

DIAGNOSTIC REPORT

TRUST NAME: BRUSH FOUNDATION T/A 20-0905480
FEDERAL EIN: 34-6000445
TRUST NUMBER: 20-0905480

** No Severe Diagnostics Detected **

Informational Diagnostics: Total 1

Federal (1)

1. Form 2220

The Form 2220 will be printed and sorted in front of Form 990-PF

** No Electronic Filing Alerts Detected **

** No Electronic Filing Rejects Detected **

** No Electronic Filing XML Validation Errors Detected **

Date 04/28/2021

To: KEYBANK BY:P S CHMURA

RE: BRUSH FOUNDATION T/A
12/31/2020

Subject: Minimum Required Payout for Private Foundation

Part I: Undistributed Income

A private foundation that is not an operating foundation must spend a minimum amount annually in the form of grants to public charities and private operating foundations to accomplish its charitable purposes. The tax statute prescribes a minimum payout of at least 5% of the total fair market value of the foundation's assets, subject to certain adjustments. The foundation is given two years in which to make the qualifying distributions - the year for which the minimum distributable amount is calculated and the subsequent year. Failure to comply with the minimum payout requirement results initially in a penalty tax of 30% on the undistributed amount.

Please be aware that if an initial 30% tax is imposed under IRC Sec. 4942(a) and any portion of such income remains undistributed as of the end of the subsequent fiscal year, the IRS is authorized to impose a tax equal to 100% of the amount remaining undistributed pursuant to IRC Sec. 4942(b).

| | | | |
|---|-----------|----------|-------------|
| Required distribution for 12/31/2020 | \$ | 361,511. | |
| Undistributed from prior years | \$ | 0. | |
| Total Required Distributions | | | \$ 361,511. |
| Qualifying distributions for 12/31/2020 | \$ | 373,908. | |
| Excess distributions carried over from PY | \$ | 102,179. | |
| Total Distributions | | | \$ 476,087. |
| Undistributed income for 12/31/2020 | \$ | | 0. |
| or | | | |
| Excess Distribution Carryover to 12/31/2021 | \$ | | 114,576. |

The undistributed income if any must be distributed by no later than 12/31/2021 or the trust will be subject to the 30% penalty tax.

Part II: Excess Distributions carryover to 12/31/2021

| | | |
|------------------------|----|----------|
| Excess from 12/31/2016 | \$ | 6,220. |
| Excess from 12/31/2017 | \$ | 7,126. |
| Excess from 12/31/2018 | \$ | 32,334. |
| Excess from 12/31/2019 | \$ | 56,499. |
| Excess from 12/31/2020 | \$ | 12,397. |
| Total | \$ | 114,576. |

Please note the excess distribution in the amount of \$ 6,220. for the 12/31/2016 tax year will be lost if not used by 12/31/2021.

Form **8879-EO**

**IRS e-file Signature Authorization
for an Exempt Organization**

OMB No. 1545-0047

For calendar year 2020, or fiscal year beginning 01/01, 2020, and ending 12/31, 20

▶ Do not send to the IRS. Keep for your records.

▶ Go to www.irs.gov/Form8879EO for the latest information.

2020

Department of the Treasury
Internal Revenue Service

Name of exempt organization or person subject to tax

BRUSH FOUNDATION T/A

Taxpayer identification number

34-6000445

Name and title of officer or person subject to tax

KEYBANK BY: P S CHMURA, VICE PRESIDENT

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, or 7a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, or 7b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

| | | | |
|---|--|----|---------------|
| 1a Form 990 check here ▶ <input type="checkbox"/> | b Total revenue, if any (Form 990, Part VIII, column (A), line 12) | 1b | _____ |
| 2a Form 990-EZ check here ▶ <input type="checkbox"/> | b Total revenue, if any (Form 990-EZ, line 9) | 2b | _____ |
| 3a Form 1120-POL check here ▶ <input type="checkbox"/> | b Total tax (Form 1120-POL, line 22) | 3b | _____ |
| 4a Form 990-PF check here ▶ <input checked="" type="checkbox"/> | b Tax based on investment income (Form 990-PF, Part VI, line 5) | 4b | <u>8,166.</u> |
| 5a Form 8868 check here ▶ <input type="checkbox"/> | b Balance due (Form 8868, line 3c) | 5b | _____ |
| 6a Form 990-T check here ▶ <input type="checkbox"/> | b Total tax (Form 990-T, Part III, line 4) | 6b | _____ |
| 7a Form 4720 check here ▶ <input type="checkbox"/> | b Total tax (Form 4720, Part III, line 1) | 7b | _____ |

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that I am an officer of the above organization or I am a person subject to tax with respect to (name of organization) _____, (EIN) _____ and that I have examined a copy of the 2020 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

I authorize PRICewaterhouseCOOPERS LLP to enter my PIN 4 4 1 4 4 as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the tax year 2020 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the organization, I will enter my PIN as my signature on the tax year 2020 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax ▶ Peggy S. Chmura Date ▶ _____

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

8 6 9 8 3 4 4 4 1 4 4
Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2020 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ [Signature] Date ▶ _____

**ERO Must Retain This Form - See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So**

For Paperwork Reduction Act Notice, see back of form.

Form **8879-EO** (2020)

ESTIMATED TAX WORKSHEET FOR FORM 990-W

| | | | |
|---|----------|----------|--------|
| A. 2021 Estimated Tax | | A | |
| B. Enter 100 % of Line A | B | | |
| C. Enter 100 % of tax on 2020 FORM 990-PF | C | 8,166 | |
| D. Required Annual Payment (Smaller of lines B or C) | D | | 8,166. |
| E. Income tax withheld (if applicable) | E | | NONE |
| F. Balance (As rounded to the nearest multiple of 10) | F | | 8,170. |

Record of Estimated Tax Payments

| Payment number | (a) Date | (b) Amount | (c) 2019 overpayment credit applied | (d) Total amount paid and credited (add (b) and (c)) |
|----------------|------------|------------|-------------------------------------|--|
| 1 | 05/17/2021 | 2,043. | | 2,043. |
| 2 | 06/15/2021 | 2,042. | | 2,042. |
| 3 | 09/15/2021 | 2,043. | | 2,043. |
| 4 | 12/15/2021 | 2,042. | | 2,042. |
| Total | | 8,170. | | 8,170. |

ESTIMATED PAYMENTS MUST BE MADE USING THE ELECTRONIC FEDERAL TAX PAYMENTS SYSTEM (EFTPS). THIS WORKSHEET MERELY PROVIDES THE AMOUNTS WHICH NEED TO BE PAID VIA THE ABOVE METHOD.

Underpayment of Estimated Tax by Corporations

2020

▶ Attach to the corporation's tax return.
 ▶ Go to www.irs.gov/Form2220 for instructions and the latest information.

Name: **BRUSH FOUNDATION T/A** Employer identification number: **34-6000445**

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

Part I Required Annual Payment

| | | | |
|-----------|--|-----------|--------|
| 1 | Total tax (see instructions) | 1 | 8,166. |
| 2a | Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1 | 2a | |
| b | Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method. | 2b | |
| c | Credit for federal tax paid on fuels (see instructions) | 2c | |
| d | Total. Add lines 2a through 2c | 2d | |
| 3 | Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. The corporation does not owe the penalty | 3 | 8,166. |
| 4 | Enter the tax shown on the corporation's 2019 income tax return. See instructions. Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5 | 4 | 3,623. |
| 5 | Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3 | 5 | 3,623. |

Part II Reasons for Filing - Check the boxes below that apply. If any boxes are checked, the corporation must file Form 2220 even if it does not owe a penalty. See instructions.

| | |
|----------|--|
| 6 | <input type="checkbox"/> The corporation is using the adjusted seasonal installment method. |
| 7 | <input type="checkbox"/> The corporation is using the annualized income installment method. |
| 8 | <input type="checkbox"/> The corporation is a "large corporation" figuring its first required installment based on the prior year's tax. |

Part III Figuring the Underpayment

| | (a) | (b) | (c) | (d) |
|---|--------------|------------|------------|------------|
| 9 Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year. Filers with installments due on or after April 1, 2020, and before July 15, 2020, see instructions | 9 07/15/2020 | 07/15/2020 | 09/15/2020 | 12/15/2020 |
| 10 Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Schedule A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column | 10 906. | 906. | 906. | 905. |
| 11 Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions | 11 1,815. | | 908. | 907. |
| Complete lines 12 through 18 of one column before going to the next column. | | | | |
| 12 Enter amount, if any, from line 18 of the preceding column | 12 | 909. | 3. | 5. |
| 13 Add lines 11 and 12 | 13 | 909. | 911. | 912. |
| 14 Add amounts on lines 16 and 17 of the preceding column | 14 | | | |
| 15 Subtract line 14 from line 13. If zero or less, enter -0- | 15 1,815. | 909. | 911. | 912. |
| 16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0- | 16 | | | |
| 17 Underpayment. If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18 | 17 | | | |
| 18 Overpayment. If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column | 18 909. | 3. | 5. | |

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

For Paperwork Reduction Act Notice, see separate instructions.

Part IV Figuring the Penalty

| | (a) | (b) | (c) | (d) |
|--|-----|-----|-----|--------------|
| 19 Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. (C corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.) See instructions | | | | |
| 20 Number of days from due date of installment on line 9 to the date shown on line 19. | | | | |
| 21 Number of days on line 20 after 4/15/2020 and before 7/1/2020 | | | | |
| 22 Underpayment on line 17 x $\frac{\text{Number of days on line 21}}{366} \times 5\% (0.05)$ | \$ | \$ | \$ | \$ |
| 23 Number of days on line 20 after 6/30/2020 and before 10/1/2020 | | | | |
| 24 Underpayment on line 17 x $\frac{\text{Number of days on line 23}}{366} \times 3\% (0.03)$ | \$ | \$ | \$ | \$ |
| 25 Number of days on line 20 after 9/30/2020 and before 1/1/2021 | | | | |
| 26 Underpayment on line 17 x $\frac{\text{Number of days on line 25}}{366} \times 3\% (0.03)$ | \$ | \$ | \$ | \$ |
| 27 Number of days on line 20 after 12/31/2020 and before 4/1/2021 | | | | |
| 28 Underpayment on line 17 x $\frac{\text{Number of days on line 27}}{365} \times 3\% (0.03)$ | \$ | \$ | \$ | \$ |
| 29 Number of days on line 20 after 3/31/2021 and before 7/1/2021 | | | | |
| 30 Underpayment on line 17 x $\frac{\text{Number of days on line 29}}{365} \times \%$ | \$ | \$ | \$ | \$ |
| 31 Number of days on line 20 after 6/30/2021 and before 10/1/2021 | | | | |
| 32 Underpayment on line 17 x $\frac{\text{Number of days on line 31}}{365} \times \%$ | \$ | \$ | \$ | \$ |
| 33 Number of days on line 20 after 9/30/2021 and before 1/1/2022 | | | | |
| 34 Underpayment on line 17 x $\frac{\text{Number of days on line 33}}{365} \times \%$ | \$ | \$ | \$ | \$ |
| 35 Number of days on line 20 after 12/31/2021 and before 3/16/2022 | | | | |
| 36 Underpayment on line 17 x $\frac{\text{Number of days on line 35}}{365} \times \%$ | \$ | \$ | \$ | \$ |
| 37 Add lines 22, 24, 26, 28, 30, 32, 34, and 36 | \$ | \$ | \$ | \$ |
| 38 Penalty. Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 34; or the comparable line for other income tax returns | | | | 38 \$ |

*Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov You can also call 1-800-829-4933 to get interest rate information.

BRUSH FOUNDATION T/A
 Schedule D Detail of Long-term Capital Gains and Losses

34-6000445

| Description | Date Acquired | Date Sold | Gross Sales Price | Cost or Other Basis | Long-term Gain/Loss |
|--|---------------|------------|-------------------|---------------------|---------------------|
| PUBLICLY TRADED SECURITIES | | | | | |
| 4150.579 AQR EQUITY MARKET NEUTRAL FUND \$0.05208 | 11/30/2018 | 06/30/2020 | 33,578.00 | 43,291.00 | -9,713.00 |
| 75. ADOBE SYS INC | VAR | 07/02/2020 | 33,395.00 | 18,261.00 | 15,134.00 |
| 50. BAXTER INTL INC COM | 03/27/2018 | 07/02/2020 | 4,358.00 | 3,278.00 | 1,080.00 |
| 75. BECTON DICKINSON & CO COM | 03/27/2018 | 03/17/2020 | 18,009.00 | 16,124.00 | 1,885.00 |
| 15927.419 BLACKROCK STRATEGIC INCOME | | | | | |
| OPPS PORTF \$0.313 | 03/27/2018 | 06/30/2020 | 157,044.00 | 157,989.00 | -945.00 |
| 100. BRISTOL MYERS SQUIBB CO | 03/27/2018 | 07/02/2020 | 5,883.00 | 6,288.00 | -405.00 |
| 100. CIGNA CORP | 03/27/2018 | 07/02/2020 | 19,077.00 | 16,738.00 | 2,339.00 |
| 100. CAPITAL ONE FINANCIAL CORP | 12/26/2014 | 02/07/2020 | 10,171.00 | 8,350.00 | 1,821.00 |
| 128. CARRIER GLOBAL CORP | VAR | 10/05/2020 | 4,079.00 | 2,349.00 | 1,730.00 |
| 125. CINCINNATI FINANCIAL CORP | 08/22/2012 | 07/02/2020 | 8,038.00 | 4,864.00 | 3,174.00 |
| 25. COVETRUS INC | 09/12/2011 | 02/07/2020 | 323.00 | 410.00 | -87.00 |
| 100. DIAMONDBACK ENERGY INC | 12/26/2014 | 10/05/2020 | 3,086.00 | 6,049.00 | -2,963.00 |
| 75. EDWARDS LIFESCIENCES CORP | 03/27/2018 | 10/05/2020 | 6,022.00 | 3,502.00 | 2,520.00 |
| 150. EXELON CORPORATION | 03/27/2018 | 10/05/2020 | 5,518.00 | 5,824.00 | -306.00 |
| 250000. FEDERAL HOME LN BANKS DTD | | | | | |
| 7/12/2016 2.07000% 7/12/2024 | 07/07/2016 | 03/05/2020 | 250,000.00 | 249,750.00 | 250.00 |
| 100000. FEDERAL FARM CR BANKS DTD | | | | | |
| 7/11/2016 1.75000% 7/11/2022 | 07/07/2016 | 04/13/2020 | 100,000.00 | 100,000.00 | |
| 100000. FEDERAL FARM CR BANKS DTD | | | | | |
| 7/13/2016 2.35000% 4/13/2026 | 07/07/2016 | 02/10/2020 | 100,000.00 | 99,850.00 | 150.00 |
| 75. FORTIVE CORP | | | | | |
| 250. GENERAL MILLS INC COM | 12/26/2014 | 10/05/2020 | 5,898.00 | 3,203.00 | 2,695.00 |
| 50. GILEAD SCIENCES INC | 03/27/2018 | 07/02/2020 | 15,322.00 | 11,388.00 | 3,934.00 |
| 25. HERSHEY FOODS CORP COM | 12/21/2016 | 10/05/2020 | 3,195.00 | 3,719.00 | -524.00 |
| 25. ILLUMINA INC | 03/27/2018 | 07/02/2020 | 3,260.00 | 2,463.00 | 797.00 |
| .36 INGERSOLL-RAND INC | 08/14/2018 | 10/05/2020 | 7,924.00 | 8,251.00 | -327.00 |
| 50. INTUIT | 08/14/2018 | 03/02/2020 | 8.00 | 9.00 | -1.00 |
| 50. KIMBERLY-CLARK CORP | 07/06/2016 | 07/02/2020 | 15,200.00 | 5,654.00 | 9,546.00 |
| 50. MANPOWERGROUP INC COM | 08/14/2018 | 07/02/2020 | 7,148.00 | 5,568.00 | 1,580.00 |
| 75. MARRIOTT INTERNATIONAL INC | 03/27/2018 | 03/17/2020 | 3,735.00 | 5,709.00 | -1,974.00 |
| Totals | VAR | 10/05/2020 | 7,251.00 | 9,539.00 | -2,288.00 |

JSA
0F0970 1.000

FEDERAL CAPITAL GAIN DISTRIBUTIONS

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LONG-TERM CAPITAL GAIN DISTRIBUTIONS

15% RATE CAPITAL GAIN DISTRIBUTIONS

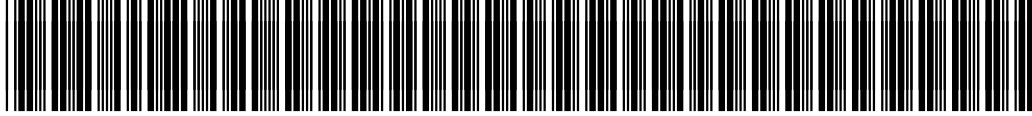
LONG-TERM CAPITAL GAIN DIVIDENDS/DISTRIBUTION 46,963.00

TOTAL 15% RATE CAPITAL GAIN DISTRIBUTIONS 46,963.00

TOTAL LONG-TERM CAPITAL GAIN DISTRIBUTIONS 46,963.00

=====

990 TAX RETURN FOR BRUSH FOUNDATION T/A 20-0905480
20-0905480



0FDV32W070854097720200000-000

Department of the Treasury
Internal Revenue Service

or Section 4947(a)(1) Trust Treated as Private Foundation
▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

2020

Open to Public Inspection

For calendar year **2020** or tax year beginning **2020**, and ending **20**

Name of foundation
BRUSH FOUNDATION T/A

Number and street (or P.O. box number if mail is not delivered to street address) Room/suite
4900 TIEDEMAN ROAD OH-01-49-0150

City or town, state or province, country, and ZIP or foreign postal code
BROOKLYN, OH 44144

A Employer identification number
34-6000445

B Telephone number (see instructions)
216-689-0416

C If exemption application is pending, check here

D 1. Foreign organizations, check here
2. Foreign organizations meeting the 85% test, check here and attach computation

E If private foundation status was terminated under section 507(b)(1)(A), check here

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here

G Check all that apply: Initial return Initial return of a former public charity
 Final return Amended return
 Address change Name change

H Check type of organization: Section 501(c)(3) exempt private foundation
 Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ **8,207,313.**

J Accounting method: Cash Accrual
 Other (specify) _____
(Part I, column (d), must be on cash basis.)

| Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).) | | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
|--|--|------------------------------------|---------------------------|-------------------------|---|
| Revenue | 1 Contributions, gifts, grants, etc., received (attach schedule) | | | | |
| | 2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B. | | | | |
| | 3 Interest on savings and temporary cash investments | | | | |
| | 4 Dividends and interest from securities | 135,182. | 134,988. | | STMT 1 |
| | 5a Gross rents | | | | |
| | b Net rental income or (loss) | | | | |
| | 6a Net gain or (loss) from sale of assets not on line 10 | 470,898. | | | |
| | b Gross sales price for all assets on line 6a 2,293,637. | | | | |
| | 7 Capital gain net income (from Part IV, line 2) | | 470,898. | | |
| | 8 Net short-term capital gain | | | | |
| | 9 Income modifications | | | | |
| | 10a Gross sales less returns and allowances | | | | |
| b Less: Cost of goods sold | | | | | |
| c Gross profit or (loss) (attach schedule) | | | | | |
| 11 Other income (attach schedule) | | | | | |
| 12 Total. Add lines 1 through 11 | 606,080. | 605,886. | | | |
| Operating and Administrative Expenses | 13 Compensation of officers, directors, trustees, etc. | 23,148. | 17,361. | | 5,787. |
| | 14 Other employee salaries and wages | | NONE | NONE | |
| | 15 Pension plans, employee benefits | | NONE | NONE | |
| | 16a Legal fees (attach schedule) | | | | |
| | b Accounting fees (attach schedule) STMT 2 | 2,700. | NONE | NONE | 2,700. |
| | c Other professional fees (attach schedule) | | | | |
| | 17 Interest | | | | |
| | 18 Taxes (attach schedule) (see instructions) STMT 3 | 3,793. | 1,078. | | |
| | 19 Depreciation (attach schedule) and depletion | | | | |
| | 20 Occupancy | | | | |
| | 21 Travel, conferences, and meetings | 5,473. | NONE | NONE | 5,473. |
| | 22 Printing and publications | | NONE | NONE | |
| | 23 Other expenses (attach schedule) STMT 4 | 53,828. | | | 53,578. |
| | 24 Total operating and administrative expenses. Add lines 13 through 23. | 88,942. | 18,439. | NONE | 67,538. |
| | 25 Contributions, gifts, grants paid | 306,370. | | | 306,370. |
| 26 Total expenses and disbursements. Add lines 24 and 25 | 395,312. | 18,439. | NONE | 373,908. | |
| 27 Subtract line 26 from line 12: | | | | | |
| a Excess of revenue over expenses and disbursements | 210,768. | | | | |
| b Net investment income (if negative, enter -0-) | | 587,447. | | | |
| c Adjusted net income (if negative, enter -0-) | | | NONE | | |

| Part II Balance Sheets | | Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.) | Beginning of year | End of year | |
|-----------------------------|---|---|-------------------|----------------|-----------------------|
| | | | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| Assets | 1 | Cash - non-interest-bearing | | | |
| | 2 | Savings and temporary cash investments | | 434,613. | 434,613. |
| | 3 | Accounts receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____ | | | |
| | 4 | Pledges receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____ | | | |
| | 5 | Grants receivable | | | |
| | 6 | Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) | | | |
| | 7 | Other notes and loans receivable (attach schedule) ▶ _____ Less: allowance for doubtful accounts ▶ _____ NONE | | | |
| | 8 | Inventories for sale or use | | | |
| | 9 | Prepaid expenses and deferred charges | | | |
| | 10a | Investments - U.S. and state government obligations (attach schedule) | | | |
| | b | Investments - corporate stock (attach schedule) . STMT .5. | | 2,380,940. | 2,999,808. |
| | c | Investments - corporate bonds (attach schedule) . STMT .7. | | 1,254,842. | 1,328,749. |
| | 11 | Investments - land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation ▶ _____ (attach schedule) | | | |
| | 12 | Investments - mortgage loans | | | |
| | 13 | Investments - other (attach schedule) STMT .8. | 6,524,797. | 2,664,032. | 3,444,143. |
| | 14 | Land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation ▶ _____ (attach schedule) | | | |
| 15 | Other assets (describe ▶ _____) | | | | |
| 16 | Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I) | 6,524,797. | 6,734,427. | 8,207,313. | |
| Liabilities | 17 | Accounts payable and accrued expenses | | | |
| | 18 | Grants payable | | | |
| | 19 | Deferred revenue | | | |
| | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| | 21 | Mortgages and other notes payable (attach schedule) | | | |
| | 22 | Other liabilities (describe ▶ _____) | | | |
| 23 | Total liabilities (add lines 17 through 22) | | NONE | | |
| Net Assets or Fund Balances | Foundations that follow FASB ASC 958, check here ▶ <input type="checkbox"/> and complete lines 24, 25, 29, and 30. | | | | |
| | 24 | Net assets without donor restrictions | | | |
| | 25 | Net assets with donor restrictions | | | |
| | Foundations that do not follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> and complete lines 26 through 30. | | | | |
| | 26 | Capital stock, trust principal, or current funds | 6,524,797. | 6,734,427. | |
| | 27 | Paid-in or capital surplus, or land, bldg., and equipment fund | | | |
| 28 | Retained earnings, accumulated income, endowment, or other funds | | | | |
| 29 | Total net assets or fund balances (see instructions) | 6,524,797. | 6,734,427. | | |
| 30 | Total liabilities and net assets/fund balances (see instructions) | 6,524,797. | 6,734,427. | | |

| Part III Analysis of Changes in Net Assets or Fund Balances | | |
|---|--|--------------|
| 1 | Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return) | 1 6,524,797. |
| 2 | Enter amount from Part I, line 27a | 2 210,768. |
| 3 | Other increases not included in line 2 (itemize) ▶ _____ | 3 |
| 4 | Add lines 1, 2, and 3 | 4 6,735,565. |
| 5 | Decreases not included in line 2 (itemize) ▶ SEE STATEMENT 10 | 5 1,138. |
| 6 | Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 | 6 6,734,427. |

Part IV Capital Gains and Losses for Tax on Investment Income

| (a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) | | (b) How acquired P - Purchase D - Donation | (c) Date acquired (mo., day, yr.) | (d) Date sold (mo., day, yr.) |
|--|--|---|---|----------------------------------|
| 1 a PUBLICLY TRADED SECURITIES | | | | |
| b | | | | |
| c | | | | |
| d | | | | |
| e | | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | (h) Gain or (loss) (e) plus (f) minus (g) | |
| a 2,293,637. | | 1,822,739. | 470,898. | |
| b | | | | |
| c | | | | |
| d | | | | |
| e | | | | |
| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. | | | | |
| (i) FMV as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of col. (i) over col. (j), if any | (l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h)) | |
| a | | | 470,898. | |
| b | | | | |
| c | | | | |
| d | | | | |
| e | | | | |
| 2 Capital gain net income or (net capital loss) | { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 } | | 2 | 470,898. |
| 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8 | { If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8 } | | 3 | |

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

SECTION 4940(e) REPEALED ON DECEMBER 20, 2019 - DO NOT COMPLETE.

| 1 Reserved | | | | |
|-----------------------------|-----------------|-----------------|-----------------|--|
| (a) Reserved | (b) Reserved | (c) Reserved | (d) Reserved | |
| Reserved | | | | |
| Reserved | | | | |
| Reserved | | | | |
| Reserved | | | | |
| Reserved | | | | |
| 2 Reserved | | | 2 | |
| 3 Reserved | | | 3 | |
| 4 Reserved | | | 4 | |
| 5 Reserved | | | 5 | |
| 6 Reserved | | | 6 | |
| 7 Reserved | | | 7 | |
| 8 Reserved | | | 8 | |

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

| | | | |
|-----------|---|-----------|--------|
| 1a | Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary - see instructions) | | |
| b | Reserved | 1 | 8,166. |
| c | All other domestic foundations enter 1.39% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b) | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) | 2 | NONE |
| 3 | Add lines 1 and 2 | 3 | 8,166. |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) | 4 | NONE |
| 5 | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | 5 | 8,166. |
| 6 | Credits/Payments: | | |
| a | 2020 estimated tax payments and 2019 overpayment credited to 2020 | 6a | 3,630. |
| b | Exempt foreign organizations - tax withheld at source | 6b | NONE |
| c | Tax paid with application for extension of time to file (Form 8868) | 6c | NONE |
| d | Backup withholding erroneously withheld | 6d | |
| 7 | Total credits and payments. Add lines 6a through 6d | 7 | 3,630. |
| 8 | Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached | 8 | |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | 9 | 4,536. |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | 10 | |
| 11 | Enter the amount of line 10 to be: Credited to 2021 estimated tax <input type="checkbox"/> NONE Refunded <input checked="" type="checkbox"/> | 11 | |

Part VII-A Statements Regarding Activities

| | Yes | No |
|--|-----|----|
| 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? | | X |
| 1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition 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. | | X |
| 1c Did the foundation file Form 1120-POL for this year? | | X |
| 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. ► \$ _____ | | |
| e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$ _____ | | |
| 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities. | | X |
| 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | | X |
| 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? | | X |
| 4b If "Yes," has it filed a tax return on Form 990-T for this year? | | |
| 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by <i>General Instruction T</i> . | | X |
| 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? | 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 | X | |
| 8a Enter the states to which the foundation reports or with which it is registered. See instructions. ► OH | | |
| 8b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? If "No," attach explanation | X | |
| 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2020 or the tax year beginning in 2020? See the instructions for Part XIV. If "Yes," complete Part XIV | | X |
| 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses | | X |

Part VII-A Statements Regarding Activities (continued)

| | | Yes | No |
|--|-----------|-------------------------------------|-------------------------------------|
| 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions | 11 | | <input checked="" type="checkbox"/> |
| 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions | 12 | | <input checked="" type="checkbox"/> |
| 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ <u>www.brushfoundation.org</u> | 13 | <input checked="" type="checkbox"/> | |
| 14 The books are in care of ▶ <u>KEYBANK N A</u> Telephone no. ▶ <u>(216) 813-4556</u> Located at ▶ <u>4900 TIEDEMAN RD OH-01-49-0150, BROOKLYN, OH</u> ZIP+4 ▶ <u>44144-2302</u> | | | |
| 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year ▶ 15 | | | |
| 16 At any time during calendar year 2020, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? | 16 | | <input checked="" type="checkbox"/> |
| See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶ | | | |

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

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

| | | Yes | No |
|--|-----------|-----|-------------------------------------|
| 1a During the year, did the foundation (either directly or indirectly): | | | |
| (1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | |
| (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | |
| (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | |
| (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | |
| (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | |
| b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions | 1b | | <input checked="" type="checkbox"/> |
| Organizations relying on a current notice regarding disaster assistance, check here ▶ <input type="checkbox"/> | | | |
| c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2020? | 1c | | <input checked="" type="checkbox"/> |
| 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)): | | | |
| a At the end of tax year 2020, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2020? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 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.) | 2b | | |
| c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ▶ _____, _____, _____, _____ | | | |
| 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | |
| b If "Yes," did it have excess business holdings in 2020 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2020.) | 3b | | |
| 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | <input checked="" type="checkbox"/> |
| b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2020? | 4b | | <input checked="" type="checkbox"/> |

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

| | | Yes | No |
|---|------------------------------|--|-------------------------------------|
| 5a During the year, did the foundation pay or incur any amount to: | | | |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | |
| (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | |
| (3) Provide a grant to an individual for travel, study, or other similar purposes? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | |
| (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | |
| (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions | | | |
| Organizations relying on a current notice regarding disaster assistance, check here | | | <input type="checkbox"/> |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| If "Yes," attach the statement required by Regulations section 53.4945-5(d). | | | |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | | | <input checked="" type="checkbox"/> |
| If "Yes" to 6b, file Form 8870. | | | |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | |
| b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? | | | |
| 8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | |

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions.

| (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|----------------------|---|---|---|---------------------------------------|
| SEE STATEMENT 11 | | 23,148. | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

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

| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|---|---|------------------|---|---------------------------------------|
| NONE | | NONE | NONE | NONE |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Total number of other employees paid over \$50,000 NONE

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE."

| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
|---|---------------------|------------------|
| NONE | | NONE |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Total number of others receiving over \$50,000 for professional services **NONE**

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

| | Expenses |
|--------|----------|
| 1 NONE | |
| 2 | |
| 3 | |
| 4 | |

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

| | Amount |
|--|--------|
| 1 NONE | |
| 2 | |
| All other program-related investments. See instructions. 3 NONE | |
| Total. Add lines 1 through 3 | |

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

| | | | |
|----------|---|-----------|------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: | | |
| a | Average monthly fair market value of securities | 1a | 7,491,110. |
| b | Average of monthly cash balances | 1b | 15,028. |
| c | Fair market value of all other assets (see instructions). | 1c | NONE |
| d | Total (add lines 1a, b, and c) | 1d | 7,506,138. |
| e | Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) | 1e | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | NONE |
| 3 | Subtract line 2 from line 1d. | 3 | 7,506,138. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions). | 4 | 112,592. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 7,393,546. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 369,677. |

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

| | | | |
|-----------|--|-----------|----------|
| 1 | Minimum investment return from Part X, line 6 | 1 | 369,677. |
| 2a | Tax on investment income for 2020 from Part VI, line 5 | 2a | 8,166. |
| b | Income tax for 2020. (This does not include the tax from Part VI.) | 2b | |
| c | Add lines 2a and 2b. | 2c | 8,166. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1. | 3 | 361,511. |
| 4 | Recoveries of amounts treated as qualifying distributions. | 4 | NONE |
| 5 | Add lines 3 and 4 | 5 | 361,511. |
| 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 | 361,511. |

Part XII Qualifying Distributions (see instructions)

| | | | |
|----------|--|-----------|----------|
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | |
| a | Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26. | 1a | 373,908. |
| 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 | 373,908. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions. | 5 | N/A |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 373,908. |

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2019 | (c) 2019 | (d) 2020 |
|---|---------------|----------------------------|-------------|-------------|
| 1 Distributable amount for 2020 from Part XI, line 7 | | | | 361,511. |
| 2 Undistributed income, if any, as of the end of 2020: | | | | |
| a Enter amount for 2019 only. | | | NONE | |
| b Total for prior years: 20____, 20____, 20____ | | NONE | | |
| 3 Excess distributions carryover, if any, to 2020: | | | | |
| a From 2015 | | NONE | | |
| b From 2016 | | 6,220. | | |
| c From 2017 | | 7,126. | | |
| d From 2018 | | 32,334. | | |
| e From 2019 | | 56,499. | | |
| f Total of lines 3a through e | 102,179. | | | |
| 4 Qualifying distributions for 2020 from Part XII, line 4: ▶ \$ <u>373,908.</u> | | | | |
| a Applied to 2019, but not more than line 2a | | | NONE | |
| b Applied to undistributed income of prior years (Election required - see instructions) | | NONE | | |
| c Treated as distributions out of corpus (Election required - see instructions) | NONE | | | |
| d Applied to 2020 distributable amount. | | | | 361,511. |
| e Remaining amount distributed out of corpus. | 12,397. | | | |
| 5 Excess distributions carryover applied to 2020 (If an amount appears in column (d), the same amount must be shown in column (a).) | NONE | | | NONE |
| 6 Enter the net total of each column as indicated below: | | | | |
| a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 | 114,576. | | | |
| b 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 | | NONE | | |
| d Subtract line 6c from line 6b. Taxable amount - see instructions | | NONE | | |
| e Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount - see instructions | | | NONE | |
| f Undistributed income for 2020. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2021. | | | | 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) | NONE | | | |
| 8 Excess distributions carryover from 2015 not applied on line 5 or line 7 (see instructions) | NONE | | | |
| 9 Excess distributions carryover to 2021. Subtract lines 7 and 8 from line 6a | 114,576. | | | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2016 | 6,220. | | | |
| b Excess from 2017 | 7,126. | | | |
| c Excess from 2018 | 32,334. | | | |
| d Excess from 2019 | 56,499. | | | |
| e Excess from 2020 | 12,397. | | | |

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) NOT APPLICABLE

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2020, enter the date of the ruling ▶

b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

| | Tax year | Prior 3 years | | | (e) Total |
|--|----------|---------------|----------|----------|-----------|
| | (a) 2020 | (b) 2019 | (c) 2018 | (d) 2017 | |
| 2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed | | | | | |
| b 85% of line 2a | | | | | |
| c Qualifying distributions from Part XII, line 4, for each year listed | | | | | |
| d Amounts included in line 2c not used directly for active conduct of exempt activities | | | | | |
| e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c | | | | | |
| 3 Complete 3a, b, or c for the alternative test relied upon: | | | | | |
| a "Assets" alternative test - enter: | | | | | |
| (1) Value of all assets | | | | | |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | |
| b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6, for each year listed. | | | | | |
| c "Support" alternative test - enter: | | | | | |
| (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) | | | | | |
| (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) | | | | | |
| (3) Largest amount of support from an exempt organization | | | | | |
| (4) Gross investment income | | | | | |

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

SEE STATEMENT 15

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

SEE ATTACHED STATEMENT FOR LINE 2

c Any submission deadlines:

SEE ATTACHED STATEMENT FOR LINE 2

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

SEE ATTACHED STATEMENT FOR LINE 2

Part XV Supplementary Information *(continued)*

3 Grants and Contributions Paid During the Year or Approved for Future Payment

| Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|---|---|--------------------------------|----------------------------------|----------|
| Name and address (home or business) | | | | |
| a <i>Paid during the year</i> | | | | |
| SEE STATEMENT 19 | | | | 306,370. |
| Total | | | ▶ 3a | 306,370. |
| b <i>Approved for future payment</i> | | | | |
| Total | | | ▶ 3b | |

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

Table with columns: (a) Business code, (b) Amount, (c) Exclusion code, (d) Amount, (e) Related or exempt function income. Rows include Program service revenue, Membership dues, Interest on savings, Dividends, Net rental income, Gain from sales of assets, and Subtotal. Totals: 13 606,080.

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

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

Table for Part XVI-B with a single column for Line No. and a large empty area for explanation. The word 'NOT APPLICABLE' is centered in the main body.

Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

| | | Yes | No |
|----------|--|--------------|----|
| 1 | Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? | | |
| a | Transfers from the reporting foundation to a noncharitable exempt organization of: | | |
| | (1) Cash | 1a(1) | X |
| | (2) Other assets | 1a(2) | X |
| b | Other transactions: | | |
| | (1) Sales of assets to a noncharitable exempt organization | 1b(1) | X |
| | (2) Purchases of assets from a noncharitable exempt organization | 1b(2) | X |
| | (3) Rental of facilities, equipment, or other assets | 1b(3) | X |
| | (4) Reimbursement arrangements | 1b(4) | X |
| | (5) Loans or loan guarantees | 1b(5) | X |
| | (6) Performance of services or membership or fundraising solicitations | 1b(6) | X |
| c | Sharing of facilities, equipment, mailing lists, other assets, or paid employees | 1c | X |
| d | If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. | | |

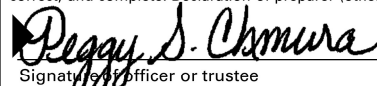
| (a) Line no. | (b) Amount involved | (c) Name of noncharitable exempt organization | (d) Description of transfers, transactions, and sharing arrangements |
|--------------|---------------------|---|--|
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2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? Yes No

b If "Yes," complete the following schedule.

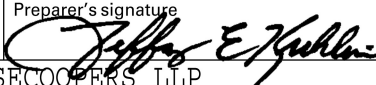
| (a) Name of organization | (b) Type of organization | (c) Description of relationship |
|--------------------------|--------------------------|---------------------------------|
| | | |
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| | | |

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here  04/28/2021 VICE PRESIDENT
 Signature of officer or trustee Date Title

KEYBANK BY: P S CHMURA

May the IRS discuss this return with the preparer shown below? See instructions. Yes No

| | | | | | |
|-------------------------------|--|--|---------------------------|--|--------------------------|
| Paid Preparer Use Only | Print/Type preparer's name JEFFREY E KUHLIN | Preparer's signature  | Date 04/28/2021 | Check <input checked="" type="checkbox"/> if self-employed | PTIN P00353001 |
| | Firm's name PRICEWATERHOUSECOOPERS LLP | Firm's EIN 13-4008324 | | Phone no. 412-355-6000 | |
| | Firm's address 1850 N CENTRAL AVE, STE 700 PHOENIX, AZ 85004 | | | | |

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES
 =====

| DESCRIPTION | REVENUE AND EXPENSES PER BOOKS | NET INVESTMENT INCOME |
|---|---|-----------------------------|
| ----- | ----- | ----- |
| USGI REPORTED AS NONQUALIFIED DIVIDENDS | 3,149. | 3,149. |
| FOREIGN DIVIDENDS | 6,446. | 6,446. |
| NONDIVIDEND DISTRIBUTIONS | 194. | |
| DOMESTIC DIVIDENDS | 48,032. | 48,032. |
| CORPORATE INTEREST | 17,911. | 17,911. |
| U.S. GOVERNMENT INTEREST (FEDERAL TAXABLE | 5,435. | 5,435. |
| BOND PREMIUM AMORTIZATION-OTHER INTEREST | -989. | -989. |
| US GOVERNMENT INTEREST REPORTED AS QUALI | 255. | 255. |
| NONQUALIFIED FOREIGN DIVIDENDS | 406. | 406. |
| NONQUALIFIED DOMESTIC DIVIDENDS | 52,293. | 52,293. |
| SECTION 199A DIVIDENDS | 2,050. | 2,050. |
| | ----- | ----- |
| TOTAL | 135,182. | 134,988. |
| | ===== | ===== |

FORM 990PF, PART I - ACCOUNTING FEES

=====

| DESCRIPTION | REVENUE AND EXPENSES PER BOOKS | NET INVESTMENT INCOME | ADJUSTED NET INCOME | CHARITABLE PURPOSES |
|---------------------------------|--------------------------------|-----------------------|---------------------|---------------------|
| TAX PREPARATION FEE (NON-ALLOC) | 2,700. | | | 2,700. |
| TOTALS | 2,700. | NONE | NONE | 2,700. |

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

| DESCRIPTION ----- | REVENUE AND EXPENSES PER BOOKS ----- | NET INVESTMENT INCOME ----- |
|--------------------------------|--|--------------------------------------|
| FEDERAL ESTIMATES - PRINCIPAL | 2,715. | |
| FOREIGN TAXES ON QUALIFIED FOR | 457. | 457. |
| FOREIGN TAXES ON NONQUALIFIED | 621. | 621. |
| TOTALS | 3,793. | 1,078. |
| | ===== | ===== |

FORM 990PF, PART I - OTHER EXPENSES

=====

REVENUE
AND
EXPENSES
PER BOOKS

CHARITABLE
PURPOSES

DESCRIPTION

| | | |
|--------------------------------|---------|---------|
| MEMBERSHIP DUES | 2,960. | 2,960. |
| CONSULTING FEE | 5,000. | 5,000. |
| OFFICE EXPENSE-PLANNED PARENTH | 44,124. | 44,124. |
| OTHER EXPENSES | 412. | 162. |
| STATE FILING FEE | 200. | 200. |
| INSURANCE | 1,132. | 1,132. |

53,828.
=====

53,578.
=====

TOTALS

FORM 990PF, PART II - CORPORATE STOCK

=====

| DESCRIPTION | ENDING BOOK VALUE | ENDING FMV |
|--------------------------------|----------------------|---------------|
| ----- | ----- | --- |
| 00846U101 AGILENT TECHNOLOGIES | 5,105. | 8,887. |
| 053484101 AVALONBAY COMMUNITIE | 25,178. | 24,065. |
| 064058100 BANK OF NEW YORK MEL | 41,016. | 33,952. |
| 09062X103 BIOGEN INC | 44,166. | 36,729. |
| 101156800 BOSTON TRUST WALDEN | 29,000. | 34,289. |
| 131649774 CALVERT EMERGING MAR | 375,180. | 494,214. |
| 134429109 CAMPBELL SOUP CO COM | 10,705. | 12,088. |
| 192446102 COGNIZANT TECH SOLUT | 16,174. | 16,390. |
| 202795HZ6 COMMONWEALTH EDISON | 50,326. | 50,630. |
| 30040W108 EVERSOURCE ENERGY CO | 9,303. | 12,977. |
| 524686524 CLEARBRIDGE INTERNAT | 254,705. | 333,828. |
| 487836108 KELLOGG CO COM | 19,455. | 18,669. |
| 501044101 KROGER CO COM | 21,251. | 19,056. |
| 42824C109 HEWLETT PACKARD ENTE | 4,806. | 3,555. |
| 701769408 PARNASSUS CORE EQUIT | 429,000. | 491,262. |
| 002824100 ABBOTT LABS COM | 10,707. | 19,161. |
| 00287Y109 ABBVIE INC COM | 9,363. | 10,715. |
| 023608102 AMEREN CORP COM | 13,074. | 21,467. |
| 27826A144 PARAMETRIC VOL RSK P | 92,415. | 103,043. |
| 31428X106 FEDEX CORP COM | 36,035. | 38,943. |
| 40434L105 HP INC COM | 16,625. | 18,443. |
| 45687V106 INGERSOLL-RAND INC C | 3,281. | 6,014. |
| 46625H100 JP MORGAN CHASE & CO | 5,859. | 22,237. |
| 4812A4351 JPMORGAN STRATEGIC I | 125,874. | 125,249. |
| 548661107 LOWES COS INC COM | 22,306. | 40,128. |
| 57636Q104 MASTERCARD INC COM C | 11,006. | 44,618. |
| 579780206 MCCORMICK & CO INC C | 10,788. | 19,120. |
| 58933Y105 MERCK & CO INC COM | 9,686. | 18,405. |
| 594918104 MICROSOFT CORP COM | 11,617. | 77,847. |

FORM 990PF, PART II - CORPORATE STOCK

=====

| DESCRIPTION | ENDING BOOK VALUE | ENDING FMV |
|--------------------------------|----------------------|---------------|
| ----- | ----- | --- |
| 68902V107 OTIS WORLDWIDE CORP | 3,522. | 4,323. |
| 74144T108 T ROWE PRICE GROUP I | 8,607. | 30,278. |
| 744320102 PRUDENTIAL FINANCIAL | 14,633. | 11,711. |
| 75513E101 RAYTHEON TECHNOLOGIE | 7,837. | 9,153. |
| 776696106 ROPER TECHNOLOGIES I | 4,159. | 10,777. |
| 88579Y101 3M CO COM | 20,853. | 21,849. |
| 92556V106 VIATRIS INC COM | 481. | 918. |
| 95040Q104 WELLTOWER INC COM | 12,086. | 14,540. |
| 98419M100 XYLEM INC COM | 15,006. | 20,358. |
| G1151C101 ACCENTURE PLC FGN CO | 4,895. | 26,121. |
| G5960L103 MEDTRONIC PLC FGN CO | 22,805. | 29,285. |
| N53745100 LYONDELLBASELL INDUS | 10,136. | 11,458. |
| 778296103 ROSS STORES INC COM | 9,690. | 15,351. |
| 78409V104 S&P GLOBAL INC COM | 38,698. | 65,746. |
| 857477103 STATE STR CORP COM | 38,475. | 29,112. |
| 92343VCR3 VERIZON COMMUNICATIO | 49,197. | 55,226. |
| 98389B100 XCEL ENERGY INC COM | 16,224. | 23,335. |
| 701765505 PARNASSUS MID CAP FU | 175,493. | 258,183. |
| 72369L107 PIONEER ILS INTERVAL | 150,000. | 129,027. |
| 693475AL9 PNC FINANCIAL SERVIC | 49,732. | 52,330. |
| G8994E103 TRANE TECHNOLOGIES P | 11,260. | 21,774. |
| 98311A105 WYNDHAM HOTELS & RES | 3,145. | 2,972. |
| | ----- | ----- |
| TOTALS | 2,380,940. | 2,999,808. |
| | ===== | ===== |

FORM 990PF, PART II - CORPORATE BONDS

=====

| DESCRIPTION | ENDING BOOK VALUE | ENDING FMV |
|---------------------------------|----------------------|---------------|
| ----- | ----- | --- |
| 020002AZ4 ALLSTATE CORP SENIOR | 50,097. | 53,345. |
| 031162BV1 AMGEN INC SENIOR NT | 50,325. | 54,883. |
| 053332AN2 AUTOZONE INC SENIOR | 49,137. | 52,091. |
| 14042E3Y4 CAPITAL ONE N A SENI | 49,719. | 50,607. |
| 46625HJH4 JPMORGAN CHASE & CO | 50,011. | 52,931. |
| 540424AQ1 LOEWS CORP SENIOR BD | 47,439. | 52,345. |
| 665859AM6 NORTHERN TRUST CORP | 100,615. | 101,969. |
| 13161P862 CALVERT SMALL CAP FU | 257,499. | 304,748. |
| 72201U638 PIMCO MORTGAGE OPPORT | 600,000. | 605,830. |
| | ----- | ----- |
| TOTALS | 1,254,842. | 1,328,749. |
| | ===== | ===== |

FORM 990PF, PART II - OTHER INVESTMENTS

=====

| DESCRIPTION | COST/ FMV C OR F | ENDING BOOK VALUE | ENDING FMV |
|--------------------------------|------------------------|----------------------|---------------|
| ----- | ----- | ----- | ---- |
| SEE ATTACHED | | | |
| 46435G516 ISHARES ESG AWARE MS | C | 67,191. | 80,344. |
| 46435G425 ISHARES ESG AWARE MS | C | 294,838. | 402,190. |
| 00206R102 AT&T INC COM | C | 17,021. | 15,444. |
| 00724F101 ADOBE INC COM | C | 16,434. | 37,509. |
| 03027X100 AMERICAN TOWER CORP | C | 8,066. | 16,835. |
| 125896100 CMS ENERGY CORP COM | C | 12,701. | 28,980. |
| 17275R102 CISCO SYS INC COM | C | 41,543. | 42,513. |
| 22160K105 COSTCO WHOLESALE COR | C | 6,548. | 28,259. |
| 231021106 CUMMINS INC COM | C | 16,064. | 22,710. |
| 235851102 DANAHER CORP DEL COM | C | 8,196. | 27,768. |
| 254687106 WALT DISNEY CO COM | C | 26,663. | 77,002. |
| 254709108 DISCOVER FINANCIAL S | C | 9,980. | 13,580. |
| 370334104 GENERAL MLS INC COM | C | 11,388. | 14,700. |
| 437076102 HOME DEPOT INC COM | C | 31,845. | 66,405. |
| 458140100 INTEL CORP COM | C | 25,518. | 44,838. |
| 459200101 INTERNATIONAL BUSINE | C | 45,640. | 34,617. |
| 461202103 INTUIT COM | C | 8,481. | 28,489. |
| 478160104 JOHNSON & JOHNSON CO | C | 6,358. | 15,738. |
| 580135101 MCDONALDS CORP COM | C | 6,481. | 16,094. |
| 655664100 NORDSTROM INC COM | C | 9,570. | 6,242. |
| 68389X105 ORACLE CORP COM | C | 4,680. | 29,111. |
| 713448108 PEPSICO INC COM | C | 38,376. | 51,905. |
| 717081103 PFIZER INC COM | C | 8,545. | 14,724. |
| 74340W103 PROLOGIS INC REIT | C | 16,050. | 24,915. |
| 760759100 REPUBLIC SERVICES IN | C | 4,978. | 16,853. |
| 872540109 TJX COS INC NEW COM | C | 21,233. | 34,145. |
| 882508104 TEXAS INSTRS INC COM | C | 31,301. | 49,239. |
| 92826C839 VISA INC COM CL A | C | 21,104. | 32,810. |

FORM 990PF, PART II - OTHER INVESTMENTS

=====

| DESCRIPTION | COST/ FMV C OR F | ENDING BOOK VALUE | ENDING FMV |
|--------------------------------|------------------------|----------------------|---------------|
| ----- | ----- | ----- | --- |
| G29183103 EATON CORP PLC FGN C | C | 30,372. | 48,056. |
| 742935356 PROFESSIONALLY MGD P | C | 407,987. | 673,796. |
| PRAXIS IMPACT BOND FUND OPENEN | C | 1,408,880. | 1,448,332. |
| | | ----- | ----- |
| TOTALS | | 2,664,032. | 3,444,143. |
| | | ===== | ===== |

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

=====

| DESCRIPTION ----- | AMOUNT ----- |
|---------------------------------------|-----------------|
| ROUNDING | 2. |
| COST ADJUSTMENT FOR RETURN OF CAPITAL | 1,136. |
| | ----- |
| TOTAL | 1,138. |
| | ===== |

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

OFFICER NAME:

KEYBANK NATIONAL ASSOCIATION

ADDRESS:

100 Public Square, Suite 600
CLEVELAND, OH 44113

TITLE:

TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 4

COMPENSATION 23,148.

OFFICER NAME:

ELIZABETH STITES

ADDRESS:

25350 ROCKSIDE ROAD
BEDFORD HEIGHTS, OH 44146

TITLE:

BOARD PRESIDENT

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 2

OFFICER NAME:

JUDITH WRIGHT

ADDRESS:

25350 ROCKSIDE ROAD
BEDFORD HEIGHTS, OH 44146

TITLE:

VICE PRESIDENT

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:

REV HENRY C DOLL

ADDRESS:

25350 ROCKSIDE ROAD
BEDFORD HEIGHTS, OH 44146

TITLE:

TREASURER

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

=====

OFFICER NAME:
 ABIGAIL ENGLISH
 ADDRESS:
 25350 ROCKSIDE ROAD
 BEDFORD HEIGHTS, OH 44146
 TITLE:
 SECRETARY
 AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:
 MIKE BRICKNER
 ADDRESS:
 25350 ROCKSIDE ROAD
 BEDFORD HEIGHTS, OH 44146
 TITLE:
 BOARD MEMBER
 AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:
 AMELIA HAYES
 ADDRESS:
 25350 ROCKSIDE ROAD
 BEDFORD HEIGHTS, OH 44146
 TITLE:
 BOARD MEMBER
 AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:
 SARAH KELLEY
 ADDRESS:
 25350 ROCKSIDE ROAD
 BEDFORD HEIGHTS, OH 44146
 TITLE:
 BOARD MEMBER
 AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

=====

OFFICER NAME:
 ELLEN LIU
 ADDRESS:
 25350 ROCKSIDE ROAD
 BEDFORD HEIGHTS, OH 44146
 TITLE:
 BOARD MEMBER
 AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:
 LOURDES RIVERA
 ADDRESS:
 25350 ROCKSIDE ROAD
 BEDFORD HEIGHTS, OH 44146
 TITLE:
 BOARD PRESIDENT
 AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:
 CINDIE CARROLL-PANKHURST
 ADDRESS:
 25350 ROCKSIDE ROAD
 BEDFORD HEIGHTS, OH 44146
 TITLE:
 EMERITUS MEMBER
 AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:
 JACQUELINE DARROCH
 ADDRESS:
 25350 ROCKSIDE ROAD
 BEDFORD HEIGHTS, OH 44146
 TITLE:
 EMERITUS MEMBER
 AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

=====

OFFICER NAME:
 HANK FOSTER
 ADDRESS:
 25350 ROCKSIDE ROAD
 BEDFORD HEIGHTS, OH 44146
 TITLE:
 EMERITUS MEMBER
 AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:
 GITA GIDWANI
 ADDRESS:
 25350 ROCKSIDE ROAD
 BEDFORD HEIGHTS, OH 44146
 TITLE:
 EMERITUS MEMBER
 AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:
 DANIEL PELLEGRAM
 ADDRESS:
 25350 ROCKSIDE ROAD
 BEDFORD HEIGHTS, OH 44146
 TITLE:
 EMERITUS MEMBER
 AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

TOTAL COMPENSATION: 23,148.
=====

RECIPIENT NAME:

THE BRUSH FOUNDATION

ADDRESS:

25350 ROCKSIDE RD, 3RD FLOOR
BEDFORD HEIGHTS, OH 44146

RECIPIENT'S PHONE NUMBER: 216-334-2209

FORM, INFORMATION AND MATERIALS:

CONTACT THE FOUNDATION FOR FORMAL GUIDELINES

SUBMISSION DEADLINES:

6/30 AND 12/31

RESTRICTIONS OR LIMITATIONS ON AWARDS:

NO GRANTS TO INDIVIDUALS. THE FOUNDATION'S VISION OF A "PREFERRED FUTURE" IS: A FUTURE IN WHICH FAMILY PLANNING WORLD-WIDE IS AVAILABLE, AFFORDABLE, ACCEPTABLE, EFFECTIVE AND SAFE. THE

RESTRICTIONS OR LIMITATIONS ON AWARDS:

BRUSH FOUNDATION'S MISSION IS TO SUPPORT ORGANIZATIONS THAT:

- ADVANCE THE FREEDOM OF REPRODUCTIVE CHOICE
- PROMOTE ACCESS TO AND UTILIZATION OF DIRECT FAMILY PLANNING SERVICES.

RESTRICTIONS OR LIMITATIONS ON AWARDS:

-DISSEMINATE EVIDENCE-BASED INFORMATION ON REPRODUCTIVE HEALTH AND CHOICE.

-SUPPORT EFFECTIVE, ACCURATE AND COMPREHENSIVE ADOLESCENT EDUCATION ON

RESTRICTIONS OR LIMITATIONS ON AWARDS:

REPRODUCTIVE HEALTH AND SEXUALITY.

-WORK TOWARD RESPONSIBLE PUBLIC POLICIES FOR REPRODUCTIVE HEALTH.

RECIPIENT NAME:
NEW VOICES PITTSBURGH
ADDRESS:
5987 BROAD STREET
PITTSBURGH, PA 15206
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
SUPPORT EXEMPT PURPOSE OF ORGANIZATION
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 50,000.

RECIPIENT NAME:
OHIO VOICE
ADDRESS:
394 E TOWN STREET
COLUMBUS, OH 43215
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
SUPPORT EXEMPT PURPOSE OF ORGANIZATION
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 30,520.

RECIPIENT NAME:
URGE (UNITE FOR REPRODUCTIVE
AND GENDER EQUITY)
ADDRESS:
1317 F STREET NW, STE 501
WASHINGTON, DC 20004
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
SUPPORT EXEMPT PURPOSE OF ORGANIZATION
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 50,000.

RECIPIENT NAME:
HARM REDUCTION COALITION
ADDRESS:
22 W 27TH ST
NEW YORK, NY 10001
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 10,000.

RECIPIENT NAME:
NARAL PRO-CHOICE OHIO FOUNDATION
ADDRESS:
11811 SHAKER BLVD, STE 210
CLEVELAND, OH 44120
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
SUPPORT EXEMPT PURPOSE OF ORGANIZATION
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 25,000.

RECIPIENT NAME:
ROOTT
ADDRESS:
THE PEOPLE'S MANSION
COLUMBUS, OH 43215
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 100.

RECIPIENT NAME:
PLANNED PARENTHOOD OF
GREATER OHIO
ADDRESS:
206 E STATE STREET
COLUMBUS, OH 43215
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
SUPPORT EXEMPT PURPOSE OF ORGANIZATION
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 25,000.

RECIPIENT NAME:
PRETERM
ADDRESS:
12000 SHAKER BLVD
CLEVELAND, OH 44120
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
SUPPORT EXEMPT PURPOSE OF ORGANIZATION
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 30,250.

RECIPIENT NAME:
CASE WESTERN RESERVE UNIVERSITY
ADDRESS:
10900 EUCLID AVE
CLEVELAND, OH 44106
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
SCHOLARSHIP
FOUNDATION STATUS OF RECIPIENT:
I
AMOUNT OF GRANT PAID 15,000.

RECIPIENT NAME:
PLANNED PARENTHOOD OF
SOUTHWEST OHIO
ADDRESS:
2314 AUBURN AVE
CINCINNATI, OH 45219
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
SUPPORT EXEMPT PURPOSE OF ORGANIZATION
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 30,000.

RECIPIENT NAME:
THIRD SECTOR NEW ENGLAND
ADDRESS:
89 SOUTH STREET, SUITE 700
BOSTON, MA 02111
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 10,500.

RECIPIENT NAME:
WOMEN HAVE OPTIONS
ADDRESS:
P O BOX 1611
COLUMBUS, OH 43216
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
SUPPORT EXEMPT PURPOSE OF ORGANIZATION
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID 30,000.

TOTAL GRANTS PAID: 306,370.
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