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.

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990PFfor instructions and the latest information.

OMB No 1545-0047 Open to Public Inspection

| _ | | lendar year 2019 or tax year beginning | | , 2019, and ending | | , 20 |
|-----------|----------|---|-----------------------------|-------------------------|--------------------------------|---------------------------------------|
| | | foundation MICHAEL E HORN FAM | ILY FOUNDATION IN | NC | A Employer identifi | |
| _ | | 029015 and street (or P.O. box number if mail is not delivered | to etreet address) | Room/suite | B Telephone numbe | 1375584 |
| INU | umber | and street (or P.O. box number it mail is not delivered | to street address) | Noom/suite | b releptione number | r (see instructions) |
| | D 0 | DOV 1044 | | | 27 | 0 212 0425 |
| | | . BOX 1944 own, state or province, country, and ZIP or foreign pos | tal code | | | 0-313-0425 |
| 0.0 | ., | own, state of province, country, and all of tereign per | | | C If exemption applicat | ion is |
| , | OWE | NSBORO, KY 42302 | | | pending, check here | |
| _ | | eck all that apply: Initial return | Initial return of | a former public charity | D 1 Foreign organizati | abadubaa |
| - | | Final return | Amended return | | 2 Foreign organizati | |
| | | Address change | Name change | | 85% test, check he computation | |
| Н | Che | ck type of organization: X Section 50 | (c)(3) exempt private four | ndation \(\lambda\) | E If private foundation | |
| Γ | S | Section 4947(a)(1) nonexempt charitable trust | Other taxable priva | te foundation 04 | under section 507(b) | L |
| ı | Fair | I — | ounting method X Cash | Accrual | F If the foundation is in | a 60-month termination |
| | end | | Other (specify) | | under section 507(b) | (1)(B), check here . 🕨 |
| _ | | | column (d), must be on cash | basis.) | | |
| P | art | Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) | (a) nevenue and | (b) Net investment | (c) Adjusted net | (d) Disbursements for charitable |
| | | may not necessarily equal the amounts in | expenses per books | income | income | purposes (cash basis only) |
| /- | 1 | column (a) (see instructions)) | | | | (cash basis only) |
| 火 | 1 | Contributions, gifts, grants, etc., received (attach schedule). | 318,270. | | | |
| | 2 | attach Sch B | | | | _ |
| | 3 | Interest on savings and temporary cash investments. Dividends and interest from securities | 292,473. | 292,473. | | STMT |
| | ' | Gross rents | | 272, 473. | | DIMI |
| | | Net rental income or (loss) | - | | | · · · · · · · · · · · · · · · · · · · |
| a) | | Net gain or (loss) from sale of assets not on line 10 | 155,762. | | | |
| Ę | Ъ | | | | | |
| Revenue | 7 | Capital gain net income (from Part IV, line 2) . | | 155,762. | | |
| æ | 8 | Net short-term capital gain | | | | |
| | 9 10a | Income modifications | | | | |
| | ь | Less Cost of goods sold . | | | | |
| | | Gross profit or (loss) (attach schedule) | | | | |
| | 11 | Other income (attach schedule) | | | | |
| | 12 | Total. Add lines 1 through 11 | | 448,235. | | |
| | 13 | Compensation of officers, directors, trustees, etc | | 1,896. | | 92,9 |
| ses | 14 | Other employee salaries and wages | 190 | NONE | NONE | |
| | | Pension plans, employee benefits | | NONE | NONE | |
| Exp | 16a | Legal fees (attach schedule) | 4,000. | 600. | NONE | 3,4 |
| ě | b | Accounting fees (attach schedule) | 49,975. | 49,975. | 10111 | 3, 1 |
| ati | 17 | Interest | 37,713 | = -1,,,,,,, | | |
| str | 18 | Taxes (attach schedule) (see instructions). 4 | 8,662. | 1,553. | | 7,1 |
| = | 19 | Depreciation (attach schedule) and depletion. | | | | · , <u>-</u> |
| þ | 20 | Occupancy | | | | |
| φp | 21 | Travel, conferences, and meetings | | NONE | NONE | |
| an | 21 22 | Printing and publications | | NONE_ | NONE | |
| | | Other expenses (attach schedule) STMT. 5. | 58,310. | 679. | | 57,6 |
| rati | 24 | Total operating and administrative expenses | 015 560 | E 4 500 | | 4.54 0 |
| Operating | | Add lines 13 through 23 | | 54,703. | NONE | 161,00 |
| | | Contributions, gifts, grants paid | | E4 702 | NTO NT | 542,9 |
| \neg | 26 | Total expenses and disbursements Add lines 24 and 25 | | 54,703. | NONE | 704,04 |
| | 27 | Subtract line 26 from line 12 | 7,761. | | | |
| | | Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-) | | 393,532. | | - |
| 1 | | | | 3,3,3,2,4 | | · · · |

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| P | art II | Balance Sheets | Attached schedules and amounts in the | Beginning of year | <u> </u> | of year |
|-------------|----------------|--|---|-------------------|-----------------|--|
| | | | description column should be for end-of-year amounts only (See instructions) | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| _ | 1 | Cash - non-interest-beari | ng | 49,034. | | 29,234 |
| | 2 | | cash investments | 617,511. | 656,776 | 656,776 |
| | _ | | | | • | |
| | | Less. allowance for doul | otful accounts ▶ | | | |
| | 4 | | · · · · · · · · · · · · · · · · · · · | | | |
| | | Less allowance for doul | btful accounts ▶ | | | |
| | 5 | | | | | |
| | 6 | | officers, directors, trustees, and other | | | |
| | | | ach schedule) (see instructions) | | | |
| | 7 | | eceivable (attach schedule) 🕨 | | | |
| | | | otful accounts ► NONE | | | |
| ş | 8 | | se | | | |
| Assets | 9 | | eferred charges | | | |
| Ž | | Investments - U S and state | government obligations (attac 6 37,007 ul 6 , , | 329,104. | 316,785 | 344,531 |
| | | | stock (attach schedule) . STMT .7 | 5,199,465. | | |
| | | · · | bonds (attach schedule). STMT .8. | 2,414,676. | 2,717,655 | |
| | 11 | Investments land, building and equipment basis | | * * * * * * | | |
| | | Less accumulated deprecia (attach schedule) | | | | |
| | 12 | | loans | | | |
| | 13 | Investments - other (atta | loans | 1,029,796. | 1,192,129 | 1,309,645 |
| | 14 | Land, buildings, and | • | | | |
| | | Less accumulated deprecia (attach schedule) | ation | | | |
| | | | > | | | |
| | 16 | Total assets (to be | completed by all filers - see the | | | |
| | | instructions Also, see p | age 1, (tem l) | 9,639,586. | 9,655,465 | 13,539,692 |
| | 17 | Accounts payable and a | ccrued expenses | | | |
| | 18 | Grants payable | | | | |
| es | 19 | Deferred revenue | | | | 1 |
| Liabilities | 20 | Loans from officers, directo | rs, trustees, and other disqualified persons | | | . ! |
| æ | 21 | Mortgages and other no | otes payable (attach schedule) | | | |
| _ | 22 | Other liabilities (describe | • ▶ } | | | <u> </u> |
| | | | | | | |
| _ | 23 | | es 17 through 22) | | NON | IE · į |
| nces | | | v FASB ASC 958, check here | | | · · |
| Ē | | and complete lines 24, | | | | |
| ë | 24 | | or restrictions | | | |
| 8 | 25 | Net assets with donor re | | | | |
| Š | | Foundations that do not for and complete lines 26 three | ollow FASB ASC 958, check here X | | | ļ. |
| <u>.</u> | 24 25 26 | • | | 9,639,586. | 9,655,465 | |
| 0 | 26 | • | apal, or current funds | 9,039,300. | 9,033,402 | <u>' </u> |
| ĕ | 27 28 29 | • | r land, bldg , and equipment fund | | | † |
| SS | 20 | - · | ated income, endowment, or other funds | 9,639,586. | 9,655,465 | 1 |
| ž | 30 | | d balances (see instructions) | 9,039,300. | 7,033,403 | |
| Set | 30 | | | 9,639,586. | 9,655,465 | |
| P | art III | | nges in Net Assets or Fund Bala | | 7,033,403 | · · · |
| | | | palances at beginning of year - Part | | nust agree with | |
| • | | | d on prior year's return) | | _ | 9,639,586. |
| 2 | | | line 27a | | | 7,761. |
| 3 | | | ded in line 2 (itemize) ► SEE STAT | | 3 | 13,033. |
| 4 | | | | - " | | 9,660,380. |
| | | | n line 2 (itemize) ► 2018 NON DIVIDENDS | | 5 | 4,915. |
| | | | alances at end of year (line 4 minus li | | | 9,655,465. |

| Part IV Capital Gain | s and Losses for Tax on Inv | estment Income | | | |
|---|---|--|------------------------------|---|--------------------------|
| | escribe the kind(s) of property sold (for | | (b) How acquired | (c) Date acquired | (d) Date sold |
| | orick warehouse, or common stock, 200 | | P - Purchase D - Donation | (mo., day, yr.) | (mo , day, yr) |
| 1 a PUBLICLY TRADED | SECURITIES | | | | |
| b | | | | | |
| C | | | | | |
| d | | | | | |
| e | | | | | |
| (e) Gross sales price | (f) Depreciation allowed | (g) Cost or other basis | | (h) Gain or (lo | |
| | (or allowable) | plus expense of sale | | ((e) plus (f) mini | ıs (g)) |
| <u>a</u> 1,312,072. | | 1,156,310. | | | 155,762. |
| <u>b</u> | | | | | _ |
| | | | | | |
| <u>d</u> | | | | | |
| e | | | | | |
| Complete only for assets s | howing gain in column (h) and owned l | by the foundation on 12/31/69. | (1) | Gains (Col. (h) ga | ın minus |
| (i) FMV as of 12/31/69 | (j) Adjusted basis | (k) Excess of col (i) | | (k), but not less t | han -0-) or |
| (1) 11010 83 01 12/ 31/ 03 | as of 12/31/69 | over col (j), if any | | Losses (from co | l. (h)) |
| a | | | <u> </u> | | 155,762. |
| b | | | | | |
| c | | | | | |
| d | | | | | |
| <u>e</u> | | | | | |
| 2 Capital gain net income | or (not constal loss) [If g | ain, also enter in Part I, line 7 | | | |
| 2 Capital gain net income | for (het capital loss) { | loss), enter -0- ın Part I, line 7 | 2 | | 155,762. |
| | ain or (loss) as defined in sections | | | | |
| If gain, also enter in I | Part I, line 8, column (c). See ins | structions. If (loss), enter -0- in | | | |
| | | | 3 | | |
| Part V Qualification (| Jnder Section 4940(e) for Red | luced Tax on Net Investment I | ncome | | |
| If "Yes," the foundation doesr | n't qualify under section 4940(e). D | butable amount of any year in the boom not complete this part. ar; see the instructions before making | - | | Yes X No |
| (a) | 1 | | ig ally ell | (d) | |
| Base period years Calendar year (or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of noncharitable-use assets | | Distribution ra (col. (b) divided by | (a) |
| 2018 | 698,214. | 12,063,738. | | (coi. (b) divided by | 0.057877 |
| 2017 | 653,373. | 11,798,871. | | | 0.055376 |
| 2016 | 632,550. | 11,238,832. | | | 0.056283 |
| 2015 | 759,507. | 11,484,202. | | | 0.066135 |
| 2014 | 481,527. | 8,869,059. | | | 0.054293 |
| | 101/32/. | 0,003,033. | | | 0.031233 |
| 2 Total of line 1, column | (d) | | 2 | | 0.289964 |
| | io for the 5-year base period - divide | | | | <u> </u> |
| • | • | if less than 5 years | 3 | | 0.057993 |
| the named of years the | Todilation has been in existence | Triess than 5 years | | | 0.00,330 |
| 4 Enter the net value of n | oncharitable-use assets for 2019 f | rom Part X, line 5 | 4 | 12. | 476,826. |
| 4 Enter the net value of h | one narrable ase assets for 2015 in | Tom Fart X, and O | | | 1,0,020. |
| 5 Multiply line 4 by line 3 | | | 5 | | 723,569. |
| • Watapiy into 4 by into 5 | | | | | |
| 6 Enter 1% of net investm | ent income (1% of Part I line 27h) | | 6 | | 3,935. |
| • Enter 170 of flet investi | ient meeme (170 of 1 art 1, mie 275) | | | | |
| 7 Add lines 5 and 6 | | | 7 | | 727,504. |
| | | | | | <u></u> ' |
| 8 Enter qualifying distribu | tions from Part XII. line 4 | | 8 | | 704,041. |
| If line 8 is equal to or | | on Part VI, line 1b, and complete | | using a 1% tax | rate. See the |
| Part VI instructions. | | ·· | | | |
| JSA 9E1430 1 000 | | | | £ | |
| DEVICTE ABOUT AN | | | | Form | 990-PF (2019) |
| FZV51/ 9/80 08/ | /05/2020 13:12:41 | 630029015 | | Form | 990-PF (2019 - |

| Par | Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see | instru | ıction | s) | | |
|---------|---|--------------|----------------|--------------|--|--|
| 1a | Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1 | _ | | - 1 | | |
| | Date of ruling or determination letter (attach copy of letter if necessary - see instructions) | | | | | |
| b | b Domestic foundations that meet the section 4940(e) requirements in Part V, check | | | | | |
| | here and enter 1% of Part I, line 27b | | | 1 | | |
| С | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of | | ٠, ٠ | لب | | |
| | Part I, line 12, col. (b) | | | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) | _ | | <u>IONE</u> | | |
| 3 | Add lines 1 and 2 | | | <u> 371.</u> | | |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) | | | <u>IONE</u> | | |
| 5 | Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0 | _ | 7,8 | 371. | | |
| 6 | Credits/Payments: | | - | 1 | | |
| a | 2019 estimated tax payments and 2018 overpayment credited to 2019 6a 2,576 . | | | | | |
| | Exempt foreign organizations - tax withheld at source | | | | | |
| C | Tax paid with application for extension of time to file (Form 8868) | | | | | |
| d | Backup withholding erroneously withheld | | 12 [| 76 | | |
| 7 | Total credits and payments. Add lines 6a through 6d | | 12,5 | 76. | | |
| 8 | —————————————————————————————————————— | | | | | |
| 9 10 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | | Δ - | 705. | | |
| 11 | Enter the amount of line 10 to be Credited to 2020 estimated tax 4,705. Refunded 11 | | -1 | 05. | | |
| | VII-A Statements Regarding Activities | | | | | |
| | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it | | Yes | No | | |
| | participate or intervene in any political campaign? | 1a | | X | | |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the | | | | | |
| | instructions for the definition | 1b | | X | | |
| | 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 | | | | | |
| c | Did the foundation file Form 1120-POL for this year? | 1c | | <u>X</u> | | |
| d | d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year | | | | | |
| | (1) On the foundation ► \$ (2) On foundation managers ► \$ | | ' | | | |
| е | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed | | | | | |
| | on foundation managers. • \$ | <u> </u> | | <u> </u> | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | 2 | | X | | |
| | If "Yes," attach a detailed description of the activities. | | | • | | |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles | | | <u>_</u> _ | | |
| _ | of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | 3 | | X | | |
| | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 4a 4b | - | <u>X</u> | | |
| _ | If "Yes," has it filed a tax return on Form 990-T for this year? | 5 | | X | | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | - | | • 1 | | |
| 6 | If "Yes," attach the statement required by General Instruction T. Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either | | , | | | |
| 0 | By language in the governing instrument, or | | , | , | | |
| | By state legislation that effectively amends the governing instrument so that no mandatory directions that | - | | , | | |
| | conflict with the state law remain in the governing instrument? | 6 | X | | | |
| 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 XV | 7 | X | | | |
| , 8a | Enter the states to which the foundation reports or with which it is registered. See instructions | | | | | |
| - | Enter the states to which the foundation reports of with which the registered. See instructions p | | | | | |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General | <u> </u> | | } | | |
| - | (or designate) of each state as required by General Instruction G? If "No," attach explanation | 8b | \overline{X} | | | |
| 9 | ls the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or | | | | | |
| | 4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," | | | , | | |
| | complete Part XIV | 9 | L | <u>X</u> | | |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their | | | _ | | |
| | names and addresses | 10 | | X | | |
| | | Q Q | A DE | 20101 | | |

| 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. 12 Did the foundation combly and advisory privileges? If Yes, attach statement See instructions. 13 Did the foundation combly with the public imagestion requirements for its annual returns and exemption application? 13 Website address > WRW, HORNEANILYFOUNDATION, ORG 14 The books are in care of P SEE STATEMENT 11 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 check here and the amount of tracewempt interest received or accreed during the year. 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 check here and the real amount of tracewempt interest received or accreed during the year. 16 At any time during calendar year 2018, 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 Set the instructions for exceptions and filling requirements for FincEN Form 114 if "Yes," enter the name of the foreign country. 17 See the instructions for exceptions and filling requirements for FincEN Form 114 if "Yes," enter the name of the foreign country. 18 Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 19 During the year, did the foundation (either directly or indirectly). 19 Engage in the sale or exchange, or leasing of property with a disqualified person? 10 See The form 4720 if any item is checked in the "Yes" column, unless an exception applies. 11 Engage in the sale or exchange, or leasing of property with a disqualified person? 12 Formation and the vear, did the foundation (either directly or indirectly). 13 Formation goods, services, or facilities to for accept them from) a disqualified person? 14 Yes X No 14 Pey compensation to, or pay or eremburse the expenses of, a disqualified person? 15 Transfer any income or | Par | t VIFA Statements Regarding Activities (continued) | | | |
|--|-----|---|----------|----------|----------|
| meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions 12. Did the foundation or a disqualified person had advisory privileges? If "Yes, statch statement See instructions 1. 2 Did the foundation comby, with the public imagestion requirements for its annual returns and exemption application? 13. It is books are in care of \$\Bigstar \text{SSTATEMENT 11}\$ 2 Telephone no. \$\Bigstar \text{Located at } \Bigstar \text{Vision of MWW. HORNPAMILY FOUNDATION. ONG 14 The books are in care of \$\Bigstar \text{SSTATEMENT 11}\$ 15 Section 4947(a)(1) nonexempt charitable trusts filing form 990-PF in lieu of Form 1041 chock here \$\Bigstar \text{Located at } \Bigstar \Bigstar \text{Located at } \Bigstar \text{Located at } \Bigstar \Big | | | | Yes | 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, a task statement. See instructions. 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 X Website address ► WWW.HORNEANI_INFOUNDATION.ORG 14 The books are in care of ► SEE_STATEDIENT_III 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 check here ■ 15 16 At any time during calendary year 2019, 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 At any time during calendary year 2019, 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 At any time during calendary year 2019, did the foundation have an interest in or a signature or other authority over bank, securities, or other financial account in a foreign country? 17 Set the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of the foreign country? 18 Statements Regarding Activities for Which Form 4720 May Be Required 19 File Form 4720 If any item is checked in the "Yes" column, unless an exception applies. 19 Tourng the year, did the foundation (either directly or indirectly). 10 Engage in the sale or exchange, or leasing of property with a disqualified person? 11 Engage in the sale or exchange, or leasing of property with a disqualified person? 12 Engage in the sale or exchange, or leasing of property with a disqualified person? 13 Furnish goods, services, or facilities to for accept them from a disqualified person? 14 Pay compensation to, or pay or reimburse the expenses of, a disqualified person? 15 Finantier any incine or seasts to a disqualified person for make any of either available for form a pay or the property to a government official? (| 11 | | | | |
| and each chandation comply, with the public inspection requirements for its annual returns and exemption application? 13 | | | 11 | <u> </u> | <u> </u> |
| 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 X | 12 | | | | |
| Website address \(\) \(\text{WW} \) \(\text{HORNFAMILYPOUNDATION, ORG} \) 14 The books are in care of \(\) \(\text{SEE STATEMENT 11} \) \(\text{Telephone no.} \) \(\text{Located at N} \) \(\t | | person had advisory privileges? If "Yes," attach statement See instructions | 12 | <u> </u> | <u> </u> |
| 14 The books are in care of ▶ SEE STATEMENT 11 Located at ▶ Located at ▶ Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 check here and enter the amount of tax-exempt interest received or accrued during the year. 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 check here and enter the amount of tax-exempt interest received or accrued during the year. 16 At any time during calendard year 2018, 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 ff "Yes," enter the name of the foreign country ▶ Part VIIB 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. 1a During the year, did the foundation leither directly or indirectly. 11) Engage in the sale or exchange, or leasing of property with a disqualified person? 21) Engage in the sale or exchange, or leasing of property with a disqualified person? 22) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? 23) Furnish goods, services, or facilities to for accept them from) a disqualified person? 24 Yes X No 25) Taxase and a section 53,4941(d) 3 or in a current notice regarding disaster assistance? See instructions 25) If any answer is "Yes" to 1a(1)(E), did any of the acts fall to qualify under the exceptions described in Regulations esection 53,4941(d) 3 or in a current notice regarding disaster assistance, check here 26) Did the foundation defined in section 4942(d) day or of the acts fall to qualify under the exception described in Regulations esempting or a fallure to distribute income (section 4942(d) (does not apply for years the foundation was a private operating foundation defined in section 4942(d) does not apply for years the foundati | 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | X | <u> </u> |
| Located at P | | | | | |
| 15 Section 4947/a(1/1) monexempt charitable trusts filling Form 980.PF in lieu of Form 1041 check here and enter the amount of tax-exempt interest received or accrued during the year. 16 At any time during celendar year 2018, 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. See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of the foreign country. See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of the foreign country. 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. 10 During the year, did the foundation (either directly or indirectly). 11 Engage in the sale or exchange, or leasing of property with a disqualified person? 12 Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? 13 Furnish goods, services, or facilities to (or accept them from) a disqualified person? 14 Yes No 16) Tarnesfer any income or assets to a disqualified person? 17 Yes X No 18 Furnish goods, services, or facilities to (or accept them from) a disqualified person? 19 Yes X No 19 Furnish goods, services, or facilities to (or accept them from) a disqualified person? 10 Yes X No 11 Furnish goods, services, or facilities to (or accept them from) a disqualified person? 11 Yes X No 12 Description or assets to a disqualified person? 12 Furnish goods, services, or facilities to (or accept them from) a disqualified person? 13 Furnish goods, services, or facilities to (or accept them from) a disqualified person? 14 Yes X No 15 Furnish goods, services, or facilities to (or accept them from) a disqualified person? 15 Furnish goods and fac | 14 | The books are in care of ► SEE STATEMENT 11 Telephone no. ► | | | |
| and enter the amount of tax-exempt interest received or accrued during the year. 6 At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority 7 See the instructions for exceptions and filing requirements for FinCEN Form 114 if "Yes," enter the name of the foreign country 8 Set the instructions for exceptions and filing requirements for FinCEN Form 114 if "Yes," enter the name of the foreign country 8 File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1 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? | | Located at ▶ ZIP+4 ▶ | | | |
| 16 At any time during calendar year 2018, 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. Part VIIBS 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. 1a During the year, did the foundation either directly or indirectly). 11 Engage in the sale or exchange, or leasing of property with a disqualified person? | 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here | | • | • |
| 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 by Part VILB 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. 1a During the year, did the foundation (either directly or indirectly). 1b Engage in the sale or exchange, or leasing of property with a disqualified person? | | and enter the amount of tax-exempt interest received or accrued during the year | | | |
| See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of the foreign country ▶ Part VIEB 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. 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? | 16 | At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority | | Yes | No |
| Part VILB Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Ves" column, unless an exception applies. 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? | | over a bank, securities, or other financial account in a foreign country? | 16 | | 1 |
| File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1 | | See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of | | | |
| File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 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? | | | | | <u>l</u> |
| 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? | Par | VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | |
| (1) Engage in the sale or exchange, or leasing of property with a disqualified person? | | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | Yes | No |
| (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? | 1a | | |] | |
| disqualified person? | | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? | , |] | 1 |
| (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | | | | | |
| (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | | | | | |
| (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)? (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). b If any answer is "Yes" to 1a(1)-(6), idd 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. Cryganizations relying on a current notice regarding disaster assistance? See instructions. Cryganizations relying on a current notice regarding disaster assistance, check here 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 2019? 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(s) beginning before 2019? If "Yes," list the years See Yes Xe Xe Xe Xe Xe Xe Xe | | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | 1 | | |
| the benefit or use of a disqualified person)? (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 80 days). 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(dl-3 or in a current notice regarding disaster assistance? See instructions. 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 2019? 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(a)(3) or 4942(i)(5)) a At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019? b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement -see instructions.) c if the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. D a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? b If "Yes," did it have excess business holdings in 2019 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 4942(a)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year fir | | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? X Yes No | | | |
| (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). 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. 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 2019? 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(i)(3) or 4942(i)(5)) a At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019? b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement -see instructions.) c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. D 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? b If "Yes," did it have excess business holdings in 2019 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(a)(17) to dispose of holdings acquired by grift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2019.) 4a Did the foundation make any investment in a | | | | | * |
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| termination of government service, if terminating within 90 days). 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. 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 2019? 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)) a At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019? If "Yes," list the years b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. b 13a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? 3b If "Yes," did it have excess business holdings in 2019 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(a)(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 Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2019.) 4a Did the foundation make any investment in a prior year (but af | | (6) Agree to pay money or property to a government official? (Exception. Check "No" if the | | | |
| 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 | | foundation agreed to make a grant to or to employ the official for a period after | ŀ | | - |
| Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions | | termination of government service, if terminating within 90 days) | | | , |
| Organizations relying on a current notice regarding disaster assistance, check here 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 2019? 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)) a At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019? 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) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement -see instructions.). c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. Description of the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? b If "Yes," did it have excess business holdings in 2019 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 Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2019.) 4a Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purposes? 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 je | b | If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in | <u>.</u> | | |
| 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 2019? | | Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions | 1b | | X |
| were not corrected before the first day of the tax year beginning in 2019? | | Organizations relying on a current notice regarding disaster assistance, check here | | | |
| 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)) a At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019? | C | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that | | <u></u> | <u> </u> |
| operating foundation defined in section 4942(j)(3) or 4942(j)(5)) a At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019? | | were not corrected before the first day of the tax year beginning in 2019? | 1c | | X |
| a At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019? | 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private | | • | |
| 6d and 6e) for tax year(s) beginning before 2019? | | operating foundation defined in section 4942(j)(3) or 4942(j)(5)) | | | |
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| (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. —————————————————————————————————— | | | | | |
| all years listed, answer "No" and attach statement - see instructions.) c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. —————————————————————————————————— | b | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) | | | İ |
| c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. | | | | | |
| 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? | | | 2b | | <u> </u> |
| 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? | C | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. | | | - 1 |
| at any time during the year? | | | | | |
| b If "Yes," did it have excess business holdings in 2019 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 Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2019.) | 3a | | | - | |
| 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 Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2019.) | | | | | |
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| the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2019.) 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4b 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 2019? 4b X | | disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the | | | |
| foundation had excess business holdings in 2019.) | | | | | 1 |
| 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4a X 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 2019? 4b X | | | | | |
| 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 2019? | | | 3b | | <u> </u> |
| charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019? 4b X | 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | X |
| | b | | | | |
| | | | | | |

| Form S | 990-PF (2019) | | | <u> </u> | 375584 | | | Page t |
|--------|---------------|--|---------------------------------------|-----------------------------------|--|--------------|----------|---------------|
| Par | t VII-B | Statements Regarding Activities | for Which Form | 4720 May Be Red | uired (continued) | | | |
| 5a | During the | year, did the foundation pay or incur any ami | ount to | | | - | Yes | No |
| | (1) Carry o | on propaganda, or otherwise attempt to influe | nce legislation (section | on 4945(e))? | . Yes X N | lo . | | |
| | (2) Influen | ce the outcome of any specific public el | ection (see section | 4955), or to carry o | n, | | - | |
| | directly | or indirectly, any voter registration drive? | | | . Yes X N | lo | | |
| | (3) Provide | e a grant to an individual for travel, study, or o | other similar purposes | ,7 | . X Yes N | lo | | |
| | (4) Provide | e a grant to an organization other than a | charitable, etc., org | ganization described | ın | | ١. | |
| | section | 4945(d)(4)(A)? See instructions | | | Yes X N | lo | | |
| | | e for any purpose other than religious, c | | | | | İ | |
| | purpos | es, or for the prevention of cruelty to children | or animals? | | . Yes X N | 0 | ٠ | \ \ \ . |
| b | | wer is "Yes" to 5a(1)-(5), did any of the | | · · | • | | | <u> </u> |
| | Regulations | s section 53.4945 or in a current notice regai | rding disaster assistar | nce? See instructions. | | 5b | | X |
| | Organizatio | ons relying on a current notice regarding disa | ster assistance, check | here | | · [] | - | |
| C | If the ans | wer is "Yes" to question 5a(4), does the | foundation claim e | exemption from the | tax | | | l . |
| | because it | maintained expenditure responsibility for the | grant? | | Yes N | o | | |
| | If "Yes," att | ach the statement required by Regulations se | ection 53.4945-5(d). | | | 1 | | ١. |
| 6a | Did the fo | undation, during the year, receive any fu | nds, directly or indir | rectly, to pay premiu | ms | - | | |
| | on a persor | nal benefit contract? | | | . Yes X N | o | _ | |
| b | Did the fou | indation, during the year, pay premiums, direc | tly or indirectly, on a | personal benefit contra | act ⁷ | . 6b | | X |
| | If "Yes" to 6 | 6b, file Form 8870. | | | | | - | |
| 7a | = | e during the tax year, was the foundation a pa | | | | | _ | |
| b | If "Yes," did | I the foundation receive any proceeds or have | any net income attrib | butable to the transact | ion? | . <u>7</u> b | | |
| 8 | | dation subject to the section 4960 tax on pay | | | | | | |
| | _ | on or excess parachute payment(s) during the | | | | | | - ' |
| Par | | nformation About Officers, Directo and Contractors | rs, Trustees, Fou | indation Managei | s, Highly Paid Em | ployees, | | |
| 1 | | cers, directors, trustees, and foundatio | n managers and the | | See instructions. | | | |
| | | (a) Name and address | (b) Title, and average hours per week | (c) Compensation (If not paid, | (d) Contributions to employee benefit plans | (e) Expe | nse acco | unt, |
| | 1 | | devoted to position | enter -0-) | and deferred compensation | otner a | llowance | es |
| | el E Horn | 1 10000 | Director | | | | | |
| | | ensboro, KY 42302 | 10 | -0- | -0- | | | -0- |
| | el Andrew F | | Director | | | | | |
| | | ensboro, KY 42302 | 10 | -0- | -0- | | | -0- |
| | Horn Walke | | Director | | | 1 | | |
| | | ensboro, KY 42302 | 20 | 37,622. | -0- | | | -0- |
| _ | yn R Crowe | | Director | 50.00 | | | | • |
| | | ensboro, KY 42302 tion of five highest-paid employees | (other than thos | 57,200 | | one) If | 2020 | -0- |
| | "NONE." | non of five fightest-paid employees | tother than thos | e moladea on mi | e i - see ilistracti | onsį. n | iione, | enter |
| | | | (b) Title, and average | | (d) Contributions to employee benefit | (e) Expe | nse acco | ınt |
| (a) | Name and add | dress of each employee paid more than \$50,000 | hours per week devoted to position | (c) Compensation | plans and deferred compensation | | llowance | |
| | | | | | compensation | | | |
| NON | R. | | | NONE | NONE | | NONE | |
| | _ | | | NONE | 110111 | | IVOIVE | |
| | | | | | | | | |
| _ | | | | | | | | |
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| | | | | | | | | |
| | | <u> </u> | | | | | | |
| otal | number of | other employees paid over \$50,000 | | | | | NONE | |

| 3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "NON | E." |
|--|------------------|
| (a) Name and address of each person paid more than \$50,000 (b) Type of service | (c) Compensation |
| | |
| ONE | NON |
| | |
| | |
| | |
| | |
| | |
| | |
| otal number of others receiving over \$50,000 for professional services | NON |
| art IX-A Summary of Direct Charitable Activities | I NON |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. | Expenses |
| 1 NONE | |
| | |
| | |
| 2 | |
| | |
| 3 | |
| | |
| | |
| 4 | |
| | |
| art IX-B Summary of Program-Related Investments (see instructions) | |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. | Amount |
| 1 NONE | |
| | |
| 2 | |
| | |
| | |
| All other program-related investments See instructions | |
| | l |
| 3 NONE | |

| Par | Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.) | ign found | lations, |
|-----|--|-----------|------------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: | | |
| а | Average monthly fair market value of securities | 1a | 12,046,553. |
| b | Average of monthly cash balances | 1b | 620,275. |
| c | Fair market value of all other assets (see instructions) | 1c | NONE |
| d | Total (add lines 1a, b, and c) | 1d | 12,666,828. |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | NONE |
| 3 | Subtract line 2 from line 1d | 3 | 12,666,828. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see | | |
| | instructions) | 4 | 190,002. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 12,476,826. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 623,841. |
| Par | Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations, check here ▶ and do not complete this part.) | dations | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 623,841. |
| 2a | Tax on investment income for 2019 from Part VI, line 5 2a 7,871. | | |
| b | Income tax for 2019. (This does not include the tax from Part VI.) 2b | | |
| С | Add lines 2a and 2b | 2c | 7,871. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 615,970. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | NONE |
| 5 | Add lines 3 and 4 | 5 | 615,970. |
| 6 | Deduction from distributable amount (see instructions) | 6 | NONE |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, | | |
| | line 1 | 7 | 615,970. |
| Par | t XII Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | |
| а | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | 1a | 704,041. |
| b | Program-related investments - total from Part IX-B | 1b | |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., | | |
| _ | purposes | 2 | NONE |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | | |
| a | Suitability test (prior IRS approval required) | 3a | NONE |
| b | Cash distribution test (attach the required schedule) | 3b | NONE |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 704,041. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. | _ | NT / 7 |
| c | Enter 1% of Part I, line 27b. See instructions | 5 | N/A |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 704,041. |
| | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca qualifies for the section 4940(e) reduction of tax in those years. | culating | whether the foundation |

Form **990-PF** (2019)

Page 9

| | 1990-PF (2019) | ntional | _ | · · | Page 9 |
|----|--|---------------|----------------------------|---------------------------------|---------------------------|
| Ľa | rt XIII Undistributed Income (see instruc | | | · , . · · · · · · · · · · · · · | |
| 1 | Distributable amount for 2019 from Part XI, | (a) Corpus | (b) Years prior to 2018 | (c) 2018 | (d) 2019 |
| | line 7 | | | | 615,970. |
| 2 | Undistributed income, if any, as of the end of 2019 | | | | |
| | Enter amount for 2018 only | | | NONE | |
| t | Total for prior years 20,20 | | NONE | | |
| | Excess distributions carryover, if any, to 2019 | | J. | | • |
| a | From 2014 | | | | |
| t | From 2015 | | | | |
| • | From 2016 82,582. | | | | |
| | From 2017 | | | | |
| E | From 2018 | | | | |
| f | Total of lines 3a through e | 494,195. | . <u>.</u> . | | |
| 4 | Qualifying distributions for 2019 from Part XII, | | | | |
| | line 4. ▶ \$ 704,041. | | | | |
| a | Applied to 2018, but not more than line 2a | | | NONE | |
| t | Applied to undistributed income of prior years | | | | ! |
| | (Election required - see instructions) | | NONE | | |
| c | Treated as distributions out of corpus (Election | | | | |
| | required - see instructions) | NONE | | | |
| c | Applied to 2019 distributable amount | | | | 615,970. |
| 6 | Remaining amount distributed out of corpus | 88,071. | | | |
| 5 | Excess distributions carryover applied to 2019 | • | | | |
| | (If an amount appears in column (d), the same amount must be shown in column (a).) | NONE | | | NONE |
| c | Enter the net total of each column as | | | | ì |
| • | indicated below: | 500.055 | | | · |
| a | Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 | 582,266. | | | |
| t | Prior years' undistributed income Subtract | | | | |
| | line 4b from line 2b | | NONE | | |
| 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 | <u>-</u> | NONE | | |
| c | Subtract line 6c from line 6b. Taxable | | | | I |
| | amount - see instructions | | NONE | | |
| e | Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount - see | | | | |
| | instructions | - | | NONE | |
| f | Undistributed income for 2019. Subtract lines | | | | |
| | 4d and 5 from line 1 This amount must be | | • | | |
| | distributed in 2020 | | | | NONE |
| 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) | NONB | | | |
| 8 | Excess distributions carryover from 2014 not | | | | |
| | applied on line 5 or line 7 (see instructions) | 45,040. | | | |
| 9 | Excess distributions carryover to 2020. | | | | |
| | Subtract lines 7 and 8 from line 6a | 537,226. | | |) |
| 10 | Analysis of line 9 | | | | |
| а | Excess from 2015 194,735. | | | | |
| t | Excess from 2016 82,582. | | | | |
| C | Excess from 2017 71,659. | | | | |
| c | Excess from 2018 100, 179. | _ | | *** h * | |
| e | Excess from 2019 88, 0'/1. | - ,, | • | · | Form 990-PF (2019) |

Form **990-PF** (2019)

| Forn | n 990-PF (2019) | | | 26- | 1375584 | Page 10 |
|------|--|---------------------------|---------------------------------------|---------------------------|-----------------------|--|
| Pa | rt XIV Private Ope | erating Foundation | s (see instructions | and Part VII-A, quest | | NOT APPLICAB |
| 1 a | If the foundation has | received a ruling or | determination letter th | nat it is a private ope | rating | |
| | foundation, and the ruling | is effective for 2019, er | nter the date of the rulir | ıg <i></i> | ▶ | |
| b | Check box to indicate v | whether the foundation | is a private operating | foundation described i | n section 494 | 2(j)(3) or 4942(j)(5) |
| 2 a | Enter the lesser of the ad- | Tax year | | Prior 3 years | | (1)7.41 |
| | justed net income from Part | (a) 2019 | (b) 2018 | (c) 2017 | (d) 2016 | (e) Total |
| | I or the minimum investment return from Part X for each | | | | | |
| | year listed | | | | | |
| Ь | 85% of line 2a | | | | | |
| c | Qualifying distributions from Part | | | | | |
| Ī | XII, line 4, for each year listed . | | | | | |
| d | 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 | | | | | |
| а | "Assets" alternative test - enter | | | | | |
| - | (1) Value of all assets | | | | | |
| | (2) Value of assets qualifying | | | | | |
| | under section | | | | | |
| b | 4942(j)(3)(B)(i) "Endowment" alternative test- | | | | | |
| | enter 2/3 of minimum invest- | | | | | |
| | ment return shown in Part X, | | | | | |
| С | "Support" alternative test - enter | | 1 | | | |
| | (1) Total support other than | | | | | |
| | gross investment income | | | | | |
| | (interest, dividends, rents, payments on securities | | | | | |
| | loans (section 512(a)(5)), | | | | | |
| | or royalties) | | - | | <u> </u> | |
| | public and 5 or more exempt organizations as | | | | | |
| | provided in section 4942 | | | | | |
| | (j)(3)(B)(iii) | | | | | - - |
| | port from an exempt | | | | | |
| | organization | | | | | |
| Pai | | tary Information (| Complete this par | t only if the found | ation had \$5,000 | or more in assets a |
| | | ring the year - see | · · · · · · · · · · · · · · · · · · · | | | |
| | Information Regarding | | | | - | |
| а | List any managers of | the foundation who | have contributed mo | ore than 2% of the tot | al contributions rec | eived by the foundation |
| | before the close of any | tax year (but only if the | ney have contributed | more than \$5,000). (S | ee section 507(d)(2) | 1.) |
| | N/A | | | | | |
| b | List any managers of | the foundation who | own 10% or more | of the stock of a corp | oration (or an equa | ally large portion of the |
| | ownership of a partners | | | | | |
| | | | | | | |
| | N/A | | | | | |
| 2 | N/A Information Regarding | Contribution, Grant, | Gift, Loan, Scholars | hip, etc., Programs: | | |
| | Check here ▶ I If th | ne foundation only | makes contributions | to preselected char | itable organizations | and does not accept |
| | unsolicited requests for | or funds. If the found | ation makes gifts, g | rants, etc., to individua | als or organizations | under other conditions |
| | complete items 2a, b, c | , and d. See instruction | ons. | | | |
| а | The name, address, and | telephone number o | r email address of th | e person to whom app | lications should be a | ddressed: |
| | SEE STATEMENT 1 | .2 | | | | |
| b | The form in which appl | ications should be sul | bmitted and informat | ion and materials they | should include. | |
| | SEE ATTACHED ST | ATEMENT FOR L | NE 2 | | | |
| | _ | | | | | |
| C | Any submission deadling | nes: | | | <u> </u> | |
| | SEE ATTACHED ST | ATEMENT FOR L | INE 2 | | | |
| | | | | | | |
| d | | mitations on awards | , such as by geog | raphical areas, charita | able fields, kinds o | of institutions, or other |
| | factors: | | | | | |
| | SEE ATTACHED ST | ATEMENT FOR LI | INE 2 | | | |

| Part XV Supplementary Information (continued) | | | | | | | |
|---|--|-------------------------|-----------------------|----------|--|--|--|
| 3 Grants and Contributions Paid Durin | ng the Year or Appi | | Future Payment | | | | |
| 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 | | | | |
| a Paid during the year | | | | | | | |
| | | | | | | | |
| Scholarships (See Attached) | | | | | | | |
| | | | SEE ATTACHED | 53,000. | | | |
| | | | | | | | |
| Grant Allocations (See Attached) | i | | | | | | |
| | : | | SEE ATTACHED | 489,975. | | | |
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| | | | | | | | |
| Total | <u>.</u> | | ▶ 3a | 542,975. | | | |
| b Approved for future payment | | | | | | | |
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| | | <u></u> . | | | | | |
| Total | <u> </u> | <u></u> | <u>.</u> ▶ <u>3</u> b | | | | |

| Part XVI- | A Analysis of Income-Produ | ucing Act | ivities | | | |
|---------------|--|----------------------|--------------------------|--------------------------------------|----------------------------|---|
| | amounts unless otherwise indicated. | Unrela | ated business income | Excluded by section 512, 513, or 514 | | (e) |
| 1 Program | n service revenue | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | Related or exempt function income (See instructions.) |
| - | | - | | | _ | (See instructions./ |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | <u>-</u> . | |
| f | | | | | | |
| g Fees | and contracts from government agencies | | | | | |
| 2 Member | ship dues and assessments | | | | | |
| 3 Interest o | n savings and temporary cash investments • | | | | | |
| 4 Dividend | ds and interest from securities | | | 14 | 292,473. | |
| 5 Net rent | al income or (loss) from real estate: | · | | ļ | | |
| a Debt | -financed property | | | - | | |
| | debt-financed property | | <u> </u> | | | |
| 6 Net renta | al income or (loss) from personal property | | | | | |
| | vestment income | | | 1.0 | 155 762 | |
| | oss) from sales of assets other than inventory | | | 18 | 155,762. | |
| | me or (loss) from special events · · · | | | | | |
| • | ofit or (loss) from sales of inventory | | | | | |
| | venue. a | | | | | |
| | | | | | | |
| | | | | | | |
| e | | | | | | |
| 12 Subtotal | . Add columns (b), (d), and (e) | | | | 448,235. | |
| | dd line 12, columns (b), (d), and (e) | | | | 13 | 448,235. |
| | eet in line 13 instructions to verify calcu | ılatıons.) | | | | - |
| Part XVI- | Relationship of Activities | to the A | ccomplishment of Ex | cempt Pur | poses | |
| Line No. | Explain below how each activity | y for which | n income is reported in | n column (e | e) of Part XVI-A contribut | ted importantly to the |
| lacktriangle | accomplishment of the foundation | on's exemp | t purposes (other than b | oy providing | funds for such purposes |). (See instructions.) |
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| | | | NOT APPLICABLE | 3 | | |
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| Form 990 | -PF (20 | 19) | | | | | 26-1375584 | 4 | | | Pag | ge 13 |
|--------------|----------------|--|-------------------------------|--------------------|-----------------|---------------|---------------------------------------|-------------|--|---------------|-----------|--------------|
| Part X | VII | Information Re Organizations | egarding Tra | nsfers to an | d Transaction | ns and | Relationships | With | Nonchari | table | Exc | empt |
| ın or | sect ganiza | organization direct ion 501(c) (other ations? rs from the reporting | than section | 501(c)(3) or | ganizations) or | in sec | ction 527, rela | | | | Yes | No |
| | | h | - | | | | | | | | ~ * | <u>X</u> |
| | - | er assets | | | | | | | | | | |
| • | • | | | | | | | • • • • • | • • • • • • • | 1a(2) | | X |
| | | ansactions: | | | | | | | | | | |
| | | s of assets to a non | | | | | | | | | | X |
| | | chases of assets from | | | | | | | | | | <u>X</u> |
| | | tal of facilities, equip | | | | | | | | | | <u>X</u> |
| | | nbursement arrange | | | | | | | Г | | | _X_ |
| | | ns or loan guarantee | | | | | | | Г | $\overline{}$ | | _ <u>X</u> _ |
| | | ormance of services | | | _ | | | | Г | | | <u>X</u> |
| | _ | of facilities, equipmenswer to any of the | _ | | | | | | _ | | | |
| | | f the goods, other | | | | | | | | | | |
| | | any transaction or | | • . | | | | | | | | |
| (a) Line | | (b) Amount involved | ſ | noncharitable exem | | 1 | escription of transfer | | | | | |
| | | _ | | | | | · · · · · · · · · · · · · · · · · · · | | | | | |
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| de | escribe | oundation directly of the country of | (other than se ving schedule. | ction 501(c)(3) | | | | | tions | Ye | es 🔀 | No |
| | | | | <u> </u> | | | ,-, | | | • | | |
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| | | penalties of perjury, I decla and complete Declaration of | | | | | | the best of | my knowledge | and b | elief, it | is true, |
| Sign Here | Signa | Kathuyo ature of officer of trustee | A. Crow | e 8/11 | /20 | Ext. Title | cutive de | recto | May the IRS with the prep See instructions | parer s | | |
| | L., | | | | | | | _ | · · · · · · · · · · · · · · · · · · · | | | |
| Paid | | Print/Type preparer's na | | Preparer's sie | hature() | | Date 0 40 240 | Chec | ^ L " | TIN | | |
| Prepai | rer | BEATRICE M. | - | <u> </u> | VACOCOLO D | 120 | 1-18.10.202 | | | 004 | | 86 |
| Use O | L | | MING MALO | | | -U | F | irm's EIN | ▶ 61-1 | .064. | 249 | |
| USE U | ''' 'y | | 00 SHELBYV UISVILLE, | /ILLE RD S KY | TE 1100 | 222-5 | 187 | Phone no | 502-42 | 6-9 | 660 | |
| | | | O T O A T TITLE I | 11.1 | 10 | <u> </u> | <u> </u> | HOTHER HO | J V Z 12 | | ~ ~ · | |

Form **990-PF** (2019)

| SECURITIES | |
|------------|--|
| FROM | |
| INTEREST | |
| AND | |
| DIVIDENDS | |
| ı | |
| H | |
| PART | |
| 990PF, | |
| FORM | |

| NET INVESTMENT INCOME | 50,599. 241,874. 292,473. |
|---|-----------------------------------|
| REVENUE AND EXPENSES PER BOOKS | 50,599. 241,874. 292,473. |
| | TOTAL |
| DESCRIPTION | TOTAL INTEREST TOTAL DIVIDENDS |

STATEMENT

FORM 990PF, PART I - ACCOUNTING FEES

| CHARITABLE PURPOSES | 3,400. |
|---|-----------------|
| ADJUSTED NET INCOME | NONE |
| NET INVESTMENT INCOME | 600. |
| REVENUE AND EXPENSES PER BOOKS | 4,000. |
| | TOTALS |
| DESCRIPTION | ACCOUNTING FEES |

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

| NET INVESTMENT INCOME | 49,975. 49,975. 49,975. |
|---|-----------------------------------|
| REVENUE AND EXPENSES PER BOOKS | 49,975. 49,975. =========== |
| | TOTALS |
| DESCRIPTION | TRUSTEE FEES |

STATEMENT

| TAXES | |
|-------------|--|
| PART I - | |
| FORM 990PF, | |

| CHARITABLE PURPOSES | 7,109. | 7,109. |
|---|--------------------------------|--------|
| NET INVESTMENT INCOME | 1,408. 145. | 1,553. |
| REVENUE AND EXPENSES PER BOOKS | 1,408. 7,254. | |
| | | TOTALS |
| DESCRIPTION | FOREIGN TAXES PAYROLL TAXES | |

| HER EXPENSES | |
|--------------|----|
| - OTE | |
| Н | II |
| PART | |
| 990PF, | |
| FORM | |

| CHARITABLE PURPOSES | 4,169. 2,675. 3,020. 1,495. 6,368. 234. 2,000. 4,371. | 57,631. |
|---|---|---------|
| NET INVESTMENT INCOME | 679. | 679. |
| REVENUE AND EXPENSES PER BOOKS | 4,169. 2,675. 3,020. 1,495. 6,368. 234. 2,000. 4,371. | 58,310. |
| DESCRIPTION | TELEPHONE LIABILITY INSURANCE POSTAL PRINTING OFFICE SUPPLIE BOARD & LUNCHEON MEETING FOUNDATION CONFERENCE & DUES PO BOX WEBSITE & DOMAIN KY FILING FEE REPORT MILEAGE/TRAVEL REIMBURSEMENT HEALTH INSURANCE | TOTALS |

STATEMENT

FORM 990PF, PART II - U.S. AND STATE OBLIGATIONS

| ENDING BOOK VALUE | 165,557. |
|----------------------|--|
| DESCRIPTION | US GOVERNMENT OBLIGATIONS STATE MUNICIPAL BONDS |

175,823. 168,708.

ENDING FMV

344,531.

316,785.

TOTALS

630029015

9

STATEMENT

26-1375584

FORM 990PF, PART II - CORPORATE STOCK

DESCRIPTION

CORPORATE STOCK

ENDING FMV BOOK VALUE ENDING

4,742,886. 4,742,886.

8,485,574. 8,485,574.

TOTALS

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FZV517 978U 08/05/2020 13:12:41

630029015

FORM 990PF, PART II - CORPORATE BONDS

DESCRIPTION

CORPORATE BONDS

BOOK VALUE ENDING

ENDING FMV

2,717,655.

2,713,932.

2,713,932.

2,717,655.

TOTALS

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FORM 990PF, PART II - OTHER INVESTMENTS

MICHAEL E HORN FAMILY FOUNDATION INC

| | # II II II II II II II II II II II II II | | |
|--|--|---------------------------------------|------------|
| | COST/ | | |
| | FMV | ENDING | ENDING |
| DESCRIPTION | C OR F | BOOK VALUE | FMV |
| 1 1 1 1 1 1 1 1 1 | 1 1 1 1 1 | ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; | !!! |
| ALTERNATIVE INVESTMENTS MISCELLANEOUS | ບບ | 1,055,000. | 1,166,901. |
| | TOTALS | 1,192,129. | 1,309,645. |

==========

| FORM 990PF, | PART III - | OTHER INCREASES | IN NET WORTH | OR FUND BALANCES |
|-------------|------------|------------------|--------------|------------------|
| ========= | ======== | ================ | =========== | ========== |

DESCRIPTION

2019 NON DIVIDEND DISTRIBUTIONS
TIMING DIFFERENCES-MUTUAL FUNDS
FEDERAL TAX REFUND

TOTAL

AMOUNT

1,751.

3,080.

FORM 990PF, PART VII-A, LINE 14 - BOOKS ARE IN THE CARE OF _____

NAME: THE GLENVIEW TRUST COMPANY

ADDRESS: 4969 US HIGHWAY 42, SUITE 2000

LOUISVILLE, KY 40222

TELEPHONE NUMBER: (502)212-7814

MICHAEL E HORN FAMILY FOUNDATION INC FORM 990PF, PART XV - LINES 2a - 2d

RECIPIENT NAME:

KATHRYN CROWE

ADDRESS:

PO BOX 1944

OWENSBORO, KY 42302

RECIPIENT'S PHONE NUMBER: 270-313-0245

FORM, INFORMATION AND MATERIALS:

GRANT AND SCHOLARSHIP APPLICATIONS-SPECIFIC INFORMATION

TO INCLUDE IS STATED IN THE APPLICATION

SUBMISSION DEADLINES:

SCHOLARSHIP APPLICATION DEADLINE IS MARCH 1ST

FOUNDATION GRANT DEADLINE IS OCTOBER 15TH

RESTRICTIONS OR LIMITATIONS ON AWARDS:

SEE ATTACHED STATEMENT

| Recipient Name | 2019 Grants | _Grant Amount | Purpose |
|--|----------------------|---------------|---|
| American Legion Bas c/o Larry Vanover, Di 2825 Summer Valley Owensboro, KY 423 Tax ID# 61-0389253 | rector Lane | 22,000.00 | Youth baseball programs |
| Bluegrass Music Mus 311 West Second Str Owensboro, KY 4230 Attention: Chris Josl Tax ID # 61-1229037 | eet 03 | 45,000 00 | ROMP, Bluegrass in the Schools Education Group Museum Volunteer Development ROMP streamline at Museum Kathryn donation |
| Carenet 922 Triplett Street St Owensboro, KY 4230 Attention: Lisa Hylai Tax ID # 20-0736119 | ol nd | 95,000.00 | Sexual Ingegrity Classes in local high schools Capital Campaign |
| Carmel Home 2501 Old Hartford Ro Owensboro, KY. 423 Attention: Sister Fra Tax ID #61-0487564 | 03 | 8,000.00 | Donation |
| CASA of Ohio Valley 415 St Ann Street Owensboro, KY 423 Attention: Roseman Tax ID #61-1303511 | | 5,000.00 | Community Partner Super Child Hero Fund |
| Casting A Net, Inc 50 Brooks School Ho Calhoun, KY 42327 Attention: Layla Tho Tax ID # 46-2373489 | ompson | 3,500.00 | Programs for Youth |
| Catholic Mens Confe 600 Locust Street Owensboro, KY. 423 Attention: Robert E Tax ID # 53-0196617 | dge | 1,000 00 | Educational Support for Conferences for Men Dir Donation |
| Catholic Prison Mini 600 Locust Street Owensboro, KY 423 Attention. Fr. Ray C Tax ID # 53-0196617 | 301 Jark | 725.00 | Ed materials |
| Chaplin Ministry for 600 Locust Street Owensboro, KY 42: Attention: Fr. Richa Tax ID # 53-0196617 | 301 rd Cash | 5,200.00 | Materials and supplies for chapel |
| Cliff Hagan Boys & 0 3415 Buckland Squa Owensboro, KY. 42 Attention: Steve W Tax ID #61-0663746 | ore 301 Inkler | 32,500.00 | Upgrade to security and refinish gym floor Operating Expenses for Mike Horn Unit |

| Community Dental Clinic of Owensboro 2811 New Hartford Rd Suite A Owensboro, KY 42303 Attention: Dr Brandon Taylor Tax ID # 26-2343126 | 7,500 00 | Capital Campign for purchase of building |
|--|----------|---|
| Daviess County Public School Health Program 1622 Southeastern Pkwy Owensboro, KY 42303 | 5,000.00 | Ed materials and supplies for health rooms |
| Attention: Wendi Kozel, RN Tax ID # 61-1346930 Diocese of West KY Office Family Life 600 Locust Street | 6,600.00 | Clean Heart Inititive Program |
| Owensboro, KY 42301 Attention: Danny May Tax ID # 53-0196617 | | |
| DreamRiders P.O. Box 172 Philpot, KY 42366 Attention. Kelly Flick | 5,000.00 | Programing for Special Needs Children |
| FOCUS Fellowship of Catholic University Students 601 Cascadig Creek Ln Winter Garden, FL 34787 | 7,500.00 | Mınıstry work at Western Ky Univ and Murray St Univ |
| Attention Andy Day Tax ID # 84-1522811 Franciscan University of Stubenville | 500.00 | Scholarships General Funds |
| 1235 University Boulevard Steubenville, Ohio 43952-1763 Tax ID# 34-0714818 | | |
| Fraternal Order of Police Lodge #16 P.O. Box 401 Owensboro, KY. 42302-0401 Tax ID # 23-7238401 | 500.00 | Shop with a Cop Christmas |
| Gennesaret Retreat Ministries of Dioceses of West KY c/o Tom Payne 2251 Becklynn Dr Owensboro, KY 42303 Tax ID# 53-0196617 | 2,500.00 | retreats for chronically ill patients |
| Gospel Community Church P.O. Box 22668 Owensboro, KY. 42304 Attention: Joseph D. Hinton, Pastor Tax ID# 81-2755376 | 5,000.00 | update security and repair HVAC system |
| Green River Area Down Syndrome (GRADSA) P.O. Box 2031 Owensboro, KY 42302 Attention: Tiffany Thrash Tax ID #61-1312541 | 5,000.00 | Programming for Youth with Special needs |
| Honor Flight-Bluegrass Chapter 222 St. Ann Street | 450.00 | Donation |

Owensboro, KY 42301 Tax ID # 26-2237257

| Imagination Library of Daviess County 1700nWest Fifth Street Owensboro, KY. 42301 Attention: Diane Bowers Tax ID # 23-7364935 | 2,500 00 | book program for children 0-5 years of age |
|---|-----------|---|
| Immaculate Conception Catholic Church c/o McRaith Catholic Center 600 Locust Street Owensboro, KY. 42301 Tax ID# 53-0196617 | 3,000.00 | Mothers of Mercy Messengers speaking Event at Cathedral March 27, 28, 2019 |
| Institute for Young Musicians P.O Box 1714 Owensboro, KY. 42302 Attention: Cheston Hoover Tax ID #61-1153717 | 2,500.00 | Youth Programming |
| Maximilian Montessori Academy 1401 B Spring Bank Dr Owensboro, KY. 42303 Attention: Amy Kemper Tax ID # 26-2559147 | 12,500.00 | Educational Programming |
| Mentor Kids Kentucky 2815 Veach Road Owensboro, KY 42303 Attention. Berly Sullivan Tax ID # 61-1222299 | 2,000.00 | office supplies/building materials |
| Murray State University 102 Curris Center Murray, KY. 42071 Tax ID # 61-6053844 | 5,000 00 | Scholarship general fund |
| Owensboro Catholic High School 1524 West Parrish Avenue Owensboro, KY 42301 Attention. Jennifer Westerfield Tax ID # 53-0196617 | 2,500.00 | Project graduation |
| Owensboro Catholic Consolidated Schools 1524 West Parrish Avenue (School Health Program) Owensboro, KY 42301 Attention. Sherry Krampee, RN, BSN Tax ID # 53-0196617 | 2,000 00 | Ed materials health room supplies |
| Owensboro Community & Tech College 4800 New Hartford Road Owensboro, KY. 42303 Tax ID #61-1109704 | 5,000 00 | Scholarship Program |
| Owensboro Dance Theatre, Inc 2705 Breckenridge Street Owenboro, KY 42303 Attention: Jennie Boggess Tax ID # 61-1040701 | 5,000 00 | Dance for Life Projects with special need students |

| Owensboro Museum of Fine Arts 901 Frederica St Owensboro, KY. 42301 Attention: Mary Bryan Hood Tax ID# 31-0896672 | 20,000 00 | Artland Program |
|---|-----------|--|
| Owensboro Symphony Orchestra, Inc 211 East Second Street Owensboro, KY. 42303 Attention. Dan Griffith Tax ID # 61-6055984 | 5,000.00 | Underwrite String Residency Program with elem schools |
| Passionist Nuns 8564 Crisp Rd Whitesville, KY. 42378 Tax ID# 53-0196617 | 6,000.00 | Men and Women Retreats |
| Pleasant Valley Community Church 800 Pleasant Valley Rd Owensboro, KY 42303 Attention. Jamus Edwards Tax ID # 31-1571467 | 57,500.00 | Love Loud and various youth projects Director Donation to be used in youth projects |
| Right to Life of Owensboro Ed Program 1115 Tamarack Rd Suite 200 Owensboro, KY 42301 Attention. Stacey Davis Tax ID# 30-0007710 | 16,000.00 | various ed program and materials Bus trip ed to Washington, DC |
| RiverPark Center 101 Daviess Street Owensboro, KY 42303 Attention: Roxi Witt Tax ID # 61-1147328 | 5,000.00 | support arts and education programs Art Teach Kids |
| St Bernard Preparatory School, Inc. 1600 St. Bernard Drive SE Cullman, AL 35055 Attention: Fr Marcus J. Voss, OSB Tax ID# 53-0196617 | 13,000.00 | Update various heating and water systems |
| St Mary of the Woods Church P.O. Box 1 Whitesville, KY. 42378 Attention: Fr. Brian Roby Tax ID # 53-0196617 | 5,000.00 | Youth Programs Dir Donation |
| St Mary of the Woods Catholic School 10521 Franklin Street Whitesville, KY. 42378 Attention: Emily Hernandez, Principal Tax ID # 53-0196617 | 10,000 00 | Update computer labs and library |
| Thruston Philpot Volunteer Fire Dept 2592 Reid Road Owensboro, KY 42303 Attention: Chief Bob Newman Tax ID # 61-1007649 | 5,000.00 | Operational Expenses -Drew Dir Donation |
| Trinity High School 10510 Main Cross Street | 25,000.00 | Turtion Suppliment Assistance |

Whitesville, KY 42378 Attn. Emily Hernandex/ Principal Tax ID# 53-0196617

University of Kentuciy Newman Center c/o Lisa Bivins 320 Rose Ln Lexington, KY. 40508 Tax ID #61-1132894

2,000.00 Youth Programming

Youth 2000-Marian Shrine Committee c/o Diocese of Owensboro 601 Locust Street Owensboro, KY. 42301 Tax ID# 53-0196617

15,000.00

Youth Programs

Total Grant Dollars for 2019

489,975.00

FORM: 990PF

| | | | Federal | Federal |
|-------------|-----------|------------------------|----------|------------------------|
| Fed Tax ID: | Acct No: | Account Name: | Tax Due: | Refund Due: EFTPS PIN: |
| 62-6323409 | 450001011 | JESSIE BARKER MCKELLAR | \$0 00 | \$0 00 0048 |
| 26-1375584 | 630029015 | MICHAEL E HORN | \$0 00 | \$0 00 9919 |

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T.

► Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10.

► Go to www.irs.gov/F1041for instructions and the latest information.

OMB No 1545-0092

| Name of estate or trust | • | | Employer identifi | cation | number | |
|--|------------------------|----------------------|--------------------------------------|--------|---------------------------|-----------------|
| MICHAEL E HORN FAMILY FOUNDATION INC | 26-137 | <u> 55</u> 84 | 1 | | | |
| Did you dispose of any investment(s) in a qualified opportur | | ıx year? | | | | No |
| If "Yes," attach Form 8949 and see its instructions for addit | ional requirements fo | r reporting your gai | n or loss. | | | |
| Note: Form 5227 filers need to complete only Parts I and II. | | | | | | |
| Part I Short-Term Capital Gains and Losses - Ge | nerally Assets Held | One Year or Les | s (see instruc | tions |) | |
| See instructions for how to figure the amounts to enter on | | (0) | (g) Adjustments | | (h) Gain o Subtract co | |
| the lines below. | (d) Proceeds | (e) Cost | to gain or loss f | rom | from colum | n (d) and |
| This form may be easier to complete if you round off cents to whole dollars. | (sales price) | (or other basis) | Form(s) 8949, P line 2, column | | combine the columi | |
| | | | | | | |
| 1a Totals for all short-term transactions reported on Form | | | | | | |
| 1099-B for which basis was reported to the IRS and fo which you have no adjustments (see instructions). | | | | 1 | | |
| However, if you choose to report all these transactions | | | | | | |
| on Form 8949, leave this line blank and go to line 1b . | | | - | | | |
| 1b Totals for all transactions reported on Form(s) 8949 | | | | | | |
| with Box A checked | | | | | | |
| 2 Totals for all transactions reported on Form(s) 8949 | | | | | | |
| with Box B checked | | | | | | |
| 3 Totals for all transactions reported on Form(s) 8949 | | | | | | _ |
| with Box C checked | 1,546. | 1,553. | | | | <u>-7</u> . |
| A Charten and the large of the above Target 4004 CO | NEO 0704 0004 | | | | | |
| 4 Short-term capital gain or (loss) from Forms 4684, 62 | 52, 6761, and 6624 | | | 4 | | |
| 5 Net short-term gain or (loss) from partnerships, S corp | norations, and other e | etates or trusts | | 5 | | |
| 6 Short-term capital loss carryover. Enter the amou | | | | | | |
| Carryover Worksheet | | | | 6 | (|) |
| 7 Net short-term capital gain or (loss). Combine lin | | column (h). Enter | here and on | | | |
| line 17, column (3) on the back | | | <u> ▶</u> | 7 | | <u>-7</u> . |
| Part Long-Term Capital Gains and Losses - Gen | | More Than One | Year (see inst | ructio | ns) | |
| See instructions for how to figure the amounts to enter on the lines below. | (d) | (e) | (g) Adjustments | | (h) Gain o Subtract co | |
| | Proceeds | Cost | to gain or loss f Form(s) 8949, P | rom | from colum combine the | n (d) and |
| This form may be easier to complete if you round off cents to whole dollars. | (sales price) | (or other basis) | line 2, column | | column | |
| 8a Totals for all long-term transactions reported on Form | | | | - | | |
| 1099-B for which basis was reported to the IRS and fo | r | | - | | | |
| which you have no adjustments (see instructions). | | | | | | |
| However, if you choose to report all these transactions | | | | | | |
| on Form 8949, leave this line blank and go to line 8b . | | | - 1 | _ | | |
| 8b Totals for all transactions reported on Form(s) 8949 | | | | | | |
| with Box D checked | | | | | | |
| with Box E checked | | | | | | |
| 10 Totals for all transactions reported on Form(s) 8949 | | | | _ 1 | | _ |
| with Box F checked | | | | | 13 | <u>33,799</u> . |
| 11 Long-term capital gain or (loss) from Forms 2439, 46 | | | | 11 | | |
| 12 Net long-term gain or (loss) from partnerships, S corp | | | | 12 | , | 1 070 |
| 13 Capital gain distributions | | | | 13 | | <u>21,970</u> . |
| 14 Gain from Form 4797, Part I | | | | 14 | | |
| 15 Long-term capital loss carryover. Enter the amou | | | | 4. | ı | 1 |
| Carryover Worksheet | | | | 15 | <u> </u> | <u>'</u> |
| line 18a, column (3) on the back | | | | 16 | 1 : | 55,769. |
| For Paperwork Reduction Act Notice, see the Instructions for For | | | | | D (Form 10 | |

Schedule D (Form 1041) 2019 Page 2

| Par | Summary of Parts I and II Caution: Read the instructions before completing this pa | art. | (1) Beneficiaries' (see instr.) | (2) Estate's or trust's | (3) Total |
|-----|---|------|---------------------------------|-------------------------|-----------|
| 17 | Net short-term gain or (loss) | 17 | | | -7, |
| 18 | Net long-term gain or (loss): | | | | |
| а | Total for year | 18a | | _ | 155,769. |
| b | Unrecaptured section 1250 gain (see line 18 of the worksheet.) | 18b | | | 809. |
| c | 28% rate gain | 18c | | | |
| 19 | Total net gain or (loss). Combine lines 17 and 18a ▶ | 19 | | | 155,762. |

Note: If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a). If lines 18a and 19, column (2), are net gains, go to Part V, and don't complete Part IV If line 19, column (3), is a net loss, complete Part IV and the Capital Loss Carryover Worksheet, as necessary

Part IV Capital Loss Limitation

Note: If the loss on line 19, column (3), is more than \$3,000, or if Form 1041, page 1, line 23 (or Form 990-T, line 39), is a loss, complete the Capital Loss Carryover Worksheet in the instructions to figure your capital loss carryover

Part V Tax Computation Using Maximum Capital Gains Rates

Form 1041 filers. Complete this part only if both lines 18a and 19 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 23, is more than zero.

Caution: Skip this part and complete the Schedule D Tax Worksheet in the instructions if

- Either line 18b, col. (2) or line 18c, col. (2) is more than zero, or
- Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.

Form 990-T trusts. Complete this part only if both lines 18a and 19 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 39, is more than zero. Skip this part and complete the Schedule D Tax Worksheet in the instructions if either line 18b, col. (2) or line 18c, col. (2) is more than zero.

| 21 | Enter taxable income from Form 1041, line 23 (or Form 990-T, line 39) | 21 | | _ | |
|----|---|-------|-------------------|---------|--|
| 22 | Enter the smaller of line 18a or 19 in column (2) | | | | |
| | but not less than zero | | | | |
| 23 | Enter the estate's or trust's qualified dividends | | | | |
| | from Form 1041, line 2b(2) (or enter the qualified | • | | | |
| | dividends included in income in Part I of Form 990-T) 23 | - | | | |
| 24 | Add lines 22 and 23 | | | | |
| 25 | If the estate or trust is filing Form 4952, enter the | | • | | |
| | amount from line 4g, otherwise, enter -0 ▶ 25 | | | | |
| 26 | Subtract line 25 from line 24. If zero or less, enter -0 | 26 | | | |
| 27 | Subtract line 26 from line 21. If zero or less, enter -0 | 27 | | | |
| 28 | Enter the smaller of the amount on line 21 or \$2,650 | 28 | | | |
| 29 | Enter the smaller of the amount on line 27 or line 28 | 29 | | | |
| 30 | Subtract line 29 from line 28. If zero or less, enter -0 This amount is taxed at 0 | % | | 30 | |
| 31 | Enter the smaller of line 21 or line 26 | 31 | | | |
| 32 | Subtract line 30 from line 26 · · · · · · · · · · · · · · · · · · | 32 | | | |
| 33 | Enter the smaller of line 21 or \$12,950 | 33 | | | |
| 34 | Add lines 27 and 30 | 34 | | | |
| 35 | Subtract line 34 from line 33. If zero or less, enter -0 | 35 | · | | |
| 36 | Enter the smaller of line 32 or line 35 | 36 | | <u></u> | |
| 37 | Multiply line 36 by 15% (0.15) | | ▶ | 37 | |
| 38 | Enter the amount from line 31 | 38 | | | |
| 39 | Add lines 30 and 36 | 39 | | | |
| 40 | Subtract line 39 from line 38. If zero or less, enter -0 | 40 | | | |
| 41 | Multiply line 40 by 20% (0.20) | | ▶ | 41 | |
| 42 | Figure the tax on the amount on line 27. Use the 2019 Tax Rate Schedule for Estates | | İ | | |
| | and Trusts (see the Schedule G instructions in the instructions for Form 1041) | 42 | | | |
| 43 | Add lines 37, 41, and 42 | 43 | | | |
| 44 | Figure the tax on the amount on line 21. Use the 2019 Tax Rate Schedule for Estates | | | | |
| | and Trusts (see the Schedule G instructions in the instructions for Form 1041) | 44 | | | |
| 45 | Tax on all taxable income. Enter the smaller of line 43 or line 44 here and | on Fo | rm 1041, Schedule | | |
| | G, Part I, line 1a (or Form 990-T, line 41) | | <u></u> | 45 | |

Schedule D (Form 1041) 2019

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990for the latest information.

Schedule of Contributors

OMB No. 1545-0047

2019

Name of the organization

Employer identification number

| MICHAEL E HORN FAMILY | FOUNDATION INC | 26-1375584 | | | | | |
|--|---|---|--|--|--|--|--|
| Organization type (check one): | | | | | | | |
| Filers of: | Section: | | | | | | |
| Form 990 or 990-EZ | 501(c)() (enter number) organization | | | | | | |
| | 4947(a)(1) nonexempt charitable trust not treated as a private four | ndation | | | | | |
| | 527 political organization | | | | | | |
| Form 990-PF | X 501(c)(3) exempt private foundation | | | | | | |
| 4947(a)(1) nonexempt charitable trust treated as a private foundation | | | | | | | |
| | 501(c)(3) taxable private foundation | | | | | | |
| , - | ered by the General Rule or a Special Rule. 8), or (10) organization can check boxes for both the General Rule and a S | pecial Rule. See | | | | | |
| General Rule | | | | | | | |
| X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. | | | | | | | |
| Special Rules | | | | | | | |
| regulations under sect 13, 16a, or 16b, and t | scribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/100 ions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 of hat received from any one contributor, during the year, total contributions ne amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Co | r 990-EZ), Part II, line of the greater of (1) | | | | | |
| 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. | | | | | | | |
| 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, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year | | | | | | | |
| Caution: An organization that isr | n't covered by the General Rule and/or the Special Rules doesn't file Schec | lule B (Form 990, | | | | | |

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization MICHAEL E HORN FAMILY FOUNDATION INC Employer identification number 26-1375584

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

| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
|------------|---|----------------------------|---|
| 1_ | Michael E Horn Clat #1 4969 US Hwy 42 Ste 2000 Louisville, KY 40222 | \$318,270 | Person X Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | _ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | - \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | _ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | _ \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | - \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |