

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93491124007281			
Form 990-PF		Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation ▶ Do not enter social security numbers on this form as it may be made public. ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.			OMB No. 1545-0052		
Department of the Treasury Internal Revenue Service					2020		
Open to Public Inspection							
For calendar year 2020, or tax year beginning 01-01-2020, and ending 12-31-2020							
Name of foundation THE MICHELLE WIGHTMAN-KARRIE WIEBER CHARITABLE FOUNDATION				A Employer identification number 34-1831533			
Number and street (or P.O. box number if mail is not delivered to street address) 100 E WATER STREET			Room/suite	B Telephone number (see instructions)			
City or town, state or province, country, and ZIP or foreign postal code SANDUSKY, OH 44870				C If exemption application is pending, check here ▶ <input type="checkbox"/>			
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change				D 1. Foreign organizations, check here..... ▶ <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ... ▶ <input type="checkbox"/>			
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation				E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ <input type="checkbox"/>			
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 7,073,604		J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ <input type="checkbox"/>			
Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)				(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1	Contributions, gifts, grants, etc., received (attach schedule)	435				
	2	Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments	2,131	2,131			
	4	Dividends and interest from securities	138,461	138,461			
	5a	Gross rents					
	b	Net rental income or (loss) _____					
	6a	Net gain or (loss) from sale of assets not on line 10 _____ 906,036	144,639				
	b	Gross sales price for all assets on line 6a _____					
	7	Capital gain net income (from Part IV, line 2)		146,942			
	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances _____					
Operating and Administrative Expenses	b	Less: Cost of goods sold					
	c	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)	10,065				
	12	Total. Add lines 1 through 11	295,731	287,534			
	13	Compensation of officers, directors, trustees, etc.					
	14	Other employee salaries and wages					
	15	Pension plans, employee benefits					
	16a	Legal fees (attach schedule)					
	b	Accounting fees (attach schedule)					
	c	Other professional fees (attach schedule)	45,957	43,865		2,092	
	17	Interest					
	18	Taxes (attach schedule) (see instructions)					
	19	Depreciation (attach schedule) and depletion					
	20	Occupancy					
	21	Travel, conferences, and meetings					
	22	Printing and publications					
23	Other expenses (attach schedule)	3,522					
24	Total operating and administrative expenses. Add lines 13 through 23	49,479	43,865		2,092		
25	Contributions, gifts, grants paid	295,001				295,001	
26	Total expenses and disbursements. Add lines 24 and 25	344,480	43,865			297,093	
	27	Subtract line 26 from line 12:					
	a	Excess of revenue over expenses and disbursements	-48,749				
	b	Net investment income (if negative, enter -0-)		243,669			
	c	Adjusted net income (if negative, enter -0-)					
For Paperwork Reduction Act Notice, see instructions.				Cat. No. 11289X		Form 990-PF (2020)	

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	1 Cash—non-interest-bearing			
	2 Savings and temporary cash investments	447,616	542,315	542,315
	3 Accounts receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	4 Pledges receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U.S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)	2,878,724	2,881,413	4,590,717
	c Investments—corporate bonds (attach schedule)	2,031,532	1,885,395	1,940,572
	11 Investments—land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)			
	14 Land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
15 Other assets (describe ▶ _____)				
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	5,357,872	5,309,123	7,073,604	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)			
	23 Total liabilities (add lines 17 through 22)		0	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input type="checkbox"/> and complete lines 24, 25, 29 and 30.			
	24 Net assets without donor restrictions			
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds	5,357,872	5,309,123	
	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds			
	29 Total net assets or fund balances (see instructions)	5,357,872	5,309,123	
30 Total liabilities and net assets/fund balances (see instructions) .	5,357,872	5,309,123		

Part III Analysis of Changes in Net Assets or Fund Balances		
1 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)	1	5,357,872
2 Enter amount from Part I, line 27a	2	-48,749
3 Other increases not included in line 2 (itemize) ▶ _____	3	
4 Add lines 1, 2, and 3	4	5,309,123
5 Decreases not included in line 2 (itemize) ▶ _____	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	6	5,309,123

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.)
1a			

(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)
a			
b			
c			
d			
e			

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	
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss) $\left\{ \begin{array}{l} \text{If gain, also enter in Part I, line 7} \\ \text{If (loss), enter -0- in Part I, line 7} \end{array} \right\}$	2	146,942
	3	
3 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		

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**

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

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

1a	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	Reserved.	1	3,387
c	All other domestic foundations enter 1.39% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	
3	Add lines 1 and 2.	3	3,387
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-.	5	3,387
6	Credits/Payments:		
a	2020 estimated tax payments and 2019 overpayment credited to 2020	6a	2,200
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d.	7	2,200
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached.	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed .	9	1,187
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid .	10	
11	Enter the amount of line 10 to be: Credited to 2021 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	No
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>	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. <input type="checkbox"/> \$ _____ (2) On foundation managers. <input type="checkbox"/> \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input type="checkbox"/> \$ _____		
2 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>	2	No
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	3	No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>	5	No
6 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?	6	Yes
7 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>	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> OH		
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>	8b	Yes
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2020 or the taxable year beginning in 2020? See the instructions for Part XIV. <i>If "Yes," complete Part XIV</i>	9	No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>	10	No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions.	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>WIGHTMAN-WIEBER-FOUNDATION.ORG</u>	13	Yes	
14	The books are in care of ► <u>CIVISTA WEALTH MANAGEMENT</u> Telephone no. ► <u>(419) 625-8424</u>			

Located at ► 100 E WATER STREET SANDUSKY OH ZIP+4 ► 44870

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here	<input type="checkbox"/>		
	and enter the amount of tax-exempt interest received or accrued during the year	► 15		
16	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?	16	Yes	No
	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.

		Yes	No
1a	During the year did the foundation (either directly or indirectly):		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <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 type="checkbox"/> Yes <input checked="" 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? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 1a(1)–(6), did any 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	1b	
	Organizations relying on a current notice regarding disaster assistance check here. ► <input type="checkbox"/>		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2020?	1c	
2	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)):		
a	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	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions.)	2b	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ► 20____, 20____, 20____, 20____		
3a	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	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.)	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	No
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?	4b	No

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

5a	During the year did the foundation pay or incur any amount to:		Yes	No
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 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	If any answer is "Yes" to 5a(1)–(5), did any 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		5b	
	Organizations relying on a current notice regarding disaster assistance check here.	<input type="checkbox"/>		
c	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).			
6a	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	6b	No
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			
	If "Yes" to 6b, file Form 8870.			
7a	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	7b	
b	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?			
8	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

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total 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
NONE		
Total 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
1	
2	
3	
4	

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
1 N/A	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ►	

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities.	1a	6,542,660
b	Average of monthly cash balances.	1b	369,957
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	6,912,617
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	
2	Acquisition indebtedness applicable to line 1 assets.	2	
3	Subtract line 2 from line 1d.	3	6,912,617
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	103,689
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	6,808,928
6	Minimum investment return. Enter 5% of line 5.	6	340,446

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.)

1	Minimum investment return from Part X, line 6.	1	340,446
2a	Tax on investment income for 2020 from Part VI, line 5.	2a	3,387
b	Income tax for 2020. (This does not include the tax from Part VI.).	2b	
c	Add lines 2a and 2b.	2c	3,387
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	337,059
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	337,059
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	337,059

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	297,093
b	Program-related investments—total from Part IX-B.	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	297,093
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	297,093

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
1 Distributable amount for 2020 from Part XI, line 7				337,059
2 Undistributed income, if any, as of the end of the 2020:				
a Enter amount for 2019 only.			43,063	
b Total for prior years: 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2020:				
a From 2015.				
b From 2016.				
c From 2017.				
d From 2018.				
e From 2019.				
f Total of lines 3a through e.				
4 Qualifying distributions for 2020 from Part XII, line 4: ► \$ 297,093				
a Applied to 2019, but not more than line 2a			43,063	
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2020 distributable amount.				254,030
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2020. (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b Prior years' undistributed income. Subtract line 4b from line 2b.				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.				
d Subtract line 6c from line 6b. Taxable amount—see instructions.				
e Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount—see instructions.				
f Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020.				83,029
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).				
8 Excess distributions carryover from 2015 not applied on line 5 or line 7 (see instructions).				
9 Excess distributions carryover to 2021. Subtract lines 7 and 8 from line 6a.				
10 Analysis of line 9:				
a Excess from 2016.				
b Excess from 2017.				
c Excess from 2018.				
d Excess from 2019.				
e Excess from 2020.				

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

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:

WIGHTMAN WIEBER CHARITABLE FOUND
ATTN STEPHANIE LAWRENCE CIVISTA
100 E WATER ST
SANDUSKY, OH 44870
(419) 625-8424
SMLAWRENCE@CIVISTA.BANK

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

A COMPLETED GRANT APPLICATION INCLUDES A PROPOSAL NARRATIVE, A BUDGET FORM AND A 501(C) (3) IRS DETERMINATION LETTER OR GROUP EXEMPTION LETTER. APPLICATIONS ARE AVAILABLE AT THE SANDUSKY ERIE COUNTY COMMUNITY FOUNDATION OFFICE OR ONLINE AT WWW.SANDUSKYFOUNDATION.ORG.

c Any submission deadlines:

COMPLETED APPLICATIONS MUST BE RECEIVED BY 5:00 PM ON MARCH 1 AND SEPTEMBER 1.

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

GRANT PROJECTS MUST SERVE ERIE COUNTY RESIDENTS. ORGANIZATIONS MUST BE DETERMINED TO BE TAX EXEMPT BY THE IRS UNDER SECTION 501(C)(3). CHURCHES, SCHOOLS, GOVERNMENTAL OR OTHER ENTITIES COVERED BY A GROUP EXEMPTION ARE ELIGIBLE FOR FUNDING BUT MUST PROVIDE A COPY OF THE GROUP EXEMPTION LETTER AND DOCUMENTATION OF THE ORGANIZATION'S INCLUSION WITHIN THE GROUP. GENERALLY, GRANTS ARE NOT MADE FOR ADVERTISING OR SPONSORSHIPS; ANNUAL CAMPAIGNS; DEBT REDUCTION; MEDICAL OR OTHER RESEARCH ORGANIZATIONS; POLITICAL PURPOSES OR LOBBYING ACTIVITIES; ROUTINE OPERATING EXPENSES FOR ONGOING PROGRAMS; SALARIES/BENEFITS OF ORGANIZATION STAFF; SECTARIAN RELIGIOUS PURPOSES; TICKETS OR ADVERTISING FOR FUNDRAISING EVENTS.

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

Recipient Name and address (home or business)	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
a <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	295,001
b <i>Approved for future payment</i> See Additional Data Table				
Total			▶ 3b	385,500

Enter gross amounts unless otherwise indicated.

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

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See instructions.)

Form **990-PF** (2020)

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

		Yes	No
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1a(1)	No
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1a(2)		No
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1b(1)	No
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1b(2)		No
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1b(3)		No
--------------	--	-----------

1b(4)		No
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1b(5)		No
--------------	--	-----------

1b(6)		No
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1c		No
-----------	--	-----------

value
ue[illegible]

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations 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**

2021-04-26

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 KEVIN D KIEFFER CPA	Preparer's Signature	Date 2021-04-26	Check if self-employed <input type="checkbox"/>	PTIN P00569226
Firm's name ▶ PAYNE NICKLES & COMPANY				Firm's EIN ▶ 34-1664586
Firm's address ▶ 422 W MARKET ST SANDUSKY, OH 448702410				Phone no. (419) 625-4942

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
DARLENE LOWERY	TRUSTEE 1.00	0	0	0
PO BOX 170 BERLIN HEIGHTS, OH 44814				
ANN MURRAY	TRUSTEE 1.00	0	0	0
639 MARINIER VILLAGE HURON, OH 44839				
RHONDA WATT	TRUSTEE 1.00	0	0	0
1200 RIVERSIDE DR HURON, OH 44839				
GENE KIDWELL	PRESIDENT 1.00	0	0	0
112 42ND ST SANDUSKY, OH 44870				
JENNIFER CHAPMAN	VICE PRESIDE 1.00	0	0	0
812 WAYNE ST SANDUSKY, OH 44870				
KEVIN LUTZ	SECRETARY/TR 1.00	0	0	0
1813 LAKE FOREST DR HURON, OH 44839				
JUSTIN HARRIS	TRUSTEE 1.00	0	0	0
237 W WASHINGTON ROW SANDUSKY, OH 44870				
TRICIA PATTEN	TRUSTEE 1.00	0	0	0
3610 MAPLE AVE CASTALIA, OH 44824				
JIM MURRAY	TRUSTEE 1.00	0	0	0
617 CHIPPEWA HURON, OH 44839				

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)				
a <i>Paid during the year</i>				
FIRELANDS POSITIVE PEOPLE 1073 WAYNE TRAIL VERMILION, OH 44089		PC	FIRELANDS POSITIVE PEOPLE	1,000
SANDUSKY CITY SCHOOLS 407 DECATUR ST SANDUSKY, OH 44870		GOV	KARLENN WIEBER SCHOLARSHIP	2,000
BGSU FOUNDATION 132 ADMINISTRATION BLDG BOWLING GREEN, OH 43403		GOV	FIRELANDS ALLIED HEALTH & SCIENCES	5,000
Total ▶ 3a				295,001

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)				
a <i>Paid during the year</i>				
ERIE COUNTY COUMMUNITY FOUNDATION 135 E WASHINGTON ROW SANDUSKY, OH 44870		GOV	RISE PROGRAM	5,000
ERIE COUNTY COMMUNITY FOUNDATION 135 E WASHINGTON ROW SANDUSKY, OH 44870		PC	SANDUSKY CITY SCHOOLS-JR ART ACADEMY	5,000
CITY OF SANDUSKY222 MEIGS ST SANDUSKY, OH 44870		GOV	SANDUSKY BAY PATHWAY	30,000
Total ▶ 3a				295,001

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)				
a <i>Paid during the year</i>				
SANDUSKY ELKS LODGE 285 120 E ADAMS ST SANDUSKY, OH 44870		PC	FISHING DERBY	1,500
SANDUSKY CITY SCHOOLS 407 DECATUR ST SANDUSKY, OH 44870		GOV	WIGHTMAN-WEIBER KIDS FEST	5,000
BGSU FOUNDATION 132 ADMINISTRATION BLDG BOWLING GREEN, OH 43403		GOV	GEORGE MYLANDER SCHOLARSHIP NEW	5,000
Total ▶ 3a				295,001

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)				
a <i>Paid during the year</i>				
FIRELANDS REGIONAL MEDICAL CENTER 1111 HAYES AVE SANDUSKY, OH 44870		PC	CENTER FOR WOMEN AND NEWBORNS	7,500
SANDUSKY STATE THEATRE 107 COLUMBUS AVE SANDUSKY, OH 44870		PC	CAPITAL CONTRIBUTION	15,000
SANDUSKY EDUCATION FOUNDATION 100 E WATER ST SANDUSKY, OH 44870		GOV	SANDUSKY AQUATIC CENTER	10,000
Total ▶ 3a				295,001

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)				
a <i>Paid during the year</i>				
STEIN HOSPICE SERVICES INC 1200 SYCAMORE LN SANDUSKY, OH 44870		PC	DONATION	500
ERIE COUNTY COMMUNITY FOUNDATION 135 E WASHINGTON ROW SANDUSKY, OH 44870		PC	EMERGENCY RESPONSE FUND	5,000
MARGARETTA 5TH GRADE SCIENCE FUND 5906 W BOGART RD CASTALIA, OH 44824		GOV	HOME FIRE CAMPAIGN	3,000
Total ▶ 3a				295,001

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)				
a <i>Paid during the year</i>				
SANDUSKY STATE THEATRE 107 COLUMBUS AVE SANDUSKY, OH 44870		PC	SANDUSKY PRIDE	1,000
BAYSHORE COUNSELING 1634 SYCAMORE LINE SANDUSKY, OH 44870		PC	TF-CBT CERTIFICATION	1,200
SANDUSKY AREA MARITIME MUSEUM 125 MEIGS ST SANDUSKY, OH 44870		PC	SUMMER CAMP	1,265
Total ▶ 3a				295,001

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)				
a <i>Paid during the year</i>				
LAKE ERIE FOUNDATION 236 WALNUT AVE LAKESIDE, OH 44870		PC	PROJECT LIFE SAVERS	1,500
VACATIONLAND SWIM CLUB 100 E WATER ST SANDUSKY, OH 44870		PC	EQUIPMENT REPLACEMENT	1,632
MARGARETTA POLAR BEAR SWIM CLUB 209 LOWELL ST CASTALIA, OH 44824		GOV	SWIM CLUB	2,000
Total ▶ 3a				295,001

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)				
a <i>Paid during the year</i>				
AMERICAN RED CROSS 404 COLUMBUS AVE SANDUSKY, OH 44870		PC	HOME FIRE CAMPAIGN	2,000
GRACE EPISCOPAL CHURCH 100 E WATER ST SANDUSKY, OH 44870		PC	CLASS 2020	2,240
SANDUSKY HS SWAN CLUB 100 E WATER ST SANDUSKY, OH 44870		GOV	SWAN CLUB ANNUAL PRODUCTION	2,400
Total ▶ 3a				295,001

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)				
a Paid during the year				
ERIE COUNTY CASA PROGRAM 111 E SHORELINE DR STE 5 SANDUSKY, OH 44870		PC	CASA PROGRAM	2,500
FIRELANDS HABITAT FOR HUMANITY 7602 MILAN RD SANDUSKY, OH 44870		PC	BUILDING CURB APPEAL	2,500
NEW JERUSALEM BAPTIST CHURCH 1920 EDDY HENRY WAY SANDUSKY, OH 44870		PC	YOUTH MINISTRY	2,500
Total ▶ 3a				295,001

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)				
a <i>Paid during the year</i>				
ERIE COUNTY HEALTH DEPARTMENT 420 SUPERIOR ST SANDUSKY, OH 44870		GOV	KIDS RIDE SAFE CAR SEAT EXPANSION	3,000
SANDUSKY STATE THEATRE 107 COLUMBUS AVE SANDUSKY, OH 44870		PC	CHILDREN'S THEATER CAMPS	3,000
SANDUSKY CITY SCHOOLS 407 DECATUR ST SANDUSKY, OH 44870		GOV	FOUNDATION OF SUCCESS	3,000
Total ▶ 3a				295,001

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)				
a <i>Paid during the year</i>				
FATHER'S HEART MINISTRY 1814 MILAN RD SANDUSKY, OH 44870		PC	SUMMER FOOD PROGRAM	3,200
SANDUSKY HS CHEERLEADING 2130 HAYES AVE SANDUSKY, OH 44870		GOV	SUMMER CHEER CAMP	3,215
ERIE COUNTY AGRICULTURAL SOCIETY 3110 COLUMBUS AVE SANDUSKY, OH 44870		PC	NEW FLOOR IN RESTROOMS	3,840
Total ▶ 3a				295,001

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)				
a <i>Paid during the year</i>				
CANCER SERVICES OF ERIE COUNTY 505 E PERKINS AVE SANDUSKY, OH 44870		PC	PATIENT SERVICES & EDUCATIONAL PROG	5,000
ERIE CTY ECONOMIC DEVELOPMENT CORP 247 COLUMBUS AVE UNIT 126 SANDUSKY, OH 44870		PC	FIRELANDS FORWARD	5,000
GRACE COMMUNITY KITCHEN 1250 SANFORD ST SUITE A VERMILION, OH 44089		PC	SAILORS CUISINE FOOD PANTRY	5,000
Total ▶ 3a				295,001

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)				
a <i>Paid during the year</i>				
VERMILION PORT AUTHORITY 777 W RIVER RD VERMILION, OH 44089		PC	ADDITION & UPGRADE OF RESTROOM	5,000
VOLUNTEERS OF AMERICA CROSSROADS 8225 BRECKSVILLE RD SUITE 206 CLEVELAND, OH 44141		PC	WHERE HEALING BEGINS	5,000
HURON PUBLIC LIBRARY 100 E WATER STREET SANDUSKY, OH 44870		PC	GIRLS WHO CODE LAPTOP FUNDING	5,172
Total ▶ 3a				295,001

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)				
a <i>Paid during the year</i>				
SECOND HARVEST FOOD BANK 5510 BAUMHART RD LORAIN, OH 44053		PC	PANTRIES & MEAL PROGRAM	8,500
OHGO3616 PLUMBROOK CIRCLE SANDUSKY, OH 44870		PC	SCHOOL PANTRY	9,500
LCADA WAY2115 WEST PARK DRIVE LORAIN, OH 44053		PC	TRANSPORTATION	5,000
Total ▶ 3a				295,001

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)				
a <i>Paid during the year</i>				
SANDUSKY BAND PARENTS PO BOX 2611 SANDUSKY, OH 44870		PC	SPONSORSHIP	1,000
BOYS & GIRLS CLUB OF NE OH ERIE CO 135 E WASHINGTON ROW SUITE D SANDUSKY, OH 44870		PC	PERSONAL CARE CLOSET	2,500
BOYS & GIRLS CLUB OF NE OH ERIE CO 135 E WASHINGTON ROW SUITE D SANDUSKY, OH 44870		PC	SMART VIRTUAL LEARNING	5,000
Total			3a	295,001

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)				
a <i>Paid during the year</i>				
ERIE COUNTY COUMMUNITY FOUNDATION 135 E WASHINGTON ROW SANDUSKY, OH 44870		GOV	RISE PROGRAM	5,000
KINSHIP INC3920 PERKINS AVE SANDUSKY, OH 44870		PC	NEW BACK DOOR	2,500
LCADA WAY2115 WEST PARK DRIVE LORAIN, OH 44053		PC	TRANSPORTATION	5,000
Total ▶ 3a				295,001

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)				
a <i>Paid during the year</i>				
NEHEMIAH PARTNERS OF SANDUSKY 1215 CAMPBELL ST SANDUSKY, OH 44870		PC	COVID 19 COMPLIANCE EXPENSES	1,600
PROJECT SHARE OF MARGARETTA TOWNSHP 4108 STATE ROUTE 269 S CASTALIA, OH 44824		PC	PROJECT SHARE OF MARGARETTA TOWNSHIP	2,500
SANDUSKY EDUCATION FOUNDATION 100 E WATER ST SANDUSKY, OH 44870		GOV	SANDUSKY AQUATIC CENTER	10,000
Total ▶ 3a				295,001

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)				
a <i>Paid during the year</i>				
SANDUSKY CAREER CENTER 2130 HAYES AVE SANDUSKY, OH 44870		GOV	SOCIAL DISTANCING EXPENSES	2,500
SECOND HARVEST FOOD BANK 5510 BAUMHART RD LORAIN, OH 44053		PC	PANTRIES & MEAL PROGRAM	10,000
SERVING OUR SENIORS310 E BOALT ST UNIT A SANDUSKY, OH 44870		PC	SERVING OUR SENIORS	10,000
Total ▶ 3a				295,001

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)				
a <i>Paid during the year</i>				
STEIN HOSPICE SERVICES INC 1200 SYCAMORE LN SANDUSKY, OH 44870		PC	KID'S BEREAVEMENT PROGRAM/CAMP GOOD	5,000
BACK TO THE WILDPO BOX 423 CASTALIA, OH 44824		PC	WETLANDS EXHIBIT	2,953
ERIE COUNTY COMMUNITY FOUNDATION 135 E WASHINGTON ROW SANDUSKY, OH 44870		PC	COMMUNITY LINKS INTERNSHIP PROGRAM	5,000
Total ▶ 3a				295,001

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)				
a <i>Paid during the year</i>				
ERIE COUNTY BOARD OF DEVELOPMENTAL 4405 GALLOWAY RD SANDUSKY, OH 44879		GOV	SAFE HOMES SAFE FAMILIES	3,500
ERIE CO FAMILY AND CHILDREN FIRST 2900 COLUMBUS AVE SANDUSKY, OH 44870		PC	TRAUMA-RESPONSIVE COMMUNITY PROJECT	6,000
FIRELANDS HABITAT FOR HUMANITY 7602 MILAN RD SANDUSKY, OH 44870		PC	LIFTING UP FAMILIES AT THE RESTORE	5,000
Total ▶ 3a				295,001

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)				
a Paid during the year				
FIRELANDS SYMPHONY ORCHESTRA 334 E WASHINGTON ST SANDUSKY, OH 44870		PC	VIRTUAL MUSIC EDUCATION	2,000
GOODWILL INDUSTRIES 419 W MARKET ST SANDUSKY, OH 44870		PC	ACCESSIBILITY REMODEL	3,500
NEW JERUSALEM BAPTIST CHURCH 1920 EDDY HENRY WAY SANDUSKY, OH 44870		PC	VISION & VICTORY FOR OUR COMMUNITY	5,000
Total ▶ 3a				295,001

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)				
a <i>Paid during the year</i>				
TEEN LEADERSHIP CORPS 110 E MAIN ST NORWALK, OH 44857		PC	TLC PROGRAM	1,000
OHGO3616 PLUMBROOK CIRCLE SANDUSKY, OH 44870		PC	HOLIDAY DISTRIBUTION	4,251
ERIE COUNTY CASA PROGRAM 111 E SHORELINE DR STE 5 SANDUSKY, OH 44870		PC	HOLIDAY DISTRIBUTION	1,200
Total ▶ 3a				295,001

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)				
a <i>Paid during the year</i>				
NEW JERUSALEM BAPTIST CHURCH 1920 EDDY HENRY WAY SANDUSKY, OH 44870		PC	HOLIDAY DISTRIBUTION	1,200
ACORN MINISTRY156 COLUMBUS AVE SANDUSKY, OH 44870		PC	HOLIDAY DISTRIBUTION	1,200
GRACE FOOD PANTRY 203 S WASHINGTON ST CASTALIA, OH 44824		PC	HOLIDAY DISTRIBUTION	1,200
Total ▶ 3a				295,001

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)				
a <i>Paid during the year</i>				
ZION LUTHERAN CHURCH 503 COLUMBUS AVE SANDUSKY, OH 44870		PC	HOLIDAY DISTRIBUTION	1,497
VOLUNTEERS OF AMERICA CROSSROADS 8225 BRECKSVILLE RD SUITE 206 CLEVELAND, OH 44141		PC	HOLIDAY DISTRIBUTION	5,000
THE MICHELLE WIGHTMAN-KARRIE WIEBER FOUNDATION100 E WATER STREET SANDUSKY, OH 44870		PC	RETURN OF GRANT FUNDS	-12,764
Total ▶ 3a				295,001

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

TY 2020 Gain/Loss from Sale of Other Assets Schedule

Name: THE MICHELLE WIGHTMAN-KARRIE WIEBER
CHARITABLE FOUNDATION

EIN: 34-1831533

Gain Loss Sale Other Assets Schedule

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	Accumulated Depreciation
CIVISTA BANK		PURCHASE			309,250	279,185			30,065	
CIVISTA BANK		PURCHASE			368,001	385,767			-17,766	
CIVISTA BANK		PURCHASE			81,843	96,445			-14,602	

TY 2020 Investments Corporate Bonds Schedule

Name: THE MICHELLE WIGHTMAN-KARRIE WIEBER
CHARITABLE FOUNDATION

EIN: 34-1831533

Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
DODGE & COX INCOME FD COM	316,042	334,147
FEDERATED TOTAL RETURN BOND	269,361	279,181
FEDERATED ULTRASHORT BOND FD	282,390	284,894
PIMCO TOTAL RETURN	259,271	270,148
FIDELITY NEW MARKETS INCOME	62,002	60,345
FEDERATED INST HIGH YIELD BD	148,784	146,659
T ROWE PRICE HIGH YIELD BD	86,894	86,987
VANGUARD INFLATION PROTECTED	116,933	129,847
CITIZENS BANK NA CFG		
VANGUARD SHORT TERM INVESTMENT GRADE	207,168	213,327
TEMPLETON GLOBAL FOND FUND		
DFA WORLD EX US GOVT FIXED INCOME	136,550	135,037

TY 2020 Investments Corporate Stock Schedule

Name: THE MICHELLE WIGHTMAN-KARRIE WIEBER
CHARITABLE FOUNDATION

EIN: 34-1831533

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
VANGUARD INTERNATIONAL GROWTH FUND	425,125	764,536
INVESCO OPPENHEIMER INTL SMALL CO FD	249,537	292,117
SCHWAB LAUDUS INTL MARKETMASTERS FD		
TROWE PRICE EMERGING MARKETS STOCK	249,132	370,145
FIDELITY CONTRAFUND	109,225	236,742
DODGE & COX STOCK FUND		
T ROWE PRICE LARGE CAP VALUE FUND	500,000	479,721
T ROWE PRICE NEW AMERICA	247,676	484,136
VANGUARD 500 INDEX FUND	169,973	528,042
VANGUARD EQUITY INCOME	101,675	123,609
T ROWE PRICE MID-CAP GROWTH	91,723	234,243
VANGUARD MID CAP VALUE INDEX FUND	180,425	202,733
VANGUARD SMALL CAP INDEX	161,764	229,135
VANGUARD STRATEGIC SMALL CAP	169,753	184,550
DODGE & COX STOCK FUND	137,090	282,305
DELAWARE SMIT CAP GROWTH	34,990	76,373
FIDELITY ADVISOR GROWTH OPPORTUNITIE	53,325	102,330

TY 2020 Other Expenses Schedule

Name: THE MICHELLE WIGHTMAN-KARRIE WIEBER
CHARITABLE FOUNDATION

EIN: 34-1831533

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
OTHER EXPENSES	3,522			

TY 2020 Other Income Schedule

Name: THE MICHELLE WIGHTMAN-KARRIE WIEBER
CHARITABLE FOUNDATION

EIN: 34-1831533

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
EXCISE TAX REFUND	10,065		

TY 2020 Other Professional Fees Schedule

Name: THE MICHELLE WIGHTMAN-KARRIE WIEBER
CHARITABLE FOUNDATION

EIN: 34-1831533

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FILING FEES	200			200
PROFESSIONAL FEES	45,757	43,865		1,892