for 2019 from Part XII, line 4: ► \$ 3,786,145 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) . . Applied to 2019 distributable amount Remaining amount distributed out of corpus Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a).) Enter the net total of each column as indicated below: a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 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 instructions . . · • • • • • • f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020. 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) Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions) . Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a Analysis of line 9: 95,755 a Excess from 2015 **b** Excess from 2016 221,501 c Excess from 2017 115,657 d Excess from 2018 . . Excess from 2019 289,854

Page 10

Part	XIV Private Operating Founda	tions (see instru	ctions and Part	VII-A, question 9		
1a	If the foundation has received a ruling foundation, and the ruling is effective for			private operating		/A
b	Check box to indicate whether the fou			ion described in se		<u>/A</u> (3) or
2a	Enter the lesser of the adjusted net	Tax year	operating loundar	Prior 3 years	- 4542()(	
	income from Part I or the minimum	(a) 2019	<b>(b)</b> 2018	(c) 2017	(d) 2016	(e) Total
	investment return from Part X for each year listed				<u> </u>	
b	85% of line 2a				-	
С	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		/			
е	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:					,
а	"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 listed				•	
С	"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)  (2) Support from general public and 5 or more exempt organizations as provided in section 4942(f)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization				<del></del>	
	(4) Gross investment income	-				
Part		n (Complete th	is part only if th	ne foundation h	ad \$5,000 or mo	ore in assets at
	any time during the year-		-		. ,	
1	Information Regarding Foundation			- "	• • • • • • • • • • • • • • • • • • • •	
а	List any managers of the foundation					by the foundation
	before the close of any tax year (but o	only if they have co	intributed more th	an \$5,000). (See se	ection 507(d)(2).)	
NONE					<u> </u>	·
b	List any managers of the foundation ownership of a partnership or other elements.					rge portion of the
NONE						
2	Information Regarding Contribution Check here ▶ ☑ If the foundation unsolicited requests for funds If the foundation complete items 2a, b, c, and d. See in	only makes controundation makes	ibutions to presel	lected charitable of		
a	The name, address, and telephone nu		lress of the person	n to whom applica	tions should be ac	dressed.
	The hame, address, and telephone he	miles or ornar add	areas ar are person	in to whom applied		
N/A b	The form in which applications should	l be submitted and	I information and i	materials they sho	uld include.	
N/A						
C	Any submission deadlines	<del></del>				
N/A						
d	Any restrictions or limitations on aw factors	ards, such as by	geographical ar	eas, charitable fie	lds, kinds of inst	itutions, or other
N/A						
					F	orm <b>990-PF</b> (2019)

Page **11** 

Part	XV Supplementary Information (cont	tinued)			
3	Grants and Contributions Paid During	the Year or Approv		ture Payment	
	Recipient	if recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
	Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
а	Paid during the year				
SEE S	TATEMENT 11				3,750,000
			'		
					•
			! 		
	Total	. <u>.</u>	l	▶ 3a	3,750,000
b	Approved for future payment				
Camb	ridge Public Library Foundation	+	<u>.</u> .		50.000
	roadway Cambridge, MA 02138		Charity	STEAM Program (Science, Technol	50,000
	End House liston Street Aliston, MA 02134		Charity	Visual & Performing Arts Programs	100,000
		1		_	
	·				J
	Total			<b>▶</b> 3h	150,000

Pa	irt X	VI-A Analysis of Income-Producing A	ctivities				
		oss amounts unless otherwise indicated		isiness income	Excluded by sect	ion 512, 513, or 514	(-)
	J		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income
1	Pro	gram service revenue:	Busiliess code	Amount	Exclusion code	Amount	(See instructions )
	а						
	b						
	С						
	d						,
	е						
	f						
	g	Fees and contracts from government agencies		<u> </u>			
2		mbership dues and assessments	-				
3		erest on savings and temporary cash investments	<del></del>		14	22.007	<del></del>
4		idends and interest from securities	-		14	23,097	
5		rental income or (loss) from real estate	AL INCOME DISE		14	932,979	Maria Maria Maria
3		• •	79.1888 488.039 4778	AND THE PARTY OF T	SOURCE AND TONE SECTION 1		AND AND REPORTED TO SELECT
		Debt-financed property	ļ				<del></del>
		Not debt-financed property	<u> </u>				
6		rental income or (loss) from personal property					
7		er investment income	14	13,405		221,416	
8		n or (loss) from sales of assets other than inventory			18	7,231,381	
9		income or (loss) from special events					
10		ss profit or (loss) from sales of inventory	ļ				
11		er revenue. a	ļ				
	b						
	С						
	d						
	e						
12	Sub		AND MALE	13,405	<b>Upversor</b>	8,408,873	
13						13	<u>8,422,278</u>
<b>13</b> (See	wor	ksheet in line 13 instructions to verify calculation	ns)			13	8,422,278
<b>13</b> (See	wor		ns)			13	<u>8,422,278</u>
13 (See Pa	wor	ksheet in line 13 instructions to verify calculation  N-B Relationship of Activities to the A	is) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa Lin	wor rt X e No	ksheet in line 13 instructions to verify calculation  //-B Relationship of Activities to the A	is) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa Lin	wor t X e No ▼	ksheet in line 13 instructions to verify calculation  //-B Relationship of Activities to the A	is) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa Lin	wor t X e No ▼	ksheet in line 13 instructions to verify calculation  //-B Relationship of Activities to the A	is) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa Lin	wor t X e No ▼	ksheet in line 13 instructions to verify calculation  //-B Relationship of Activities to the A	is) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa Lin	wor t X e No ▼	ksheet in line 13 instructions to verify calculation  //-B Relationship of Activities to the A	is) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa Lin	wor t X e No ▼	ksheet in line 13 instructions to verify calculation  //-B Relationship of Activities to the A	is) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa Lin	wor t X e No ▼	ksheet in line 13 instructions to verify calculation  //-B Relationship of Activities to the A	is) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa Lin	wor t X e No ▼	ksheet in line 13 instructions to verify calculation  //-B Relationship of Activities to the A	is) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa Lin	wor t X e No ▼	ksheet in line 13 instructions to verify calculation  //-B Relationship of Activities to the A	is) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa Lin	wor t X e No ▼	ksheet in line 13 instructions to verify calculation  //-B Relationship of Activities to the A	is) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa Lin	wor t X e No ▼	ksheet in line 13 instructions to verify calculation  //-B Relationship of Activities to the A	is) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa Lin	wor t X e No ▼	ksheet in line 13 instructions to verify calculation  //-B Relationship of Activities to the A	is) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa Lin	wor t X e No ▼	ksheet in line 13 instructions to verify calculation  //-B Relationship of Activities to the A	is) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa Lin	wor t X e No ▼	ksheet in line 13 instructions to verify calculation  //-B Relationship of Activities to the A	is) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa Lin	wor t X e No ▼	ksheet in line 13 instructions to verify calculation  //-B Relationship of Activities to the A	is) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa Lin	wor t X e No ▼	ksheet in line 13 instructions to verify calculation  //-B Relationship of Activities to the A	is) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa Lin	wor t X e No ▼	ksheet in line 13 instructions to verify calculation  //-B Relationship of Activities to the A	is) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa Lin	wor t X e No ▼	ksheet in line 13 instructions to verify calculation  //-B Relationship of Activities to the A	is) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa Lin	wor t X e No ▼	ksheet in line 13 instructions to verify calculation  //-B Relationship of Activities to the A	is) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa Lin	wor t X e No ▼	ksheet in line 13 instructions to verify calculation  //-B Relationship of Activities to the A	is) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa Lin	wor t X e No ▼	ksheet in line 13 instructions to verify calculation  //-B Relationship of Activities to the A	is) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa Lin	wor t X e No ▼	ksheet in line 13 instructions to verify calculation  //-B Relationship of Activities to the A	is) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa Lin	wor t X e No ▼	ksheet in line 13 instructions to verify calculation  //-B Relationship of Activities to the A	is) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa Lin	wor t X e No ▼	ksheet in line 13 instructions to verify calculation  //-B Relationship of Activities to the A	is) Accomplishm	ent of Exemp	t Purposes		

Part.	VAII	Organization	n <b>n</b> egarding Tran ons	sters to and Trai	nsactions and <b>n</b>	elationship	he Mir	II NOIICI	aritable	EXCII	ipt
1	Did th	<del></del>	directly or indirectly e	andade in any of the	following with any	other organ	nization	described		Yes I	No
			other than section								
		izations?						•			
а	Trans	fers from the rep	porting foundation to	a noncharitable ex	empt organization	of					
	(1) C	ash		٠		•			1a(1)		✓_
	(2) 0	ther assets .				<b>.</b>			1a(2)		✓
b	Other	transactions.									
			a noncharitable exe	•					1b(1)		<u>✓</u>
			ets from a noncharita		ation .				1b(2)		<u>√</u>
			, equipment, or other	r assets					1b(3)		<u> </u>
		eimbursement ai	_				•	• •	1b(4)		<u> </u>
		oans or loan gua					•	• •	1b(5)		<u> </u>
			ervices or membersh					•	1b(6)		<u> </u>
			equipment, mailing list of the above is "Yes			 Column (h) :			1c	four mou	·kot
d	uzlue	of the goods of	of the above is Test	s, complete the lo	nowing schedule C	If the found	srioulu Iation ri	aiways sii ecewed le	ow life i	iali illai fair mai	rket
	value	in any transaction	on or sharing arrange	ement, show in colu	umn ( <b>d)</b> the value of	f the goods.	other a	assets, or s	services	receive	ed.
(a) Line		b) Amount involved		arıtable exempt organiza		ption of transfe		_			
N/A	+-										_
								·			_
		•									
						_					
											—
	_										
										. <u>.</u>	
	$\rightarrow$										—
								<del></del>			—
	$\rightarrow$		-						_		
									,		
2a	Is the	foundation dire	ectly or indirectly af	filiated with, or rela	ated to, one or mo	ore tax-exe	mpt org	ganizations	3		_
			501(c) (other than sec							s 🗸 l	No
b	If "Ye	s," complete the	e following schedule								
		(a) Name of organ	ization	(b) Type of o	rganization		(c) Descr	ription of relat	ionship		
N/A				==							
				<u> </u>							
	<del>,</del>			446		atatamenta and	l to the be	ot of my know	lodge and h	adiof it io	truc
Sign	corre	r penaities of peŋury, I ct, and complete Decl	declare that I have examine laration of preparer (other that	o triis return, including acc in taxpayer) is based on all	information of which prepared	statements, and arer has any kno	i to the be wledge				
_	LУ	() ILLE ALLA	11 KALLALA	$(x^{(1)})_{ij}$	-m \			May the with the	IRS discu preparer s	ss this ret hown belo	.um .w?
Here		ature of officer or true	stee	Date	TRUSTEE AND	PRESIDEN	<u> </u>			<b></b> Yes □	
	Logn	Print/Type preparer	<del> </del>	Preparer's signature		Date	1.	🗇 .	PTIN		=
Paid		,, , ,		Ja. J.	mana	1 / /		Check [√] if self-employed			
Prepa		JEFFREY A GRO	SELF-EMPLOYED	1 7 -912	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	1 / /	Firm's E				—
Use (	Inly		28120 STONEGATE C	IRCLE WESTLAKE	OH 44145	<del></del>	Phone r		440-823-	5528	
		i iiii a addiess	LUIZU GIONEUMIE O	Jez, WEGIERILL	J.1 11.1.0			·			

## Schedule B

(Form 990, 990-EZ. or 990-PF)

Department of the Treasury Internal Revenue Service Name of the organization

THE ERIC & JANE NORD FAMILY FUND

## 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

**Employer identification number** 

34-1465569

Organization type (check one): Filers of: Section: Form 990 or 990-EZ ☐ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation ☐ 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation ☐ 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, chantable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year . . . . . . . . . . .

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,

**Employer identification number** 

THE ERIC & JANE NORD FAMILY FUND 34-1465569 Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. Part I (c)
Total contributions (a) No. Name, address, and ZIP + 4 Type of contribution 2016 NORD CHARITABLE LEAD TRUST UTA DATED 11082016 **Person**  $oldsymbol{arVar}$ Payroll Noncash C/O THOMPSON HINE LLP 1,675,000 (Complete Part II for noncash contributions.) 129 PUBLIC SQUARE #3900, CLEVELAND OHIO 44114 (a) (c) No. Name, address, and ZIP + 4 Total contributions Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (a) (c) (d) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 Person Payroll Noncash (Complete Part II for noncash contributions.) (a) (d) (b) (c) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person Payroli Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 Person **Payroll** Noncash (Complete Part II for noncash contributions.)

Employer identification number 34-1465569

Part II	Noncash Property (see instructions). Use duplicate copie	es of Part II if additional space	e 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
		<b>\$</b>	
(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
		- - - - \$	

Name of organization
THE ERIC & JANE NORD FAMILY FUND

Employer identification number 34-1465569

	the following line entry. For organiza	ations completing Pa	rt III, enter the	tor. Complete columns (a) through (e) and total of exclusively religious, charitable, etc.,			
	contributions of \$1,000 or less for t	<del>-</del>		e. See instructions.) ▶ \$			
(a) No. from	Use duplicate copies of Part III if ad  (b) Purpose of gift	(c) Use		(d) Description of how gift is held			
Part I							
Ì		(e) Transi	fer of gift				
	Transferee's name, address, and 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, and ZIP + 4 Rela			tionship 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, and ZIP + 4			ationship 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) Transf	er of gift				
	Transferee's name, address, and ZIP + 4			Relationship of transferor to transferee			

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or

NATIONAL CENTER FOR PRIVATE PHILANTHROPY	2,500	=	-	2,500
PHILANTHROPY NEW YORK	2,400			2,400
PHILANTHROPY OHIO	750			750
CHARITY WATCH	500			500
TOTAL TO FORM 990-PF, PAGE 1, LINE 16C	116,286	110,136		6,150
FORM 990-PF TAXES		S	STATEMENT	6
				· · · · · · · · · · · · · · · · · · ·
	(A)	(B)	(C)	(D)
	EXPENSES	NET INVEST-	ADJUSTED	CHARITABLE
DESCRIPTION	PER BOOKS	MENT INCOME	NET INCOME	PURPOSES
FEDERAL EXCISE TAXES	60,925	-	-	-
TOTAL TO FORM 990-PF, PAGE 1, LINE 18	60,925			

DESCRIPTION

INVESTMENT ADVISORY FEES

**EXPENSES** 

PER BOOKS

110,136

(C)

ADJUSTED

**NET INCOME** 

(D)

CHARITABLE

PURPOSES

(B)

**NET INVEST-**

MENT INCOME

110,136

ISES	S	TATEMENT	7
(A) EXPENSES PER BOOKS	(B) NET INVEST-	(C) ADJUSTED	(D) CHARITABLE PURPOSES
200	- WIZIAL HACCIAIE	-	200
55 11 <i>2</i>	- 56	-	55 56
392	196		~ 196
166	- 83	-	. 83
925	335	<u>-</u>	590
тоск	S	TATEMENT	8
	a) BOOK VALUE BEG. OF YEAR	b) BOOK VALUE END OF YEAR	C) FAIR MARKET VALUE END OF YEAR
- I <b>P</b> :			
	3,959	3,459	52,491,808
	1,501,300	-	-
	733,079	-	-
	806,374	954,010	1,003,273
	1,345,998	1,823,979	2,266,703
	-	3,167,330	3,276,863
	883,468	-	-
	770,704	-	-
	919,576	-	-
<b>x</b> )	-	1,246,783	1,349,828
	653,499		
	921,467		
	-	•	1,005,601
	-		1,530,117
	-		2,080,523
	•		1,016,206
	019.027	235,304	234,601
		195 031	237,415
	930,997	2,117,696	2,073,701
	550,557	_, ,000	_,,, • 1
	1,097,847	1,234,316	1,166,746
	EXPENSES PER BOOKS 200 55 112 392 166	EXPENSES PER BOOKS MENT INCOME  200 55 112 56 392 196 166 83  925 335  STOCK S  BOOK VALUE BEG. OF YEAR  1,501,300 733,079 806,374 1,345,998 - 883,468 770,704 919,576 ct) 653,499 921,467	EXPENSES PER BOOKS MENT INCOME  200 55 5112 56 6 - 112 392 196 166 83 -  STOCK  STATEMENT   a) b) BOOK VALUE BEG. OF YEAR  1,501,300 - 733,079 - 806,374 954,010 1,345,998 1,823,979 - 3,167,330 883,468 - 770,704 - 919,576 - 21) 21,467 - 31,165,153 - 31,675,772 - 1,675,772 - 2,286,571 - 1,049,576 - 235,304 918,937 - 233,902 195,031

FORM 990-PF	CORPORATE BONDS ,		STATEMENT 9	
DESCRIPTION	_	a) BOOK VALUE BEG OF YEAR	b) BOOK VALUE END OF YEAR	C) FAIR MARKET VALUE END OF YEAR
SECURITIES HELD / TRADED BY GLENMEDE TR	RUST			
32,075 / 35,216 shs Legg Mason BW Global Op I	3d	381,454	519,931	512,299
28,949 / 31,803 shs Templeton Global Bond Fund		396,417	539,961	513,543
Glenmede Core Fixed Income (Separately Manage	ed Acct.)	2,524,052	3,000,821	3,191,014
14,781 / 30,370 shs Vanguard Short Term Inflation	Protected Fund	365,702	760,001	771,362
TOTAL TO FORM 990-PF, PAGE 2, LINE 10C	<del>-</del>	3,667,625	4,820,714	4,988,219

FORM 990-PF	INVESTMENTS-OTHER		STATEM	MENT 10
	- · · · · · · · · · · · · · · · · · · ·	a)	b)	c)
		BOOK VALUE	<b>BOOK VALUE</b>	FAIR MARKET VALUE
DESCRIPTION		BEG OF YEAR	END OF YEAR	END OF YEAR
SECURITIES HELD / TRADED BY GLENMEDE TR	RUST			
AQR Style Premia Alternative Fund		136,412	-	· -
Vanguard Market Neutral Fund		133,237	-	-
United States Commodity Index		269,158	-	-
Liberty Special Strategies TE Fund LLC		600,000	677,705	617,230
Glenmede Private Investment Fund VIII LLC		234,000	237,988	298,601
Independence Global Fund LLC		450,000	611,895	533,258
First Tr N. American Energy Infra ETF		176,301	224,172	210,965
Vanguard Global EX US Real Estate		374,030	728,243	597,621
Vanguard Index FDS Real Estate ETF		420,217	771,054	738,025
Glenmede Private Equity Fund X LLC		156,000	207,233	252,721
Parametric Commodity Strategy Fund		211,233	355,864	324,924
TOTAL TO EODM 000 DE DAGE 2 LINE 42		3,160,588	3,814,154	3,573,345
TOTAL TO FORM 990-PF, PAGE 2, LINE 13		3,100,300	3,014,134	3,373,343

2019

	S AND CONTRIBUTIONS STATEM ID DURING THE YEAR	IENT 11 (P	age 1 of 2)
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
BOSTON PUBLIC LIBRARY FUND 700 Boylston Street BOSTON, MA 02116	None / General Charitable Purposes	Public Charity	\$ 100,000
BOSTON MEDICAL CENTER CORP One Boston Medical Center Place BOSTON, MA 02118	None / COVID-19 Relief Fund	Public Charity	100,000
CAMBRIDGE PUBLIC LIBRARY FOUNDATION 449 Broadway CAMBRIDGE, MA 02138	None/ COVID-19 Crisis Grant	Public Charity	25,000
CAMBRIDGE PUBLIC LIBRARY FOUNDATION 449 Broadway CAMBRIDGE, MA 02138	None/ STEAM Program	Public Charity	25,000
CASE WESTERN RESERVE UNIVERSITY 10900 Euclid Avenue CLEVELAND, OH 44106	None / COVID-19 Response Fund	Public Charity	150,000
CASE WESTERN RESERVE UNIVERSITY 10900 Euclid Avenue CLEVELAND, OH 44106	None / COVID-19 Research Task Force	Public Charity	430,000
CASE WESTERN RESERVE UNIVERSITY 10900 Euclid Avenue CLEVELAND, OH 44106	None / Barbara R Snyder Scholarship Fund	Public Charity	- 425,000
CLEVELAND INSTITUTE OF ART 11610 Euclid Ave CLEVELAND, OH 44106	None/ General Charitable Purposes	Public Charity	10,000
CLEVELAND MUSEUM OF ART 11150 East Boulevard CLEVELAND, OH 44106	None/ COVID-19 Emergency Relief	Public Chanty	100,000
CLEVELAND QRCHESTRA 11001 Euclid Avenue CLEVELAND, OH 44106	None/ Pmt 2 of 2 for Outreach Commitment	Public Charity	150,000
CLEVELAND ORCHESTRA 11001 Euclid Avenue CLEVELAND, OH 44106	None/ COVID-19 Emergency Relief	Public Charity	175,000
CLEVELAND ORCHESTRA 11001 Euclid Avenue CLEVELAND, OH 44106	None/ General Charitable Purposes	Public Charity	12,500
COMMUNITY FUNDS, INC 909 3rd Avenue NEW YORK, NY 10022	None/ New York Community Trust COVID Relief Fund	Public Charity	100,000
COMMUNITY FUNDS, INC 909 3rd Avenue NEW YORK, NY 10022	None/ Westchester Community Foundation COVID Relief Fund	Public Charity	100,000
FIRELANDS ASSN FOR THE VISUAL ARTS 39 South Main Street OBERLIN, OH 44074	None/ Education Programming	Public Chanty	45,000
FREEDOM ALLIANCE 22570 Markey Court DULLES, VA 20166	None/ General Charitable Purposes	Public Charity	5,000
FRONT INTERNATIONAL FOR CONTEMP ART 1460 West 29th Street CLEVELAND, OH 44113	None/ Pmt 3 of 3/ Cleveland Triennial for Contemporary Art	Public Charity	100,000
GREATER BOSTON FOOD BANK 70 South Bay Avenue BOSTON, MA 02118	None/ COVID-19 Emergency Relief	Public Charity	200,000
HAPPY TRAILS FARM ANIMAL SANCTUARY 5623 New Milford Road RAVENNA, OH 44266	None/ Humane Animal Treatment	,Public Charity	2,000

THE ERIC & JANE NURD FAMILY F	<u> 2019</u>		34-1400009
FORM 990-PF	GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR	STATEMENT	11 (Page 2 of 2)
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECI STAT	PIENT US AMOUNT
	CONTINUED FROM PREVIOUS PAGE		
LEGAL AID SOCIETY OF CLEVELAND 1223 West 6th Street CLEVELAND, OH 44113	None/ General Charitable Purp	oses Public Chari	
LORAIN COUNTY COMMUNITY COLLEG 1005 North Abbe Road #CC220 ELYRIA, OH 44035	FDN None/ Student Emergency Assi Endowment Fund	stance Public Charr	,
LORAIN COUNTY HEALTH & DENTISTRY 1205 Broadway LORAIN, OH 44052	None/ General Charitable Purpi	oses Public Chari	•
MASS AUDUBON SOCIETY 208 South Great Road LINCOLN, MA 01773	None/Educator Internship Progr	ram Public Chari	•
MASS AUDUBON SOCIETY 208 South Great Road LINCOLN, MA 01773	None/ Wellfleet Bay Wildlife Sar COVID-19 Emergency Reli	•	•
MUSEUM OF FINE ARTS BOSTON 465 Huntington Avenue BOSTON, MA 02115	None/ Paid Internships	Public Chan	,
MUSEUM OF FINE ARTS BOSTON 465 Huntington Avenue BOSTON, MA 02115	None/ COVID-19 Emergency Ro	elief Public Chari	
NEIGHBORHOOD ALLIANCE 1536 East 30th Street LORAIN, OH 44058	None/ Senior Enrichment Servic Home Delivered Meal Progr		
NEW YORK PUBLIC LIBRARY Fifth Avenue & 42nd Street NEW YORK, NY 10018	None/ General Charitable Purpo	oses Public Chari	•
OBERLIN COLLEGE 50 West Lorain Street OBERLIN, OH 44074	None/ General Operations	Public Chan	
OBERLIN COLLEGE 50 West Lorain Street OBERLIN, OH 44074	None/ General Chantable Purpo	oses Public Chari	· · · · · · · · · · · · · · · · · · ·
OBERLIN COLLEGE 50 West Lorain Street OBERLIN, OH 44074	None/ Bonner Foundation Scho Program Fund	olars Public Chari	
SECOND HARVEST FOOD BANK OF CEN 5510 Baumhart Road LORAIN, OH 44053	TRAL OH None/ General Charitable Purpo	oses Public Chari	·
SECOND HARVEST FOOD BANK OF CEN 5510 Baumhart Road LORAIN, OH 44053	TRAL OH None/ New Food Truck	Public Charit	•
WEST END HOUSE BOYS & GIRLS CLUB 105 Allston Street ALLSTON, MA 02134	None/ General Charitable Purpo	oses Public Chari	
WEST END HOUSE BOYS & GIRLS CLUB 105 Aliston Street ALLSTON, MA 02134	None/ Visual & Performing Arts	Programs Public Chant	
VERMILLION COMMUNITY SERVICE P. O Box 143 VERMILION, OH 44084	None/ Share-A-Ride Transporta Assistance	ation Public Charif	

TOTAL TO FORM 990-PF, PART XV, LINE 3A

\$ 3,750,000