

Form **990-PF**Department of the Treasury  
Internal Revenue Service**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](http://www.irs.gov/Form990PF) for instructions and the latest information.

**2020****Open to Public  
Inspection****For calendar year 2020, or tax year beginning 01-01-2020 , and ending 12-31-2020**

Name of foundation HOVEN FAMILY FOUNDATION INC C/O FAIRPORT WEALTH		A Employer identification number 59-3443878	
Number and street (or P.O. box number if mail is not delivered to street address) 1350 EUCLID AVENUE SUITE 400		B Telephone number (see instructions) (216) 431-3000	
City or town, state or province, country, and ZIP or foreign postal code CLEVELAND, OH 44115		C If exemption application is pending, check here ► <input type="checkbox"/>	
<b>G</b> 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		<b>D</b> 1. Foreign organizations, check here..... ► <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ... ► <input type="checkbox"/> <b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here ..... ► <input type="checkbox"/> <b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ..... ► <input type="checkbox"/>	
<b>H</b> 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			
<b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16) ►\$ <u>1,245,677</u>		<b>J</b> Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) <u>(Part I, column (d) must be on cash basis.)</u>	

<b>Part I Analysis of Revenue and Expenses</b> (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)
<b>Revenue</b>					
1	Contributions, gifts, grants, etc., received (attach schedule)				
2	Check ► <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B				
3	Interest on savings and temporary cash investments				
4	Dividends and interest from securities	21,577	21,577		
5a	Gross rents				
b	Net rental income or (loss)				
6a	Net gain or (loss) from sale of assets not on line 10	30,795			
b	Gross sales price for all assets on line 6a	196,921			
7	Capital gain net income (from Part IV, line 2)		30,795		
8	Net short-term capital gain				
9	Income modifications				
10a	Gross sales less returns and allowances				
b	Less: Cost of goods sold				
c	Gross profit or (loss) (attach schedule)				
11	Other income (attach schedule)				
12	<b>Total.</b> Add lines 1 through 11	52,372	52,372		
<b>Operating and Administrative Expenses</b>					
13	Compensation of officers, directors, trustees, etc.	0	0		0
14	Other employee salaries and wages				
15	Pension plans, employee benefits				
16a	Legal fees (attach schedule)	25	25		0
b	Accounting fees (attach schedule)				
c	Other professional fees (attach schedule)	17,468	17,468		0
17	Interest				
18	Taxes (attach schedule) (see instructions)	797	797		0
19	Depreciation (attach schedule) and depletion				
20	Occupancy				
21	Travel, conferences, and meetings				
22	Printing and publications				
23	Other expenses (attach schedule)	628	567		61
24	<b>Total operating and administrative expenses.</b>				
	Add lines 13 through 23	18,918	18,857		61
25	Contributions, gifts, grants paid	35,000			35,000
26	<b>Total expenses and disbursements.</b> Add lines 24 and 25	53,918	18,857		35,061
27	Subtract line 26 from line 12:				
a	<b>Excess of revenue over expenses and disbursements</b>	-1,546			
b	<b>Net investment income</b> (if negative, enter -0-)		33,515		
c	<b>Adjusted net income</b> (if negative, enter -0-)				

<b>Part II</b> <b>Balance Sheets</b>		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
<b>Assets</b>	<b>1</b>	Cash—non-interest-bearing . . . . .	7,778	10,720	10,720
	<b>2</b>	Savings and temporary cash investments . . . . .	171	1,011	1,011
	<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)	87,305	36,524	41,486
	<b>b</b>	Investments—corporate stock (attach schedule) . . . . .	591,916	654,518	986,985
	<b>c</b>	Investments—corporate bonds (attach schedule) . . . . .	207,569	191,132	205,475
	<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) . . . . .				
<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)	894,739	893,905	1,245,677	
<b>Liabilities</b>	<b>17</b>	Accounts payable and accrued expenses . . . . .			
	<b>18</b>	Grants payable . . . . .			
	<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 ►) . . . . .			
	<b>23</b>	<b>Total liabilities</b> (add lines 17 through 22) . . . . .	0	0	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow FASB ASC 958, check here ►</b> <input type="checkbox"/>				
	<b>and complete lines 24, 25, 29 and 30.</b>				
	<b>24</b>	Net assets without donor restrictions . . . . .			
	<b>25</b>	Net assets with donor restrictions . . . . .			
	<b>Foundations that do not follow FASB ASC 958, check here ►</b> <input checked="" type="checkbox"/>				
	<b>and complete lines 26 through 30.</b>				
	<b>26</b>	Capital stock, trust principal, or current funds . . . . .	0	0	
	<b>27</b>	Paid-in or capital surplus, or land, bldg., and equipment fund	0	0	
	<b>28</b>	Retained earnings, accumulated income, endowment, or other funds	894,739	893,905	
	<b>29</b>	<b>Total net assets or fund balances</b> (see instructions) . . . . .	894,739	893,905	
<b>30</b>	<b>Total liabilities and net assets/fund balances</b> (see instructions) . . . . .	894,739	893,905		

**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>	894,739
<b>2</b>	Enter amount from Part I, line 27a . . . . .	<b>2</b>	-1,546
<b>3</b>	Other increases not included in line 2 (itemize) ►	<b>3</b>	956
<b>4</b>	Add lines 1, 2, and 3 . . . . .	<b>4</b>	894,149
<b>5</b>	Decreases not included in line 2 (itemize) ►	<b>5</b>	244
<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>	893,905

**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 See Additional Data Table					
b					
c					
d					
e					
(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 See Additional Data Table					
b					
c					
d					
e					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69					(i) 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 See Additional Data Table					
b					
c					
d					
e					
2 Capital gain net income or (net capital loss)		If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7		2	30,795
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				3	

**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.	1	466
	Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions)		
b	Reserved. . . . .	1	466
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	0
3	Add lines 1 and 2. . . . .	3	466
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	5	466
6	Credits/Payments:		
a	2020 estimated tax payments and 2019 overpayment credited to 2020	6a	797
b	Exempt foreign organizations—tax withheld at source	6b	0
c	Tax paid with application for extension of time to file (Form 8868)	6c	0
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments. Add lines 6a through 6d. . . . .	7	797
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached.	8	0
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . . ►	9	
10	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . . ►	10	331
11	Enter the amount of line 10 to be: <b>Credited to 2021 estimated tax</b> ► 331	Refunded	► 11

**Part VII-A Statements Regarding Activities**

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	<input type="checkbox"/>	Yes	No
1b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition).	<input type="checkbox"/>	Yes	No
	<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>			
1c	Did the foundation file <b>Form 1120-POL</b> for this year?	<input type="checkbox"/>	Yes	No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. ► \$ _____ 0 (2) On foundation managers. ► \$ _____ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$ _____ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	<input type="checkbox"/>	Yes	No
	<i>If "Yes," attach a detailed description of the activities.</i>			
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>	<input type="checkbox"/>	Yes	No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	<input type="checkbox"/>	Yes	No
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	<input type="checkbox"/>	Yes	No
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	<input type="checkbox"/>	Yes	No
	<i>If "Yes," attach the statement required by General Instruction T.</i>			
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?			
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>	<input type="checkbox"/>	Yes	No
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	► FL		
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>	<input type="checkbox"/>	Yes	No
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>	<input type="checkbox"/>	Yes	No
10	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>	<input type="checkbox"/>	Yes	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 ►N/A	13	Yes
14	The books are in care of ►D DWAYNE HOVEN PRESIDENTTRUSTEE	Telephone no. ►(216) 431-3000	
Located at ►C/O 1350 EUCLID AVENUE SUITE 400 CLEVELAND OH			ZIP+4 ►44115
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —check here. . . . .	► 15	<input type="checkbox"/>
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? . . . . . See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ►	16	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

**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? ( <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	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. . . . . Organizations relying on a current notice regarding disaster assistance check here. . . . . ►	1b	<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	No
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		
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? . . . . . If "Yes," list the years ► 20____, 20____, 20____, 20____	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
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.) . . . . .	2b	<input type="checkbox"/>
c	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____		
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	<input type="checkbox"/>
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"/>	<input checked="" type="checkbox"/>		
(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"/>	<input checked="" type="checkbox"/>		
(3) Provide a grant to an individual for travel, study, or other similar purposes? . . . . .		<input type="checkbox"/>	<input checked="" type="checkbox"/>		
(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"/>	<input checked="" type="checkbox"/>		
(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"/>	<input checked="" type="checkbox"/>		
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 . . . . . 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"/>	<input type="checkbox"/>		
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"/>	<input checked="" type="checkbox"/>		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .	<input type="checkbox"/>			
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"/>	<input checked="" type="checkbox"/>		
b	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction? . . . . .	<input type="checkbox"/>			
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"/>	<input checked="" type="checkbox"/>		

**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.

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
D DWAYNE HOVEN 308 HAWKINS ISLAND DRIVE ST SIMONS ISLAND, GA 31522	PRESIDENT 2.00	0	0	0
MARY M HOVEN 308 HAWKINS ISLAND DRIVE ST SIMONS ISLAND, GA 31522	SECRETARY/TREASURER 2.00	0	0	0
THOMAS A SEIFERT 1350 EUCLID AVENUE SUITE 400 CLEVELAND, OH 44115	TRUSTEE 1.00	0	0	0

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

<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
NONE				

<b>Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)</b>		
<b>3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".</b>		
<b>(a) Name and address of each person paid more than \$50,000</b> NONE	<b>(b) Type of service</b>	<b>(c) Compensation</b>
<b>Total number of others receiving over \$50,000 for professional services.</b> . . . . . ►	0	
<b>Part IX-A Summary of Direct Charitable Activities</b>		
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.		<b>Expenses</b>
<b>1</b>		
<b>2</b>		
<b>3</b>		
<b>4</b>		
<b>Part IX-B Summary of Program-Related Investments (see instructions)</b>		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		<b>Amount</b>
<b>1</b>		
<b>2</b>		
All other program-related investments. See instructions.		
<b>3</b>		
<b>Total. Add lines 1 through 3</b> . . . . . ►	0	

**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	1,096,026
b	Average of monthly cash balances. . . . .	1b	13,655
c	Fair market value of all other assets (see instructions). . . . .	1c	0
d	<b>Total</b> (add lines 1a, b, and c). . . . .	1d	1,109,681
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	1e	0
2	Acquisition indebtedness applicable to line 1 assets. . . . .	2	0
3	Subtract line 2 from line 1d. . . . .	3	1,109,681
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	4	16,645
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,093,036
6	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	6	54,652

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

1	Minimum investment return from Part X, line 6. . . . .	1	54,652
2a	Tax on investment income for 2020 from Part VI, line 5. . . . .	2a	466
b	Income tax for 2020. (This does not include the tax from Part VI.). . . . .	2b	
c	Add lines 2a and 2b. . . . .	2c	466
3	Distributable amount before adjustments. Subtract line 2c from line 1. . . . .	3	54,186
4	Recoveries of amounts treated as qualifying distributions. . . . .	4	0
5	Add lines 3 and 4. . . . .	5	54,186
6	Deduction from distributable amount (see instructions). . . . .	6	0
7	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . . . .	7	54,186

**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	35,061
b	Program-related investments—total from Part IX-B. . . . .	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes. . . . .	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required). . . . .	3a	
b	Cash distribution test (attach the required schedule). . . . .	3b	
4	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	35,061
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	0
6	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	6	35,061
<b>Note:</b> 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				54,186
<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: 20____, 20____, 20____		0		
<b>3</b> Excess distributions carryover, if any, to 2020:				
<b>a</b> From 2015. . . . .	7,624			
<b>b</b> From 2016. . . . .	10,279			
<b>c</b> From 2017. . . . .	24,432			
<b>d</b> From 2018. . . . .	16,046			
<b>e</b> From 2019. . . . .	12,009			
<b>f</b> <b>Total</b> of lines 3a through e. . . . .	70,390			
<b>4</b> Qualifying distributions for 2020 from Part XII, line 4: ► \$ 35,061			0	
<b>a</b> Applied to 2019, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2020 distributable amount. . . . .				35,061
<b>e</b> Remaining amount distributed out of corpus	0			
<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).)	19,125			19,125
<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	51,265			
<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. . . . .		0		
<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) . . . . .	0			
<b>8</b> Excess distributions carryover from 2015 not applied on line 5 or line 7 (see instructions) . . . . .	0			
<b>9</b> <b>Excess distributions carryover to 2021.</b> Subtract lines 7 and 8 from line 6a . . . . .	51,265			
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2016. . . . .				
<b>b</b> Excess from 2017. . . . .	23,210			
<b>c</b> Excess from 2018. . . . .	16,046			
<b>d</b> Excess from 2019. . . . .	12,009			
<b>e</b> 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 <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 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.			
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).)  
D DWAYNE HOVEN

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:

D DWAYNE HOVEN CO FAIRPORT WEALTH  
1350 EUCLID AVENUE SUITE 400  
CLEVELAND, OH 44115  
(216) 431-3000

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

A LETTER DETAILING THE ORGANIZATION AND PURPOSE OF REQUEST.

c Any submission deadlines:

NO SUBMISSION DEADLINES.

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

USED WITHIN THE U.S. OR ITS POSSESSIONS FOR CHARITABLE, RELIGIOUS, AND EDUCATIONAL PURPOSES.

**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 Paid during the year</b> See Additional Data Table				
<b>Total . . . . .</b>			► 3a	35,000
<b>b Approved for future payment</b>				
<b>Total . . . . .</b>			► 3b	0

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions.)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
<b>1</b> Program service revenue:					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
<b>2</b> Membership dues and assessments. . . . .					
<b>3</b> Interest on savings and temporary cash investments . . . . .					
<b>4</b> Dividends and interest from securities. . . . .			14	21,577	
<b>5</b> Net rental income or (loss) from real estate:					
a Debt-financed property. . . . .					
b Not debt-financed property. . . . .					
<b>6</b> Net rental income or (loss) from personal property					
<b>7</b> Other investment income. . . . .					
<b>8</b> Gain or (loss) from sales of assets other than inventory . . . . .					30,795
<b>9</b> Net income or (loss) from special events:					
<b>10</b> Gross profit or (loss) from sales of inventory					
<b>11</b> Other revenue: a _____					
b					
c					
d					
e					
<b>12</b> Subtotal. Add columns (b), (d), and (e). . . . .		0		21,577	30,795
<b>13</b> Total. Add line 12, columns (b), (d), and (e). . . . .			13		52,372

**Part VI-B Relationship of Activities to the Accomplishment of Exempt Purposes**

## Part XVII

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

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

	Yes	No
<b>1a(1)</b>		<b>No</b>
<b>1a(2)</b>		<b>No</b>
<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>
<b>1c</b>		<b>No</b>

a Transfers from the reporting foundation to a noncharitable exempt organization of:

(1) Cash. . .

- (1) Sales of assets to a noncharitable exempt organization. . . . .
- (2) Purchases of assets from a noncharitable exempt organization. . . . .
- (3) Rental of facilities, equipment, or other assets. . . . .
- (4) Reimbursement arrangements. . . . .
- (5) Loans or loan guarantees. . . . .
- (6) Performance of services or membership or fundraising solicitations. . . . .

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

**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.

<b>(a) Name of organization</b>	<b>(b) Type of organization</b>	<b>(c) Description of relationship</b>

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.

\*\*\*\*\*

2021-05-05

\*\*\*\*\*

May the IRS discuss this  
return  
with the preparer shown  
below  
(see instr.)  Yes  No

Signature of officer or trustee

Date

>Title

**Sign  
Here**

**Paid  
Preparer  
Use Only**

					(see instr.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Paid Preparer Use Only</b>	Print/Type preparer's name		Preparer's Signature	Date	Check if self-employed ► <input type="checkbox"/>
	PETER P DEVITO			2021-05-05	PTIN P00235580
	Firm's name ► FAIRPORT WEALTH				Firm's EIN ► 26-1094814
Firm's address ► 1350 EUCLID AVENUE SUITE 400 CLEVELAND, OH 44115				Phone no. (216) 431-3000	

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

(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.)
44 SHS OCCIDENTAL PETROLEUM CORP		2019-08-09	2020-04-06
100 SHS ABBOTT LABORATORIES INC		2017-05-26	2020-04-06
30 SHS ADOBE SYSTEMS INC		2017-05-26	2020-09-24
200 SHS CISCO SYSTEMS INC		2019-01-14	2020-09-24
33 SHS CORTEVA INC-W/I		2019-01-14	2020-04-06
33 SHS DOW INC		2019-01-14	2020-04-06
33 SHS DUPONT DE NEMOURS INC-WI		2019-01-14	2020-04-06
0.24 SHS INGERSOLL RAND INC		2017-05-26	2020-03-11
88 SHS INGERSOLL RAND INC		2017-05-26	2020-09-24
600 SHS ISHARES 1 TO 3 YEAR TREASURY BOND ETF		2017-05-26	2020-04-06

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

(e) Gross sales price	Depreciation allowed (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
582		2,037	-1,455
8,181		4,484	3,697
14,029		4,257	9,772
7,578		8,675	-1,097
789		992	-203
991		1,792	-801
1,154		2,735	-1,581
5		5	0
3,142		2,014	1,128
51,911		50,781	1,130

**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			Gains (Col. (h) gain minus col. (k), but not less than -0-) or (l) Losses (from col.(h))
(i) F.M.V. as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col. (i) (k) over col. (j), if any	
			-1,455
			3,697
			9,772
			-1,097
			-203
			-801
			-1,581
			0
			1,128
			1,130

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

(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.)
15 SHS LOCKHEED MARTIN CORP		2018-04-25	2020-09-24
1 SHS WELLS FARGO & CO 949746101 CLASS ACTION		2001-01-01	2020-11-19
150 SHS QUALCOMM		2018-12-20	2020-09-24
400 SHS SPDR DJ WILSHIRE GLOBAL REAL ESTATE ETF		2017-05-26	2020-09-24
150 SHS SPDR BLOOMBERG BARCLAYS HIGH YIELD BOND		2016-12-08	2020-04-06
50 SHS SALESFORCE.COM		2018-04-25	2020-09-24
50 SHS UNITEDHEALTH GROUP INC		2016-12-08	2020-04-06
150 SHS VERIZON COMMUNICATIONS		2018-12-20	2020-09-24
200 SHS WISDOMTREE JAPAN HEDGED EQUITY ETF		2017-05-26	2020-09-24
60 SHS AMERICAN TOWER CORP		2014-06-30	2020-04-06

**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 (g) plus expense of sale	(h) (e) plus (f) minus (g)
5,742		4,940	802
28		25	3
16,862		8,601	8,261
15,395		19,112	-3,717
13,860		16,420	-2,560
11,913		5,893	6,020
12,193		7,966	4,227
8,901		8,329	572
9,786		10,230	-444
13,879		6,838	7,041

**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			
(i) F.M.V. as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col. (i) (k) over col. (j), if any	(I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
			802
			3
			8,261
			-3,717
			-2,560
			6,020
			4,227
			572
			-444
			7,041

**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 Paid during the year</b>				
BEECH BROOK3737 LANDER ROAD CLEVELAND, OH 44124	N/A	N/A	GENERAL PURPOSE	1,000
BOYS & GIRLS CLUB OF BROOKS COUNTY 4513 GREEN ISLAND ROAD VALDOSTA, GA 31602	N/A	N/A	GENERAL PURPOSE	5,000
CASA GLYNN INCPO BOX 145 BRUNSWICK, GA 31521	N/A	N/A	GENERAL PURPOSE	1,000
<b>Total . . . . .</b>			► 3a	35,000

**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 Paid during the year</b>				
CASA GLYNN INCPO BOX 145 BRUNSWICK, GA 31521	N/A	N/A	GENERAL PURPOSE	2,000
COASTAL GEORGIA AREA CCA INC ONE COMMUNITY ACTION DRIVE BRUNSWICK, GA 31520	N/A	N/A	GENERAL PURPOSE	5,000
COASTAL GEORGIA AREA CCA INC ONE COMMUNITY ACTION DRIVE BRUNSWICK, GA 31520	N/A	N/A	GENERAL PURPOSE	1,000
<b>Total . . . . .</b>			► 3a	35,000

## 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)				
<i>a Paid during the year</i>				
COLLEGE OF COASTAL GEORGIA FOUNDATION ONE COLLEGE DRIVE BRUNSWICK, GA 31520	N/A	N/A	GENERAL PURPOSE	500
COMMUNITIES OF COASTAL GEORGIA FOUNDATION 1626 FREDERICA ROAD SUITE 201 ST SIMONS ISLAND, GA 31522	N/A	N/A	GENERAL PURPOSE	500
DOGS HELPING HEROSPO BOX 2126 CLARKSVILLE, IN 47131	N/A	N/A	GENERAL PURPOSE	500
<b>Total . . . . .</b>			► 3a	35,000

## 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 Paid during the year</b>				
HABITAT FOR HUMANITY GLYNN COUNTY PO BOX 296 BRUNSWICK, GA 31521	N/A	N/A	GENERAL PURPOSE	5,000
HAND IN HAND OF GLYNN INC PO BOX 2452 BRUNSWICK, GA 31521	N/A	N/A	GENERAL PURPOSE	1,000
HOSPICE OF THE GOLDEN ISLES 1692 GLYNCO PARKWAY BRUNSWICK, GA 31525	N/A	N/A	GENERAL PURPOSE	2,000
<b>Total . . . . .</b>			► 3a	35,000

## 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)				
<i>a Paid during the year</i>				
IDLEWILD PRESBYTERIAN CHURCH 1750 UNION AVENUE MEMPHIS, TN 38104	N/A	N/A	GENERAL PURPOSE	500
K-9'S FOR WARRIORS 114 CAMP K9 ROAD POINTE VEDRA, FL 32081	N/A	N/A	GENERAL PURPOSE	2,000
SAFE HARBOR FOUNDATION PO BOX 1313 BRUNSWICK, GA 31521	N/A	N/A	GENERAL PURPOSE	2,000
<b>Total . . . . .</b>			► 3a	35,000

**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 Paid during the year</b>				
TIGERS UNLIMITED FOUNDATION 317 SOUTH COLLEGE STREET AUBURN, AL 36849	N/A	N/A	GENERAL PURPOSE	5,000
TIGERS UNLIMITED FOUNDATION 317 SOUTH COLLEGE STREET AUBURN, AL 36849	N/A	N/A	GENERAL PURPOSE	1,000
<b>Total . . . . .</b>			► 3a	35,000

## TY 2020 Investments Corporate Bonds Schedule

**Name:** HOVEN FAMILY FOUNDATION INC  
C/O FAIRPORT WEALTH  
**EIN:** 59-3443878

### Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
INVESCO SENIOR LOAN ETF (BKLN) - 1,000 SHS	23,323	22,280
ISHARES CORE US AGGREGATE BOND (AGG) - 1,550 SHS	167,809	183,195

**TY 2020 Investments Corporate Stock Schedule**

**Name:** HOVEN FAMILY FOUNDATION INC  
 C/O FAIRPORT WEALTH  
**EIN:** 59-3443878

**Investments Corporation Stock Schedule**

<b>Name of Stock</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
VANGUARD FTSE EMERGING MARKETS ETF (VWO) - 1,100 SHS	48,597	55,121
ATLASSIAN CORP (TEAM) - 100 SHS	5,541	23,387
BRISTOL MYERS SQUIBB CO (BMY) - 100 SHS	2,511	6,203
CELANESE CORP (CE) - 100 SHS	9,519	12,994
CHEVRON CORPORATION (CVX) - 100 SHS	11,512	8,445
EATON CORP (ETN) - 100 SHS	6,217	12,014
JPMORGAN CHASE & CO (JPM) - 100 SHS	11,402	12,707
MICROSOFT CORP (MSFT) - 100 SHS	11,319	22,242
MONELEZ INTERNATIONAL (MDLZ) - 100 SHS	4,263	5,847
SALESFORCE COM (CRM) - 50 SHS	5,892	11,126
SEMPRA ENERGY (SRE) - 100 SHS	11,446	12,741
SPLUNK INC (SPLK) - 100 SHS	9,763	16,989
TEXAS INSTRUMENTS INC (TXN) - 100 SHS	10,673	16,413
UNITEDHEALTH GROUP INC (UNH) - 50 SHS	7,966	17,534
VALERO ENERGY CORP (VLO) - 100 SHS	6,845	5,657
VISA INC (V) - 100 SHS	14,811	21,873
VOYA FINL INC (VOYA) - 100 SHS	5,282	5,881
APPLE INC (AAPL) - 480 SHS	8,744	63,691
AMERICAN TOWER CORP (AMT) - 70 SHS	7,978	15,712
ALPHABET INC CL A (GOOGL) - 15 SHS	11,924	26,290
AMAZON COM INC (AMZN) - 15 SHS	11,508	48,854
ABBOTT LABORATORIES INC (ABT) - 100 SHS	4,484	10,949
EXELON CORPORATION (EXC) - 200 SHS	9,224	8,444
COMCAST CORPORATION CL A (CMCSA) - 300 SHS	10,388	15,720
ISHARES MSCI EAFE SMALL-CAP ETF (SCZ) - 300 SHS	17,469	20,505
ISHARES CORE S&P MID-CAP ETF (IJH) - 350 SHS	59,286	80,441
BANK OF AMERICA CORP (BAC) - 400 SHS	9,202	12,124
GARRETT MOTION INC (GTX) - 5 SHS	77	22
COSTCO WHOLESALE CORP (COST) - 50 SHS	8,900	18,839
HOME DEPOT INC (HD) - 50 SHS	8,874	13,281

## Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
HONEYWELL INTL INC (HON) - 50 SHS	7,048	10,635
ILLINOIS TOOL WORKS INC (ITW) - 50 SHS	6,345	10,194
PEPSICO INC (PEP) - 50 SHS	1,686	7,415
ISHARES CORE S&P SMALL CAP ETF (IJR) - 530 SHS	36,464	48,707
ADOBE SYSTEMS INC (ADBE) - 30 SHS	4,257	15,004
RESIDEO TECHNOLOGIES INC (REZI) - 8 SHS	210	170
ISHARES INTERNATIONAL SELECT DIVIDEND ETF (IDV) - 800 SHS	26,552	23,576
ISHARES MSCI EAFE ETF (EFA) - 800 SHS	51,698	58,368
MEDTRONIC PLC (MDT) - 100 SHS	10,166	11,714
TRANTE TECHNOLOGIES PLC (ITT) - 100 SHS	6,912	14,516
ABBVIE INC (ABBV) - 100 SHS	7,518	10,715
BOSTON SCIENTIFIC CORP (BSX) - 250 SHS	9,285	8,987
CVS HEALTH CORPORATION (CVS) - 100 SHS	5,634	6,830
CROWDSTRIKE HOLDINGS INC (CRWD) -100 SHS	13,420	21,182
EQUINIX INC (EQIX) -100 SHS	63,954	71,418
NEXTERA ENERGY INC (NEE) - 240 SHS	14,047	18,516
SQUARE INC (SQ) - 100 SHS	15,395	21,764
ISHARES MSCI EAFE GROWTH ETF (EFG) - 250 SHS	22,310	25,228

## TY 2020 Investments Government Obligations Schedule

**Name:** HOVEN FAMILY FOUNDATION INC

C/O FAIRPORT WEALTH

**EIN:** 59-3443878

**US Government Securities - End  
of Year Book Value:**

36,524

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

41,486

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

0

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

0

## TY 2020 Legal Fees Schedule

**Name:** HOVEN FAMILY FOUNDATION INC

C/O FAIRPORT WEALTH

**EIN:** 59-3443878

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
CLASS ACTION FILING FEE	25	25		0

## TY 2020 Other Decreases Schedule

**Name:** HOVEN FAMILY FOUNDATION INC  
C/O FAIRPORT WEALTH

**EIN:** 59-3443878

Description	Amount
EATON CORP PLC COST BASIS ADJUSTMENT	227
INVESCO SENIOR LOAN ETF COST BASIS ADJUSTMENT	17

## TY 2020 Other Expenses Schedule

**Name:** HOVEN FAMILY FOUNDATION INC  
C/O FAIRPORT WEALTH  
**EIN:** 59-3443878

## Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FLORIDA ANNUAL REPORTING FEE	61	0		61
CORPORATE AGENT FILING FEE	99	99		0
FOREIGN TAXES PAID	468	468		0

## TY 2020 Other Increases Schedule

**Name:** HOVEN FAMILY FOUNDATION INC  
C/O FAIRPORT WEALTH

**EIN:** 59-3443878

## Other Increases Schedule

Description	Amount
MISC ADJUSTMENT	956

## TY 2020 Other Professional Fees Schedule

**Name:** HOVEN FAMILY FOUNDATION INC

C/O FAIRPORT WEALTH

**EIN:** 59-3443878

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT MANAGEMENT FEES - MELLON	17,468	17,468		0

## TY 2020 Taxes Schedule

**Name:** HOVEN FAMILY FOUNDATION INC

C/O FAIRPORT WEALTH

**EIN:** 59-3443878

## Taxes Schedule

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
2020 ESTIMATED TAX	797	797		0