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2020

OMB No. 1545-0052

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 <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

or	caler	ndar year 2020, or tax year beginning 10-01-20	020 , aı	nd ei	nding 09-30-	2021		
		ındation D RUTH SELIGMAN			A Employer id	entification numbe	r	
		DUNDATION INC	.1		61-1401360			
		I street (or P.O. box number if mail is not delivered to street address LYDESDALE COURT) Room/suite		B Telephone number (see instructions)			
					(859) 344-1881			
		n, state or province, country, and ZIP or foreign postal code Y 41094			C If exemption	application is pendin	g, check here	
G Ch	neck al	ll that apply: \qed Initial return \qed Initial return of a	former public charity		D 1. Foreign or	ganizations, check he	ere	
		\square Final return \square Amended return				ganizations meeting k here and attach co		
		Address change Name change			<u>'</u>	ındation status was i	· · · —	
_	,	pe of organization: $lacksquare$ Section 501(c)(3) exempt private 4947(a)(1) nonexempt charitable trust \Box Other taxable				n 507(b)(1)(A), chec		
		ket value of all assets at end J Accounting method:	Cash Accru	ıal	F If the founda	ition is in a 60-mont	h termination 🖂	
of '	year (f	from Part II, col. (c), ▶\$ 3,536,056 CPart I, column (d) must		·ui		n 507(b)(1)(B), chec		
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Boyonya and				(d) Disbursements	
		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	for charitable purposes (cash basis only)	
	1	Contributions, gifts, grants, etc., received (attach	281,192	,				
	2	schedule) Check ▶ ☐ if the foundation is not required to attach	201,192					
	-	Sch. B						
	3	Interest on savings and temporary cash investments	1		1			
	4	Dividends and interest from securities	24,857		24,857			
	5a b	Gross rents Net rental income or (loss)						
Ф	6a	Net gain or (loss) from sale of assets not on line 10	275,666	5				
Revenue	b	Gross sales price for all assets on line 6a						
3e√	7	Capital gain net income (from Part IV, line 2)	-		275,666			
_	8	Net short-term capital gain			273,000			
	9	Income modifications						
	10a	Gross sales less returns and allowances						
	ь	Less: Cost of goods sold						
	C	Gross profit or (loss) (attach schedule)						
	11	Other income (attach schedule)						
	12	Total. Add lines 1 through 11	581,716	5	300,524			
	13	Compensation of officers, directors, trustees, etc.						
	14	Other employee salaries and wages						
ses	15	Pension plans, employee benefits						
Ē	16a	Accounting fees (attach schedule)	3,800		3,800			
EX	b c	Other professional fees (attach schedule)	18,298	-	18,298			
Хe	17	Interest	10,230	1	10,230			
Operating and Administrative Expenses	18	Taxes (attach schedule) (see instructions)	2,000	 	2,000			
<u> </u>	19	Depreciation (attach schedule) and depletion			·			
<u>=</u>	20	Occupancy						
Ă	21	Travel, conferences, and meetings						
anc	22	Printing and publications						
Ď.	23	Other expenses (attach schedule)						
Tati	24	Total operating and administrative expenses.						
<u>e</u>		Add lines 13 through 23	24,098	_	24,098		0	
ت	25	Contributions, gifts, grants paid	212,800				212,800	
	26	Total expenses and disbursements. Add lines 24 and 25	236,898	3	24,098		212,800	
	27	Subtract line 26 from line 12:			·			
	a	Excess of revenue over expenses and disbursements	344,818					
	b	Net investment income (if negative, enter -0-)	344,016		276,426			
	С	Adjusted net income (if negative, enter -0-)			,			

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Accounts receivable ▶

3

Net Assets or

26

27 28

29

30

Part III

2

3

		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 ▶			
\sim	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	255,542	267,103	1,506,685
	C	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	1,081,817	1,406,095	2,012,589
	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)	1,345,162	1,689,980	3,536,056
	17	Accounts payable and accrued expenses			
	18	Grants payable			
Liabilities	19	Deferred revenue			
≝	20	Loans from officers, directors, trustees, and other disqualified persons			
<u>ia</u>	21	Mortgages and other notes payable (attach schedule)			
-	22	Other liabilities (describe)			
	23	Total liabilities(add lines 17 through 22)		0	
Ş		Foundations that follow FASB ASC 958, check here ▶			
일		and complete lines 24, 25, 29 and 30.			
	24	Net assets without donor restrictions			
ă	25	Net assets with donor restrictions			
Fund Balance		Foundations that do not follow FASB ASC 958, check here 🕨 🗹			

1,345,162

1,345,162

1,345,162

1,689,980

1,689,980

1,689,980

1 2

3 4

5

6

1,345,162

1,689,980

1,689,980 Form **990-PF** (2020)

344,818

and complete lines 26 through 30.

Total liabilities and net assets/fund balances (see instructions) . Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with endof-year figure reported on prior year's return)

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Capital stock, trust principal, or current funds . . .

Enter amount from Part I, line 27a

Other increases not included in line 2 (itemize)

Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) ▶

Paid-in or capital surplus, or land, bldg., and equipment fund

Capital Gaills allu	LUSSES IOI TAX UII TIIVESU	ment Income		1	T
	kind(s) of property sold (e.g., use; or common stock, 200 shs		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1aSee Additional Data Table					
b					
С					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)		(g) other basis pense of sale	Gain o	h) r (loss)) minus (g)
a See Additional Data Table					
b					
c					
d					
e					
Complete only for assets show	wing gain in column (h) and ow	ned by the foundation	on 12/31/69		1)
(i)	(j)		(k)	Gains (Col. (h) gain minus
F.M.V. as of 12/31/69	Adjusted basis as of 12/31/69		s of col. (i) l. (j), if any		less than -0-) or om col.(h))
a See Additional Data Table	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	3,0,00	(3),,	,	
b	1				
С					
c d					
d					
d	net capital loss) {	If gain, also enter in I If (loss), enter -0- in		} 2	275,666
d e 2 Capital gain net income or (n	net capital loss) or (loss) as defined in sections 1	If (loss), enter -0- in		2	275,666
d e Capital gain net income or (r Net short-term capital gain of	, ,	If (loss), enter -0- in 1222(5) and (6):	Part I, line 7	2	275,666
d e Capital gain net income or (r Net short-term capital gain or If gain, also enter in Part I, I in Part I, line 8	or (loss) as defined in sections 1	If (loss), enter -0- in 1222(5) and (6): lons). If (loss), enter -1	Part I, line 7	3	275,666
d e Capital gain net income or (r Net short-term capital gain or If gain, also enter in Part I, I in Part I, line 8 Part V Qualification Under	or (loss) as defined in sections in the sections of the section (c) (see instruction or section 4940(e) for Reservice of the section 4940(e) for Reservice or section	If (loss), enter -0- in 1222(5) and (6): ons). If (loss), enter -1	Part İ, line 7 0- • • • • • • • • • • • • • • • • • • •	3	275,666
d e Capital gain net income or (r Net short-term capital gain or If gain, also enter in Part I, I in Part I, line 8 Part V Qualification Under	or (loss) as defined in sections in the section of the section of the section of the section of the section 4940(e) for Research the section 4940(e) for Research the section of the secti	If (loss), enter -0- in 1222(5) and (6): ons). If (loss), enter -0- educed Tax on Net	Part İ, line 7 0- • • • • • • • • • • • • • • • • • • •	3	275,666
d e 2 Capital gain net income or (r 3 Net short-term capital gain of If gain, also enter in Part I, lin Part I, line 8 Part V Qualification Under ECTION 4940(e) REPEALED	or (loss) as defined in sections in the sections of the section (c) (see instruction or section 4940(e) for Reservice of the section 4940(e) for Reservice or section 4940(e) for Reservice or section 4940(e) for Reservice or section 4940(e) for Reservice or section 4940(e) for Reservice or section 4940(e) for Reservice or section 4940(e) for Reservice or section 4940(e) for Reservice or section 4940(e) for Reservice or section 4940(e) for Reservice or section	If (loss), enter -0- in 1222(5) and (6): ons). If (loss), enter -1	Part İ, line 7 0- t Investment I	3	275,666
d e 2 Capital gain net income or (r 3 Net short-term capital gain of If gain, also enter in Part I, lin Part I, line 8 Part V Qualification Under ECTION 4940(e) REPEALED 1 Reserved (a)	or (loss) as defined in sections 1 line 8, column (c) (see instruction	If (loss), enter -0- in 1222(5) and (6): ons). If (loss), enter -0- educed Tax on Net D - DO NOT COMPL	Part İ, line 7 0- t Investment I	ncome (d)	275,666
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5a	During the year did the foundation p	оау о	r incur any amount to:							Yes	No
	(1) Carry on propaganda, or otherw	ise a	ttempt to influence legisla	ation (section 4945(e))?		Yes	~	No			
	(2) Influence the outcome of any sp	ecifi	public election (see sect	tion 4955); or to carry		□ les		110			
	on, directly or indirectly, any vo	ter re	egistration drive?			☐ Yes	✓	No			
	(3) Provide a grant to an individual	for t	ravel, study, or other sim	ilar purposes?		Yes	✓	No			
	(4) Provide a grant to an organizati	on ot	her than a charitable, etc	, organization described	l						
	in section 4945(d)(4)(A)? See ir					☐ Yes	✓	No			
	(5) Provide for any purpose other the			* * * * * * * * * * * * * * * * * * * *							
	educational purposes, or for the	•	•			Yes	✓	No			
b	If any answer is "Yes" to $5a(1)-(5)$,		•			cribed in					
	Regulations section 53.4945 or in a						•		5b		
	Organizations relying on a current n					•					
С	If the answer is "Yes" to question 5a	٠, ,,		•							
	tax because it maintained expenditu					Yes		No			
	If "Yes," attach the statement requir		-								
5a	Did the foundation, during the year,		, , , , ,	., , , ,	ıms on						
_	a personal benefit contract?				•	Yes	✓	No			
b	Did the foundation, during the year,	pay	premiums, directly or ind	lirectly, on a personal be	nefit contract	t?	•		6 b		No
_	If "Yes" to 6b, file Form 8870.										
7a	At any time during the tax year, was					Yes	✓	No			
b	If "Yes", did the foundation receive a		,				•		7b		
3	Is the foundation subject to the sect		, , , ,			tion or					
	excess parachute payment during th					☐ Yes	✓	No			
Pai	rt VIII Information About C	Offic	ers, Directors, Trust	ees, Foundation Ma	inagers, H	ighly Pai	d En	nplo	yees,		
1	List all officers, directors, trustee	e fo	undation managers an	nd their compensation	See instru	ctions					
-	List all officers, affectors, trustee		b) Title, and average	(c) Compensation (If		tributions t	<u> </u>	(.)			
	(a) Name and address	,	hours per week	not paid, enter	employee b	enefit plans	and		Expen ther al		
			devoted to position	-0-)	deferred o	compensati	on	Ļ			
ee A	Additional Data Table										
_		<u> </u>									**
	Compensation of five highest-pai	ıa en	npioyees (otner than ti	nose included on line 1				ne, e	nter	NONE.	
a)	Name and address of each employee	paid	(b) Title, and average			tributions t yee benefit		(e)	Expens	e acco	unt.
,	more than \$50,000		hours per week devoted to position	(c) Compensation	plans a	nd deferred			her all		
			devoted to position		comp	pensation					
ONE	Ē										
					1						
ota	I number of other employees paid over	er \$5	0,000			. •					
								For	m ggr	1-PF (2020

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Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Paid E	mployees,
3 Five highest-paid independent contractors for professional service	es (see instructions). If none, enter "NOI	NE".
(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	result at a tradicational information and a set the number of	
List the foundation's four largest direct charitable activities during the tax year. Include rele organizations and other beneficiaries served, conferences convened, research papers produced.		Expenses
1		
2		
3		
4		
Deleted Towns of Deleted Towns of Constitution of the Constitution		
Part IX-B Summary of Program-Related Investments (see in Describe the two largest program-related investments made by the foundation during the		Amount
1	ie tax year on illes 1 and 2.	Amount
2		
All other program-related investments. See instructions.		
3		
-		
Total. Add lines 1 through 3		
		- 000 5= (0000)

1a

1b

2

3a 3b

4

5

212,800

212,800

212.800

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Part XII

1

2

3

4

5

b

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

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

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

income. Enter 1% of Part I, line 27b. See instructions.

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

163,402

163,402

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Form	99	0-PF	(20
Pa	rt	XII	3

90-PF (20	020)	
t XIII	Undistributed Income	(see instructions)

a From 2015.

b From 2016.

e From 2019.

f Total of lines 3a through e.

d Applied to 2020 distributable amount. . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a).)

5 Excess distributions carryover applied to 2020. (If an amount appears in column (d), the

a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2021.

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. . .

6 Enter the net total of each column as

b Prior years' undistributed income. Subtract 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 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

indicated below:

4 Qualifying distributions for 2020 from Part XII, line 4: ▶ \$ a Applied to 2019, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election required—see instructions).

c From 2017. . . . d From 2018.

- 1 Distributable amount for 2020 from Part XI, line 7
- a Enter amount for 2019 only.
- 2 Undistributed income, if any, as of the end of 2020: **b** Total for prior years: 20______, 20______

 - Excess distributions carryover, if any, to 2020:
 - 74.531

1.693

50.718 19,190

67.765 1,693

50.718

19.190

49.398

- 67,765

(a)

Corpus

213.897

49.398

263,295

74.531

188,764

(b)

Years prior to 2019

(c)

2019

						rage
	art XIV Private Operating Found	ations (see instr	uctions and Part \	VII-A, question 9)		
1a	If the foundation has received a ruling or det foundation, and the ruling is effective for 20					
b	Check box to indicate whether the organizati	on is a private oper	ating foundation des	scribed in section \Box	│ 4942(j)(3) or □	4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each	(a) 2020	(b) 2019	(c) 2018	(d) 2017	(e) Iotai
	year listed					
b	85% of line 2a					
С	Qualifying distributions from Part XII, line 4 for each year listed					
	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test—enter:					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
С	"Support" alternative test—enter:					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(iii).					
	(3) Largest amount of support					
	from an exempt organization					
	(4) Gross investment income					
Pa	rt XV Supplementary Information			foundation had s	\$5,000 or more i	in
1	assets at any time during the		ructions.)			
	List any managers of the foundation who hav before the close of any tax year (but only if	e contributed more				n
b	List any managers of the foundation who own ownership of a partnership or other entity) of				arge portion of the	
2	Information Regarding Contribution, Gra	ant, Gift, Loan, Sc	holarship, etc., Pro	ograms:		
	Check here ► ☑ if the foundation only mak	es contributions to	preselected charitab	le organizations and	does not accept	
	unsolicited requests for funds. If the foundar other conditions, complete items 2a, b, c, ar	ion makes gifts, gr	ants, etc. to individu			
a	The name, address, and telephone number of	or e-mail address of	the person to whon	n applications should	be addressed:	
	RUTH DOERING					
	10885 CLYDESDALE COURT WALTON, KY 41094					
	(859) 344-1881					
	RUTHDOERING@CHASSELIGMAN.COM					
ь 	The form in which applications should be sub WRITTEN REQUEST	mitted and informa	ition and materials t	hey should include:		
C	Any submission deadlines:					
	NONE					
d	Any restrictions or limitations on awards, suc factors:	ch as by geographic	al areas, charitable	fields, kinds of institu	itions, or other	
	NONE					

Form 990-PF (2020)				Page 11				
Part XV Supplementary Informa	ation (continued)							
Grants and Contributions Paid During the Year or Approved for Future Payment								
Recipient	Purpose of grant or	Amount						
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount				
a Paid during the year			1					
See Additional Data Table		ļJ	1					
Total	<u> </u>		> 3a	212,800				
b Approved for future payment								
	 							
1	'	1						
1	,	1						
1	1	1						
1	,	1						
1	,	1						
1	,	1						
Total			> 3h					

Form **990-PF** (2020)

Part XVI-A Analysis of Income-Producing	Activities				rage LL
Enter gross amounts unless otherwise indicated.		usiness income	Excluded by section	n 512, 513, or 514	(e) Related or exempt
1 Program service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions.)
a					
b					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments3 Interest on savings and temporary cash					
investments					1
4 Dividends and interest from securities					24,857
5 Net rental income or (loss) from real estate:					
a Debt-financed property.b Not debt-financed property.					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than					
inventory					275,666
9 Net income or (loss) from special events:10 Gross profit or (loss) from sales of inventory					
11 Other revenue: a					
b					
c					
d e					
12 Subtotal. Add columns (b), (d), and (e).					300,524
13 Total. Add line 12, columns (b), (d), and (e).			1	3	300,524
(See worksheet in line 13 instructions to verify calcular Part XVI-B Relationship of Activities to the	ılations.)				·
Line No. Explain below how each activity for which the accomplishment of the foundation's expressions.))

orm	990-PF (`											Pa	ge 13
	t XVII	- Exempt Organi	zations									able		
		ganization directly or in than section 501(c)(3)									on 501		Yes	No
a Tr	ansfers	from the reporting foun	dation to a n	oncha	ritable exe	empt organizat	tion of:	:						
(1	L) Cash											1a(1)		No
(2	2) Othe	rassets										1a(2)		No
b Ot	ther tran	sactions:												
(1	L) Sales	of assets to a nonchar	itable exempt	t orga	nization.							1b(1)		No
(2	2) Purch	nases of assets from a r	oncharitable	exem	npt organiz	ation						1b(2)		No
(3	3) Renta	al of facilities, equipmer	nt, or other a	ssets.								1b(3)		No
(4	l) Reim	bursement arrangemen	ts									1b(4)		No
•	•	s or loan guarantees.									•	1b(5)		No
-	•	mance of services or m			_						•	1b(6)		No
	_	f facilities, equipment, n										1c		No
of in	the goo any trai	wer to any of the above ds, other assets, or ser nsaction or sharing arra	vices given b ngement, sho	y the ow in	reporting f column (d	foundation. If t) the value of	the fou the go	ındatior ods, ot	n receive her asse	d less than fair mar ts, or services recei	ket valu ved.	e		
(a) Lii	ne No.	(b) Amount involved	(c) Name of	noncha	aritable exen	npt organization	+-	(d) Desc	cription of	transfers, transactions	, and shar	ring arra	ngemen	its
							+							
							-							
3- T-	N - 6		+ <i>66</i> : : - +			J								
		ndation directly or indire in section 501(c) (other	•		•						.	Z No		
		omplete the following s		1 301((6)(3)) 01 11	ii section 527 :	• •				es L	J 140		
D II	Tes, C	(a) Name of organization			(ь	Type of organia	zation			(c) Description	of relation	nship		
		(=,			\\	, .,,,				(-)				
cia.	of m	er penalties of perjury, ny knowledge and belief ch preparer has any kno	, it is true, co								ased on	all infor	matio	n of
Sigı Her		*****				2022-08-14		*	****		return			
iici	│ 	Signature of officer or t	rustee			Date		—) −	itle		below	ne prepa nstr.) 🔽	_	
	•	Print/Type preparer's	name	Prepa	arer's Sign	ature	l D	ate			PTIN			
		7,7,7					ا ا	acc		Check if self-		P00065	227	
	_	Lisa Goetz								employed ▶ 🗹		. 00005	,557	
Paid	-													
	parer Only		ANN GOETZ	СРА							Firm's E	IN ►		
	•		WAHTAH 08.	AY RD										
		UN	UNION, KY 41091							Phone no. (859) 384-6601				

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (c) (d) (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) How acquired Date acquired Date sold P-Purchase (mo., day, yr.) (mo., day, yr.) D-Donation Р 300.00 APPLE 2006-10-30 2020-12-17 300.00 APPLE Р 2008-02-06 2021-03-16 325.00 APPLE Ρ 2006-10-30 2021-06-15 137.969 COLUMBIA CONTRARIAN CORE FUND Р 2015-11-06 2021-07-27 Ρ 400.00 APPLE 2006-10-30 2021-09-28 Ρ 611.995 LORD ABBETT GROWTH LEADERS FUND 2018-05-07 2021-09-28 Capital Gain Dividends Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h Depreciation allowed (e) Gross sales price Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 38,548 871 37,677 37,731 1,366 36,365 42,108 944 41,164 5.000 3,142 1,858 56.884 1.161 55,723 30,000 18,611 11,389 91,490 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I 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 (i) F.M.V. as of 12/31/69 Adjusted basis Excess of col. (i) **(I)** Losses (from col.(h)) (j) as of 12/31/69 (k) over col. (j), if any 37,677 36,365 41,164 1,858 55,723 11,389

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation RUTH DOERING Trustee 2.00 30 ARCADIA AVE LAKESIDE PARK, KY 41017 JENNIFER DOERING Trustee 0.00 18 MITCHELL HILL FT THOMAS, KY 41075 CHAS SELIGMAN Trustee 0.00 7211 MURNAN RD COLD SPRING, KY 41076 KRISTIN TRACY Trustee 0.00 15 MITCHELL HILL FT THOMAS, KY 41075 STACY STAAT Trustee 0.00

11800 BIG BONE CHURCH ROAD

UNION, KY 41091

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year

Total .

PARISH KITCHEN1561 MADISON AVE COVINGTON, KY 41011	N/A	PC	UNRESTRICTED CHARITABLE GIFT	6,000
MADONNA HOUSE25 ORPHANAGE FORT MITCHELL, KY 41017	N/A	PC	UNRESTRICTED CHARITABLE GIFT	1,000
CARENET PREGNANCY SERVICES OF	N/A	PC	UNRESTRICTED CHARITABLE	1,000

212,800

3a

FORT MITCHELL, KY 41017	IN/A	PC	GIFT CHARITABLE	1,00
CARENET PREGNANCY SERVICES OF NKY 7134 PRICE PIKE FLORENCE, KY 41042	N/A	PC	UNRESTRICTED CHARITABLE GIFT	1,00

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to contribution status of any foundation manager

Name and address (home or husiness)

Name and dadress (nome or business)	or substantial contributor			
a Paid during the year				
EMERGENCY COLD SHELTER 634 SCOTT ST	N/A	PC	UNRESTRICTED CHARITABLE GIFT	1,000

recipient

WOMEN'S CRISIS SENTER	NI/A	DC	LINDECTRICTED CHARITARIE	1 000
REDWOOD REHABILITATION CENTER 71 ORPHANGE ROAD FT MITCHELL, KY 41017	N/A	PC	UNRESTRICTED CHARITABLE GIFT	1,000
COVINGTON, KY 41011				

REDWOOD REHABILITATION CENTER 71 ORPHANGE ROAD FT MITCHELL, KY 41017	N/A	PC	UNRESTRICTED CHARITABLE GIFT	1,000
WOMEN'S CRISIS CENTER 835 MADISON AVE COVINGTON, KY 41011	N/A	PC	UNRESTRICTED CHARITABLE GIFT	1,000

71 ORPHANGE ROAD FT MITCHELL, KY 41017			GIFT	1,000
WOMEN'S CRISIS CENTER 835 MADISON AVE COVINGTON, KY 41011	N/A	PC	UNRESTRICTED CHARITABLE GIFT	1,000
Total			▶ 3a	212,800

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year DIOCECAN CATHOLIC CHILDDENG NI/A DC LINDECTRICTED CHARITARIE 11 000

HOME 75 ORPHANAGE ROAD FT MITCHELL, KY 41017	N/A	PC	GIFT	11,000
ROSE GARDEN2040 MADISON AVE COVINGTON, KY 41014	N/A	PC	UNRESTRICTED CHARITABLE GIFT	1,000

ROSE GARDEN2040 MADISON AVE COVINGTON, KY 41014	N/A	PC	UNRESTRICTED CHARITABLE GIFT	1,000
FAMILY PROMISE336 W 9TH ST NEWPORT, KY 41071	N/A	PC	UNRESTRICTED CHARITABLE GIFT	1,000

Total .

212,800

■ 3a

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
LEARNING GROVE450 BARTLETT AVE ERLANGER, KY 41018	N/A	PC	UNRESTRICTED CHARITABLE GIFT	1,000
MENTORING DILISROT VORK ST	N/A	DC.	LINDESTRICTED CHARITARIE	6,000

MENTORING PLUS801 YORK ST NEWPORT, KY 41071	N/A	PC	UNRESTRICTED CHARITABLE GIFT	6,000
CATHOLIC CHARITIES3629 CHURCH ST	N/A		UNRESTRICTED CHARITABLE	1,000

NEWPORT, KY 41071	,	GIFT	,
CATHOLIC CHARITIES3629 CHURCH ST COVINGTON, KY 41015	N/A	UNRESTRICTED CHARITABLE	1,000

Total .

CATHOLIC CHARITIES3629 CHURCH ST	N/A	UNRESTRICTED CHARITABLE	1,000
COVINGTON, KY 41015		GIFT	·

Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
BRIGHTON CENTER741 CENTRAL AVE NEWPORT, KY 41071	N/A	PC	UNRESTRICTED CHARITABLE GIFT	1,000

*				
BETHANY HOUSE 1841 FAIRMOUNT AVENUE CINCINNATI, OH 45214	N/A	PC	UNRESTRICTED CHARITABLE GIFT	1,000

Total .

П	1841 FAIRMOUNT AVENUE CINCINNATI, OH 45214			GIFT	
	HOSEA HOUSE901 YORK STREET	N/A	PC	UNRESTRICTED CHARITABLE	1,000

CINCINNATI, OH 45214				
HOSEA HOUSE901 YORK STREET NEWPORT, KY 41071	N/A	PC	UNRESTRICTED CHARITABLE GIFT	1,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

BE CONCEDNED 1100 W DIVE ST

Total .

NI/A

COVINGTON, KY 41011		100	GIFT	1,000
ALICE LLOYD COLLEGE 100 PURPOSE ROAD PIPPA PASSES, KY 41844	N/A	PC	UNRESTRICTED CHARITABLE GIFT	5,000
BOONE COUNTY CASA	N/A	DC.	LINDECTRICTED CHARITABLE	10.000

DC

LINDESTRICTED CHARITARIE

■ 3a

1 000

100 PURPOSE ROAD PIPPA PASSES, KY 41844			GIFT	
BOONE COUNTY CASA 2989 WASHINGTON ST BURLINGTON, KY 41005	N/A	PC	UNRESTRICTED CHARITABLE GIFT	10,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
THE CARNEGIE1028 SCOTT BLVD COVINGTON, KY 41011	N/A	PC	UNRESTRICTED CHARITABLE GIFT	3,000
COVINGTON, RY 41011			GIFI	

COVINCTON, KT 11011			CIT 1	
KY SYMPHONY ORCHESTRA 540 LINDEN AVE NEWPORT, KY 41071	N/A	PC	UNRESTRICTED CHARITABLE GIFT	3,000
MT CARMEL SCHOOL	N/A		UNRESTRICTED CHARITABLE	2,500

NEWPORT, KY 41071		GIFI	
MT CARMEL SCHOOL 75 MILL CREEK LAWSON RD JACKSON, KY 41339	N/A	UNRESTRICTED CHARITABLE GIFT	2,500
		_	

MT CARMEL SCHOOL 75 MILL CREEK LAWSON RD JACKSON, KY 41339	N/A	UNRESTRICTED CHARITABLE GIFT	2,500
Total		 ▶ 3a	212,800

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

a Paid during the year

If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Foundation status of recipient

recipient

Purpose of grant or contribution

ST AGATHA ACADEMY244 S MAIN ST

Total .

N/A

WINCHESTER, KY 40391	TV/		GIFT	0,000
ST ELIZABETH HEALTHCARE 1 MEDICAL VILLAGE EDGEWOOD, KY 41017	N/A	PC	UNRESTRICTED CHARITABLE GIFT	10,000

LINRESTRICTED CHARITARIE

■ 3a

6 000

EDGEWOOD, KY 41017		SII 1	
COVINGTON CATHOLIC HIGH SCHOOL 1600 DIXIE HIGHWAY PARK HILLS, KY 41011	N/A	UNRESTRICTED CHARITABLE GIFT	5,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
UP SPRINGPO BOX 2330 CINCINNATI, OH 45223	N/A	PC	UNRESTRICTED CHARITABLE GIFT	10,000

CINCINNATI, OH 45223			GIFT	
ST TIMOTHY CHURCH10272 US 42 UNION, KY 41091	N/A	PC	UNRESTRICTED CHARITABLE GIFT	20,000
REVIV FAMILY SUPPORT FOUNDATION	N/A	PC	UNRESTRICTED CHARITABLE	10,000

UNION, KY 41091	IN/A	1	GIFT	20,000
REVIV FAMILY SUPPORT FOUNDATION 151 GOODMAN STREET CINCINNATI, OH 45219	N/A	PC	UNRESTRICTED CHARITABLE GIFT	10,000
Total			▶ 3a	212,800

Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution any foundation manager recipient

Name and address (home or business)

Name and address (nome or business)	or substantial contributor			
a Paid during the year				
KIDS ON THE BLOCK	N/A	PC	UNRESTRICTED CHARITABLE	5,300

958 COLLETT AVENUE SUITE 100 BOWLING GREEN, KY 42101			GIFT	2,722
THE VICTORIAN RIVERSIDE 702 GARRARD ST	N/A	PC	UNRESTRICTED CHARITABLE GIFT	10,000

BOWLING GREEN, KT 42101				
THE VICTORIAN RIVERSIDE 702 GARRARD ST COVINGTON, KY 41011	N/A	PC	UNRESTRICTED CHARITABLE GIFT	10,000
THE PRITCHARD COMMITTEE	N/A		UNRESTRICTED CHARITABLE	2,500

702 GARRARD ST COVINGTON, KY 41011	IN/A	PC	GIFT	10,000
THE PRITCHARD COMMITTEE 271 W SHORT ST 202 LEXINGTON, KY 40507	N/A		UNRESTRICTED CHARITABLE GIFT	2,500

COVINGTON, KY 41011			
THE PRITCHARD COMMITTEE 271 W SHORT ST 202 LEXINGTON, KY 40507	N/A	UNRESTRICTED CHARITABLE GIFT	2,500
Total		 ▶ 3a	212,800

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Status of recipient or status of recipient or recipient or substantial contributor

a Paid during the year

Total .

		l		
AMERICAN RED CROSS2111 DANA AVE CINCINNATI, OH 45207	N/A	PC	UNRESTRICTED CHARITABLE GIFT	10,000
PANORAMA APARTMENTS 111 BRENT SPENCE SQUARE COVINCTON KY 41011	N/A		UNRESTRICTED CHARITABLE GIFT	10,000

COVINGTON, KY 41011				
TRI STATE BLEEDING DISORDER FDTN 635 W 7TH ST UNIT 407 CINCINNATI, OH 45203	N/A	PC	UNRESTRICTED CHARITABLE GIFT	5,000

Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

THOMAS MORE UNIVERSITY 333 THOMAS MORE PARKWAY CRESTVIEW HILLS, KY 41017	N/A	PC	UNRESTRICTED CHARITABLE GIFT	20,000
MILECTONECI 2272 BIGGS BD	N/A	DC	LINDECTRICTED CHARITARIE	10.000

CRESTVIEW HIELS, RT 11017				
MILESTONES12372 RIGGS RD INDEPENDENCE, KY 41051	N/A	PC	UNRESTRICTED CHARITABLE GIFT	10,000
CAMPBELLSVILLE UNIVERSITY 1 UNIVERSITY DR CAMPBELLSVILLE KV 42718	N/A	PC	UNRESTRICTED CHARITABLE GIFT	4,500

212,800

INDEPENDENCE, KY 41051			GIFT	
CAMPBELLSVILLE UNIVERSITY 1 UNIVERSITY DR CAMPBELLSVILLE, KY 42718	N/A	PC	UNRESTRICTED CHARITABLE GIFT	4,500
				i

Total .

Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
VILLA MADONNA ACADEMY 2500 AMSTERDAM RD 1	N/A	PC	UNRESTRICTED CHARITABLE GIFT	10,000

VILLA HILLS, KY 41017				
5 SPIRAL DR SUITE 100	N/A	PC	UNRESTRICTED CHARITABLE GIFT	5,000
FLORENCE, KY 41042				

5 SPIRAL DR SUITE 100 FLORENCE, KY 41042		GIFT	
Total	 	▶ 3a	212,800

efile GRAPHIC print - DO NOT F	PROCESS	As Filed D	ata -			DLN: 93491226006032	
TY 2020 Accounting Fo	TY 2020 Accounting Fees Schedule						
Name: CHAS AND RUTH S				H SELIGMAN			
	FAMILY F	OUND	ATION INC				
EIN: 61-1401360							
Softv	ware ID:	2001155	1				
Software '	Version:	2020v4.0)				
Category	Ame	ount		nvestment ncome	Adjusted Net Income	Disbursements for Charitable Purposes	
ACCOUNTING FEES		3,800		3,800		0 0	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		LN: 93491226006032
TY 2020 Investments Corpora	te Stock Schedule		
Name:	CHAS AND RUTH SELIC	6MAN	
	FAMILY FOUNDATION	INC	
EIN:	61-1401360		
Software ID:	20011551		
Software Version:	2020v4.0		
Investments Corporation Stock Schedule			4
Name of Stock	•	End of Year Book Value	End of Year Fair Market Value

Corporate Stocks

1,506,685

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DLN	: 93491226006032	
TY 2020 Investments - Other Schedule					
Name:	CHAS AND RUTH	H SELIGMAN			
	FAMILY FOUNDATION INC				
EIN:	61-1401360				
Software ID:	20011551				
Software Version:	2020v4.0				
nvestments Other Schedule 2				4	
Category/ Item	Lis	ted at Cost or FMV	Book Value	End of Year Fair Market Value	
Mutual Funds & ETF's	AT	COST	1,406,095	2,012,589	

efile GRAPHIC print - DO NOT PROCES	S As Filed Data	-	DLN	N: 93491226006032		
TY 2020 Other Professional	Fees Schedu	le		_		
Nam	ne: CHAS AND R	RUTH SELIGMAN				
	FAMILY FOU	FAMILY FOUNDATION INC				
EI	: N: 61-1401360	61-1401360				
Software I	D: 20011551					
Software Version	on: 2020v4.0					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
INVESTMENT FEES	18,298	18,298	0	0		

efile GRAPHIC print - DO NOT	PROCESS	As Filed Data	-	DLI	N: 93491226006032
TY 2020 Taxes Sched	lule				
	Name:	CHAS AND F	RUTH SELIGMAN		
		FAMILY FOU	NDATION INC		
	EIN:	61-1401360			
Soft	tware ID:	20011551			
Software	Version:	2020v4.0			
Taxes Schedule	,		,		
Category	An	nount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAX		2,000	2,000		

efile GRAPHIC print - DC	NOT PROCESS As Filed Data			DLN: 93491226006032			
Schedule B	Sched	lule of Contributors		OMB No. 1545-0047			
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service		to Form 990, 990-EZ, or 990-PF. <u>gov/Form990</u> for the latest inform	ation.	2020			
Name of the organization CHAS AND RUTH SELIGMAN	I		Employer id	dentification number			
FAMILY FOUNDATION INC Organization type (check	r anal:		61-1401360	1			
Organization type (check	Conej.						
Filers of:	Filers of: Section:						
Form 990 or 990-EZ	☐ 501(c)() (enter number)	organization					
	4947(a)(1) nonexempt cha	aritable trust not treated as a pr	ivate foundation				
	☐ 527 political organization						
Form 990-PF	✓ 501(c)(3) exempt private f	oundation					
	4947(a)(1) nonexempt cha	aritable trust treated as a private	foundation				
	☐ 501(c)(3) taxable private f	oundation					
	on filing Form 990, 990-EZ, or 990- roperty) from any one contributor.						
Special Rules							
under sections 509 received from any	n described in section 501(c)(3) filing (a)(1) and 170(b)(1)(A)(vi), that chone contributor, during the year, to 1h, or (ii) Form 990-EZ, line 1. Cor	ecked Schedule A (Form 990 o tal contributions of the greater o	r 990-EZ), Part II, line 13,	, 16a, or 16b, and that			
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.							
during the year, co If this box is check purpose. Don't cor	n described in section 501(c)(7), (8 intributions exclusively for religious ed, enter here the total contribution inplete any of the parts unless the Ce, etc., contributions totaling \$5,000	s, charitable, etc., purposes, but ns that were received during the General Rule applies to this org	no such contributions total year for an exclusively re anization because it rece	aled more than \$1,000. eligious, charitable, etc., eived <i>nonexclusively</i>			
990-EZ, or 990-PF), but it	that isn't covered by the General R must answer "No" on Part IV, line t I, line 2, to certify that it doesn't m	2, of its Form 990; or check the	box on line H of its Form	rm 990, ⊧990-EZ			
For Paperwork Reduction Actor Form 990, 990-EZ, or 990-		Cat. No. 30613X	Schedule B (Form 990	0, 990-EZ, or 990-PF) (2020)			

Employer identification number 61-1401360

FAMILY FC	DUNDATION	IN
Part I		
Contribut	ors	•

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1	Chas Seligman Dist Co Inc 10885 Clydesdale Court Walton, KY 41094	\$ 281,192	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d) Type of contribution
No.	Name, address, and ZIP + 4	Total contributions	
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		Schedule B (F	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

Schedule	B (Form 990, 990-EZ, or 990-PF) (2020)			Page 4
	ganization RUTH SELIGMAN UNDATION INC			mployer identification number 1-1401360
Part III	than \$1,000 for the year from any one contri	outor. Complete cotal of exclusively structions.) ► \$	olumns <mark>(a)</mark> througl [,] religious, charitab	n section 501(c)(7), (8), or (10) that total more in (e) and the following line entry. For sile, etc., contributions of \$1,000 or less for
(a) No. from Part I	(b) Purpose of gift	(c) Us	se of gift	(d) Description of how gift is held
-	Transferee's name, address, and ZI		nsfer of gift Relatio	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	- (c) Us	se of gift	(d) Description of how gift is held
-	Transferee's name, address, and Zl		nsfer of gift Relatio	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Us	se of gift	(d) Description of how gift is held
			nsfer of gift	
	T			
-	Transferee's name, address, and ZI		Relatio	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	- (c) Us	se of gift	(d) Description of how gift is held
-	Transferee's name, address, and Zl	nship of transferor to transferee		
			Sch	edule B (Form 990, 990-EZ, or 990-PF) (2020)