### **Filing Instructions**

# **Local Initiative For Excellence Foundation**

### **Private Foundation Tax Return**

### Taxable Year Ended December 31, 2020

**Date Due:** November 15, 2021

Remittance: None is required. Your Form 990-PF for the tax year ended 12/31/20 shows a

total overpayment of \$3,334, all of which is to be credited to your estimated tax

liability for the coming year. Do not mail a copy of this return.

Signature: You are using a Personal Identification Number (PIN) for signing your return

electronically. Form 8879-EO, IRS e-file Signature Authorization for an Exempt

Organization should be signed and dated by an authorized officer of the

organization and returned by mail, fax or scan to:

Jackson S. Harty Co., CPA 119 East Court Street Suite 200 Cincinnati, OH 45202-1203

Fax: 513-632-9500 jackson@hartycpa.com

Important: Your return will not be filed with the IRS until the signed Form

8879-EO has been received by this office.

Other: Your return is being filed electronically with the IRS and is not required to be

mailed. If you Mail a paper copy of your return to the IRS it will delay the

processing of your return.

Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ 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.

Open to Public Inspection

For	calend	dar year 2020 or tax year beginning , i	and ending				
	ame of for	undation L INITIATIVE FOR EXCELLENCE			A Emplo	yer identification number	
		DATION	**-	-***1852			
		d street (or P.O. box number if mail is not delivered to street address)	l s	Room/suite	1	one number (see instructions	1
		MALSBARY ROAD	"	loon / Julie	B relepir	one number (see mondenons)	)
		n, state or province, country, and ZIP or foreign postal code					
Ε	BLUE ASH OH 45242					nption application is pending,	check here
	G Check all that apply: Initial return Initial return of a former public charity				D 1. For	reign organizations, check her	re •
	000	Final return Amended	•	orial ity			
		Address change Name cha				reign organizations meeting th % test, check here and attach	
_	01 1	<u></u>			1		
<u>H</u>		type of organization: X Section 501(c)(3) exempt private				te foundation status was term	
ĻĻ		n 4947(a)(1) nonexempt charitable trust Other taxab			┪	1 507(b)(1)(A), check here	······· ′ ⊔
		rket value of all assets at J Accounting method:	X Cash Ac	crual		oundation is in a 60-month ter	
		rear (from Part II, col. (c), Other (specify)			under	section 507(b)(1)(B), check he	ere
		▶ \$ 6,006,166   (Part I, column (d), must	t be on cash basis.)				(1) = (1)
P	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	(b) Net in	vestment	(c) Adjusted net	(d) Disbursements for charitable
		the amounts in column (a) (see instructions).)	books	inco	me	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	500,000				(odon basis only)
	2	Check ► if the foundation is not required to attach Sch. B	220,000				
	3	Interest on savings and temporary cash investments	1,510		1,510	1,510	
	4	Dividends and interest from securities	114,513		14,513	114,513	
	5a	Cross repts	111,010				
Revenue	h	Net rental income or (loss)					
	6a	Net gain or (loss) from sale of assets not on line 10 STMT 1	90,941				
	b	Gross sales price for all assets on line 6a 2,883,771	30,311	•			
	7	Capital gain net income (from Part IV, line 2)			89,553		
	8	Net short-term capital gain			03,333	0	
	9					, and the second	
	10a	Income modifications  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	706,964	2	05,576	116,023	
_	12	Compensation of officers, directors, trustees, etc.	(	+	,,,,,,,		
xpenses	14	Other employee salaries and wages					
ů	15	Pension plans, employee benefits					
ğ	. 16a	Legal fees (attach schedule)					
Ш	b	Accounting fees (attach schedule) STMT 2	1,615	5	300		1,315
\ Ve	C	Other professional fees (attach schedule) STMT 3	24,547		24,547		
ati	17	Interest			,		
and Administrative	18	Taxes (attach schedule) (see instructions) STMT 4	1,867	,	667		200
Ë	19	Depreciation (attach schedule) and depletion					
卢	20	Occupancy					
⋖	21	Travel, conferences, and meetings					
pu	22	Printing and publications					
		Printing and publications Other expenses (att. sch.)  STMT 5	816	5			816
Operating	24	Total operating and administrative expenses.					
rat		Add lines 13 through 23	28,845	5	25,514	o	2,331
be	25	Contributions, gifts, grants paid	315,000				315,000
O	26	Total expenses and disbursements. Add lines 24 and 25	343,845		25,514	0	317,331
	27	Subtract line 26 from line 12:					·
	а	Excess of revenue over expenses and disbursements	363,119				
	b	Net investment income (if negative, enter -0-)	·		80,062		
_	С	Adjusted net income (if negative, enter -0-)				116,023	

	JIII 330		Beginning of year	En	nd of y	rage <b>£</b>
	Part I	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value		(c) Fair Market Value
П	1		67,000	765,91	16	765,916
	2	Cash – non-interest-bearing	07,000	705,51		703,310
	3	Savings and temporary cash investments  Accounts receivable ▶				
	3	The second section of the second section is a second section of the section o				
	4	Diadres ressivable				
	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 (att. schedule)				
	_	Less: allowance for doubtful accounts ▶ 0				
ste	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
⋖	10a	Investments – U.S. and state government obligations (attach schedule)				
	b	Investments – corporate stock (attach schedule)				
	С	Investments – corporate bonds (attach schedule)				
	11	Investments – land, buildings, and equipment: basis ▶				
		Less: accumulated depreciation (attach sch.) ▶				
	12	Investments – mortgage loans Investments – other (attach schedule) SEE STATEMENT 6	-0.770 000			
	13		3,770,383	3,434,58	36	5,240,250
	14	Land, buildings, and equipment: basis				
		Less: accumulated depreciation (attach sch.) ▶				
	15	Other assets (describe ►				
	16	Total assets (to be completed by all filers – see the				
$\dashv$	_	instructions. Also, see page 1, item I)	3,837,383	4,200,50	)2	6,006,166
	17	Accounts payable and accrued expenses				
,	18	Grants payable				
Ë	19	Deferred revenue				
員	20	Loans from officers, directors, trustees, and other disqualified persons				
Liabilities	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe ► )				
4	23	Total liabilities (add lines 17 through 22)	0		0	
		Foundations that follow FASB ASC 958, check here				
ces		and complete lines 24, 25, 29, and 30.	2 22 222	4 000 50		
an	24	Net assets without donor restrictions	3,837,383	4,200,50	)2	
Bal	25	Net assets with donor restrictions				
פ		Foundations that do not follow FASB ASC 958, check here				
ᇍ		and complete lines 26 through 30.				
5	26	Capital stock, trust principal, or current funds				
S	27	Paid-in or capital surplus, or land, bldg., and equipment fund				
se	28	Retained earnings, accumulated income, endowment, or other funds	2 227 222	4 000 50		
Ř	29	Total net assets or fund balances (see instructions)	3,837,383	4,200,50	)2	
Net Assets or Fund Balanc	30	Total liabilities and net assets/fund balances (see	2 027 202	4 000 50		
_	D '	instructions)	3,837,383	4,200,50	JZ	
_	Part I		-1	T		
1		net assets or fund balances at beginning of year – Part II, column (a), line 29 (mu	<u> </u>			2 027 202
_		f-year figure reported on prior year's return)			1	3,837,383
		amount from Part I, line 27a			2	363,119
3	Othe	increases not included in line 2 (itemize) ▶			3	4 200 F00
4		ines 1, 2, and 3			4	4,200,502
5		eases not included in line 2 (itemize)			5	4,200,502
6	ıotal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (	v), iine 29		6	4,200,502

Form **990-PF** (2020)

FOITH 990-F	PF (2020) <b>HOCAL 1</b>	NITIALIVE FOR EXCEPT	ENCE	1652			Page	J
Part IV	Capital Gains a	nd Losses for Tax on Investmer	nt Income					
		the kind(s) of property sold (for example, real estate, rehouse; or common stock, 200 shs. MLC Co.)		<b>(b)</b> How acquired P – Purchase D – Donation	(c) Date acc (mo., day,		(d) Date sold (mo., day, yr.)	
1a TD	AMERITRADE S	SUMMARY TOTALS		P				_
b TD	AMERITRADE							
С								_
d								_
е								
((	(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis	(	(h) Gain o		
	2,882,118			2,792,830			89,288	3
b	265						265	5
								_
e								_
	ete only for assets showing	g gain in column (h) and owned by the fou	indation on 12/31/6	69.	w.c		(1-)	_
		(j) Adjusted basis		ss of col. (i)			(h) gain minus ess than -0-) <b>or</b>	
(i)	i) FMV as of 12/31/69	as of 12/31/69		. (j), if any		Losses (fror		
							89,288	3
b							265	<u>5</u>
								-
								-
e								_
		If gain, also enter in P	art L line 7	7				_
2 Capital	I gain net income or (net c	apital loss)  If (loss), enter -0- in P			2		89,553	3
3 Net sho	ort-term capital gain or (los	ss) as defined in sections 1222(5) and (6):	_				,	_
		, column (c). See instructions. If (loss), en						
_					3			
Part V		der Section 4940(e) for Reduce	d Tax on Net	Investment Inco	ome			_
1 0110 1		ON 4940(e) REPEALED ON DEC				<u></u>		_
1 Reserve								_
	(a)	(b)	<del>)                                    </del>	(c)			(d)	_
	Reserved	Reserved		Reserved		R	eserved	
	Reserved							_
	Reserved							_
	Reserved							_
	Reserved							_
	Reserved							_
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8 Reserve	ved .				8			

FOIII	990-PF (2020) HOCAL INITIATIVE FOR EXCELLENCE			age 4		
Pa	irt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948—see instruction	s)				
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)			503		
b Reserved 1						
С	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-)		_	<u> 0</u>		
3	Add lines 1 and 2		2,	<u>503</u>		
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		0	<del>0</del>		
5	Tax based on investment income.   Subtract line 4 from line 3. If zero or less, enter -0-		2,	503		
6	Credits/Payments:					
а	2020 estimated tax payments and 2019 overpayment credited to 2020 6a 2,337					
b	Exempt foreign organizations – tax withheld at source  Tax paid with application for extension of time to file (Form 8868)  6c  3,500					
С						
d -	Backup withholding erroneously withheld  Takkup withholding erroneously withheld		F 4	837		
7	Total credits and payments. Add lines 6a through 6d		٠, ر	<u>637</u>		
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached is attached in Form 2220 is at					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed  Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  10		3	334		
10 44			٠,,	334		
11 Da	Enter the amount of line 10 to be: Credited to 2021 estimated tax ▶ 3,334 Refunded ▶ 11   art VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No		
ıa	participate or intervene in any political compaign?	1a	163	X		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	la.				
b	instructions for the definition	1b		х		
	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials	1.0				
	published or distributed by the foundation in connection with the activities.					
С	Did the foundation file Form 1120-POL for this year?	1c		Х		
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. ▶ \$					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х		
	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					
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X		
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b				
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X		
	If "Yes," attach the statement required by General Instruction T.					
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?	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. ▶  OH					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General					
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	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 instructions for Part XIV. If "Yes,"					
	complete Part XIV	9		X		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their					
	names and addresses	10		X		

Pa	art 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		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privilegee? If "Vee" attach atetament. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	х	
. •	Wobeito address N HTTP: //WWW I.TFE-RRAINHEAT.TH ORG/			
14	The books are in care of ▶ DR. CARTER F. RANDOLPH  Telephone no. ▶ 513-8	91-	7144	4
	4200 MALSBARY ROAD	T	1.77.7	
		2		
15	Located at ► BLUE ASH  OH ZIP+4 ► 45242  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – check here	·		<b></b>
	and enter the amount of tax-exempt interest received or accrued during the year			_
16	At any time during calendar year 2020, did the foundation have an interest in or a signature or other authority		Yes	No
	over a hank population or other financial account in a foreign country?	16	103	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country ▶			
P	art 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):		162	NO
ıa	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(1) Engage in the sale of exchange, or leasing of property with a disqualified person?			
	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)?  Yes X 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.)  Yes X No			
L				
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions <b>N/A</b>	41.		
	············· <del>i</del>	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	4.		
_	were not corrected before the first day of the tax year beginning in 2020?  N/A	1c		
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)):			
а	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?  Yes X No			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	0.		
	all years listed, answer "No" and attach statement – see instructions.)  N/A	2b		
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.			
_	▶ 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?  Yes X No			
L	at any time during the year? Yes X No  If "Yes," did it have excess business holdings in 2020 as a result of (1) any purchase by the foundation or			
b				
	disqualified persons after May 26, 1969; <b>(2)</b> 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	21		
4 -	foundation had excess business holdings in 2020.)  N/A	3b		v
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	4.		v
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2020?	4b		X

	_					_	_	_	_	
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	est VII B Statements Describes A	ativities for Which Corre	4720 May Da F	Degrad /oo	ation (ad)			age <b>o</b>
	art VII-B Statements Regarding A		4/20 May Be F	kequirea (coi	nunuea)		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
5a	0 , , , , , , , , , , , , , , , , , , ,	•	40.45(-))0		v. 👽 u.		Yes	No
	(1) Carry on propaganda, or otherwise attemp	• ,	* **	Ц	Yes X No			
	(2) Influence the outcome of any specific publ	,	to carry on,		v. 👽 u.			
	directly or indirectly, any voter registration				Yes X No			
	(3) Provide a grant to an individual for travel,				Yes X No			
	(4) Provide a grant to an organization other th	an a charitable, etc., organization	n described in		, <b>v</b>			
	section 4945(d)(4)(A)? See instructions				Yes X No			
	(5) Provide for any purpose other than religion		or educational		, <b>v</b>			
	purposes, or for the prevention of cruelty to				Yes X No			
b	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of				N/A			
	in Regulations section 53.4945 or in a current			ns		5b		
	Organizations relying on a current notice regard				▶ ⊔			
С	If the answer is "Yes" to question 5a(4), does			NT/A 🗆	V			
	because it maintained expenditure responsibili	*		N/A 🗌	Yes  No			
c -	If "Yes," attach the statement required by Reg							
6a	Did the foundation, during the year, receive an on a personal benefit contract?		• •		Yes X No			
b	Did the foundation, during the year, pay premi	ume directly or indirectly on a p			res ZI NO	6b		X
b	If "Yes" to 6b, file Form 8870.	uns, directly of indirectly, on a p	ersonal benefit cont			00		
7a		ation a party to a prohibited tax s	helter transaction?		Yes X No			
b	If "Yes," did the foundation receive any procee	' '		· · · · · · · · · · · · · · · · · · ·		7b		
8	Is the foundation subject to the section 4960 to	•		S		1.5		
-	remuneration or excess parachute payment(s)				Yes X No			
Pa	art VIII Information About Officer	s, Directors, Trustees, Fe	oundation Mana	agers, Highly	Paid Emplo	ees.		
	and Contractors				•			
1 1	List all officers, directors, trustees, and found	dation managers and their con	npensation. See in	structions.				
		×	(b) Title, and average	(c) Compensation	(d) Contributions to			
	(a) Name and address		hours per week	(If not paid,	employee benefit plans and deferred		pense ad er allowa	
			devoted to position	enter -0-)	compensation			
GE	EORGE WILE	CINCINNATI	PRESIDENT					
55	545 DRAKE ROAD	ОН 45243	5.00		0	0		0
C.P	ARTER RANDOLPH	BLUE ASH	TREASURER					
42	200 MALSBARY ROAD	ОН 45242	5.00		0	0		0
PA	ATTY BROCKMAN	BLUE ASH	SECRETARY					
42	200 MALSBARY ROAD	ОН 45242	5.00		0	0		0
				<u> </u>				
2			11 4 1					
	Compensation of five highest-paid employe	es (other than those included	on line 1 – see ins	tructions). If no	ile, elitei			
	"NONE."	es (other than those included	<u> </u>	tructions). If no	· -			
	"NONE."		(b) Title, and average	,	(d) Contributions to employee benefit		pense a	
			<u> </u>	(c) Compensation	(d) Contributions to employee benefit plans and deferred		pense ad er allowa	
NC.	"NONE."  (a) Name and address of each employee paid mo		(b) Title, and average hours per week	,	(d) Contributions to employee benefit			
NC	"NONE."		(b) Title, and average hours per week	,	(d) Contributions to employee benefit plans and deferred			
ŅĊ	"NONE."  (a) Name and address of each employee paid mo		(b) Title, and average hours per week	,	(d) Contributions to employee benefit plans and deferred			
NC	"NONE."  (a) Name and address of each employee paid mo		(b) Title, and average hours per week	,	(d) Contributions to employee benefit plans and deferred			
, NC	"NONE."  (a) Name and address of each employee paid mo		(b) Title, and average hours per week	,	(d) Contributions to employee benefit plans and deferred			
NC	"NONE."  (a) Name and address of each employee paid mo		(b) Title, and average hours per week	,	(d) Contributions to employee benefit plans and deferred			
NC	"NONE."  (a) Name and address of each employee paid mo		(b) Title, and average hours per week	,	(d) Contributions to employee benefit plans and deferred			
	"NONE."  (a) Name and address of each employee paid mo		(b) Title, and average hours per week	,	(d) Contributions to employee benefit plans and deferred			
NC	"NONE."  (a) Name and address of each employee paid mo		(b) Title, and average hours per week	,	(d) Contributions to employee benefit plans and deferred			
NC	"NONE."  (a) Name and address of each employee paid mo		(b) Title, and average hours per week	,	(d) Contributions to employee benefit plans and deferred			

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 N/A	
2	
All other program-related investments. See instructions.  3	
Total. Add lines 1 through 3	
	Form <b>990-PF</b> (2020

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

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, Part X see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 4,619,783 Average monthly fair market value of securities 1a а Average of monthly cash balances 1b 375,547 Fair market value of all other assets (see instructions) С 1c Total (add lines 1a, b, and c) 1d Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) <u>1e</u> Acquisition indebtedness applicable to line 1 assets 2 2 4,995,330 3 3 Subtract line 2 from line 1d 4 Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see 74,930 4,920,400 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 246,020 Minimum investment return. Enter 5% of line 5. Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations Part XI and certain foreign organizations, check here | | and do not complete this part.) 246,020 Minimum investment return from Part X, line 6 Tax on investment income for 2020 from Part VI, line 5 2,503 2a Income tax for 2020. (This does not include the tax from Part VI.) Add lines 2a and 2b 2c С Distributable amount before adjustments. Subtract line 2c from line 1 3 3 Recoveries of amounts treated as qualifying distributions 4 4 Add lines 3 and 4 243,517 5 5 Deduction from distributable amount (see instructions) 6 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, 243,517 line 1. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 317,331 1a а Program-related investments – total from Part IX-B

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., Program-related investments – total from Part IX-B b 1b 2 purposes 3 Amounts set aside for specific charitable projects that satisfy the: Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3b b Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4 317,331 4 4 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 Adjusted qualifying distributions. Subtract line 5 from line 4 6 6 Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Form **990-PF** (2020)

Pa	urt XIII Undistributed Income (see instructions	)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2020 from Part XI,	Corpus	Years prior to 2019	2019	2020
	line 7				243,517
2	Undistributed income, if any, as of the end of 2020:				
а	Enter amount for 2019 only			52,985	
	Total for prior years: 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2020:				
а	From 2015				
b	From 2016				
С	From 2017				
d	From 2018				
е	From 2019				
f	Total of lines 3a through e				
4	Qualifying distributions for 2020 from Part XII,				
	line 4: ▶ \$317,331				
а	Applied to 2019, but not more than line 2a			52,985	
b	Applied to undistributed income of prior years				
	(Election required – see instructions)				
С	Treated as distributions out of corpus (Election				
	required – see instructions)				
d	Applied to 2020 distributable amount				243,517
е	Remaining amount distributed out of corpus	20,829			
5	Excess distributions carryover applied to 2020				
	(If an amount appears in column (d), the same				
	amount must be shown in column (a).)				
6	Enter the net total of each column as				
	indicated below:				
	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	20,829			
b	Prior years' undistributed income. Subtract				
	line 4b from line 2b	. (/)			
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)	) `			
	tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable				
	amount – see instructions				
е	Undistributed income for 2019. Subtract line				
	4a from line 2a. Taxable amount – see				
	instructions				
f	Undistributed income for 2020. Subtract lines				
	4d and 5 from line 1. This amount must be				•
_	distributed in 2021				0
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
_	required—see instructions)				
8	Excess distributions carryover from 2015 not				
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2021.	00 000			
	Subtract lines 7 and 8 from line 6a	20,829			
10	Analysis of line 9:				
а	Excess from 2016				
b	Excess from 2017				
C	Excess from 2018				
d	Excess from 2019				
е	Excess from 2020				

<u>Pa</u>	<u>irt XIV                                    </u>	<b>ndations</b> (see in	structions and Par	t VII-A, question 9	<del>)</del> )	
1a	If the foundation has received a ruling or o			ting		
	foundation, and the ruling is effective for 2	*	•			
b	Check box to indicate whether the foundar		ating foundation descri T		942(j)(3) or 4942	2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year	(b) 2010	Prior 3 years	(4) 2017	(e) Total
	income from Part I or the minimum	(a) 2020	<b>(b)</b> 2019	(c) 2018	(d) 2017	
	investment return from Part X for					
	each year listed					
b	85% of line 2a					
С	Qualifying distributions from Part XII,					
4	line 4, for each year listed					
d	for active conduct of exempt activities					
_	Qualifying distributions made directly					
е	for active conduct of exempt activities.					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
•	alternative test relied upon:					
а	"Assets" alternative test – enter:					
_	(1) Value of all assets					
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test – enter 2/3					
	of minimum investment return shown in					
	Part X, line 6, for each year listed					
С	"Support" alternative test – enter:					
	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on		X			
	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					
Da	(4) Gross investment income	ation (Complete	this part only if t	 the foundation b	 	in accets at
Га	any time during the ye			ine ioundation n	au \$5,000 or more	iii assets at
1	Information Regarding Foundation Mar		10113.7			
a	List any managers of the foundation who	-	e than 2% of the total	contributions received	by the foundation	
	before the close of any tax year (but only				•	
	GEORGE WILE	•	,		•	
b	List any managers of the foundation who	own 10% or more of	the stock of a corporat	ion (or an equally larg	e portion of the	
	ownership of a partnership or other entity)	of which the foundat	ion has a 10% or grea	iter interest.		
	N/A					
2	Information Regarding Contribution, G	rant, Gift, Loan, Scl	nolarship, etc., Progra	ams:		
	Check here ▶ ☐ if the foundation only			=		
	unsolicited requests for funds. If the found		ants, etc., to individual	ls or organizations und	der other conditions,	
	complete items 2a, b, c, and d. See instru					
а	The name, address, and telephone number		of the person to whom	applications should be	e addressed:	
	CARTER RANDOLPH 513-		II 45040			
I.	4200 MALSBARY RD. CI			ov obovilstisset str		
b	The form in which applications should be <b>DETAILED INFORMATION</b>			ey snould include:		
	Any submission deadlines:	THOUGHD	OH MEDSTIE.			
С	DETAILED INFORMATION	TNCLUDED	ON WEBSITE			
d	Any restrictions or limitations on awards, s			elds kinds of institution	ons or other	
u	factors:	Justi do by geograph	iodi di odo, oriantable II	oras, rando or montuno	one, or other	
	DETAILED INFORMATION	INCLUDED	ON WEBSITE.			

Page **11** 

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year UNIVERSITY OF CINCINNATI 2600 CLIFTON AVE CINCINNATI OH 45220 MEDICAL RESEARCH 50,000 SALK INST FOR BIOLOGICAL STUDIES 10010 N TORREY PINES RD LA JOLLA CA 92037 MEDICAL RESEARCH 50,000 NKU FOUNDATION, INC LUCAS ADMIN CENTR STE 822 HIGHLAND HEIGHTS KY 41099 UNDERGRADUATE FELLOWSHIP **PROGRAM** 165,000 CINCINNATI CHILDREN'S HSPTL MED CTR 3333 BURNET AVE MEDICAL CINCINNATI OH 45229 RESEARCH 50,000 Total ▶ 3a 315,000 **b** Approved for future payment N/A ▶ 3b Total

		020) LOCAL INITIATIVE FOR E		<u></u>	, , , T 9 2		Page 1
F	Part XVI-A	Analysis of Income-Producing Act	ivities				
En	er gross amo	ounts unless otherwise indicated.	Unrelate	d business income	Excluded b	y section 512, 513, or 514	(-)
	_		(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions.)
1	Program se	rvice revenue:					
	e						
	f						
		nd contracts from government agencies					
_	Membership	dues and assessments					1 510
3	Interest on s	savings and temporary cash investments					1,510
4		nd interest from securities					114,513
5		ncome or (loss) from real estate:					
	a Debt-fina	anced property					
_	<b>b</b> Not deb	ot-financed property					
6	Net rental in	ncome or (loss) from personal property					
7	Other invest	tment income					00 041
8	Gain or (los	s) from sales of assets other than inventory					90,941
9	Net income	or (loss) from special events					
		or (loss) from sales of inventory					
11	Other reven						
				•			
	е		7				006.064
12	Subtotal. Ad	ld columns (b), (d), and (e)				0	206,964
13	Total. Add I	ine 12, columns (b), (d), and (e)				<sup>13</sup> —	206,964
		in line 13 instructions to verify calculations.)	<del> (//)</del>				
	Part XVI-B	·					
	Line No.	Explain below how each activity for which income					
	NT / 7	accomplishment of the foundation's exempt purpor	ses (otner than	by providing tunds to	or sucn pur	poses). (See Instructi	ons.)
	N/A						
_							

WIL10 09/09/2021 10:45 AM \*\*-\*\*\*1852 Form 990-PF (2020) LOCAL INITIATIVE FOR EXCELLENCE Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt **Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described No 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 **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements |1b(4) (5) Loans or loan guarantees 1b(5) (6) Performance of services or membership or fundraising solicitations 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees 1c 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 N/A 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? **b** If "Yes" complete the following schedule

D II	b it res, complete the following schedule.					
	(a) Name of organization	(b) Type of organization	(c) Description of relationship			
N/	A					
	Under penalties of periury. 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

May the IRS discuss this return with the preparer shown below? X Yes See instructions TREASURER

	Signature of officer or trustee	Date Title			
	Print/Type preparer's name	Preparer's signature		Date	Check if
Paid					self-employed
Paid	JACKSON S. HARTY	JACKSON S. HARTY		09/09/21	
Preparer					
•	Firm's name ► JACKSON S. HARTY CO.	., CPA	PTIN	****	· * * *
Use Only	Firm's address > 119 EAST COURT STREE	ET SUITE 200	Firm's FIN	. ** <u>-</u> ***	5025

45202-1203

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CINCINNATI,

Form 990-PF (2020)

# WIL10 Local Initiative For Excellence

# Federal Statements

\*\*-\*\*1852 FYE: 12/31/2020

		Net Gain / Loss	\$ 1,388	0 \$ 1,388	
		Depreciation	₩.	\\	
e of Assets		Expense		0	counting Fees
<u>I, Line 6a - Sal</u>		Cost	\$}-	\$ 0	Line 16b - Acc
Form 990-PF, Part I, Line 6a - Sale of Assets	How Received	Sale Price	PURCHASE 1,388 \$	1,388 \$	Statement 2 - Form 990-PF, Part I, Line 16b - Accounting Fees
Statement 1 - F		Date Sold	:ON 10/08/20 \$	, Ω- Ω-	<u>itement 2 - For</u>
ØI	Description	Date Acquired	S LITIGATI 1/01/16		Sta Sta
	Des	Whom Sold	WELLS FARGO SECURITIES LITIGATION 1/01/16 10/08/20 \$	TOTAL	

Charitable Purpose	\$ 1,315	\$ 1,315	
Adjusted Net	₩.	\$	
Net Investment	300	300	
Total	\$ 1,615 \$		
Description	INDIRECT ACCOUNTING FEES	TOTAL	

Charitable Purnose	φ- -	\$
Adjusted Net		0
	₩.	∾
Net	24,547	24,547
	₩.	₩
Total	24,547	24,547
	₩.	₩.
Description	ADVISOR FEE	TOTAL

Statement 3 - Form 990-PF, Part I, Line 16c - Other Professional Fees

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WIL10 Local Initiative For Excellence \*\*-\*\*1852 FYE: 12/31/2020

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<b>Fed</b>	

	Charitable Purpose	\$ 200	\$ 200		Charitable Purpose	w-	735	0 \$ 816
axes	Adjusted Net	₩.	₩ ₩	Expenses	Adjusted Net	⟨\$\		\$
4 - Form 990-PF, Part I, Line 18 - Taxes	Net Investment	667	299	Form 990-PF, Part I, Line 23 - Other Expenses	Net Investment			0
Form 990-PF, Pa		667 \$ 200 1,000	\$ 867	990-PF, Part I,		w <b>3</b>	735	816
Statement 4 - I	Total	⋄	ψ.	Statement 5 - Form	Total	. ბ		₩
	Description	FOREIGN TAXES STATE TAXES FEDERAL TAXES	TOTAL	State	Description	EXPENSES	WEBSITE DESIGN AND MAINTENANC BOARD MEETING EXPENSES	TOTAL

<u>Investments</u>	
Other	
13 -	
Line '	
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Part	
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990	
- Form	
ဖ	
<b>Statement</b>	

Fair Market Value	\$ 5,240,250	\$ 5,240,250
Basis of Valuation	COST	
End of Year	\$ 3,434,586	\$ 3,434,586
Beginning of Year	\$ 3,770,383	\$ 3,770,383
Description	SECURITIES	TOTAL

WIL10 Local Initiative For Excellence 9/9/2021 10:45 AM \*\*-\*\*1852 **Federal Statements** 

FYE: 12/31/2020

### Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

### Description

DETAILED INFORMATION INCLUDED ON WEBSITE.

### Form 990-PF, Part XV, Line 2c - Submission Deadlines

### Description

DETAILED INFORMATION INCLUDED ON WEBSITE.

### Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

### Description

DETAILED INFORMATION INCLUDED ON WEBSITE.

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

Department of the Treasury Internal Revenue Service

### Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2020

Name of the organization
LOCAL INITIATIVE FOR EXCELLENCE
FOUNDATION

Organization type (check one):

Employer identification number

\*\*-\*\*1852

Filers of:	Section:					
Form 990 or 990-EZ	501(c)( ) (enter number) organization					
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation					
	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					
	overed by the <b>General Rule</b> or a <b>Special Rule</b> .  (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See					
General Rule						
or more (in money or p	<b>X</b> 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 section 13, 16a, or 16b, and the	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 <sup>1</sup> / <sub>3</sub> % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.					
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 (entering "N/A" in column (b) instead of the contributor name and address), 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 <i>exclusively</i> 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 <i>exclusively</i> religious, charitable, etc., purpose. Don't complete any of the parts unless the <b>General Rule</b> applies to this organization because it received <i>nonexclusively</i> religious, charitable, etc., contributions totaling \$5,000 or more during the year						
Caution: An organization that	isn't covered by the Coneral Pule and/or the Special Pules descrit file Schedule P. (Form 000					

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 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).

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) (2020)

Page **2** 

Name of organization

### LOCAL INITIATIVE FOR EXCELLENCE

Employer identification number \*\*-\*\*\* 1852

Part I	Contributors (see instructions). Use duplicate copies of Pa	art I if additional space is ne	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	GEORGE WILE 5545 DRAKE ROAD CINCINNATI OH 45243	\$ 500,000	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Nume, address, und 2n · · ·	\$	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
	Name, audiess, and zir + 4	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	nume, audiess, and £ii + 4	\$	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.)

### LOCAL INITIATIVE FOR EXCELLENCE

\*\*-\*\*\*1852 FORM 990-PF ESTIMATES **FOUNDATION Estimated Tax on Unrelated Business Taxable** OMB No. 1545-0047 **Income for Tax-Exempt Organizations** (and on Investment Income for Private Foundations) (Worksheet) 2021 ► Go to www.irs.gov/Form990W for instructions and the latest information. Department of the Treasury ▶ Keep for your records. Do not send to the Internal Revenue Service. Internal Revenue Service Unrelated business taxable income expected in the tax year 1 Tax on the amount on line 1. See instructions for tax computation Alternative minimum tax for trusts. See instructions 3 3 Total. Add lines 2 and 3 5 Estimated tax credits. See instructions 5 6 6 Subtract line 5 from line 4 Other taxes. See instructions 7 7 Total. Add lines 6 and 7 8 Credit for federal tax paid on fuels. See instructions Subtract line 9 from line 8. Note: If less than \$500, the organization is not required to make estimated tax payments. Private foundations, see 10a 2,503 instructions Enter the tax shown on the 2020 return. See instructions. Caution: If zero or the tax year was for less than 12 months, skip this line and enter the amount from line 10a on line 10c 2,503 10b c 2021 Estimated Tax. Enter the smaller of line 10a or line 10b. If the organization is required to skip line 10b, enter the amount from line 10a on line 10c. 2,503 10c

			(a)	(b)	(c)	(d)
11	Installment due dates. See instructions	11	05/17/21	06/15/21	09/15/21	12/15/21
12	Required installments. Enter 25% of line 10c in columns (a) through (d). But see instructions if the organization uses the annualized income installment method, the adjusted seasonal installment method, or is a "large organization."	12	2,600			
13	2020 Overpayment. See					
	instructions	13	2,600			
14	Payment due (Subtract line 13 from line 12)	14				

For Paperwork Reduction Act Notice, see instructions.

Form **990-W** (2021)

Form <b>990-PF</b>	Underdistribution and Excess Dist  For calendar year 2020, or tax year beginning	ributions for Part X	III	2020
Name LOCAL INIT	TATIVE FOR EXCELLENCE		Employer Iden	tification Number

## Undistributed Income Carryovers Form 990-PF, Part XIII

	Prior Undistributed Income				Next Year Carryover	
Tax Year	Nontaxable or Previously Taxed	Taxable in 2020	Total per Year	Current Year Decreases	Nontaxable or Previously Taxed	Taxable in 2021
Years prior						
20 16						
20 17						
20 18						
2019		52,985	52,985	52,985		
2020			243,517	243,517		
Total Carryove	Total Carryover to Next Year					

<sup>\*</sup> Carryover amount includes 4942(a) amounts

## Excess Distribution Carryovers Form 990-PF, Part XIII

	Current Year		Next Year
Preceding Tax Year Excess Distributions	Decreases		Carryover
2015			
2016		X	
2017			
2018			
2019	. (7)		
Current Year Excess Distribution Generated (2	020)		20,829
Total Carryover to Next Year			20,829

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# Two Year Comparison Report

For calendar year 2020, or tax year beginning

2019 & 2020

Taxpayer Identification Number 2,500 1,239 -264 2,236 -997 997 -2,560 56,433 -1,410-797 53,708 1,239 -2,372 51,501 -2,207 \*\*-\*\*1852 Net investment income Differences 0 0 0 500,000 -2,560 -2,372 552,889 -1,575 -60,000 -65,409 618,298 57,821 -2,797 -1,037Revenue and expenses per books 3,500 0 1,510 89,553 205,576 667 2,503 2,503 -3,3343,334 114,513 24,847 25,514 180,062 5,837 2,337 Net investment income 2020 1,510 816 315,000 343,845 500,000 114,513 706,964 26,162 363,119 4,200,502 90,941 1,867 4,200,502 Revenue and expenses per books 3,601 0 4,070 116,885 154,075 1,264 1,264 1,000 33,120 26,257 126,354 -2,337 2,337 1,464 2,601 27,721 Net investment income FOUNDATION 2019 4,070 116,885 33,120 154,075 375,000 409,254 -255,1793,837,383 27,737 4,664 1,853 3,837,383 Revenue and expenses 9. 15. 20. 10. 12 13. 14. 16. 17. 18. 19. 21. Net income (if negative investment activity, enter -0-) 21. 22. 23. 24. 25. 26. 28. 29. 30. 32. 34. FOR EXCELLENCE Contributions, gifts, grants, and similar amounts received a 17. Occupancy
a 18. Other expenses
b 19. Contributions, gifts, grants paid
x 20. Total expenses and disbursements. Add lines 10 through 19 6. Capital gain net income 7. Gross profit or (loss) 2. Interest on savings and temporary cash investments 10. Compensation of officers, directors, trustees, etc. Dividends and interest from securities 26. Estimates and overpayments credited 10. Compensation of officers, directors, tr
11. Other employee salaries and wages
12. Pension plans, employee benefits
13. Professional fees
14. Interest
15. Taxes 5. Net gain or (loss) from sale of assets 11. Other employee salaries and wages 31. Overpayment credited to next year 30. Balance due / (Overpayment) 27. Foreign tax withheld28. Other Payments29. Total payments and credits 9. Total. Add lines 1 through 8 LOCAL INITIATIVE ∞ 16. Depreciation and depletion 24. Subtitle A income tax 33. Net due / (Refund) 23. Section 511 Tax 8. Other income 35. Total liabilities 34. Total assets 25. Total Taxes 4. Gross rents 36. Net assets 22. Excise Tax 32. Penalty რ Веvenue Due / Refund

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Name

Use the 2Yr Report for more recent historical information Tax Return History LOCAL INITIATIVE FOR EXCELLENCE Form 990PF

Taxpayer Identification Number

2020

3,000 188 264 2,299 5,305 116,595 1,750 28,547 28,999 229,942 2,299 1,900 4,900 135,291 258,941 2,601 \*\*-\*\*1852 Net investment income 2018 188 509 5,305 116,595 1,750 29,942 3,809 285,000 319,448 4,092,562 4,092,562 135,291 258,941 -60,507 Revenue and expenses per books 15 273 468 415 415 3,596 108,718 98,713 25,818 26,559 184,468 1,845 1,845 1,430 1,415 211,027 Net investment income 2017 273 899 3,596 108,718 216,768 27,703 150,000 188,083 28,685 9,439 4,153,069 4,153,069 106,184 -1,730Revenue and expenses per books <u>60</u> 685 685 415 0 1,650 92,538 94,248 25,772 68,476 1,100 1,100 23,591 2,177 Net investment income 2016 -793 666 1,650 250,000 92,538 4,124,384 -367,632 24,771 4,377 -554,3884,124,384 -274,237280,151 Revenue and expenses per books œ. 9. 15. 16. 20. 10. 12 13. 14. 17. 18. 19. 21. Net income (if negative investment activity, enter -0-) |21. 22. 23. 24. 25. 26. 28. 29. 30. 31. 32. 34. 1. Contributions, gifts, grants, and similar amounts received a 17. Occupancy
a 18. Other expenses
a 19. Contributions, gifts, grants paid
x 20. Total expenses and disbursements. Add lines 10 through 19 7. Gross profit or (loss) 11. Other employee salaries and wages 2. Interest on savings and temporary cash investments 10. Compensation of officers, directors, trustees, etc. Dividends and interest from securities 26. Estimates and overpayments credited 10. Compensation of officers, directors, tr
11. Other employee salaries and wages
12. Pension plans, employee benefits
13. Professional fees
14. Interest
15. Taxes 5. Net gain or (loss) from sale of assets FOUNDATION 31. Overpayment credited to next year 30. Balance due / (Overpayment) 28. Other Payments
29. Total payments and credits 9. Total. Add lines 1 through 8 6. Capital gain net income ∞ 16. Depreciation and depletion 24. Subtitle A income tax 27. Foreign tax withheld 33. Net due / (Refund) 23. Section 511 Tax 8. Other income 35. Total liabilities 34. Total assets 25. Total Taxes 4. Gross rents 36. Net assets 22. Excise Tax 32. Penalty რ Веvenue Due / Refund

WIL10 Local Initiative For Excellence 9/9/2021 10:45 AM **Federal Statements** \*\*-\*\*\*1852 FYE: 12/31/2020 Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000 Name of Manager Amount GEORGE WILE TOTAL **Taxable Interest on Investments** Unrelated Exclusion Postal US Description Amount Obs (\$ or %) Business Code Code TD AMERITRADE 3559 \$ 1,510 1,510 TOTAL **Taxable Dividends from Securities** Unrelated Exclusion Postal US Description Amount **Business** Code Code Obs (\$ or %) TD AMERITRADE 3559 114,513 114,513 TOTAL

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

OMB	No	15/15-00/17

For calendar year 2020, or fiscal year beginning ....., 2020, and ending ....., 20

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

Department of the Treasury Internal Revenue Service

▶ Go to www.irs.gov/Form8879EO for the latest information. LOCAL INITIATIVE FOR EXCELLENCE

Taxpayer identification number

Name of exempt organization or person subject to tax

FOUNDATION	**-***1852
Name and title of officer or person subject to tax	
TREASURER	
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	n 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 the	nis 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 enter	red -0- on the
return, then enter -0- on the applicable line below. <b>Do not</b> complete more than one line in Part I.	
<b>1a Form 990</b> check here ▶	1b
2a Form 990-EZ check here ▶	
3a Form 1120-POL check here b Total tax (Form 1120-POL, line 22)	3b
4a Form 990-PF check here   X b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b 2,503
5a Form 8868 check here ▶ b Balance due (Form 8868, line 3c)	· · · · · · · · · · · · · · · · · · ·
6a Form 990-T check here ▶ b Total tax (Form 990-T, Part III, line 4)	6b
7a Form 4720 check here b Total tax (Form 4720, Part III, line 1)	
Part II Declaration and Signature Authorization of Officer or Person Subject to Tax	<u> </u>
Under penalties of perjury, I declare that X I am an officer of the above organization or I am a person subject	
(name of organization) , (EIN)	
of the 2020 electronic return and accompanying schedules and statements, and, to the best of my knowledge and be	elief, 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 retu	rn to the IRS and
to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason	•
processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its de	5
Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the	
software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this ac	
a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to continuously data. Lake authorize the financial institutions involved in the proceeding of the electronic payment of the	
(settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of tax confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a payment of tax confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a payment of tax confidential information necessary to answer inquiries and resolve issues related to the payment.	
identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic fund	
Tachtinodilon namber (1 114) as my signature for the electronic retain and, it applicable, the consent to electronic fand	o withdrawai.
PIN: check one box only	
X Lauthorize JACKSON S. HARTY CO., CPA to enter my PIN	42001
to one my my	as my signature  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	s being filed with a
state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforemention	9
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	
electronically filed return. If I have indicated within this return that a copy of the return is being filed with a star regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure cons	
regulating ordinate at part of the five reaction program, I will offer my I my off the retained disclosure cons	
Signature of officer or person subject to tax Date	08/31/21
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.

\*\*\*\*\*

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.

JACKSON S. HARTY CO., CPA ERO's signature

Date

ERO Must Retain This Form — See Instructions

Do Not Submit This Form to the IRS Unless Requested To Do So