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Internal Revenue Service

As Filed Data -

## DLN: 93491227000092

2021

OMB No. 1545-0047

## Form 990-PF **Return of Private Foundation** Department of the Treasury

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 2021, or tax year be	eginning 01-01-20	)21 , a	nd en	ding 12-31-	2021	
		Indation FOUNDATION				A Employer id	entification numbe	er
-						85-1225814		
	ber and	street (or P.O. box number if mail is not de	elivered to street address)	Room/suite		<b>B</b> Telephone nu	ımber (see instructio	ns)
P	JOUX	59				(419) 582-2681	L	
		, state or province, country, and ZIP or fore H 453510069	eign postal code	1			application is pendir	ng, check here
		1 Mark 2 mark 1	Traitie Landon of a	Common modelli o alconito		<b>D.4</b>		P —
i Cr	еск аі	I that apply:	☐ Initial return of a	former public charity	'	=	ganizations, check h ganizations meeting	▶ ⊔
		Address change	☐ Name change				k here and attach co	
I Ch	eck tv		(c)(3) exempt private f	foundation			undation status was	
_		1 4947(a)(1) nonexempt charitable tru	· · · · · <b>—</b>	e private foundation		under sectio	n 507(b)(1)(A), che	ck nere • —
				Cash 🗹 Accru	ual	F If the founda	ation is in a 60-mont	h termination 🦳
		rom Dart II col (c)	Other (specify)				n 507(b)(1)(B), che	
11116	10)	(Pa	art I, column (d) must	be on cash basis.)				
Pa	rt I	Analysis of Revenue and Ex	penses (The total	(a) Revenue and				(d) Disbursements
		of amounts in columns (b), (c), and (d) n		expenses per	(d)	Net investment income	(c) Adjusted net income	for charitable purposes
		equal the amounts in column (a) (see ins		books				(cash basis only)
	1	Contributions, gifts, grants, etc., rec schedule)	:eived (attach	47,900				
	2	Check ▶ ☐ if the foundation is <b>not</b>	required to attach					
	_	Sch. B						
	3	Interest on savings and temporary c						
	4	Dividends and interest from securitie	es					
	5a	Gross rents	• • • • • • • • • • • • • • • • • • •					
a)	b	Net rental income or (loss)						
Ĕ	6a	Net gain or (loss) from sale of assets	s not on line 10					
Revenue	b	Gross sales price for all assets on lin						
ž	7	Capital gain net income (from Part I				0		
	8	Net short-term capital gain						
	9 10a							
	b	Gross sales less returns and allowan Less: Cost of goods sold	ces					
	c	Gross profit or (loss) (attach schedu	ile)	<u> </u>				
	11	Other income (attach schedule)						
	12	Total. Add lines 1 through 11		47,900		0	(	
<u>,                                     </u>	13	Compensation of officers, directors,		0		0	(	0
) Se	14	Other employee salaries and wages	,					
<u>=</u>	15	Pension plans, employee benefits						
Ĭ	16a	Legal fees (attach schedule)						
is e	b	Accounting fees (attach schedule)		<b>%</b> J 50		0	(	50
	С	Other professional fees (attach sche	dule)					
É	17	Interest						
and Administrative Expenses	18	Taxes (attach schedule) (see instruc	ctions)					
Ĭ	19	Depreciation (attach schedule) and o	depletion					
<u> </u>	20	Occupancy						
	21	Travel, conferences, and meetings .						
= ====================================	22	Printing and publications						
Operating	23	Other expenses (attach schedule)						
)	24	Total operating and administration	ve expenses.					
		Add lines 13 through 23		50		0	(	50
	25	Contributions, gifts, grants paid		43,143	3			43,143
	26	Total expenses and disbursemen	ı <b>ts.</b> Add lines 24 and	40 400		0	,	43,193
	27	Subtract line 26 from line 12:		43,193	1	0		45,193
	-, а	Excess of revenue over expenses	s and					
		disbursements		4,707	<u>'</u>			-
	b c	Net investment income (if negative, Adjusted net income (if negative,				0		-
or		work Reduction Act Notice, see in	•		Щ,	Cat. No. 11289	<u> </u>	) <mark> </mark> rm <b>990-PF</b> (2021)
٠.	. apei	Noussalon Act Hotice, see III				Jac. 190. IIZO9/	, FO	>>U=FF (∠UZI,

		should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	43,101	47,808	47,808
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			_
		Less: allowance for doubtful accounts ▶			
Ś	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)			
	С	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)			_
	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)	43,101	47,808	47,808
	17	Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
g	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe •)			
	23	Total liabilities(add lines 17 through 22)	0	0	
nces		Foundations that follow FASB ASC 958, check here ▶ □ and complete lines 24, 25, 29 and 30.			
ala	24	Net assets without donor restrictions			
ĕ	25	Net assets with donor restrictions			
Fund Balance		Foundations that do not follow FASB ASC 958, check here  and complete lines 26 through 30.			

0

47,808

47,808

47,808

1

2

3

4

5

6

43,101

4,707

47,808

47,808

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0

43,101

43,101

43,101

Capital stock, trust principal, or current funds .

of-year figure reported on prior year's return)

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

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

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

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions) . . . . .

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year-Part II, column (a), line 29 (must agree with end-

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

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

Net Assets or

26

27

28

29

30

Part III

2

3

4

5

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Page **3** 

		rind(s) of property sold (e.g., real ese; or common stock, 200 shs. MLC	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)				
1a									
			T						
	(e)	<b>(f)</b> Depreciation allowed		( <b>g)</b> other basis		<b>h)</b> r (loss)			
	Gross sales price	(or allowable)		ense of sale		) minus (g)			
а									
b									
С									
d									
e									
	Complete only for assets show	ng gain in column (h) and owned by	y the foundation	on 12/31/69		I)			
	(i)	(j)		(k)	Gains (Col. (h) gain minus col. (k), but not less than -0-) <b>or</b>				
	F.M.V. as of 12/31/69	Adjusted basis as of 12/31/69		of col. (i) . (j), if any	Losses (from col.(h))				
a		, ,		(37)	· .				
b									
С									
d									
e									
			n, also enter in P						
2	Capital gain net income or (ne	t capital loss)     { If (los	ss), enter -0- in F	art I, line 7	2				
3	Net short-term capital gain or	(loss) as defined in sections 1222(5	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						
	,								

orm :	990-PF (2021)				Р	age <b>4</b>
Par	t V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see inst	ructi	ons)			
a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.					
	Date of ruling or determination letter:(attach copy of letter if necessary-see instructions)					
1.						
b	All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations enter 4% (0.04) 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				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0
-	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	5				0
6	Credits/Payments:	$\neg$				
а	2021 estimated tax payments and 2020 overpayment credited to 2021   6a   0	ĺ				
b	Exempt foreign organizations—tax withheld at source 6b 0					
С	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				0
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached.	8				0
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				0
	taran da antara da a	10				
		11				
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did				V	N -
.a			-	1-	Yes	No No
h	it participate or intervene in any political campaign?  Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructio		. ⊢	1a		No
		115		1ь		No
	for the definition		H	10		No
				- 1		
_	published or distributed by the foundation in connection with the activities.			.		No
	Did the foundation file <b>Form 1120-POL</b> for this year?		$\vdash$	1c		No
d	(1) On the foundation. $\triangleright$ \$0 (2) On foundation managers. $\triangleright$ \$0			- 1		
				- 1		
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			- 1		
	on foundation managers. • \$0			- 1		
	Has the foundation engaged in any activities that have not previously been reported to the IRS?		·	2		No
	If "Yes," attach a detailed description of the activities.			- 1		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			- 1		
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes .		· L	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		Ŀ	4a		No
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?....................................		· 🗠	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		·  _	5		No
	If "Yes," attach the statement required by General Instruction T.			- 1		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			- 1		
	By language in the governing instrument, or			- 1		
	• 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?		· L	6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c),					
	and Part XIV.		· L	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	<b>▶</b> он					
h	If the angular is "Vac" to line 7, has the foundation furnished a serve of Form 200 DE to the Attendance					
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? If "No," attach explanation.		<u> </u>	вь	Yes	
9	General (or designate) of each state as required by General Instruction G? Ir Ivo, attach explanation.  Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)		H.	70	162	
	or 4942(j)(5) for calendar year 2021 or the taxable year beginning in 2021? See the instructions for Part XIII.  If "Yes," complete Part XIII			9		Na
	If "Yes," complete Part XIII Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their name</i>		. ⊢	-		No
	and addresses	.5		10		No
	and addresses.	• •			DE (	2021)

	Website address ►N/A	
14	The books are in care of ▶SANDRA HOEHNE	_ Telephone no. ▶(419) 582-2681
	Located at ▶275 WEST MAIN STREET OSGOOD OH	ZIP+4 ▶45351
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form $1041$ —check and enter the amount of tax-exempt interest received or accrued during the year	here

1

	and effect the amount of tax exempt interest received of accrace during the year.				
16	At any time during calendar year 2021, did the foundation have an interest in or a signature or other authority over				
	a bank, securities, or other financial account in a foreign country?	16		No	
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ▶				
Pa	rt VI-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	
<b>1</b> a	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?	1a(1)		No	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				
	a disqualified person?	1a(2)		No	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1a(3)		No	
	(4) Pay compensation to or pay or reimburse the expenses of a disqualified person?	1a(4)		No	

country ▶	<b>5</b>		
Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required	d		
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?	1a(1)	<u>,                                    </u>	No
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
a disqualified person?............................	1a(2)	<u>,                                    </u>	No
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1a(3)	<u>,                                    </u>	No
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1a(4)	<u>,                                    </u>	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)?.....................	1a(5)	<i>i</i>	No
(6) Agree to pay money or property to a government official? (Exception. Check "No"			
if the foundation agreed to make a grant to or to employ the official for a period			
after termination of government corvice, if terminating within 90 days	12/6	ا ا	No.

after termination of government service, if terminating within 90 days.). . . . . . . . No **b** If any answer is "Yes" to 1a(1)-(6), did **any** of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions. . . . . . . . **1**b c Organizations relying on a current notice regarding disaster assistance check here. . . . . . . . d Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, **1**d No Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5): a At the end of tax year 2021, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2021?............ 2a No

2b

3a

3b

4a

4b

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No

No

No

**b** Are there any years listed in 2a for which the foundation is **not** applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) 

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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 2021?.

Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at

b If "Yes," did it have excess business holdings in 2021 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 

**▶** 20\_\_\_\_\_, 20\_\_\_\_\_, 20\_\_\_\_\_\_

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Statements Regarding Activities for Which Form 4720 May Be Required (continued)
the year did the foundation pay or incur any amount to:
man and an analysis of the section of the section (and the section 404F(-))?

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))?						5a(1)		No
	(2) Influence the outcome of any s	pecific	public election (see sect	ion 4955); or t	o carry				
	on, directly or indirectly, any vo	oter re	gistration drive?				5a(2)		No
	(3) Provide a grant to an individual for travel, study, or other similar purposes?						5a(3)		No
	(4) Provide a grant to an organizat	ion ot	her than a charitable, etc	., organization	described	l			
	in section 4945(d)(4)(A)? See i	nstruc	tions				. 5a(4)		No
	(5) Provide for any purpose other t	han re	eligious, charitable, scient	ific, literary, o	r				
	educational purposes, or for the	e prev	ention of cruelty to childr	en or animals?			. 5a(5)		No
b	If any answer is "Yes" to 5a(1)-(5)	, did a	ny of the transactions fa	il to qualify und	der the ex	ceptions described in			
	Regulations section 53.4945 or in a	curre	nt notice regarding disast	er assistance?	See instr	uctions	. 5b		
C	Organizations relying on a current r	notice	regarding disaster assista	ance check .		▶ □			
d	If the answer is "Yes" to question 5	a(4),	does the foundation claim	exemption fro	m the				
	tax because it maintained expendit	ure re	sponsibility for the grant?				5d		
	If "Yes," attach the statement requ	ired by	Regulations section 53.4	4945−5(d).					
6a	Did the foundation, during the year	, recei	ve any funds, directly or	indirectly, to p	ay premit	ıms on			
	a personal benefit contract?						6a		No
b	Did the foundation, during the year						<b>6</b> b		No
	If "Yes" to 6b, file Form 8870.								
7a	At any time during the tax year, wa	s the	foundation a party to a p	rohibited tax sl	nelter tran	nsaction?	7a		No
b	If "Yes", did the foundation receive						<b>7</b> b		
8	Is the foundation subject to the sec	tion 4	960 tax on payment(s) o	f more than \$1	,000,000	in remuneration or			
	excess parachute payment during t	he yea	ar?				. 8		No
	Information About	Offic	ers Directors Trust	ees Founda	tion Ma	nagers, Highly Paid En	nlovees		
Pa	and Contractors	<b></b>	ers, Directors, Trust	ccs, rounde	1011 110	magero, mgm, raid En	ipioyees,		
1	List all officers, directors, truste	es. fo	undation managers an	d their comp	ensation.	See instructions			
	List an officers, an eccors, craste		<b>b)</b> Title, and average	(c) Compens		(d) Contributions to	(-) =		
	(a) Name and address	`	hours per week	not paid,		employee benefit plans and	(e) Exper other a		
			devoted to position	-0-)		deferred compensation	01.10. 0		
	IANNE L HERSHBERGER	PRES:	IDENT		0	0			0
	VEST MAIN STREET OD, OH 45351								
	RA A HOEHNE	TREA	SURER		0	0			0
275 W	VEST MAIN STREET	1.00			_	_			_
OSGO	OD, OH 45351								
	I M BURGHARDT	SECR 1.00	ETARY		0	0			0
	VEST MAIN STREET OD, OH 45351	1.00							
	Compensation of five highest-pa	id em	plovees (other than th	ose included	on line 1	—see instructions). If nor	ne, enter "	NONE.	."
						(d) Contributions to	,		
(a)	Name and address of each employee	paid	<b>(b)</b> Title, and average hours per week	(c) Compe	neation	employee benefit	(e) Expen		
	more than \$50,000		devoted to position	(c) compa	. IISation	plans and deferred	other all	owanc	es
NON	-		•			compensation			
NON	_	-							
				I		1			
						+			

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Part VII  Information About Officers, Directors, Trustees, I and Contractors (continued)	Foundation Managers, Highly Pa	id Employees,
3 Five highest-paid independent contractors for professional service	es (see instructions). If none, enter	"NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		0
Part VIII-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include rele- organizations and other beneficiaries served, conferences convened, research papers produc		of Expenses
1		
2		<del></del>
3		
4		
Part VIII-B Summary of Program-Related Investments (see in	nstructions)	
Describe the two largest program-related investments made by the foundation during the	e tax year on lines 1 and 2.	Amount
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		0
		Form <b>990-PF</b> (2021)

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755

49,569

2,478

2,478

2,478

2,478

2,478

43,193

43.193

Form **990-PF** (2021)

4

5

6

1

2c

3

4

5

6

7

1a

1b

2

3a

3h

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4

5

1

2a

3

4

5

6

1

2

3

Part XI

Part X

b	Average of monthly cash balances	1b	50,324
C	Fair market value of all other assets (see instructions)	<b>1</b> c	0
d	<b>Total</b> (add lines 1a, b, and c)	1d	50,324
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		

2 2 50,324 3 

Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign

2a

2b

Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see

. . Net value of noncharitable-use assets. Subtract line 4 from line 3.

organizations check here 

and do not complete this part.)

Tax on investment income for 2021 from Part V, line 5. . . . . . . .

Income tax for 2021. (This does not include the tax from Part V.). . .

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

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.,

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

Distributable amount before adjustments. Subtract line 2c from line 1. . . . . . . . . . . . . . . .

Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1. . .

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

a From 2016. . . . . **b** From 2017. . . . . c From 2018. . . . d From 2019. . . . .

e From 2020. . . . .

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2,478

2,478

Form **990-PF** (2021)

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Form	990-PF	(202	
			7

PF (20	021)		
	Undistributed Income	(500	instr

a Enter amount for 2020 only. . . . . . . **b** Total for prior years: 20\_\_\_\_\_\_, 20\_\_\_\_\_\_, 20\_\_\_\_\_\_ Excess distributions carryover, if any, to 2021:

f Total of lines 3a through e . . . . . . . .

**d** Applied to 2021 distributable amount. . . . e Remaining amount distributed out of corpus

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

**5** Excess distributions carryover applied to 2021. (If an amount appears in column (d), the

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

Subtract lines 7 and 8 from line 6a . . . . .

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 2022 . . . . . . 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 2016 not applied on line 5 or line 7 (see instructions) . . . Excess distributions carryover to 2022.

indicated below:

10 Analysis of line 9: a Excess from 2017. **b** Excess from 2018. . c Excess from 2019. . .

d Excess from 2020. .

e Excess from 2021. .

4 Qualifying distributions for 2021 from Part XI, line 4: ▶ \$ \_\_\_\_ a Applied to 2020, 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). . . . . . . . .

art XII	Undistributed Income (see instru	ıctions)
Distributab	le amount for 2021 from Part X, line 7	

Distributable amount for 2021 from Part X, line 7	Γ
Undistributed income, if any, as of the end of 2021:	Γ

4,232

4.232

40.715

4.232

40.715

44,947

44.947

(b)

Years prior to 2020

(a)

(c)

2020

factors:

Form 990-PF (2021)  Part XIV Supplementary Informa	tion (continued)			Page <b>11</b>
Part XIV Supplementary Informa 3 Grants and Contributions Paid De		d for Future	Pavment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
Name and address (home or business) any foundation manager or substantial contributor	recipient	contribution	1	
a Paid during the year See Additional Data Table	or substantial contributor			
Total			▶ 3a	43,143

Total	 <u> </u>	▶ 3a	43,143
<b>b</b> Approved for future payment			
Total	 	▶ 3b	0
			Form <b>990-PF</b> (2021)

nter gross	amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
_	n service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	function income (See instructions.)
-						
	and contracts from government agencies rship dues and assessments					
	t on savings and temporary cash					
	ds and interest from securities					
	etal income or (loss) from real estate:					
	financed property ebt-financed property					
	ital income or (loss) from personal property					
	nvestment income					
Gain or invento	(loss) from sales of assets other than					
	ome or (loss) from special events:					
Gross	profit or (loss) from sales of inventory					
Other r	evenue: a					
	<u> </u>					
е			0		(	) (
e ! Subtotal.	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)		0	13	3	
e Subtota Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations.)				
e Subtota Total. (See wo Part XV	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which	lations.)  le Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XV-A contribut	ed importantly to	
e Subtotal. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu  Relationship of Activities to the Explain below how each activity for which	lations.)  le Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XV-A contribut	ed importantly to	
e Subtota Total. (See wo Part XV ine No.	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which	lations.)  le Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XV-A contribut	ed importantly to	
e Subtota Total. (See wo Part XV ine No.	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which	lations.)  le Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XV-A contribut	ed importantly to	
e Subtota Total. (See wo Part XV	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which	lations.)  le Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XV-A contribut	ed importantly to	
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Subtota Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which	lations.)  le Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XV-A contribut	ed importantly to	
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Subtota Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which	lations.)  le Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XV-A contribut	ed importantly to	
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Part XVI

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

										other organizati itical organizatio	on described in sect ns?	tion 501		Yes	No
		fers from the reporting foundation to a noncharitable exempt organization of:													
				-								.	1a(1)		No
	(2)	Other	assets									[	1a(2)		No
b	Other	trans	actions:												
	(1) 9	Sales	of assets to a no	nchari	table exemp	t orga	anization.						<b>1</b> b(1)		No
			ases of assets fro									- F	1b(2)		No
			of facilities, equ		-							- t	1b(3)		No
			ursement arrang									l l	1b(4)		No
										 		l l	1b(5)		No No
	` '						-					- t	1b(6) 1c		No
		-													110
	in any	trans	saction or sharin	g arrai	ngement, sh	ow in	column (d)	) the value of t		goods, other ass	ed less than fair ma ets, or services rece	eived.			
(a)	Line N	0.	(b) Amount involv	ed	(c) Name of	nonch	aritable exen	npt organization	╀	(d) Description o	f transfers, transaction	s, and shar	ing arrar	ngemen	its
		-							-						
		+							+						
									t						
		_							┞						
		-							╀						
		-							$\vdash$						
		+							╁						
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									_						
		_							$\vdash$						
	Is the	found	dation directly or	indira	ctly offiliator	d with	or rolated	t to one or me	ro t	ax-exempt organ	vizations				
			,		•		•	,				vec 🔽	] No		
			mplete the follow	•		1 301	(0)(3)) 01 11	r section 527:	•			163	1110		
ь	11 16.	3, 60	(a) Name of orga	_			(b	) Type of organiz	atio	n	(c) Description	on of relatio	nship		
		Unda	r nenalties of no	riury 1	declare tha	+ I h ~	Ve evamina	ed this return	incl	uding accompany	ring schedules and s	statement	e and	to the	hes+
											than taxpayer) is l				
Sig	gn		n preparer has ar	ny kno	wledge.		ı								
He	re	*	****					2022-08-11		*****		May the IR with the pr	S discuss eparer sh	this retu own belo	irn ow?
		s	ignature of office	er or tr	ustee			Date		Title		See instru	ctions. 🖸	Yes [	□ <sub>No</sub>
	<u> </u>		Print/Type prep	arer's	name	Prep	arer's Sign	ature		Date	Check if self-	PTIN			
			JONATHAN R	ICHVD	'NS					2022.00.44	employed ▶ □		P01311	831	
Pa			JONATHANK	ACI IAR						2022-08-11					
	epa		Firm's name ▶	CLIF	TONLARSON.	ALLEN	l LLP				1	Firm's EI	N <b>&gt;</b> 41.	.07467	749
Us	e O	nly					- 2450					1 11111 5 61	·	J/7U/	· ¬ J
			Firm's address	► ON	IE SEAGATE	SUITE	= 2650						/ 4		274
	TOLEDO, OH 43604 Phone no. (419) 244-3711							3/11							

Form 990PF Part XIV 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 PC HIGH SCHOOL GYM 7,507

MARION LOCAL ATHLETIC BOOSTERS

PO BOX 31 MARIA STEIN, OH 45860			
MCDO PO BOX 65 MARIA STEIN, OH 45860	PC	BIKE PATH PLEDGE	10,000
	PC	CORPORATE SPONSORSHIP	300

SCOREBOARD

PO BOX 65 MARIA STEIN, OH 45860			
CANCER ASSOCIATION OF DARKE COUNTY 1111 SWEITZER ST STE C GREENVILLE, OH 45331	PC	CORPORATE SPONSORSHIP	300
Total	 	▶ 3a	43,143

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 PC BRONZE SPONSORSHIP 250 CANCER ASSOCIATION OF MERCER COUNTY

18 S MAIN ST ELINA, OH 45822			
ENTER FOR NEUROLOGICAL EVELOPMENT 8 MAIN ST	PC	DONATION	

CEI DF' BURKETTSVILLE, OH 45310 CHICKASAW COMMUNITY PARK ASSOCIATION PO BOX 184

CHICKASAW, OH 45826

Total . .

PC	DONATION

▶ 3a

2,500

5,000

43,143

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			
COMMUNITY FOUNDATION OF SHELBY COUNTY 100 S MAIN AVE SUITE 202	PC	MATCH/NEW CHOICES	2,500

SIDNEY, OH 45365		
FORT LORAMIE EDUCATION FOUNDATION PO BOX 118 FORT LORAMIE OH 45845	PC	SCHOLARSHIP

	PC	SCHOLARSHIP	1,500
	PC	MLK CLASSIC	1,000

PO BOX 118 FORT LORAMIE, OH 45845				
FORT LORAMIE SCHOOLS		PC	MLK CLASSIC	
EZE CREENRACK RD	l .		l .	

FORT LORAMIE, OH 45845			
FORT LORAMIE SCHOOLS 575 GREENBACK RD	PC	MLK CLASSIC	1,000
	I		1

ORT LORAMIE SCHOOLS		
75 GREENBACK RD		
ORT LORAMIE, OH 45845		

Total		▶ 3a	43 143
575 GREENBACK RD FORT LORAMIE, OH 45845			

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

	or substantial contributor			
a Paid during the year				
HABITAT FOR HUMANITY OF LOGAN COUNTY		PC	DONATION	2,500

4399 CO RD 130 HUNTSVILLE, OH 43324			
LOGAN COUNTY NEIGHBORHOOD OUTREACH 13976 IRONWOOD AVE LAKEVIEW, OH 43331	PC	DONATION	2,000

LOGAN COUNTY NEIGHBORHOOD OUTREACH 13976 IRONWOOD AVE LAKEVIEW, OH 43331	PC	DONATION	2,000
MAV YOUTH MENTORING 1005 N MAIN ST	PC	DONATION	2,500

13976 IRONWOOD AVE LAKEVIEW, OH 43331			
MAV YOUTH MENTORING 1005 N MAIN ST CELINA, OH 45822	PC	DONATION	2,500

Total . .

43,143

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

MARION COMMUNITY SCHOLARSHIP FOUNDATION 1901 STATE ROUTE 716 MARIA STEIN, OH 45860	PC	SCHOLARSHIP	1,500
MARION LOCAL SCHOOLS	PC	BOOK PROGRAM	1,836

MARION LOCAL SCHOOLS 1901 STATE ROUTE 716 MARIA STEIN, OH 45860	PC	BOOK PROGRAM	1,836
MERCER COUNTY CIVIC FOUNDATION 119 W FULTON ST CFLINA OH 45822	PC	TRI STAR ETERNAL SCHOLARSHIP	1,500

MARIA STEIN, OH 45860			
MERCER COUNTY CIVIC FOUNDATION 119 W FULTON ST CELINA, OH 45822	PC	TRI STAR ETERNAL SCHOLARSHIP	1,500
Total	 	▶ 3a	43,143

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			
NEW BREMEN FOUNDATION	PC	NEW BREMEN BLANKETEERS	500
PO BOX 97			

NEW BREMEN FOUNDATION PO BOX 97 NEW BREMEN, OH 45869			
OUR HOME FAMILY RESOURCE CENTER	PC	EMPTY BOWLS MERCER COUNTY 2021	250

		1	
OUR HOME FAMILY RESOURCE CENTER 117 W FAYETTE ST CELINA, OH 45822	PC	EMPTY BOWLS MERCER COUNTY 2021	250
Total	 	<b>&gt;</b> 3a	43,143

efile GRAPHIC print - DO NOT P	ROCESS As File	ed Data -	D	LN: 93491227000092	
TY 2021 Accounting Fees Schedule					
	Name: OSGOOD FOUNDATION				
	<b>EIN:</b> 85-1225814				
		<del></del>	+	1	
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	

50

ACCOUNTING FEES

Schedule B Schedule of Contributors			OMB No. 1545-0047
(Form 990) Department of the Treasury Internal Revenue Service	► Attach to Form ► Go to <u>www.irs.gov/Form</u>	2021	
Name of the organization OSGOOD FOUNDATION			Employer identification number
Organization type (chec	k one):		85-1225814
Filers of:	Section:		
Form 990 or 990-EZ	☐ 501(c)( ) (enter number) organiz	ation	
	4947(a)(1) nonexempt charitable	trust <b>not</b> treated as a private founda	tion
	☐ 527 political organization		
Form 990-PF	☑ 501(c)(3) exempt private foundati	on	
	4947(a)(1) nonexempt charitable	trust treated as a private foundation	
	☐ 501(c)(3) taxable private foundation	on	
	tion filing Form 990, 990-EZ, or 990-PF that property) from any one contributor. Comple		
Special Rules			
under sections 50 received from any	on described in section 501(c)(3) filing Form 19(a)(1) and 170(b)(1)(A)(vi), that checked Solve contributor, during the year, total content 1h, or (ii) Form 990-EZ, line 1. Complete F	Schedule A (Form 990 or 990-EZ), Pributions of the greater of <b>(1)</b> \$5,000	art II, line 13, 16a, or 16b, and that
during the year, to	on described in section 501(c)(7), (8), or (10 otal contributions of more than \$1,000 exclude prevention of cruelty to children or animal	<i>sively</i> for religious, charitable, scient	
during the year, c If this box is chec purpose. Don't co	on described in section 501(c)(7), (8), or (10 ontributions exclusively for religious, charitaked, enter here the total contributions that we mplete any of the parts unless the <b>General</b> le, etc., contributions totaling \$5,000 or more	able, etc., purposes, but no such con vere received during the year for an <b>Rule</b> applies to this organization be	tributions totaled more than \$1,000. exclusively religious, charitable, etc. cause it received nonexclusively
990-EZ, or 990-PF), but i	n that isn't covered by the General Rule and t <b>must</b> answer "No" on Part IV, line 2, of its rt I, line 2, to certify that it doesn't meet the	Form 990; or check the box on line	H of its Form 990-EZ
For Paperwork Reduction Ac	t Notice, see the Instructions	Cat. No. 30613X	Schedule B (Form 990) (2021)

for Form 990, 990-EZ, or 990-PF.

Name of organization	
OSGOOD FOUNDATION	
B / I	

lame of organization		Employer identification	Employer identification number		
OSGOOD FOUNDATION		85-1225814	85-1225814		
Part I Contributors	Contributors (see instructions). Use duplicate copies of Part I if add	litional space is needed.			
(a)	(b)	(c)	(d)		
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution		
1	THE OSGOOD STATE BANK  275 W MAIN STREET  OSGOOD, OH 45351	\$ 39,900	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a)	(b)	(c)	(d) Type of contribution		
No.	Name, address, and ZIP + 4	Total contributions			
2	TONY KAISER 275 W MAIN STREET  OSGOOD, OH 45351	\$ 6,500	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) Total contributions	(d)		
No.	Name, address, and ZIP + 4		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.)		