



Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	<b>1</b> Cash—non-interest-bearing . . . . .	93,326	350,138	350,138
	<b>2</b> Savings and temporary cash investments . . . . .	735,840	298,238	298,238
	<b>3</b> Accounts receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	<b>4</b> Pledges receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	<b>5</b> Grants receivable . . . . .			
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	<b>7</b> Other notes and loans receivable (attach schedule) ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	<b>8</b> Inventories for sale or use . . . . .			
	<b>9</b> Prepaid expenses and deferred charges . . . . .			
	<b>10a</b> Investments—U.S. and state government obligations (attach schedule)	7,324,474	5,885,443	5,885,443
	<b>b</b> Investments—corporate stock (attach schedule) . . . . .	24,290,925	25,609,922	25,609,922
	<b>c</b> Investments—corporate bonds (attach schedule) . . . . .			
	<b>11</b> Investments—land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
	<b>12</b> Investments—mortgage loans . . . . .			
	<b>13</b> Investments—other (attach schedule) . . . . .	5,465,507	6,195,402	6,195,402
	<b>14</b> Land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
<b>15</b> Other assets (describe ▶ _____)				
<b>16</b> <b>Total assets</b> (to be completed by all filers—see the instructions. Also, see page 1, item I)	37,910,072	38,339,143	38,339,143	
Liabilities	<b>17</b> Accounts payable and accrued expenses . . . . .	5,000	3,500	
	<b>18</b> Grants payable . . . . .	1,049,465	530,590	
	<b>19</b> Deferred revenue . . . . .			
	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons			
	<b>21</b> Mortgages and other notes payable (attach schedule) . . . . .			
	<b>22</b> Other liabilities (describe ▶ _____)		38,738	
	<b>23</b> <b>Total liabilities</b> (add lines 17 through 22) . . . . .	1,054,465	572,828	
Net Assets or Fund Balances	<b>Foundations that follow FASB ASC 958, check here</b> ▶ <input checked="" type="checkbox"/> <b>and complete lines 24, 25, 29 and 30.</b>			
	<b>24</b> Net assets without donor restrictions . . . . .	36,855,607	37,766,315	
	<b>25</b> Net assets with donor restrictions . . . . .			
	<b>Foundations that do not follow FASB ASC 958, check here</b> ▶ <input type="checkbox"/> <b>and complete lines 26 through 30.</b>			
	<b>26</b> Capital stock, trust principal, or current funds . . . . .			
	<b>27</b> Paid-in or capital surplus, or land, bldg., and equipment fund			
	<b>28</b> Retained earnings, accumulated income, endowment, or other funds			
	<b>29</b> <b>Total net assets or fund balances</b> (see instructions) . . . . .	36,855,607	37,766,315	
<b>30</b> <b>Total liabilities and net assets/fund balances</b> (see instructions) .	37,910,072	38,339,143		

**Part III Analysis of Changes in Net Assets or Fund Balances**

<b>1</b> Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return) . . . . .	<b>1</b>	36,855,607
<b>2</b> Enter amount from Part I, line 27a . . . . .	<b>2</b>	-2,143,561
<b>3</b> Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>	3,054,269
<b>4</b> Add lines 1, 2, and 3 . . . . .	<b>4</b>	37,766,315
<b>5</b> Decreases not included in line 2 (itemize) ▶ _____	<b>5</b>	
<b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	<b>6</b>	37,766,315

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1a</b> See Additional Data Table				
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss) $\left\{ \begin{array}{l} \text{If gain, also enter in Part I, line 7} \\ \text{If (loss), enter -0- in Part I, line 7} \end{array} \right\}$		<b>2</b>	926,631
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8 . . . . .		<b>3</b>	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income****SECTION 4940(e) REPEALED ON DECEMBER 20, 2019 - DO NOT COMPLETE**

<b>1</b> Reserved			
(a) Reserved	(b) Reserved	(c) Reserved	(d) Reserved
<b>2</b> Reserved . . . . .		<b>2</b>	
<b>3</b> Reserved. . . . .		<b>3</b>	
<b>4</b> Reserved . . . . .		<b>4</b>	
<b>5</b> Reserved . . . . .		<b>5</b>	
<b>6</b> Reserved . . . . .		<b>6</b>	
<b>7</b> Reserved . . . . .		<b>7</b>	
<b>8</b> Reserved , . . . .		<b>8</b>	

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)**

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions)		
<b>b</b>	Reserved.	<b>1</b>	20,627
<b>c</b>	All other domestic foundations enter 1.39% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	
<b>3</b>	Add lines 1 and 2.	<b>3</b>	20,627
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0-.	<b>5</b>	20,627
<b>6</b>	Credits/Payments:		
<b>a</b>	2020 estimated tax payments and 2019 overpayment credited to 2020	<b>6a</b>	12,119
<b>b</b>	Exempt foreign organizations—tax withheld at source	<b>6b</b>	0
<b>c</b>	Tax paid with application for extension of time to file (Form 8868)	<b>6c</b>	
<b>d</b>	Backup withholding erroneously withheld	<b>6d</b>	
<b>7</b>	Total credits and payments. Add lines 6a through 6d.	<b>7</b>	12,119
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached.	<b>8</b>	136
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> .	<b>9</b>	8,644
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> .	<b>10</b>	
<b>11</b>	Enter the amount of line 10 to be: <b>Credited to 2021 estimated tax</b> <input type="checkbox"/> <b>Refunded</b> <input type="checkbox"/>	<b>11</b>	

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	<b>1a</b>	No
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i>	<b>1b</b>	No
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year?	<b>1c</b>	No
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: <b>(1)</b> On the foundation. <b>(2)</b> On foundation managers.		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers.		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>	<b>2</b>	No
<b>3</b> 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? <i>If "Yes," attach a conformed copy of the changes</i>	<b>3</b>	No
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year?	<b>4a</b>	Yes
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	<b>4b</b>	Yes
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>	<b>5</b>	No
<b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	<b>6</b>	Yes
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>	<b>7</b>	Yes
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) <b>OH</b>		
<b>b</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 General Instruction G? <i>If "No," attach explanation.</i>	<b>8b</b>	Yes
<b>9</b> 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 2020 or the taxable year beginning in 2020? See the instructions for Part XIV. <i>If "Yes," complete Part XIV</i>	<b>9</b>	No
<b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>	<b>10</b>	No

**Part VII-A Statements Regarding Activities** (continued)

<b>11</b>	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions. . . . .	<b>11</b>		<b>No</b>
<b>12</b>	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions . . . . .	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ <u>N/A</u>	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of ▶ <u>WESTFIELD</u> Telephone no. ▶ <u>(330) 887-8431</u>			

Located at ▶ PO BOX 5001 Westfield Center OHZIP+4 ▶ 44251

<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —check here . . . . . ▶ <input type="checkbox"/>			
	and enter the amount of tax-exempt interest received or accrued during the year . . . . . ▶ <b>15</b>			
<b>16</b>	At any time during calendar year 2020, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? . . . . .	<b>16</b>	<b>Yes</b>	<b>No</b>
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ▶			

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required****File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

<b>1a</b>	During the year did the foundation (either directly or indirectly):		<b>Yes</b>	<b>No</b>
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions . . . . . <input type="checkbox"/>	<b>1b</b>		<b>No</b>
<b>c</b>	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2020? . . . . . <input type="checkbox"/>	<b>1c</b>		<b>No</b>
<b>2</b>	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
<b>a</b>	At the end of tax year 2020, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2020? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions.) . . . . . <input type="checkbox"/>	<b>2b</b>		<b>No</b>
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here. ▶ 20____, 20____, 20____, 20____			
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If "Yes," did it have excess business holdings in 2020 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 Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2020.) . . . . . <input type="checkbox"/>	<b>3b</b>		
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>		<b>No</b>
<b>b</b>	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2020?	<b>4b</b>		<b>No</b>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required** (continued)

<b>5a</b>	During the year did the foundation pay or incur any amount to:		<b>Yes</b>	<b>No</b>
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions. . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions . . . . .		<b>5b</b>	
	Organizations relying on a current notice regarding disaster assistance check here. . . . .	<input type="checkbox"/>		
<b>c</b>	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? . . . . .	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	If "Yes," attach the statement required by Regulations section 53.4945–5(d).			
<b>6a</b>	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>6b</b>	<b>No</b>
<b>b</b>	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .			
	If "Yes" to 6b, file Form 8870.			
<b>7a</b>	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>7b</b>	
<b>b</b>	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction? . . . . .			
<b>8</b>	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

<b>1 List all officers, directors, trustees, foundation managers and their compensation. See instructions</b>				
<b>(a)</b> Name and address	<b>(b)</b> Title, and average hours per week devoted to position	<b>(c)</b> Compensation (If not paid, enter -0-)	<b>(d)</b> Contributions to employee benefit plans and deferred compensation	<b>(e)</b> Expense account, other allowances
See Additional Data Table				
<b>2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."</b>				
<b>(a)</b> Name and address of each employee paid more than \$50,000	<b>(b)</b> Title, and average hours per week devoted to position	<b>(c)</b> Compensation	<b>(d)</b> Contributions to employee benefit plans and deferred compensation	<b>(e)</b> Expense account, other allowances
<b>Total</b> number of other employees paid over \$50,000. . . . .				

**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".**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
<b>Total</b> number of others receiving over \$50,000 for professional services. . . . . ►		

**Part IX-A** **Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**Part IX-B** **Summary of Program-Related Investments** (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
<b>1</b>	
<b>2</b>	
All other program-related investments. See instructions.	
<b>3</b>	
<b>Total.</b> Add lines 1 through 3 . . . . . ►	

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b>	Average monthly fair market value of securities. . . . .	<b>1a</b>	35,068,455
<b>b</b>	Average of monthly cash balances. . . . .	<b>1b</b>	198,111
<b>c</b>	Fair market value of all other assets (see instructions). . . . .	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c). . . . .	<b>1d</b>	35,266,566
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	<b>1e</b>	
<b>2</b>	Acquisition indebtedness applicable to line 1 assets. . . . .	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d. . . . .	<b>3</b>	35,266,566
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	<b>4</b>	528,998
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	34,737,568
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	<b>6</b>	1,736,878

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6. . . . .	<b>1</b>	1,736,878
<b>2a</b>	Tax on investment income for 2020 from Part VI, line 5. . . . .	<b>2a</b>	20,627
<b>b</b>	Income tax for 2020. (This does not include the tax from Part VI.). . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b. . . . .	<b>2c</b>	20,627
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1. . . . .	<b>3</b>	1,716,251
<b>4</b>	Recoveries of amounts treated as qualifying distributions. . . . .	<b>4</b>	
<b>5</b>	Add lines 3 and 4. . . . .	<b>5</b>	1,716,251
<b>6</b>	Deduction from distributable amount (see instructions). . . . .	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . . . .	<b>7</b>	1,716,251

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26. . . . .	<b>1a</b>	4,216,178
<b>b</b>	Program-related investments—total from Part IX-B. . . . .	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes. . . . .	<b>2</b>	0
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required). . . . .	<b>3a</b>	0
<b>b</b>	Cash distribution test (attach the required schedule). . . . .	<b>3b</b>	0
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	4,216,178
<b>5</b>	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. . . . .	<b>5</b>	0
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	<b>6</b>	4,216,178

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.



**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2019	(c) 2019	(d) 2020
<b>1</b> Distributable amount for 2020 from Part XI, line 7				1,716,251
<b>2</b> Undistributed income, if any, as of the end of 2020:				
<b>a</b> Enter amount for 2019 only. . . . .			0	
<b>b</b> Total for prior years: 2018, 2017, 2016		0		
<b>3</b> Excess distributions carryover, if any, to 2020:				
<b>a</b> From 2015. . . . .	1,056,222			
<b>b</b> From 2016. . . . .	1,059,456			
<b>c</b> From 2017. . . . .	1,088,271			
<b>d</b> From 2018. . . . .	1,171,217			
<b>e</b> From 2019. . . . .	1,412,240			
<b>f</b> <b>Total</b> of lines 3a through e. . . . .	5,787,406			
<b>4</b> Qualifying distributions for 2020 from Part XII, line 4: ► \$ <u>4,216,178</u>				
<b>a</b> Applied to 2019, but not more than line 2a			0	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .				
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .				
<b>d</b> Applied to 2020 distributable amount. . . . .				1,716,251
<b>e</b> Remaining amount distributed out of corpus	2,499,927			
<b>5</b> Excess distributions carryover applied to 2020. (If an amount appears in column (d), the same amount must be shown in column (a).)				
<b>6</b> <b>Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	8,287,333			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b. . . . .		0		
<b>c</b> 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. . . . .				
<b>d</b> Subtract line 6c from line 6b. Taxable amount—see instructions. . . . .		0		
<b>e</b> Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount—see instructions. . . . .			0	
<b>f</b> Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020. . . . .				0
<b>7</b> 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). . . . .				
<b>8</b> Excess distributions carryover from 2015 not applied on line 5 or line 7 (see instructions). . . . .	1,056,222			
<b>9</b> <b>Excess distributions carryover to 2021.</b> Subtract lines 7 and 8 from line 6a. . . . .	7,231,111			
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2016. . . . .	1,059,456			
<b>b</b> Excess from 2017. . . . .	1,088,271			
<b>c</b> Excess from 2018. . . . .	1,171,217			
<b>d</b> Excess from 2019. . . . .	1,412,240			
<b>e</b> Excess from 2020. . . . .	2,499,927			

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2020, enter the date of the ruling. . . . . ▶

**b** Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

**2a** Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .

	Tax year	Prior 3 years			(e) Total
	(a) 2020	(b) 2019	(c) 2018	(d) 2017	
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon:					
<b>a</b> "Assets" alternative test—enter:					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .					
<b>c</b> "Support" alternative test—enter:					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

**Part XV Supplementary Information** (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions

**a** The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:

The Westfield Insurance Foundation  
PO Box 5001  
Westfield Center, OH 44251  
JaniGroza@westfieldgrp.com

**b** The form in which applications should be submitted and information and materials they should include:

Applicants should use the contact information provided and submit requests electronically. Necessary information provided should include prior open year filed 990 returns, and any applicable financial records relating to the request; such as program budgets or financial statements if requested.

**c** Any submission deadlines:

Submissions are accepted at any time.

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

Funds are disbursed to organizations that are permissible within the Foundation's exempt purpose and existence under 501(c)(3), strategy, and eligible to receive contributions according to applicable IRC code sections and verification.

**Part XV** **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total</b> . . . . .			▶ <b>3a</b>	3,715,626
<b>b</b> <i>Approved for future payment</i>				
<b>Total</b> . . . . .			▶ <b>3b</b>	

Enter gross amounts unless otherwise indicated.

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Form **990-PF** (2020)

## Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

		<b>Yes</b>	<b>No</b>
--	--	------------	-----------

--	--	--

1a(1)		No
1a(2)		No

--	--	--

<b>1b(1)</b>	<b>No</b>
--------------	-----------

<b>1b(2)</b>		<b>No</b>
--------------	--	-----------

<b>1b(3)</b>		<b>No</b>
--------------	--	-----------

<b>1b(4)</b>		<b>No</b>
--------------	--	-----------

<b>1b(5)</b>		<b>No</b>
--------------	--	-----------

<b>1b(6)</b>		<b>No</b>
--------------	--	-----------

1c		No
----	--	----

value  
ue

[illegible]

described in section 501(c) (other than section 501(c)(3)) or in section 527? . . . . . ☐ Yes ☒ No

**b** If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.
--

**Sign  
Here**

\*\*\*\*\*

2021-10-22

\*\*\*\*\*

Signature of officer or trustee

Date \_\_\_\_\_

Title

May the IRS discuss this return with the preparer shown below

(see instr.) ☒ Yes ☐ No

**Paid  
Preparer  
Use Only**

Print/Type preparer's name  Jacob Cook	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN  P01240455
Firm's name ▶ BDO USA LLP				Firm's EIN ▶
Firm's address ▶ 200 OTTAWA AVE NW STE 300  GRAND RAPIDS, MI 49503				Phone no. (616) 774-7000

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

List and describe the kind(s) of property sold (e.g., real estate, (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
ST CAPITAL GAINS - COVERED			
LT CAPITAL GAINS - COVERED			
ST CAPITAL GAINS ON GP SMF III, LP			
LT CAPITAL GAINS ON GP SMF III, LP			
LT CAPITAL GAINS ON GP SMF III AIV, LP			
ST CAPITAL GAINS ON PACIFIC PRIVATE EQTY OPP FD II, LP			
LT CAPITAL GAINS ON PACIFIC PRIVATE EQTY OPP FD II, LP			

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
697,992		479,077	218,915
3,891,583		3,510,276	381,307
785			785
166,801			166,801
70,848			70,848
76			76
87,899			87,899

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
			218,915
			381,307
			785
			166,801
			70,848
			76
			87,899

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
Joseph Kohmann	Director 0.5	0	0	0
PO Box 5001 Westfield Center, OH 44251				
Edward Largent	Director 0.5	0	0	0
PO Box 5001 Westfield Center, OH 44251				
Jani Groza	Director 15.0	0	0	0
PO Box 5001 Westfield Center, OH 44251				
Frank Carrino	Director 1.0	0	0	0
PO Box 5001 Westfield Center, OH 44251				
Stuart Rosenberg	Director 0.25	0	0	0
PO Box 5001 Westfield Center, OH 44251				
James Merz	Director 0.25	0	0	0
PO Box 5001 Westfield Center, OH 44251				
Michael Prandi	Director 0.25	0	0	0
PO Box 5001 Westfield Center, OH 44251				
Craig Welsh	Director 0.25	0	0	0
PO Box 5001 Westfield Center, OH 44251				
Robyn Hahn	Director 0.25	0	0	0
PO Box 5001 Westfield Center, OH 44251				
Kristine Neate	Director beg 2020 0.25	0	0	0
PO Box 5001 Westfield Center, OH 44251				
Jennifer Palmieri	Director beg 2020 0.25	0	0	0
PO Box 5001 Westfield Center, OH 44251				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
Akron Urban League 440 Vernon Odom Blvd Akron, OH 44307	NONE	PC	Family Stability	2,000
Akron Urban League 440 Vernon Odom Blvd Akron, OH 44307	NONE	PC	Family Stability	25,000
Akron Urban League 440 Vernon Odom Blvd Akron, OH 44307	NONE	PC	Justice & Equality	75,000
<b>Total . . . . . ▶ 3a</b>				3,715,626



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Akron-Canton Regional Foodbank 350 Opportunity Pkwy AKRON, OH 44307	NONE	PC	Food Insecurity	5,000
Akron-Canton Regional Foodbank 350 Opportunity Pkwy AKRON, OH 44307	NONE	PC	Food Insecurity	5,000
Akron-Canton Regional Foodbank 350 Opportunity Pkwy AKRON, OH 44307	NONE	PC	Food Insecurity	50,000
<b>Total . . . . .</b>			<b>3a</b>	3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Akron-Canton Regional Foodbank 350 Opportunity Pkwy AKRON, OH 44307	NONE	PC	Food Insecurity	200
Akron-Canton Regional Foodbank 350 Opportunity Pkwy AKRON, OH 44307	NONE	PC	Food Insecurity	150
Akron-Canton Regional Foodbank 350 Opportunity Pkwy AKRON, OH 44307	NONE	PC	Food Insecurity	525
<b>Total . . . . . ▶ 3a</b>				3,715,626

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Akron-Canton Regional Foodbank 350 Opportunity Pkwy AKRON, OH 44307	NONE	PC	Employee Match	1,150
Akron-Canton Regional Foodbank 350 Opportunity Pkwy AKRON, OH 44307	NONE	PC	Employee Match	100
Akron-Canton Regional Foodbank 350 Opportunity Pkwy AKRON, OH 44307	NONE	PC	Employee Match	225
<b>Total . . . . . ▶ 3a</b>				3,715,626

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Akron-Canton Regional Foodbank 350 Opportunity Pkwy AKRON, OH 44307	NONE	PC	Employee Match	32,844
Akron-Canton Regional Foodbank 350 Opportunity Pkwy AKRON, OH 44307	NONE	PC	General Support	280
Akron-Canton Regional Foodbank 350 Opportunity Pkwy AKRON, OH 44307	NONE	PC	Food Insecurity	18,000
<b>Total . . . . .</b> ► <b>3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Almost Home Inc231 N MAIN ST BRIGHTON, CO 80601	NONE	PC	Disaster Recovery	15,000
Alzheimer's Disease & Related Disorders Assoc 225 N Michigan Ave 17th Fl Chicago, IL 60601	NONE	PC	General Support	75
AMERICAN CANCER SOCIETY INC 250 WILLIAMS ST 4TH FL ATLANTA, GA 30303	NONE	PC	Employee Match	50
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
AMERICAN CANCER SOCIETY INC 250 WILLIAMS ST 4TH FL ATLANTA, GA 30303	NONE	PC	Employee Match	23,327
AMERICAN CANCER SOCIETY INC 250 WILLIAMS ST 4TH FL ATLANTA, GA 30303	NONE	PC	Employee Match	2,400
AMERICAN CANCER SOCIETY INC 250 WILLIAMS ST 4TH FL ATLANTA, GA 30303	NONE	PC	General Support	51
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
AMERICAN CANCER SOCIETY INC 250 WILLIAMS ST 4TH FL ATLANTA, GA 30303	NONE	PC	General Support	51
AMERICAN CANCER SOCIETY INC 250 WILLIAMS ST 4TH FL ATLANTA, GA 30303	NONE	PC	Holiday help	1,500
American Cancer Society Inc 250 Williams Street NW Atlanta, GA 30303	NONE	PC	General Support	260
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
American Diabetes Association 2451 Crystal Drive Suite 900 Arlington, VA 22202	NONE	PC	General Support	51
American Diabetes Association 2451 Crystal Drive Suite 900 Arlington, VA 22202	NONE	PC	General Support	50
American Heart Association (national) 1375 E 9 ST 600 Cleveland, OH 44114	NONE	PC	Employee Match	18,563
<b>Total . . . . . ▶ 3a</b>				3,715,626



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
American Heart Association Inc 7272 Greenville Avenue Dallas, TX 75231	NONE	PC	Employee Match	800
American Heart Association Inc 7272 Greenville Avenue Dallas, TX 75231	NONE	PC	General Support	18,000
American Inst for Chartered Property Casualty Unde 720 Providence Road Malvern, PA 19355	NONE	PC	General Support	15,000
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
American Red Cross of Northeast Ohio 3747 Euclid Avenue Cleveland, OH 44115	NONE	PC	Safety	75,000
ANIMAL FRIENDS INC 562 CAMP HORNE RD PITTSBURGH, PA 15237	NONE	PC	General Support	50
APOSTOLIC CHRISTIAN HOME INC 10680 STEINER RD RITTMAN, OH 44270	NONE	PC	General Support	51
Total . . . . . ▶ 3a				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ARTHRITIS FOUNDATION INC 1355 PEACHTREE ST NE STE 600 ATLANTA, GA 30390	NONE	PC	General Support	51
Atlanta Community Food Bank 732 Jospeh E Lowery Blvd NW Atlanta, GA 30318	NONE	PC	Employee Match	780
Autism Society 6110 Executive Boulevard Suite 305 Rockville, MD 20852	NONE	PC	General Support	15,000
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Avon Lake United Church of Christ 32801 Electric Blvd Avon Lake, OH 44012	NONE	PC	General Support	51
AvonAvon Lake Community Resource Services Inc 33479 Lake Road Suite C Avon Lake, OH 44012	NONE	PC	Disaster Recovery	15,000
BackpackBuddyOrg145 WATERSIDE CIR WINFIELD, WV 25213	NONE	PC	Food Insecurity	5,000
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Bath Township Fire Department PO Box 1188 Bath, OH 44210	NONE	PC	General Support	75
Battered Women's Shelter 974 E MARKET ST AKRON, OH 44305	NONE	PC	Capital campaign	20,000
Battered Women's Shelter 974 E MARKET ST AKRON, OH 44305	NONE	PC	Holiday help	1,500
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
BECAUSE I SAID I WOULD 20525 CENTER RIDGE RD STE 500 ROCKY RIVER, OH 44116	NONE	PC	General Support	1,250
BEN CURTIS FAMILY FOUNDATION 6060 PARKLAND BLVD STE 100 CLEVELAND, OH 44124	NONE	PC	Food Insecurity	5,000
BENJAMIN ROSE INSTITUTE 11890 FAIRHILL RD CLEVELAND, OH 44120	NONE	PC	Food Insecurity	5,000
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Best Christmas Ever IncPO Box 439 Cloquet, MN 55720	NONE	PC	Family stability	5,000
Black River Local Schools 257-A county road 40 Sullivan, OH 44880	NONE	PC	General Support	350
Bluecoats of Medina County Inc 4121 Avon Lake Road Litchfield, OH 44253	NONE	PC	Safety	250
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Bowling Green State University 337 Maurer Center Bowling Green, OH 43403	NONE	PC	Insurance program support	5,000
BOYS & GIRLS CLUB OF GREATER KINGSFORT INC PO BOX 784 KINGSFORT, TN 37662	NONE	PC	General Support	76
BOYS AND GIRLS CLUB OF THE WESTERN RESERVE INC 889 JONATHAN AVE AKRON, OH 44306	NONE	PC	General Support	1,320
<b>Total . . . . . ▶ 3a</b>				3,715,626



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Brethren Housing Association 219 Hummel Street Harrisburg, PA 17104	NONE	PC	Family stability	10,000
BRIDGEPORT UNITED METHODIST CHURCH 251 WORTHINGTON DR BRIDGEPORT, WV 26330	NONE	PC	General Support	50
BULLDOG BAGS INCPO BOX 1475 STOW, OH 44224	NONE	PC	Employee Match	41
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
BVU The Center for Nonprofit Excellence 1300 East 9th Street Cleveland, OH 44114	NONE	PC	General Support	2,725
BVU The Center for Nonprofit Excellence 1300 East 9th Street Cleveland, OH 44114	NONE	PC	General Support	2,500
CANDIDPO Box 22799 NEW YORK, NY 10087	NONE	PC	Membership tools	1,625
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CANDIDPO Box 22799 NEW YORK, NY 10087	NONE	PC	Membership tools	750
CAPITAL AREA FOOD BANK 4900 PUERTO RICO AVE NE WASHINGTON, DC 20017	NONE	PC	Food Insecurity	1,500
Catholic Charities USA 2050 Ballenger Avenue Alexandria, VA 22314	NONE	PC	Disaster Recovery	25,000
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Catholic Charities Diocese of Cleveland 1404 E Ninth St 8th Floor Cleveland, OH 44114	NONE	PC	General Support	250
CENTER FOR DISASTER PHILANTHROPY INC One Thomas Circle NW Suite 700 WASHINGTON, DC 20005	NONE	PC	Disaster Recovery	1,200
CENTER FOR DISASTER PHILANTHROPY INC One Thomas Circle NW Suite 700 WASHINGTON, DC 20005	NONE	PC	Disaster Recovery	75,000
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CENTER FOR DISASTER PHILANTHROPY INC One Thomas Circle NW Suite 700 WASHINGTON, DC 20005	NONE	PC	Disaster Recovery	30,000
Central Pennsylvania Food Bank 3908 Corey Road Harrisburg, PA 17109	NONE	PC	Food Insecurity	25
Central Pennsylvania Food Bank 3908 Corey Road Harrisburg, PA 17109	NONE	PC	Employee Match	1,994
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Charleston Catholic High School HOPE 1033 VIRGINIA ST E CHARLESTON, WV 25301	NONE	PC	Family stability	5,000
CHATTANOOGA AREA FOOD BANK INC 2009 CURTAIN POLE RD CHATTANOOGA, TN 37406	NONE	PC	Food Insecurity	25
CHESTER COUNTY FOOD BANK 650 PENNSYLVANIA DR EXTON, PA 19341	NONE	PC	Food Insecurity	2,500
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
CHN Housing Partners 2999 Payne Avenue Cleveland, OH 44114	NONE	PC	Family Stability	5,000
CHN Housing Partners 2999 Payne Avenue Cleveland, OH 44114	NONE	PC	Disaster Recovery	100,000
Christian Children's Home of Ohio 2685 Armstrong Rd Wooster, OH 44691	NONE	PC	General Support	5,000
Total . . . . . ▶ 3a				3,715,626

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Cincinnati Union Bethel 2401 Reading Road Cincinnati, OH 45202	NONE	PC	Family stability	15,000
CLEARVIEW LEGACY FOUNDATION PO BOX 30196 EAST CANTON, OH 44730	NONE	PC	General Support	3,500
CLEVELAND HEARING AND SPEECH CENTER 11635 EUCLID AVE CLEVELAND, OH 44106	NONE	PC	Food Insecurity	5,000
<b>Total . . . . . ▶ 3a</b>				3,715,626



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
Cleveland Leadership Center 1375 East 9th Street Suite 1100 Cleveland, OH 44114	NONE	PC	General Support	7,000
Cleveland Leadership Center 1375 East 9th Street Suite 1100 Cleveland, OH 44114	NONE	PC	General Support	1,000
Cleveland Public Library 325 Superior Avenue Cleveland, OH 44114	NONE	PC	Democracy 2020 campaign	7,500
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Cleveland Sight Center1909 E 101st St Cleveland, OH 44106	NONE	PC	General Support	5,000
Cleveland State University Foundation 2121 Euclid Avenue UN 501 Cleveland, OH 44115	NONE	PC	Scholarship	2,340
Cloverleaf Local School District 8525 Friendsville Rd Lodi, OH 44254	NONE	PC	Food Insecurity	20,000
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
COALITION OF COMMITTED CHRISTIANS INC 311 W 2ND ST FRANKFORT, KY 40601	NONE	PC	Food Insecurity	5,000
Coatesville Area Senior Center 250 MARTIN LUTHER KING JR BLVD COATESVILLE, PA 19320	NONE	PC	Disaster Recovery	15,000
College Now Greater Cleveland 1500 West 3rd Street Suite 125 Cleveland, OH 44113	NONE	PC	Family Stability	5,000
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
College Now Greater Cleveland 1500 West 3rd Street Suite 125 Cleveland, OH 44113	NONE	PC	Assistance to Cloverleaf Local Schools	14,925
College Now Greater Cleveland 1500 West 3rd Street Suite 125 Cleveland, OH 44113	NONE	PC	Family Stability	50,000
College Now Greater Cleveland 1500 West 3rd Street Suite 125 Cleveland, OH 44113	NONE	PC	Family Stability	25,000
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
COLUMBUS CENTER FOR HUMAN SERVICES INC 540 INDUSTRIAL MILE RD COLUMBUS, OH 43228	NONE	PC	General Support	51
COMMUNITY AIDS NETWORKAKRON PRIDE INITIATIVE 759 W MARKET ST 1ST FLOOR AKRON, OH 44303	NONE	PC	General Support	500
COMMUNITY AIDS NETWORKAKRON PRIDE INITIATIVE 759 W MARKET ST 1ST FLOOR AKRON, OH 44303	NONE	PC	General Support	1,500
<b>Total . . . . .</b>			<b>▶ 3a</b>	3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
COMMUNITY FOOD BANK OF NEW JERSEY INC 31 EVANS TERMINAL HILLSIDE, NJ 07205	NONE	PC	Food Insecurity	25
Community Foundation of Greater Dubuque 700 Locust St Ste 195 Dubuque, IA 52001	NONE	PC	Disaster Recovery	15,000
Community Homeless Outreach & Support Inc 219 Virginia Ave Lebanon, TN 37087	NONE	PC	Family stability	10,000
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
COMMUNITY OF HOPE c/o Cleveland State University Cleveland, OH 44115	NONE	PC	General Support	360
COMPASS Family & Community Services 535 MARMION AVE YOUNGSTOWN, OH 44502	NONE	PC	Family stability	15,000
Council on Foundations 2121 Crystal Drive Ste 700 Arlington, VA 22202	NONE	PC	Membership tools	8,500
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Council on Foundations 2121 Crystal Drive Ste 700 Arlington, VA 22202	NONE	PC	Membership tools	1,500
Creston Canaan United Methodist Church PO Box 1111 Creston, OH 44217	NONE	PC	General Support	50
CREUTZFELDT-JAKOB DISEASE FOUNDATION INC 3634 W MARKET ST SUITE 110 AKRON, OH 44333	NONE	PC	General Support	51
<b>Total . . . . . ▶ 3a</b>				3,715,626



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CROSSROADS HEALTH 8445 MUNSON RD MENTOR, OH 44060	NONE	PC	Food Insecurity	5,000
Cultivate Culinary School & Catering 1403 Prairie Avenue South Bend, IN 46613	NONE	PC	Food Insecurity	5,000
Cuyahoga Community College Foundation 700 CARNEGIE AVE CLEVELAND, OH 44115	NONE	PC	Family Stability	37,500
<b>Total . . . . . ▶ 3a</b>				3,715,626

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Cuyahoga Community College Foundation 700 CARNEGIE AVE CLEVELAND, OH 44115	NONE	PC	Holiday help	1,500
Dare to Care FoodbankP O Box 35458 Louisville, KY 40232	NONE	PC	Food Insecurity	25
Dare to Care FoodbankP O Box 35458 Louisville, KY 40232	NONE	PC	Employee Match	51
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
East Chippewa Church of the Brethren 7207 Chippewa Road Orrville, OH 44667	NONE	PC	General Support	50
EASTERN REGIONAL KIDNEY FOUNDATION INC 4822 MARKET ST STE 240 YOUNGSTOWN, OH 44512	NONE	PC	General Support	50
Ehrbar Angels Foundation 11218 Essex Cir North Royalton, OH 44133	NONE	PC	Safety	750
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Empowering and Strengthening Ohio's People (ESOP) 11890 Fairhill Rd Cleveland, OH 44120	NONE	PC	Family Stability	20,000
Empowering and Strengthening Ohio's People (ESOP) 11890 Fairhill Rd Cleveland, OH 44120	NONE	PC	Family Stability	30,000
Evansville First Seventh-day Adventist Church 41 West Campground Road Evansville, IN 47710	NONE	PC	General Support	50
<b>Total . . . . .</b> ▶ <b>3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
EXCELSIOR COVENANT CHURCH EXCELSIOR MN 19955 EXCELSIOR BLVD EXCELSIOR, MN 55331	NONE	PC	General Support	50
FACING HUNGER FOODBANK INC 1327 7TH AVE HUNTINGTON, WV 25701	NONE	PC	Food Insecurity	25
FAIRFAX RENAISSANCE DEVELOPMENT CORPORATION 8111 QUINCY AVE SUITE 100 CLEVELAND, OH 44104	NONE	PC	Family Stability	35,000
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
FAIRFAX RENAISSANCE DEVELOPMENT CORPORATION 8111 QUINCY AVE SUITE 100 CLEVELAND, OH 44104	NONE	PC	Holiday help	1,500
Fairmount Homes333 Wheat Ridge Dr Ephrata, PA 15722	NONE	PC	General Support	51
Faith in Action Medina County Caregivers 13291 Old Mill Rd Spencer, OH 44275	NONE	PC	General Support	4,125
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
FAMILY & COMMUNITY SERVICES INC 705 OAKWOOD ST STE 221 RAVENNA, OH 44266	NONE	PC	Food Insecurity	5,000
Family Scholar House Inc 403 REG SMITH CIR LOUISVILLE, KY 40208	NONE	PC	Family stability	15,000
Farmers' Legal Action Group 6 West 5th Street St Paul, MN 55102	NONE	PC	Family Stability	50,000
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Farmers' Legal Action Group 6 West 5th Street St Paul, MN 55102	NONE	PC	Disaster Recovery	75,000
Feeding America 35 E WACKER DR STE 2000 CHICAGO, IL 60601	NONE	PC	Food Insecurity	50,000
Feeding America 35 E WACKER DR STE 2000 CHICAGO, IL 60601	NONE	PC	Food Insecurity	450,000
<b>Total . . . . . ▶ 3a</b>				3,715,626



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Feeding America 35 E WACKER DR STE 2000 CHICAGO, IL 60601	NONE	PC	Employee Match	125
Feeding America Kentucky's Heartland Inc PO BOX 821 Elizabethtown, KY 42702	NONE	PC	Food Insecurity	25
Feeding America Kentucky's Heartland Inc PO BOX 821 Elizabethtown, KY 42702	NONE	PC	Food Insecurity	25
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
FEEDING AMERICA SOUTHWEST VIRGINIA 1025 ELECTRIC RD SALEM, VA 24153	NONE	PC	Food Insecurity	25
FEEDING AMERICA WEST MICHIGAN 864 W RIVER CENTER DR NE COMSTOCK PARK, MI 49321	NONE	PC	Food Insecurity	50
FEEDING AMERICA WEST MICHIGAN 864 W RIVER CENTER DR NE COMSTOCK PARK, MI 49321	NONE	PC	Food Insecurity	25
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Feeding Medina County 650 W Smith Road C-8 Medina, OH 44256	NONE	PC	Food Insecurity	15,000
Feeding Medina County 650 W Smith Road C-8 Medina, OH 44256	NONE	PC	Food Insecurity	5,000
Feeding Medina County 650 W Smith Road C-8 Medina, OH 44256	NONE	PC	Employee Match	50
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Feeding Medina County 650 W Smith Road C-8 Medina, OH 44256	NONE	PC	Employee Match	50
Feeding Medina County 650 W Smith Road C-8 Medina, OH 44256	NONE	PC	Food insecurity	2,760
Feeding Medina County 650 W Smith Road C-8 Medina, OH 44256	NONE	PC	Food Insecurity	2,500
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Feeding Medina County 650 W Smith Road C-8 Medina, OH 44256	NONE	PC	Food Insecurity	4,000
Feeding Northeast Florida 1116 Edgewood Ave N Units D and E Jacksonville, FL 32254	NONE	PC	Food insecurity	500
FEEDING TAMPA BAY 4702 TRANSPORT DR BLDG 6 TAMPA, FL 33605	NONE	PC	Food Insecurity	25
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
FIGHT2FEED A CHARITABLE ORGANIZATION NO 175 825 S WAUKEGAN RD UNIT A8 LAKE FOREST, IL 60045	NONE	PC	Food Insecurity	5,000
Florence United Methodist Church 8585 Old Toll Road Florence, KY 41042	NONE	PC	General Support	75
FOOD BANK OF IOWAPO Box 1517 DES MOINES, IA 50305	NONE	PC	Food Insecurity	25
<b>Total . . . . . ▶ 3a</b>				3,715,626

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
FOOD BANK OF IOWAPO Box 1517 DES MOINES, IA 50305	NONE	PC	Employee Match	51
FOOD BANK OF NORTHERN INDIANA 702 CHAPIN ST SOUTH BEND, IN 46601	NONE	PC	Food Insecurity	25
FOOD BANK OF NORTHERN INDIANA 702 CHAPIN ST SOUTH BEND, IN 46601	NONE	PC	Food Insecurity	50
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
FOOD BANK OF NORTHWEST INDIANA INC 6490 BROADWAY MERRILLVILLE, IN 46410	NONE	PC	Food Insecurity	25
FOOD FOR THE HUNGRY INC 1224 E WASHINGTON ST PHOENIX, AZ 85034	NONE	PC	General Support	51
FOODBANK OF MONMOUTH AND OCEAN CTYS INC DBA Fulfil 3300 ROUTE 66 NEPTUNE, NJ 07753	NONE	PC	Food Insecurity	1,500
<b>Total . . . . . ▶ 3a</b>				3,715,626



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Foodshare450 Woodland Avenue Bloomfield, CT 06002	NONE	PC	Employee Match	1,300
Freestore Foodbank Inc 1141 Central Parkway Cincinnati, OH 45202	NONE	PC	Food Insecurity	25
Freestore Foodbank Inc 1141 Central Parkway Cincinnati, OH 45202	NONE	PC	Food Insecurity	25
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
Freestore Foodbank Inc 1141 Central Parkway Cincinnati, OH 45202	NONE	PC	Employee Match	1,000
Freestore Foodbank Inc 1141 Central Parkway Cincinnati, OH 45202	NONE	PC	Employee Match	1,000
Freestore Foodbank Inc 1141 Central Parkway Cincinnati, OH 45202	NONE	PC	Food insecurity	500
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Fulton County HOPEPO BOX 735 ROCHESTER, IN 46975	NONE	PC	Family stability	15,000
Fund for Our Economic Future 4415 Euclid Avenue Suite 203 Cleveland, OH 44103	NONE	PC	Family Stability	75,000
Fund for Our Economic Future 4415 Euclid Avenue Suite 203 Cleveland, OH 44103	NONE	PC	Economic development	40,000
<b>Total . . . . . ▶ 3a</b>				3,715,626

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Gamma Iota SigmaPO Box 1744 Powell, OH 43065	NONE	PC	General Support	10,000
Girl Scouts of North East Ohio One Girl Scout Way Macedonia, OH 44056	NONE	PC	General Support	500
Girl Scouts of North East Ohio One Girl Scout Way Macedonia, OH 44056	NONE	PC	General Support	500
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Give Back Cincinnati 312 Walnut St Ste 3600 Cincinnati, OH 45202	NONE	PC	General Support	500
GLEANERS COMMUNITY FOOD BANK INC 2131 BEAUFAIT ST DETROIT, MI 48207	NONE	PC	Food Insecurity	75
GLEANERS COMMUNITY FOOD BANK INC 2131 BEAUFAIT ST DETROIT, MI 48207	NONE	PC	Food Insecurity	25
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Gleaners Food Bank of Indiana Inc 3737 Waldemere Ave Indianapolis, IN 46241	NONE	PC	Food Insecurity	50
Gleaners Food Bank of Indiana Inc 3737 Waldemere Ave Indianapolis, IN 46241	NONE	PC	Food Insecurity	50
Gloria Dei Lutheran ChurchPO Box 1935 Holmes Beach, FL 34218	NONE	PC	General Support	50
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
God's Pantry Food Bank Inc 1685 JAGGIE FOX WAY LEXINGTON, KY 40511	NONE	PC	Food Insecurity	25
God's Pantry Food Bank Inc 1685 JAGGIE FOX WAY LEXINGTON, KY 40511	NONE	PC	Food Insecurity	15,000
Good Shepherd Presbyterian Church 611 N 2450 E St George, UT 84771	NONE	PC	General Support	51
Total . . . . . ▶ 3a				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Great Lakes Science Center 601 Erieside Avenue Cleveland, OH 44114	NONE	PC	General Support	250
Greater Cleveland Food Bank Inc 15500 South Waterloo Road Cleveland, OH 44110	NONE	PC	Food Insecurity	200
Greater Cleveland Food Bank Inc 15500 South Waterloo Road Cleveland, OH 44110	NONE	PC	Food Insecurity	150
<b>Total . . . . . ▶ 3a</b>				3,715,626



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Greater Cleveland Food Bank Inc 15500 South Waterloo Road Cleveland, OH 44110	NONE	PC	Employee Match	150
Greater Cleveland Food Bank Inc 15500 South Waterloo Road Cleveland, OH 44110	NONE	PC	Employee Match	350
Greater Cleveland Food Bank Inc 15500 South Waterloo Road Cleveland, OH 44110	NONE	PC	Employee Match	3,165
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
GREATER CLEVELAND SPORTS COMMISSION 334 EUCLID AVE STE 100 CLEVELAND, OH 44114	NONE	PC	General Support	4,400
GREATER CLEVELAND SPORTS COMMISSION 334 EUCLID AVE STE 100 CLEVELAND, OH 44114	NONE	PC	General Support	23,153
GREATER CLEVELAND SPORTS COMMISSION 334 EUCLID AVE STE 100 CLEVELAND, OH 44114	NONE	PC	General Support	5,000
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Greater Pittsburgh Community Food Bank 1 N Linden Street Duquesne, PA 15110	NONE	PC	Food Insecurity	25
Greater Pittsburgh Community Food Bank 1 N Linden Street Duquesne, PA 15110	NONE	PC	Food Insecurity	25
Greater Twin Cities United Way 404 S Eighth Street Minneapolis, MN 55404	NONE	PC	Employee Match	150
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
HABITAT FOR HUMANITY INTERNATIONAL INC 322 West Lamar Street Americus, GA 31709	NONE	PC	Family Stability	975
Habitat for Humanity of Greater Indianapolis Inc 3135 N Meridian St Indianapolis, IN 46208	NONE	PC	General Support	5,000
Habitat for Humanity of Greater Indianapolis Inc 3135 N Meridian St Indianapolis, IN 46208	NONE	PC	Food Insecurity	5,000
<b>Total . . . . .</b>			<b>▶ 3a</b>	3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Habitat for Humanity of Illinois Inc 931 W 75th St Suite 137-110 Naperville, IL 60565	NONE	PC	Family Stability	1,800
Habitat for Humanity of Indiana Inc 101 W Ohio St Suite 2000 Indianapolis, IN 46204	NONE	PC	Family Stability	1,325
Habitat for Humanity of Iowa Inc 5191 Maple Dr Suite L Pleasant Hill, IA 50327	NONE	PC	Family Stability	400
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Habitat for Humanity of Medina County 620 E Smith Road E-6A Medina, OH 44256	NONE	PC	Food Insecurity	5,000
Habitat for Humanity of Michigan Inc 618 S Creyts Rd Suite A Lansing, MI 48917	NONE	PC	Family Stability	2,800
Habitat for Humanity of Minnesota 2171 University Ave W Suite 200 St Paul, MN 55114	NONE	PC	Family Stability	1,850
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Habitat for Humanity of Ohio 88 E Broad Street Suite 1800 Columbus, OH 43215	NONE	PC	Family Stability	7,500
Habitat for Humanity of Ohio 88 E Broad Street Suite 1800 Columbus, OH 43215	NONE	PC	General Support	76
Habitat for Humanity of Ohio 88 E Broad Street Suite 1800 Columbus, OH 43215	NONE	PC	Family Stability	10,500
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Habitat for Humanity of Pennsylvania 33 South Seward St York, PA 17404	NONE	PC	Family Stability	6,025
HABITAT FOR HUMANITY OF SUMMIT COUNTY INC 2301 ROMIG RD AKRON, OH 44320	NONE	PC	Family Stability	50,000
HABITAT FOR HUMANITY OF SUMMIT COUNTY INC 2301 ROMIG RD AKRON, OH 44320	NONE	PC	General Support	15,000
<b>Total . . . . . ▶ 3a</b>				3,715,626



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
HABITAT FOR HUMANITY OF SUMMIT COUNTY INC 2301 ROMIG RD AKRON, OH 44320	NONE	PC	Holiday help	1,500
Habitat for Humanity of Tennessee Inc PO Box 10375 Murfreesboro, TN 37129	NONE	PC	Family Stability	2,100
Haven House of Pickaway County Inc PO Box 366 Circleville, OH 43113	NONE	PC	Family stability	5,000
<b>Total . . . . . ▶ 3a</b>				3,715,626

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
HCR MANORCARE INCPO BOX 10086 TOLEDO, OH 43699	NONE	PC	General Support	50
HEALING WARRIORS PROGRAM 1044 W DRAKE RD STE 202 FORT COLLINS, CO 80526	NONE	PC	Food Insecurity	5,000
HEALTHY NEW ALBANY INC 150 W Main St Ste B NEW ALBANY, OH 43054	NONE	PC	Employee Match	51
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
HEART OF WEST MICHIGAN UNITED WAY 118 COMMERCE AVE SW GRAND RAPIDS, MI 49503	NONE	PC	Employee Match	51
Helping Hand of HopePO Box 642 Elizabethtown, KY 42702	NONE	PC	Disaster Recovery	15,000
Helping Harvest117 MORGAN DR READING, PA 19608	NONE	PC	Food Insecurity	50
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
Helping Harvest117 MORGAN DR READING, PA 19608	NONE	PC	Food Insecurity	50
HIGHLAND FOUNDATION FOR EDUCATIONAL EXCELLENCE INC 3880 RIDGE RD MEDINA, OH 44256	NONE	PC	Digital Divide	5,000
HOCKING-ATHENS PERRY COMMUNITY ACTION 3 CARDARAS DR GLOUSTER, OH 45732	NONE	PC	Food Insecurity	75
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
HOCKING-ATHENS PERRY COMMUNITY ACTION 3 CARDARAS DR GLOUSTER, OH 45732	NONE	PC	Food Insecurity	25
HOLY FAMILY HOME7801 DETROIT AVE CLEVELAND, OH 44102	NONE	PC	General Support	51
HOPE RIDGE UNITED METHODIST CHURCH 9870 JOHNNYCAKE RIDGE RD MENTOR, OH 44060	NONE	PC	General Support	51
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
HOPEWELL HOSPICE FOUNDATION OF AMERICA INC 525 ROUTE 70 WEST SUITE B15 LAKEWOOD, NJ 08701	NONE	PC	General Support	50
Hopewell United Methodist Church 852 Hopewell Rd Downingtown, PA 19335	NONE	PC	Family stability	5,000
HOSPICE OF MEDINA COUNTY 17876 SAINT CLAIR AVE CLEVELAND, OH 44110	NONE	PC	General Support	50
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
HOSPICE OF MEDINA COUNTY 17876 SAINT CLAIR AVE CLEVELAND, OH 44110	NONE	PC	General Support	51
HOSPICE OF MEDINA COUNTY 17876 SAINT CLAIR AVE CLEVELAND, OH 44110	NONE	PC	General Support	50
HOSPICE OF MIAMI COUNTY INC 550 SUMMIT AVENUE NO 101 TROY, OH 45373	NONE	PC	General Support	50
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Hospice of the Western Reserve Inc 17876 St Clair Ave Cleveland, OH 44110	NONE	PC	General Support	50
Housing Opportunities of Northern Kentucky Inc 502 FRY ST COVINGTON, KY 41011	NONE	PC	Disaster Recovery	15,000
Housing Research and Advocacy Center 2728 Euclid Avenue Suite 200 Cleveland, OH 44115	NONE	PC	Fair Housing	10,000
<b>Total . . . . . ▶ 3a</b>				3,715,626



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
HUMAN RIGHTS CAMPAIGN FOUNDATION 1640 RHODE ISLAND AVENUE NW WASHINGTON, DC 20036	NONE	PC	General Support	5,000
HUMANE SOCIETY OF RICHLAND COUNTY 3025 PARK AVE W ONTARIO, OH 44906	NONE	PC	General Support	51
ideastream1375 Euclid Avenue Cleveland, OH 44115	NONE	PC	General Support	20,000
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Insurance Industry Charitable Foundation Inc 1999 Avenue of the Stars Suite 110 Los Angeles, CA 90067	NONE	PC	General Support	5,000
Insurance Industry Charitable Foundation Inc 1999 Avenue of the Stars Suite 110 Los Angeles, CA 90067	NONE	PC	Disaster Recovery	5,000
Insurance Industry Charitable Foundation Inc 1999 Avenue of the Stars Suite 110 Los Angeles, CA 90067	NONE	PC	General Support	5,000
<b>Total</b> . . . . .			▶ <b>3a</b>	3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
InVEST127 South Peyton Street Alexandria, VA 22314	NONE	PC	General Support	20,000
Irwin A & Robert D Goodman Community Center 214 WAUBESA ST MADISON, WI 53704	NONE	PC	Family stability	10,000
Isaiah 117 HousePo Box 842 Elizabethton, TN 37644	NONE	PC	Family stability	5,000
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
JD BREAST CANCER FOUNDATION 14837 DETROIT AVE STE 295 CLEVELAND, OH 44107	NONE	PC	General Support	500
JONI AND FRIENDSPO BOX 3333 AGOURA HILLS, CA 91376	NONE	PC	General Support	500
Jordan's Joy4321 E 60TH ST DAVENPORT, IA 52807	NONE	PC	Family stability	5,000
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Junior Achievement of North Central Ohio 4353 Executive Circle NW Canton, OH 44718	NONE	PC	Food Insecurity	5,000
Kentucky Habitat for Humanity Inc 330 N Hubbards Lane 3 Louisville, KY 40207	NONE	PC	Family Stability	1,700
KITTEN KRAZY INC 930 LAFAYETTE RD UNIT A MEDINA, OH 44256	NONE	PC	General Support	50
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
LANCASTER COUNTY AGRICULTURE COUNCIL 1383 Arcadia Rd Lancaster, PA 17601	NONE	PC	Disaster Recovery	6,900
Leadership Medina County 6300 Technology Lane Medina, OH 44256	NONE	PC	General Support	500
LEARNING CLUB of Toledo 5800 Monroe Street Bldg F Ste 5 Sylvania, OH 43560	NONE	PC	Family stability	5,000
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
LEGAL AID SOCIETY OF CLEVELAND 1223 W 6TH ST CLEVELAND, OH 44113	NONE	PC	Food Insecurity	5,000
LeRoy United Methodist Church PO Box 327 Westfield Center, OH 44251	NONE	PC	General Support	350
Leukemia & Lymphoma Society PO Box 772392 Detroit, MI 48277	NONE	PC	Disaster Recovery	5,000
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Liberty Baptist Fellowship 111 North Broadway St Medina, OH 44256	NONE	PC	General Support	50
Life Remodeled2470 Collingwood St Detroit, MI 48206	NONE	PC	Family stability	15,000
Lifecare Hospice1900 Akron Rd Wooster, OH 44691	NONE	PC	General Support	50
<b>Total . . . . . ▶ 3a</b>				3,715,626



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Lifecare Hospice1900 Akron Rd Wooster, OH 44691	NONE	PC	General Support	50
Lifecare Hospice1900 Akron Rd Wooster, OH 44691	NONE	PC	General Support	51
Literacy Volunteers of America Inc 105 W Liberty St Lower Medina, OH 44256	NONE	PC	General Support	1,000
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
LIVING HOPE LUTHERAN CHURCH 2855 W CADILLAC DR FARWELL, MI 48622	NONE	PC	General Support	50
LUPUS FOUNDATION OF AMERICA INC 2121 K ST NW STE 200 WASHINGTON, DC 20037	NONE	PC	General Support	51
LUTHERAN CAMPUS MINISTRIES OF KENT INC 600 S WATER ST KENT, OH 44240	NONE	PC	General Support	51
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Lynch Family Foundation LtdPO Box 44 Waucoma, IA 52171	NONE	PC	Food Insecurity	5,000
Main Street Medina 39 Public Square Suite 305 Medina, OH 44256	NONE	PC	General Support	2,500
Main Street Medina 39 Public Square Suite 305 Medina, OH 44256	NONE	PC	General Support	1,000
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Marion County Family Resource Network 305 WASHINGTON ST FAIRMONT, WV 26554	NONE	PC	Family stability	10,000
MATTHEW 25 OUTREACH CENTER PO BOX 3911 MANSFIELD, OH 44907	NONE	PC	General Support	500
May Dugan Center4115 BRIDGE AVE CLEVELAND, OH 44113	NONE	PC	Food Insecurity	5,000
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
Medina County Fraternal Order of Police Medina Co FOP 204 Medina, OH 44256	NONE	PC	Holiday help	750
Medina County Job and Family Services 232 Northland Dr Medina, OH 44256	NONE	PC	Holiday help	1,500
Medina County Park District Association 6364 Deerview Ln Medina, OH 44256	NONE	PC	Food Insecurity	3,500
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Medina County Police Activities League 555 Independence Drive Medina, OH 44256	NONE	PC	Safety	500
Medina County Police Activities League 555 Independence Drive Medina, OH 44256	NONE	PC	Safety	7,500
Medina County SPCA8790 Guilford Road Seville, OH 44273	NONE	PC	General Support	50
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MEDINA CREATIVE LIVING INC 232 N COURT ST MEDINA, OH 44256	NONE	PC	Holiday help	1,750
MEDINA HOSPITAL FOUNDATION 1000 E WASHINGTON ST MEDINA, OH 44256	NONE	PC	General Support	2,500
MEDINA HOSPITAL FOUNDATION 1000 E WASHINGTON ST MEDINA, OH 44256	NONE	PC	General Support	5,000
<b>Total . . . . .</b> ► <b>3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Mesa Youth Svcs Inc dba Mesa County Ptrs 1169 COLORADO AVE GRAND JCT, CO 81501	NONE	PC	Family stability	10,000
Middletown Community Foundation 300 NORTH MAIN STREET MIDDLETOWN, OH 45042	NONE	PC	Disaster Recovery	15,000
Mid-Ohio Foodbank 3960 Brookham Drive Grove City, OH 43123	NONE	PC	Food Insecurity	150
<b>Total . . . . . ▶ 3a</b>				3,715,626



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
Mid-Ohio Foodbank 3960 Brookham Drive Grove City, OH 43123	NONE	PC	Food Insecurity	125
Mid-Ohio Foodbank 3960 Brookham Drive Grove City, OH 43123	NONE	PC	Employee Match	76
Mid-Ohio Foodbank 3960 Brookham Drive Grove City, OH 43123	NONE	PC	Employee Match	1,664
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Mid-Ohio Foodbank 3960 Brookham Drive Grove City, OH 43123	NONE	PC	Food Insecurity	1,000
Minnesota Valley Action Council 706 N VICTORY DR MANKATO, MN 56001	NONE	PC	Family stability	15,000
Mission 22 17040 PILKINGTON RD STE 200 LAKE OSWEGO, OR 97035	NONE	PC	General Support	51
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Mississippi State UniversityPO Box 5227 Mississippi State, MS 39762	NONE	PC	Scholarship	1,500
MOUNTAINEER FOOD BANK INC 484 ENTERPRISE DR GASSAWAY, WV 26624	NONE	PC	Food Insecurity	75
MOUNTAINEER FOOD BANK INC 484 ENTERPRISE DR GASSAWAY, WV 26624	NONE	PC	Food Insecurity	25
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MYASTHENIA GRAVIS FOUNDATION OF AMERICA INC 290 Turnpike Road Suite 5-315 Westborough, ME 01581	NONE	PC	General Support	76
NATIONAL ARBOR DAY FOUNDATION 211 N 12 ST LINCOLN, NE 68508	NONE	PC	General Support	51
NATIONAL DIVERSITY COUNCIL PO BOX 590258 HOUSTON, TX 77259	NONE	PC	General Support	10,500
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
National Kidney Foundation Inc 30 E 33rd Street New York, NY 10016	NONE	PC	General Support	51
National Multiple Sclerosis Society 733 Third Avenue 3rd Floor New York, NY 10017	NONE	PC	General Support	9,224
NATIONAL PANCREATIC CANCER FOUNDATION PO BOX 1848 LONGMONT, CO 80502	NONE	PC	General Support	51
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
National Voluntary Orgs Active in Disaster (NVOAD) 950 N Washington Street ALEXANDRIA, VA 22314	NONE	PC	Disaster Recovery	18,669
NEW BEGINNINGS CROSSROADS FELLOWSHIP 99 E BUCKEYE ST STE 14 WEST SALEM, OH 44287	NONE	PC	Community Outreach	500
NORTH GEORGIA COMMUNITY FOUNDATION 615 F OAK ST Suite 1300 GAINESVILLE, GA 30501	NONE	PC	Disaster Recovery	5,000
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
NORTHEAST OHIO SPCA INC 9555 BROOKPARK RD PARMA, OH 44129	NONE	PC	General Support	51
Northern Illinois Food Bank 273 Dearborn Court Geneva, IL 60134	NONE	PC	Food Insecurity	50
Northern Illinois Food Bank 273 Dearborn Court Geneva, IL 60134	NONE	PC	Food Insecurity	50
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Northern Illinois Food Bank 273 Dearborn Court Geneva, IL 60134	NONE	PC	Food Insecurity	3,000
Northern Illinois Food Bank 273 Dearborn Court Geneva, IL 60134	NONE	PC	Food Insecurity	900
Northfield Rescue Squad Association 301 5TH ST W NORTHFIELD, MN 55057	NONE	PC	Safety	15,000
<b>Total . . . . . ▶ 3a</b>				3,715,626



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
OH-GO3616 PLUM BROOK CIR SANDUSKY, OH 44870	NONE	PC	Food Insecurity	500
OHIO MCC ACTIVITY CENTERPO BOX 19 KIDRON, OH 44636	NONE	PC	General Support	500
Ohio Northern University Financial Aid Office 525 S Main St Ada, OH 45810	NONE	PC	Scholarship	750
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Ohio State University Foundation 1480 West Lane Avenue Columbus, OH 43221	NONE	PC	Insurance program support	8,334
OHIO TRI COUNTY FOOD ALLIANCE 701 E COLUMBIA ST SPRINGFIELD, OH 45503	NONE	PC	Employee Match	51
Ohio University020 Chubb Hall Athens, OH 45701	NONE	PC	Scholarship	1,500
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
Ontario United Methodist Church 3540 Park Ave W Ontario, OH 44906	NONE	PC	General Support	51
OTTERBEIN UNIVERSITY Attn Business Office WESTERVILLE, OH 43081	NONE	PC	Scholarship	1,500
Our Lady of Sorrows Catholic Church 330 Lebanon Street Monroe, OH 45050	NONE	PC	General Support	250
Total . . . . . ▶ 3a				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
PANCREATIC CANCER ACTION NETWORK INC 1500 ROSECRANS AVE STE 200 MANHATTAN BEACH, CA 90266	NONE	PC	General Support	51
PCS FOR PEOPLE 3126 St Clair Avenue NE Cleveland, OH 44114	NONE	PC	Digital Divide	25,000
Pegasus Therapeutic Riding Academy Inc 8297 BUSTLETON AVE PHILADELPHIA, PA 19152	NONE	PC	Family stability	5,000
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
PELOTONIA450 W BROAD ST COLUMBUS, OH 43215	NONE	PC	General Support	7,500
PGA TOUR INC100 PGA TOUR BLVD PONTE VEDRA, FL 32082	NONE	PC	General Support	215,000
PHILABUNDANCE3616 S GALLOWAY ST PHILADELPHIA, PA 19148	NONE	PC	Food Insecurity	50
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
PHILABUNDANCE3616 S GALLOWAY ST PHILADELPHIA, PA 19148	NONE	PC	Food Insecurity	75
PHILABUNDANCE3616 S GALLOWAY ST PHILADELPHIA, PA 19148	NONE	PC	Food Insecurity	1,500
Philanthropy Ohio 500 South Front Street Suite 900 Columbus, OH 43215	NONE	PC	Disaster Recovery	2,500
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Philanthropy Ohio 500 South Front Street Suite 900 Columbus, OH 43215	NONE	PC	Membership tools	6,485
Philanthropy Ohio 500 South Front Street Suite 900 Columbus, OH 43215	NONE	PC	Membership tools	750
Plant City Fire Rescue 604 E Alexander Street Plant City, FL 33563	NONE	PC	Safety	15,000
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Playhouse Square Foundation 1501 Euclid Avenue Suite 200 Cleveland, OH 44115	NONE	PC	General Support	25,000
Prevail1100 S 9th St Noblesville, IN 46060	NONE	PC	Family stability	10,000
Purdue UniversityOutside Awards West Lafayette, IN 47907	NONE	PC	Scholarship	1,500
<b>Total . . . . . ▶ 3a</b>				3,715,626



**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Refuge of Hope MinistriesPO Box 9361 Canton, OH 44711	NONE	PC	General Support	50
Riverside Nazarene C/O Xenia Nazarene Church Xenia, OH 45385	NONE	PC	General Support	75
Roadrunner Food Bank Inc 5840 Office Blvd NE Albuquerque, NM 87109	NONE	PC	Food Insecurity	5,000
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Saint Anne Catholic Church 139 S First Street Rittman, OH 44270	NONE	PC	General Support	50
Salem Community Pantry Inc PO BOX 222 SALEM, OH 44460	NONE	PC	Food Insecurity	15,000
SALVATION ARMY NATIONAL CORP 615 SLATERS LN ALEXANDRIA, VA 22314	NONE	PC	Holiday help	3,500
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SAM Center413 Lincoln Way East Massillion, OH 44646	NONE	PC	Holiday help	1,500
SAM Center413 Lincoln Way East Massillion, OH 44646	NONE	PC	Holiday help	1,600
SAM Center413 Lincoln Way East Massillion, OH 44646	NONE	PC	Food Insecurity	2,000
<b>Total . . . . . ▶ 3a</b>				3,715,626

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SAMARITANS PURSEPO BOX 3000 BOONE, NC 28607	NONE	PC	General Support	51
SCHUYLKILL UNITED WAY 9 N CENTRE ST POTTSVILLE, PA 17901	NONE	PC	Disaster Recovery	5,000
SECOND HARVEST FOOD BANK OF EAST TENNESSEE 136 HARVEST LN MARYVILLE, TN 37801	NONE	PC	Employee Match	130
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SECOND HARVEST FOOD BANK OF METROLINA INC 500 SPRATT ST STE B CHARLOTTE, NC 28206	NONE	PC	Food Insecurity	25
SECOND HARVEST FOOD BANK OF METROLINA INC 500 SPRATT ST STE B CHARLOTTE, NC 28206	NONE	PC	Food Insecurity	25
SECOND HARVEST FOOD BANK OF METROLINA INC 500 SPRATT ST STE B CHARLOTTE, NC 28206	NONE	PC	Employee Match	130
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Second Harvest Food Bank of Middle Tennessee 331 Great Circle Road Nashville, TN 37228	NONE	PC	Food Insecurity	75
Second Harvest Food Bank of Middle Tennessee 331 Great Circle Road Nashville, TN 37228	NONE	PC	Food Insecurity	50
Second Harvest Food Bank of Middle Tennessee 331 Great Circle Road Nashville, TN 37228	NONE	PC	Employee Match	1,118
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Second Harvest Food Bank of North Central Ohio 5510 Baumhart Rd Lorain, OH 44053	NONE	PC	Food Insecurity	25
Second Harvest Food Bank of North Central Ohio 5510 Baumhart Rd Lorain, OH 44053	NONE	PC	Employee Match	50
Second Harvest Food Bank of North Central Ohio 5510 Baumhart Rd Lorain, OH 44053	NONE	PC	Employee Match	520
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Second Harvest Food Bank of Northwest NC 3655 REED ST WINSTON SALEM, NC 27107	NONE	PC	Food Insecurity	15,000
SECOND HARVEST FOOD BANK OF NW PA 1507 GRIMM DR ERIE, PA 16501	NONE	PC	Food Insecurity	25
SECOND HARVEST FOOD BANK OF NW PA 1507 GRIMM DR ERIE, PA 16501	NONE	PC	Food Insecurity	25
<b>Total . . . . .</b> ▶ <b>3a</b>				3,715,626



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Second Harvest Food Bank of the Mahoning Valley 2805 Salt Springs Road Youngstown, OH 44509	NONE	PC	Food Insecurity	50
Second Harvest Food Bank of the Mahoning Valley 2805 Salt Springs Road Youngstown, OH 44509	NONE	PC	Food Insecurity	50
Second Harvest Foodbank of Central Florida 411 Mercy Drive Orlando, FL 32805	NONE	PC	Food Insecurity	25
<b>Total . . . . . ▶ 3a</b>				3,715,626

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Second Harvest Heartland 1140 Gervaise Avenue St Paul, MN 55109	NONE	PC	Employee Match	299
Shelby County CASAGALPO BOX 4187 SIDNEY, OH 45365	NONE	PC	Family stability	5,000
SHRINERS HOSPITALS FOR CHILDREN PO BOX 31356 TAMPA, FL 33631	NONE	PC	General Support	75
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SMILES FOR SOPHIE FOREVER 31722 LEEWARD CT AVON LAKE, OH 44012	NONE	PC	General Support	51
Society for Handicapped Citizens of Medina County 4283 Paradise Rd Seville, OH 44273	NONE	PC	General Support	2,500
SOPHIAS GRACE FOUNDATION 1377 NORTHUMBERLAND RD COATESVILLE, PA 19320	NONE	PC	General Support	500
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
Spanish American Committee 4407 Lorain Avenue Cleveland, OH 44113	NONE	PC	Food Insecurity	15,000
Spanish American Committee 4407 Lorain Avenue Cleveland, OH 44113	NONE	PC	Family Stability	3,500
Spanish American Committee 4407 Lorain Avenue Cleveland, OH 44113	NONE	PC	Family Stability	1,250
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Spanish American Committee 4407 Lorain Avenue Cleveland, OH 44113	NONE	PC	General Support	500
Spanish American Committee 4407 Lorain Avenue Cleveland, OH 44113	NONE	PC	Family Stability	45,000
Spanish American Committee 4407 Lorain Avenue Cleveland, OH 44113	NONE	PC	Family Stability	75,000
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Spanish American Committee 4407 Lorain Avenue Cleveland, OH 44113	NONE	PC	Holiday help	1,500
ST EMERIC PARISH1860 W 22ND ST CLEVELAND, OH 44113	NONE	PC	General Support	50
ST JUDE CHILDRENS RESEARCH HOSPITAL INC 262 DANNY THOMAS PL MEMPHIS, TN 38105	NONE	PC	General Support	51
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ST JUDE CHILDRENS RESEARCH HOSPITAL INC 262 DANNY THOMAS PL MEMPHIS, TN 38105	NONE	PC	General Support	51
ST JUDE CHILDRENS RESEARCH HOSPITAL INC 262 DANNY THOMAS PL MEMPHIS, TN 38105	NONE	PC	General Support	51
ST JUDE CHILDRENS RESEARCH HOSPITAL INC 262 DANNY THOMAS PL MEMPHIS, TN 38105	NONE	PC	General Support	51
<b>Total</b> . . . . . ▶ <b>3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ST MARYS FOOD BANK ALLIANCE 2831 N 31ST AVE PHOENIX, AZ 85009	NONE	PC	Employee Match	520
ST PETER'S JR HIGH HIGH SCHOOL 104 W 1ST ST MANSFIELD, OH 44902	NONE	PC	General Support	450
St George Antiochian Church 3204 Ridgewood Rd Akron, OH 44333	NONE	PC	General Support	50
<b>Total . . . . . ▶ 3a</b>				3,715,626



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
St Joseph Catholic Church 2643 Waterloo Road Mogadore, OH 44260	NONE	PC	General Support	50
St Raphael Parish 525 Dover Center Road Bay Village, OH 44140	NONE	PC	General Support	50
SUMMA HEALTHPO BOX 2090 AKRON, OH 44309	NONE	PC	General Support	1,250
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
TCN Behavioral Health Services 452 West Market Street Xenia, OH 45385	NONE	PC	Family stability	10,000
Team NEO Foundation 1111 Superior Ave Suite 1600 Cleveland, OH 44114	NONE	PC	Economic development	35,000
THE CANCER FOUNDATION INC 3320 OLD JEFFERSON RD STE 700 PO BO ATHENS, GA 30607	NONE	PC	General Support	76
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
The Centre for Global Inclusion 2124 Water Rail Avenue North Las Vegas, NV 89084	NONE	PC	General Support	10,000
THE CHILDRENS CENTER OF MEDINA COUNTY 724 E SMITH RD MEDINA, OH 44256	NONE	PC	General Support	250
The Clinic143 CHURCH ST PHOENIXVILLE, PA 19460	NONE	PC	Disaster Recovery	15,000
<b>Total . . . . . ▶ 3a</b>				3,715,626

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
THE COMMUNITY FOUNDATION OF MIDDLE TN INC 3833 CLEGHORN AVE STE 400 NASHVILLE, TN 37215	NONE	PC	Disaster Recovery	75,000
THE DIVERSITY CENTER OF NORTHEAST OHIO INC 3659 GREEN RD STE 220 CLEVELAND, OH 44122	NONE	PC	General Support	3,500
The Fair Housing Center326 N Erie St TOLEDO, OH 43604	NONE	PC	Fair Housing	10,000
<b>Total . . . . .</b> ► <b>3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
The Fort Wayne Rescue Mission Ministries Inc 404 E Washington Blvd FORT WAYNE, IN 46802	NONE	PC	Family stability	10,000
The Ohio State University 2nd Fl Student Acad Svcs Bldg Columbus, OH 43210	NONE	PC	Scholarship	1,500
The Plexus Education Foundation Inc PO Box 91697 Cleveland, OH 44101	NONE	PC	General Support	2,500
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
The Salvation Army 440 West Nyack Road West Nyack, NY 10994	NONE	PC	Holiday help	4,000
The University of Akron Dept of Dvlpmt InfoCision Stadium Akron, OH 44325	NONE	PC	General Support	1,500
The University of Akron Dept of Dvlpmt InfoCision Stadium Akron, OH 44325	NONE	PC	General Support	2,000
<b>Total . . . . . ▶ 3a</b>				3,715,626

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
The University of Akron Dept of Dvlpmt InfoCision Stadium Akron, OH 44325	NONE	PC	General Support	1,500
The Winner's Club of Calhoun Inc 958 Sugar Valley Road NE Calhoun, GA 30703	NONE	PC	Disaster Recovery	10,000
TIDEWELL HOSPICE INC 5955 RAND BLVD SARASOTA, FL 34238	NONE	PC	General Support	51
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Toledo Northwestern Ohio Food Bank 24 East Woodruff Ave Toledo, OH 43604	NONE	PC	Food Insecurity	50
Toledo Northwestern Ohio Food Bank 24 East Woodruff Ave Toledo, OH 43604	NONE	PC	Food Insecurity	50
Toledo Northwestern Ohio Food Bank 24 East Woodruff Ave Toledo, OH 43604	NONE	PC	Employee Match	260
<b>Total . . . . . ▶ 3a</b>				3,715,626



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
TOURETTE ASSOCIATION OF AMERICA INC 42-40 BELL BOULEVARD BAYSIDE, NY 11361	NONE	PC	General Support	51
Towards Employment Inc 1255 Euclid Ave Suite 300 Cleveland, OH 44115	NONE	PC	Family Stability	30,000
Towards Employment Inc 1255 Euclid Ave Suite 300 Cleveland, OH 44115	NONE	PC	Family Stability	100,000
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
TRI-COUNTY SCHOLARSHIP FUND 14 WEST MAIN STREET MENDHAM, NJ 07945	NONE	PC	General Support	7,500
Truly Reaching You IncPO Box 814 Akron, OH 44309	NONE	PC	Family stability	10,000
UNC-CHSuite 2215 SASB N Chapel Hill, NC 27599	NONE	PC	Scholarship	1,500
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Union Gospel Mission Assoc of St Paul 77 9th St E Saint Paul, MN 55101	NONE	PC	Family stability	10,000
United Cerebral Palsy of Greater Cleveland 10011 Euclid Ave Cleveland, OH 44106	NONE	PC	General Support	10,000
United Way of Ashland County Ohio Inc 132 W Main Street Lower Lvl Ashland, OH 44805	NONE	PC	Employee Match	130
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
United Way of Bradford County 24 MAIN ST Suite 1 Towanda, PA 18848	NONE	PC	Disaster Recovery	15,000
United Way of Central and Northeastern Connecticut 30 Laurel Street Hartford, CT 06106	NONE	PC	Employee Match	50
United Way of Central and Northeastern Connecticut 30 Laurel Street Hartford, CT 06106	NONE	PC	Employee Match	1,222
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
United Way of Central Ohio 360 S Third Street Columbus, OH 43215	NONE	PC	Employee Match	50
United Way of Central Ohio 360 S Third Street Columbus, OH 43215	NONE	PC	Employee Match	51
United Way of Central Ohio 360 S Third Street Columbus, OH 43215	NONE	PC	Employee Match	1,001
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
UNITED WAY OF DELAWARE COUNTY INC PO Box 319 Delaware, OH 43015	NONE	PC	Employee Match	25
United Way of Greater Cleveland 1331 Euclid Ave Cleveland, OH 44115	NONE	PC	Employee Match	150
United Way of Greater Cleveland 1331 Euclid Ave Cleveland, OH 44115	NONE	PC	Employee Match	60
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
United Way of Greater Cleveland 1331 Euclid Ave Cleveland, OH 44115	NONE	PC	Employee Match	5,000
United Way of Greater Cleveland 1331 Euclid Ave Cleveland, OH 44115	NONE	PC	Employee Match	1,352
United Way of Greater Lorain County Inc 642 Broadway Ave Lorain, OH 44052	NONE	PC	Employee Match	130
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
United Way of Greater Stark County Inc 401 Market Avenue N Ste 300 Canton, OH 44702	NONE	PC	Employee Match	2,080
UNITED WAY OF GREATER TOLEDO 424 JACKSON ST TOLEDO, OH 43604	NONE	PC	Food Insecurity	5,000
UNITED WAY OF GREATER TOLEDO 424 JACKSON ST TOLEDO, OH 43604	NONE	PC	Food Insecurity	5,000
<b>Total . . . . . ▶ 3a</b>				3,715,626



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
UNITED WAY OF GREATER TOLEDO 424 JACKSON ST TOLEDO, OH 43604	NONE	PC	Employee Match	51
United Way of Jefferson County 511 North Fourth Street Steubenville, OH 43952	NONE	PC	Disaster Recovery	15,000
United Way of Lancaster County 1910 Harrington Dr Suite A Lancaster, PA 17601	NONE	PC	Employee Match	650
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
United Way of Medina County 728 East Smith Rd Suite D Medina, OH 44256	NONE	PC	Family Stability	2,500
United Way of Medina County 728 East Smith Rd Suite D Medina, OH 44256	NONE	PC	Employee Match	50
United Way of Medina County 728 East Smith Rd Suite D Medina, OH 44256	NONE	PC	Employee Match	150
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
United Way of Medina County 728 East Smith Rd Suite D Medina, OH 44256	NONE	PC	Employee Match	10,521
United Way of Medina County 728 East Smith Rd Suite D Medina, OH 44256	NONE	PC	General Support	250
UNITED WAY OF RICHLAND COUNTY 35 N PARK STREET MANSFIELD, OH 44902	NONE	PC	Employee Match	130
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
United Way of Summit & Medina 37 North High Street Akron, OH 44308	NONE	PC	School supplies	3,800
United Way of Summit & Medina 37 North High Street Akron, OH 44308	NONE	PC	Employee Match	325
United Way of Summit County Inc 37 N High Street Akron, OH 44308	NONE	PC	Employee Match	26
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
United Way of Summit County Inc 37 N High Street Akron, OH 44308	NONE	PC	Employee Match	2,509
United Way of Sumner County 1531 Hunt Club Boulevard Suite 110 Gallatin, TN 37066	NONE	PC	Employee Match	468
United Way of the Capital Region 2235 Millennium Way Enola, PA 17025	NONE	PC	Disaster Recovery	15,000
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
United Way of Union County Inc 648 Clymer Road Suite 120 Marysville, OH 43040	NONE	PC	Employee Match	150
United Way of Wayne and Holmes Counties Inc 215 South Walnut Street Wooster, OH 44691	NONE	PC	Employee Match	4,000
United Way of York County 800 E King St York, PA 17403	NONE	PC	Employee Match	51
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
United Way of York County 800 E King St York, PA 17403	NONE	PC	Employee Match	130
University Hospitals Case Medical Center 11100 Euclid Ave Cleveland, OH 44106	NONE	PC	General Support	51
University of Kentucky Student Financial Aid Office Lexington, KY 40506	NONE	PC	Scholarship	1,500
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
University of Wisconsin-Madison Third Party Billing Madison, WI 53715	NONE	PC	Scholarship	1,500
VICTORY TEMPLE INCPO BOX 2593 SANDUSKY, OH 44871	NONE	PC	Food Insecurity	500
Village of Westfield Center 6701 Greenwich Road Westfield Center, OH 44251	NONE	PC	General Support	3,000
<b>Total . . . . . ▶ 3a</b>				3,715,626



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Voices of Hope - Lexington Inc 450 OLD VINE ST STE 101 LEXINGTON, KY 40507	NONE	PC	Family stability	10,000
Wayne County Children Services 2534 Burbank Rd Wooster, OH 44691	NONE	PC	Holiday help	1,500
WAYNE STATE UNIVERSITY Office of the Bursar Welcome Ctr DETROIT, MI 48202	NONE	PC	Scholarship	1,500
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
WEST OHIO FOOD BANKPO Box 1566 LIMA, OH 45802	NONE	PC	Food Insecurity	25
Westbrook Health Services2121 7TH ST PARKERSBURG, WV 26101	NONE	PC	Family stability	10,000
WESTERN RESERVE HISTORICAL SOCIETY 10825 EAST BLVD CLEVELAND, OH 44106	NONE	PC	General Support	5,000
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Westerville Area Resource Ministry 150 Heatherdown Drive Westerville, OH 43081	NONE	PC	General Support	51
Westfield Employee Financial Hardship Fund One Park Circle Westfield Center, OH 44251	NONE	PC	Disaster Recovery	117,650
Westfield Fire and Rescue 8975 North Leroy Road Westfield Center, OH 44251	NONE	PC	Safety	1,000
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
WESTMORELAND COUNTY FOOD BANK INC 100 DEVONSHIRE DR DELMONT, PA 15626	NONE	PC	Food Insecurity	50
WOMEN IN SPORTS AND EVENTS INC 244 FIFTH AVENUE NO 2087 NEW YORK, NY 10001	NONE	PC	General Support	2,125
WOUNDED WARRIOR PROJECT INC 4899 BELFORT RD STE 300 JACKSONVILLE, FL 32256	NONE	PC	General Support	51
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
YOUNG MENS CHRISTIAN ASSOCIATION OF AKRON OHIO 50 S MAIN ST STE LL100 AKRON, OH 44308	NONE	PC	General Support	2,500
Young Men's Christian Association of Southwestern 222 NW 6TH ST EVANSVILLE, IN 47708	NONE	PC	General Support	76
YOUNG MENS CHRISTIAN ASSOC OF WEST CENTRAL FL INC 3620 CLEVELAND HEIGHTS BLVD LAKELAND, FL 33803	NONE	PC	General Support	76
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
YOUTH FOR CHRIST USA INC PO BOX 323 WADSWORTH, OH 44282	NONE	PC	Disaster Recovery	51
Youth Opportunities Unlimited (YOU) The Halle Building Cleveland, OH 44115	NONE	PC	Family Stability	4,500
Youth Opportunities Unlimited (YOU) The Halle Building Cleveland, OH 44115	NONE	PC	Family Stability	100,000
<b>Total . . . . . ▶ 3a</b>				3,715,626

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
YWCA Greater Cleveland 4019 Prospect Ave Cleveland, OH 44103	NONE	PC	General Support	6,500
YWCA Nashville & Middle Tennessee 1608 WOODMONT BLVD NASHVILLE, TN 37215	NONE	PC	Family stability	10,000
Zion Evangelical Lutheran Church 2233 Abbeyville Rd Valley City, OH 44280	NONE	PC	General Support	50
<b>Total . . . . . ▶ 3a</b>				3,715,626

**Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.**

## **TY 2020 Depreciation Schedule**

**Name:** The Westfield Insurance Foundation

**EIN:** 20-3816760



**TY 2020 General Explanation Attachment****Name:** The Westfield Insurance Foundation**EIN:** 20-3816760**General Explanation Attachment**

Identifier	Return Reference	Explanation	
1	Election to Forego Net Operating Loss	Form 990-T IRC Section 172(b)(3)	Taxpayer incurred a net operating loss in the tax year ended 12/31/2020, w hich is entitled to a five-year carryback of such loss under IRC Sec. 172(b)(1)(D). Pursuant to IRC Sec. 172(b)(3) under Rev. Proc. 2020-24, taxpayer hereby elects to relinquish the carryback period w ith respect to any regular tax and AMT net operating losses.

**TY 2020 Investments Corporate Stock Schedule****Name:** The Westfield Insurance Foundation**EIN:** 20-3816760**Investments Corporation Stock Schedule**

<b>Name of Stock</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
ISHARES - MSCI EAFE IDX FD	2,724,472	2,724,472
ISHARES - RUSSELL MIDCAP VALUE	3,714,732	3,714,732
ISHARES - RUSSLE MIDCAP GROWTH	3,519,253	3,519,253
ISHARES - RUSSELL 1000 VALUE	3,791,660	3,791,660
ISHARES - RUSSELL 1000 GROWTH	3,628,192	3,628,192
ISHARES - S&P SMALLCAP 600 VAL	3,461,367	3,461,367
ISHARES - S&P SMALLCAP 600 GRO	2,845,822	2,845,822
VANGUARD - EMERGING MKT ETF	1,924,424	1,924,424

**TY 2020 Investments Government Obligations Schedule****Name:** The Westfield Insurance Foundation**EIN:** 20-3816760**US Government Securities - End  
of Year Book Value:**

5,885,443

**US Government Securities - End  
of Year Fair Market Value:**

5,885,443

**State & Local Government  
Securities - End of Year Book  
Value:****State & Local Government  
Securities - End of Year Fair  
Market Value:**

## TY 2020 Investments - Other Schedule

**Name:** The Westfield Insurance Foundation

**EIN:** 20-3816760

### Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
GP PARTNERS SMF III, LP	FMV	4,811,250	4,811,250
PACIFIC PVT EQTY OPP FD II, LP	FMV	1,384,152	1,384,152

**TY 2020 Legal Fees Schedule****Name:** The Westfield Insurance Foundation**EIN:** 20-3816760

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
CUSTODIAL FEES	2,411	2,411	0	0

**TY 2020 Other Expenses Schedule****Name:** The Westfield Insurance Foundation**EIN:** 20-3816760**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
SOFTWARE EXPENSE	40,485	0	0	40,485
OFFICE EXPENSE	4,160	0	0	4,160
BANK FEES	458	458	0	0
INSURANCE	248	0	0	248

**TY 2020 Other Income Schedule****Name:** The Westfield Insurance Foundation**EIN:** 20-3816760**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
GoldPoint Ptrs Select Manager Fund III	0	7,779	0
GoldPoint Ptrs Select Mgr Fund III AIV		4,325	
Pacific Private Equity Opps Fund II		-37,580	

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -	DLN: 93491314019081
TY 2020 Other Increases Schedule			
Name: The Westfield Insurance Foundation			
EIN: 20-3816760			
Other Increases Schedule			
Description			Amount
UNREALIZED GAIN			3,054,269



**TY 2020 Other Liabilities Schedule****Name:** The Westfield Insurance Foundation**EIN:** 20-3816760

Description	Beginning of Year - Book Value	End of Year - Book Value
DUE TO OHIO FARMERS	0	38,738

**TY 2020 Other Professional Fees Schedule****Name:** The Westfield Insurance Foundation**EIN:** 20-3816760

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
CONSULTING FEES	17,250	17,250	0	0

**TY 2020 Taxes Schedule****Name:** The Westfield Insurance Foundation**EIN:** 20-3816760**Taxes Schedule**

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PAYROLL TAXES	23,756	0	0	23,756
FEDERAL TAXES	5,000	0	0	