

Form **990-PF**
 Department of the Treasury
 Internal Revenue Service

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

▶ **Do not enter social security numbers on this form as it may be made public.**
 ▶ **Go to www.irs.gov/Form990PF for instructions and the latest information.**

OMB No 1545-0052
2018
Open to Public Inspection

For calendar year 2018, or tax year beginning 04-01-2018 , and ending 03-31-2019

Name of foundation MARY E BABCOCK FOUNDATION		A Employer identification number 31-1170451	
Number and street (or P O box number if mail is not delivered to street address) Room/suite 3460 BEECH ROAD		B Telephone number (see instructions) (740) 404-7187	
City or town, state or province, country, and ZIP or foreign postal code JOHNSTOWN, OH 43031		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ <u>2,333,433</u>		J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)	
		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		(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	50,686	50,686		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	5,468			
	b Gross sales price for all assets on line 6a <u>5,468</u>				
	7 Capital gain net income (from Part IV, line 2)		5,468		
	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	56,154	56,154	0		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	0	0	0	0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	814	0	0	0
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	1,272	0	0	0
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	1,298	0	0	60
	24 Total operating and administrative expenses. Add lines 13 through 23	3,384	0	0	60
	25 Contributions, gifts, grants paid	112,337			112,337
26 Total expenses and disbursements. Add lines 24 and 25	115,721	0	0	112,397	
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements	-59,567				
b Net investment income (if negative, enter -0-)		56,154			
c Adjusted net income (if negative, enter -0-)			0		

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	104,484	44,917	44,917
	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 ▶ _____			
	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)			
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	1,783,296	1,783,296	2,288,516
	14 Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15 Other assets (describe ▶ _____)				
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	1,887,780	1,828,213	2,333,433	
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)	0	0	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds	1,887,780	1,828,213	
	28 Paid-in or capital surplus, or land, bldg, and equipment fund	0	0	
29 Retained earnings, accumulated income, endowment, or other funds	0	0		
30 Total net assets or fund balances (see instructions)	1,887,780	1,828,213		
31 Total liabilities and net assets/fund balances (see instructions) .	1,887,780	1,828,213		

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 30 (must agree with end-of-year figure reported on prior year's return)	1	1,887,780
2 Enter amount from Part I, line 27a	2	-59,567
3 Other increases not included in line 2 (itemize) ▶ _____	3	0
4 Add lines 1, 2, and 3	4	1,828,213
5 Decreases not included in line 2 (itemize) ▶ _____	5	0
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	1,828,213

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-14 regarding controlled entities, donor advised funds, public inspection requirements, and books in care.

Located at 60 EAST DOUGLAS ST JOHNSTOWN OH ZIP+4 43031

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year. 15

Table with 3 columns: Question, Yes, No. Row 16 regarding interest in foreign countries.

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.

Main table with 3 columns: Question, Yes, No. Rows 1a-4b regarding Form 4720 exceptions and requirements.

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling. ▶

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

	Tax year	Prior 3 years			(e) Total
	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
2a 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))

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

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 e-mail address of the person to whom applications should be addressed
 TODD
 3460 BEECH ROAD
 JOHNSTOWN, OH 43031
 (614) 989-1307

b The form in which applications should be submitted and information and materials they should include
 BRIEF DESCRIPTION OF CHARITABLE ACTIVITIES FOR WHICH FUNDS ARE REQUESTED

c Any submission deadlines
 NONE

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

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 Additional Data Table				
Total				▶ 3a
b <i>Approved for future payment</i>				
Total				▶ 3b

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
RICHARD T CLARK PO BOX 382 JOHNSTOWN, OH 43031	DIRECTOR 2 00	0	0	0
MARY C THOMAS 5528 JOHNSTOWN-ALEXANDRIA ROAD JOHNSTOWN, OH 43031	SECRETARY 2 00	0	0	0
DAVID MATHEWS 60 EAST DOUGLAS ST JOHNSTOWN, OH 43031	TREASURER 2 00	0	0	0
TODD DODDERER 3460 BEECH ROAD JOHNSTOWN, OH 43031	PRESIDENT 2 00	0	0	0
STEVEN H WILLIAMS 115 PHILLIPS GLEN DR GRANVILLE, OH 43023	VICE PRESIDENT 2 00	0	0	0
MRS SHARON JOHNSON 66 EAST DOUGLAS STREET JOHNSTOWN, OH 43031	DIRECTOR 2 00	0	0	0
TERRY A PRIEST 128 STONE HEDGE ROW DRIVE JOHNSTOWN, OH 43031	DIRECTOR 2 00	0	0	0
CHARLES WALKER 4012 DUTCH LANE RD JOHNSTOWN, OH 43031	DIRECTOR 2 00	0	0	0

Form 990PF Part XV Line 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>				
APPLE BLOSSOM FLOWERS LANDSCAPING 225 EDWARDS RD JOHNSTOWN, OH 43037	N/A	N/A	FLOWERS AND LANDSCAPING OF TOWN SQUARELANDSCAPING TOWN SQUARE	5,425
KESSLER SIGN COMPANY 2669 NATINAL RD ZANESVILLE, OH 43701	N/A	N/A	BALANCE OF COMMUNITY SIGN	13,500
MONROE TOWNSHIP TRUSTEES 9444 WOODHAVEN RD JOHNSTOWN, OH 43031	N/A		DIGITAL SIGN	15,000
Total ▶ 3a				112,337

Form 990PF Part XV Line 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>				
LICKING COUNTY FOUNDATION 30 N 2ND ST NEWARK, OH 43055	N/A		MARY BABCOCK FUND FOR CHILDRENS LIBRARY ADDITION	55,412
DON SPIRESPO BOX 144 ST LOUISVILLE, OH 43071	N/A		MASTODON TRAIL WORK	10,000
OHIO STATE UNIVERSITY PO BOX 182646 COLUMBUS, OH 432182646	N/A	N/A	SCHOLARSHIP FOR WYATT BUNSTINE	1,500
Total				112,337

▶ 3a

Form 990PF Part XV Line 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>				
THE WORKS55 S 1ST ST NEWARK, OH 43055	N/A	N/A	2019 PROGRAMS IN JOHNSTOWN	10,000
ROSE-HULMAN INSTITUTE OF TECHNOLOGY 5500 WABASH AVE TERRE HAUTE, IN 47803	N/A		SCHOLARSHIP FOR DANIELLE VILLA	1,500
Total ▶ 3a				112,337

TY 2018 Accounting Fees Schedule**Name:** MARY E BABCOCK FOUNDATION**EIN:** 31-1170451

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAX PREP	814	0	0	0

TY 2018 Explanation of Non-Filing with Attorney General Statement

Name: MARY E BABCOCK FOUNDATION

EIN: 31-1170451

Statement:

THE OHIO ATTORNEY GENERAL DOES NOT WANT ORGANIZATIONS TO FURNISH A COPY OF THEIR FORM 990PF BUT REQUIRES THEY PROVIDE SPECIFIC INFORMATION THRU AN ON-LINE FILING. THE ORGANIZATION HAS COMPLIED WITH THE ON-LINE FILING REQUIREMENT.

TY 2018 Investments - Other Schedule**Name:** MARY E BABCOCK FOUNDATION**EIN:** 31-1170451**Investments Other Schedule 2**

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
FIDELITY TOTAL BOND	AT COST	230,393	230,535
FIDELITY TOTAL MKT INDEX PREM	AT COST	1,148,390	1,606,352
FIDELITY INTERNATIONAL INDEX PREM	AT COST	404,513	451,629

TY 2018 Other Expenses Schedule**Name:** MARY E BABCOCK FOUNDATION**EIN:** 31-1170451**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INSURANCE	963	0	0	0
STATE FILING FEES	225	0	0	0
POSTAGE	50	0	0	0
AWARD PLAQUES	60	0	0	60

TY 2018 Taxes Schedule**Name:** MARY E BABCOCK FOUNDATION**EIN:** 31-1170451

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL EXCISE TAX	1,272	0	0	0