

Return of Private Foundation

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

2019

Open to Public Inspection

Form **990-PF**

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.

For calendar year 2019 or tax year beginning , and ending

Name of foundation L & L NIPPERT CHARITABLE FOUNDATION INC ATTN: CARTER F. RANDOLPH, PH.D.		A Employer identification number 31-1351011
Number and street (or P.O. box number if mail is not delivered to street address) 4200 MALSARY ROAD	Room/suite	B Telephone number 513-891-7144
City or town, state or province, country, and ZIP or foreign postal code BLUE ASH, OH 45242-5510		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) \$ 81,042,724.	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 <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received				N/A	
2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B					
3 Interest on savings and temporary cash investments		75,626.	75,626.		STATEMENT 1
4 Dividends and interest from securities		1,750,764.	1,750,764.		STATEMENT 2
5a Gross rents					
b Net rental income or (loss)					
6a Net gain or (loss) from sale of assets not on line 10		2,694,291.			
b Gross sales price for all assets on line 6a		46,643,629.			
7 Capital gain net income (from Part IV, line 2)			2,694,291.		
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)					
11 Other income		2,181.	0.		STATEMENT 3
12 Total. Add lines 1 through 11		4,522,862.	4,520,681.		
13 Compensation of officers, directors, trustees, etc.		30,000.	0.		30,000.
14 Other employee salaries and wages					
15 Pension plans, employee benefits					
16a Legal fees					
b Accounting fees STMT 4		8,060.	4,030.		4,030.
c Other professional fees STMT 5		310,227.	310,227.		0.
17 Interest					
18 Taxes STMT 6		65,656.	21,847.		0.
19 Depreciation and depletion					
20 Occupancy					
21 Travel, conferences, and meetings					
22 Printing and publications					
23 Other expenses STMT 7		19,000.	0.		18,900.
24 Total operating and administrative expenses. Add lines 13 through 23		432,943.	336,104.		52,930.
25 Contributions, gifts, grants paid		3,807,723.			3,807,723.
26 Total expenses and disbursements. Add lines 24 and 25		4,240,666.	336,104.		3,860,653.
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements ...		282,196.			
b Net investment income (if negative, enter -0-)			4,184,577.		
c Adjusted net income (if negative, enter -0-)				N/A	

L & L NIPPERT CHARITABLE FOUNDATION INC
ATTN: CARTER F. RANDOLPH, PH.D.

Form 990-PF (2019)

31-1351011

Page 2

Part II Balance Sheets <small>Attached schedules and amounts in the description column should be for end-of-year amounts only.</small>		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing	26,253,197.	736,080.	736,080.
	2 Savings and temporary cash investments			
	3 Accounts receivable ▶			
	Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	Less: allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable ▶			
	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			
	b Investments - corporate stock STMT 8	27,047,441.	53,880,283.	77,207,347.
	c Investments - corporate bonds STMT 9	642,865.	642,865.	689,765.
	11 Investments - land, buildings, and equipment: basis ▶			
Less: accumulated depreciation ▶				
12 Investments - mortgage loans				
13 Investments - other STMT 10	3,392,350.	2,343,668.	2,374,936.	
14 Land, buildings, and equipment: basis ▶				
Less: accumulated depreciation ▶				
15 Other assets (describe ▶ ACCRUED INCOME)	19,443.	34,596.	34,596.	
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	57,355,296.	57,637,492.	81,042,724.	
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			
	22 Other liabilities (describe ▶			
23 Total liabilities (add lines 17 through 22)	0.	0.		
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	10,403,661.	10,403,661.	
	27 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
	28 Retained earnings, accumulated income, endowment, or other funds	46,951,635.	47,233,831.	
29 Total net assets or fund balances	57,355,296.	57,637,492.		
30 Total liabilities and net assets/fund balances	57,355,296.	57,637,492.		

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	57,355,296.
2 Enter amount from Part I, line 27a	2	282,196.
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	57,637,492.
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 29	6	57,637,492.

Form 990-PF (2019)

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.)
1a TD AMERITRADE - 0650 CAPITAL GAIN			
b DISTRIBUTION	P		
c TD AMERITRADE - A/C 0650	P		
d TD AMERITRADE - A/C 0650	P		
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			
b 11,962.			11,962.
c 37,201,807.		39,016,277.	-1,814,470.
d 9,429,860.		4,933,061.	4,496,799.
e			

(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			
b			11,962.
c			-1,814,470.
d			4,496,799.
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.			
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	2,694,291.
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). If (loss), enter -0- in Part I, line 8	}	3	N/A

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

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018	3,428,396.	78,110,000.	.043892
2017	3,480,686.	73,568,871.	.047312
2016	2,933,158.	66,365,044.	.044197
2015	2,096,689.	59,153,856.	.035445
2014	1,197,979.	45,263,909.	.026467

2 Total of line 1, column (d)	2	.197313
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	.039463
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	78,675,562.
5 Multiply line 4 by line 3	5	3,104,774.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	41,846.
7 Add lines 5 and 6	7	3,146,620.
8 Enter qualifying distributions from Part XII, line 4	8	3,860,653.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

L & L NIPPERT CHARITABLE FOUNDATION INC

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), 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	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	41,846.
c	All other domestic foundations enter 2% 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	0.
3	Add lines 1 and 2	3	41,846.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4	0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	41,846.
6	Credits/Payments:		
a	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	39,712.
b	Exempt foreign organizations - tax withheld at source	6b	0.
c	Tax paid with application for extension of time to file (Form 8868)	6c	0.
d	Backup withholding erroneously withheld	6d	0.
7	Total credits and payments. Add lines 6a through 6d	7	39,712.
8	Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8	290.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	2,424.
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 2020 estimated tax <input type="checkbox"/> Refunded <input checked="" type="checkbox"/>	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a		X
1b		X
1c		X
2		X
3		X
4a		X
4b		N/A
5		X
6	X	
7	X	
8a		
8b	X	
9		X
10		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		X
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		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► WWW.LNLCHARITABLE.ORG	X	
14 The books are in care of ► CARTER F. RANDOLPH Telephone no. ► 513-891-7144 Located at ► 4200 MALSARY ROAD, CINCINNATI, OH ZIP+4 ► 45242		
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	N/A
16 At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ►		X

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 checked="" type="checkbox"/> Yes <input 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	X
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 2019?	1c	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019? <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	N/A
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 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2019.)	3b	N/A
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b	X

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	N/A	5b	
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?	N/A <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?		6b	X
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?	N/A	7b	
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.

(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		30,000.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). 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				

Total number of other employees paid over \$50,000 0

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

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

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
RANDOLPH COMPANY INC 4200 MALSARY ROAD, CINCINNATI, OH 45242	INVESTMENT ADVISORS	326,780.

Total number of others receiving over \$50,000 for professional services ▶ **0**

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 N/A	
2	
3	
4	

Part IX-B Summary of Program-Related Investments

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	
3 All other program-related investments. See instructions.	

Total. Add lines 1 through 3 ▶ **0.**

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	71,219,335.
b	Average of monthly cash balances	1b	8,654,332.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	79,873,667.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	79,873,667.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,198,105.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	78,675,562.
6	Minimum investment return. Enter 5% of line 5	6	3,933,778.

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	3,933,778.
2a	Tax on investment income for 2019 from Part VI, line 5	2a	41,846.
b	Income tax for 2019. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	41,846.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	3,891,932.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	3,891,932.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	3,891,932.

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	3,860,653.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	3,860,653.
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	5	41,846.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	3,818,807.

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 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				3,891,932.
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only			3,796,888.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2019:				
a From 2014				
b From 2015				
c From 2016				
d From 2017				
e From 2018				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2019 from Part XII, line 4: ▶ \$ 3,860,653.				
a Applied to 2018, but not more than line 2a			3,796,888.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2019 distributable amount				63,765.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
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		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				3,828,167.
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)	0.			
8 Excess distributions carryover from 2014 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2015				
b Excess from 2016				
c Excess from 2017				
d Excess from 2018				
e Excess from 2019				

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

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 2019, 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				(e) Total
	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
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.

a The name, address, and telephone number or email address of the person to whom applications should be addressed:
CARTER F RANDOLPH PH.D, 513-891-7144
4200 MALSARY ROAD, CINCINNATI, OH 45242

b The form in which applications should be submitted and information and materials they should include:
FULL DIRECTIONS FOR APPLICATIONS ARE AVAILABLE ON WWW.LNLCHARITABLE.ORG

c Any submission deadlines:
APPLICATIONS MUST BE RECEIVED BY AUGUST 1ST.

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:
GRANTS ARE ONLY GRANTED TO LOCAL 501(C)(3) ORGANIZATIONS

L & L NIPPERT CHARITABLE FOUNDATION INC

Form 990-PF (2019)

ATTN: CARTER F. RANDOLPH, PH.D.

31-1351011 Page 11

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 Paid during the year				
4C FOR CHILDREN 2100 SHERMAN AVE., #300 CINCINNATI, OH 45212	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	100,000.
ADVENTURE CREW 2692 MADISON ROAD SUITE N1-414 CINCINNATI, OH 45208	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	25,000.
BEECH ACRES PARENTING CENTER 6881 BEECHMONT AVENUE CINCINNATI, OH 45230	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	50,000.
BETHANY HOUSE SERVICES, INC. 1841 FAIRMOUNT AVENUE CINCINNATI, OH 45214	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	35,000.
BIG BROTHERS BIG SISTERS OF BUTLER COUNTY 1755 S. ERIE BLVD., SUITE D HAMILTON, OH 45011	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	40,945.
Total	SEE CONTINUATION SHEET(S)			3a 3,807,723.
b Approved for future payment				
NONE				
Total				3b 0.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income
	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	
1 Program service revenue:					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	75,626.	
4 Dividends and interest from securities			14	1,750,764.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	2,694,291.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a MISCELLANEOUS	900099		01	2,181.	
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0.		4,522,862.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	4,522,862.

(See worksheet in line 13 instructions to verify calculations.)

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).

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		<input checked="" type="checkbox"/>
(2)	Other assets		<input checked="" type="checkbox"/>
b	Other transactions:		
(1)	Sales of assets to a noncharitable exempt organization		<input checked="" type="checkbox"/>
(2)	Purchases of assets from a noncharitable exempt organization		<input checked="" type="checkbox"/>
(3)	Rental of facilities, equipment, or other assets		<input checked="" type="checkbox"/>
(4)	Reimbursement arrangements		<input checked="" type="checkbox"/>
(5)	Loans or loan guarantees		<input checked="" type="checkbox"/>
(6)	Performance of services or membership or fundraising solicitations		<input checked="" type="checkbox"/>
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees		<input checked="" type="checkbox"/>
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? Yes No

b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Sign Here 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.

Signature of officer or trustee _____ **Date** _____ **Title** **PRESIDENT/TRUST** **EE**

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

Paid Preparer Use Only	Print/Type preparer's name GREGORY A. DEYHLE	Preparer's signature _____	Date 06/04/20	Check <input type="checkbox"/> if self-employed	PTIN P00341594
	Firm's name ▶ MELLOTT & MELLOTT, P.L.L.			Firm's EIN ▶ 31-6063298	
	Firm's address ▶ 312 WALNUT STREET - SUITE 2500 CINCINNATI, OH 45202-4025			Phone no. 513-241-2940	

923622 12-17-19

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	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
BRIGHTON CENTER INC. PO BOX 325 NEWPORT, KY 41071	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	10,000.
CAMP JOY 10117 OLD 3-C HIGHWAY CLARKSVILLE, OH 45113	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	75,000.
CATHOLIC INNER-CITY SCHOOLS EDUCATION FUND (CISE) 10 E 8TH STREET CINCINNATI, OH 45202	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	70,000.
CENTER FOR RESPITE CARE P.O BOX 141301 CINCINNATI, OH 45250	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	60,000.
CET GREATER CINCINNATI TELEVISION EDUCATIONAL FOUNDATION 1223 CENTRAL PARKWAY CINCINNATI, OH 45214	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	100,000.
CHILDHOOD FOOD SOLUTIONS 2573 ST. LEO PLACE CINCINNATI, OH 45225	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	39,000.
CHILDREN'S HOME OF CINCINNATI 5050 MADISON ROAD CINCINNATI, OH 45227	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	45,000.
CHILDREN'S THEATRE OF CINCINNATI 4015 RED BANK ROAD CINCINNATI, OH 45227	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	25,000.
CINCINNATI ART MUSEUM 953 EDEN PARK DRIVE CINCINNATI, OH 45202	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	40,000.
CINCINNATI MUSEUM CENTER 1301 WESTERN AV CINCINNATI, OH 45203	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	500,000.
Total from continuation sheets				3,556,778.

L & L NIPPERT CHARITABLE FOUNDATION INC
 ATTN: CARTER F. RANDOLPH, PH.D.

31-1351011

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	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
CINCINNATI PLAYHOUSE IN THE PARK 962 MT. ADAMS CIRCLE CINCINNATI, OH 45202	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	100,000.
CINCINNATI THERAPEUTIC RIDING AND HORSEMANSHIP 1342 US HWY 50 MILFORD, OH 45150	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	50,000.
CINCINNATI WORKS INC. 708 WALNUT STREET, FLOOR 2 CINCINNATI, OH 45202	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	120,000.
CINCINNATI YOUTH COLLABORATIVE 301 OAK STREET CINCINNATI, OH 45219	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	50,000.
CINCINNATI ZOO & BOTANICAL GARDEN 3400 VINE STREET CINCINNATI, OH 45220	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	250,000.
COMMUNITY MATTERS CINCINNATI, INC. 2110 SAINT MICHAEL STREET CINCINNATI, OH 45204	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	10,000.
CRAYONS TO COMPUTERS 1350 TENNESSEE AVE CINCINNATI, OH 45229	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	20,000.
ECONOMICS CENTER 225 CALHOUN STREET, SUITE 370 CINCINNATI, OH 45219	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	12,025.
EMERGENCY SHELTER OF NORTHERN KENTUCKY P.O. BOX 332 COVINGTON, KY 41012	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	50,000.
EPISCOPAL RETIREMENT SERVICE AFFORDABLE LIVING 3870 VIRGINIA AVENUE CINCINNATI, OH 45227	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	30,000.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	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
FERNSIDE: A CENTER FOR GRIEVING CHILDREN 4360 COOPER ROAD CINCINNATI, OH 45242	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	25,000.
FIRST STEP HOME 2211 FULTON AVENUE CINCINNATI, OH 45206	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	25,000.
FIRST TEE OF GREATER CINCINNATI & NORTHERN KENTUCKY 4747 PLAYFIELD LANE CINCINNATI, OH 45226	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	10,000.
FREESTORE FOODBANK, INC. 1141 CENTRAL PARKWAY CINCINNATI, OH 45202	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	30,000.
GREEN UMBRELLA 5030 OAKLAWN DRIVE CINCINNATI, OH 45227	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	40,000.
HOSPICE OF CINCINNATI, INC. 4360 COOPER ROAD CINCINNATI, OH 45242	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	20,000.
INTERFAITH HOSPITALITY NETWORK OF GREATER CINCINNATI INC. 990 NASSAU STREET CINCINNATI, OH 45206	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	30,000.
KEEP CINCINNATI BEAUTIFUL, INC. 1115 BATES AVE. CINCINNATI, OH 45225	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	25,000.
LA SOUPE, INC. 4150 ROUND BOTTOM RD. CINCINNATI, OH 45244	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	350,000.
LEGAL AID SOCIETY OF GREATER CINCINNATI 215 E. NINTH STREET, SUITE 200 CINCINNATI, OH 45202	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	50,000.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	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
LIBRARY FOUNDATION 800 VINE STREET CINCINNATI, OH 45202	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	10,000.
LIFE FORWARD, PREGNANCY CARE OF CINCINNATI 2415 AUBURN AVENUE CINCINNATI, OH 45219	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	25,000.
LIGHTHOUSE YOUTH SERVICES, INC. D/B/A LIGHTHOUSE YOUTH & FAMILY SERVICES 401 EAST MCMILLAN STREET CINCINNATI, OH 45206	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	25,000.
MAPLE KNOLL COMMUNITIES, INC. (DBA.. MAPLE KNOLL VILLAGE) 11100 SPRINGFIELD PIKE CINCINNATI, OH 45215	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	25,000.
MAY WE HELP 7501 WOOSTER PIKE CINCINNATI, OH 45227	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	30,000.
MOTHER TERESA CATHOLIC ELEMENTARY SCHOOL 7197 MOTHER TERESA LANE LIBERTY TOWNSHIP, OH 45044	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	25,000.
OHIO FOUNDATION OF INDEPENDENT COLLEGES, INC. (OFIC) 250 EAST BROAD STREET, SUITE 1700 COLUMBUS, OH 43215	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	6,600.
OHIO VALLEY VOICES 6642 BRANCH HILL-GUINEA PIKE LOVELAND, OH 45140	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	30,000.
OUR DAILY BREAD 1730 RACE STREET CINCINNATI, OH 45202	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	20,000.
PRICE HILL WILL 3724 ST. LAWRENCE AVENUE CINCINNATI, OH 45205	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	75,000.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	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
PRO BONO PARTNERSHIP OF OHIO 255 E. FIFTH ST., SUITE 1900 CINCINNATI, OH 45202	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	25,000.
SALVATION ARMY 114 EAST CENTRAL PARKWAY CINCINNATI, OH 45201	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	75,000.
SANTA MARIA COMMUNITY SERVICES 617 STEINER AVENUE CINCINNATI, OH 45204	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	25,000.
SOCIETY OF ST. VINCENT DE PAUL COUNCIL OF NKY 2655 CRESCENT SPRINGS ROAD COVINGTON, KY 41011	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	50,000.
ST. RITA SCHOOL FOR THE DEAF 1720 GLENDALE MILFORD ROAD CINCINNATI, OH 45215	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	25,000.
TAFT MUSEUM OF ART 316 PIKE STREET CINCINNATI, OH 45202	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	40,000.
TALBERT HOUSE 2600 VICTORY PARKWAY CINCINNATI, OH 45206	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	100,000.
TEACH FOR AMERICA -SOUTHWEST OHIO 1110 MAIN STREET CINCINNATI, OH 45202	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	65,000.
UNIVERSITY OF THE CUMBERLANDS 6191 COLLEGE STATION DRIVE WILLIAMSBURG, KY 40769	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	10,000.
WAVE FOUNDATION, INC. ONE NEWPORT WAY NEWPORT, KY 41071	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	75,000.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	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
WOMEN HELPING WOMEN 215 EAST NINTH ST., 7TH FLOOR CINCINNATI, OH 45202	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	25,000.
YWCA GREATER CINCINNATI 898 WALNUT ST CINCINNATI, OH 45202	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	80,000.
BEECHWOOD HOME 2140 POGUE AVENUE CINCINNATI, OH 45208	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	5,000.
CINCINNATI ASSOCIATION FOR THE BLIND AND VISUALLY IMPAIRED (CABVI) 2045 GILBERT AVE CINCINNATI, OH 45202	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	30,000.
CINCINNATI EYE INSTITUTE FOUNDATION 1945 CEI DRIVE CINCINNATI, OH 45242	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	51,000.
EAST END ADULT EDUCATION CENTER 5721 DRAGON WAY, SUITE 401 CINCINNATI, OH 45227	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	25,000.
HEARING SPEECH & DEAF CENTER OF GREATER CINCINNATI 2825 BURNET AVENUE, SUITE 330 CINCINNATI, OH 45219	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	30,000.
ISPACE, INC. 100 SCARLET OAKS DRIVE CINCINNATI, OH 45241	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	35,000.
MILL CREEK ALLIANCE 1662 BLUE ROCK RD. CINCINNATI, OH 45223	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	33,153.
PREVENTIONFIRST! 2100 SHERMAN AVE, SUITE 102 CINCINNATI, OH 45212	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	50,000.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	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
PROKIDS 2605 BURNET AVENUE CINCINNATI, OH 45219	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	100,000.
SHELTERHOUSE VOLUNTEER GROUP: DBA: SHELTERHOUSE 411 GEST ST, SUITE CINCINNATI, OH 45203	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	50,000.
ST. ALOYSIUS ORPHANAGE 4721 READING ROAD CINCINNATI, OH 45237	NONE	NOT FOR PROFIT	ORGANIZATION'S CHARITABLE PURPOSE	20,000.
Total from continuation sheets				

Underpayment of Estimated Tax by Corporations

Department of the Treasury
Internal Revenue Service

▶ Attach to the corporation's tax return.

FORM 990-PF

2019

▶ Go to www.irs.gov/Form2220 for instructions and the latest information.

Name **L & L NIPPERT CHARITABLE FOUNDATION INC**
ATTN: CARTER F. RANDOLPH, PH.D.

Employer identification number
31-1351011

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	41,846.
2a	Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1	2a	
2b	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	
2c	Credit for federal tax paid on fuels (see instructions)	2c	
2d	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	41,846.
4	Enter the tax shown on the corporation's 2018 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	39,712.
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	39,712.

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 The corporation is using the adjusted seasonal installment method.
- 7 The corporation is using the annualized income installment method.
- 8 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	9	05/15/19	06/15/19	09/15/19	12/15/19
10 Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Sch 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	9,928.	10,995.	10,462.	10,461.
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	5,403.		24,381.	9,928.
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				
13 Add lines 11 and 12	13			24,381.	9,928.
14 Add amounts on lines 16 and 17 of the preceding column	14		4,525.	15,520.	1,601.
15 Subtract line 14 from line 13. If zero or less, enter -0-	15	5,403.	0.	8,861.	8,327.
16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0-	16		4,525.	0.	
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	4,525.	10,995.	1,601.	2,134.
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				

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.

LHA 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 19				
20 Number of days from due date of installment on line 9 to the date shown on line 19	20			
21 Number of days on line 20 after 4/15/2019 and before 7/1/2019	21			
22 Underpayment on line 17 x $\frac{\text{Number of days on line 21} \times 6\% (0.06)}{365}$...	22 \$	\$	\$	\$
23 Number of days on line 20 after 06/30/2019 and before 10/1/2019	23			
24 Underpayment on line 17 x $\frac{\text{Number of days on line 23} \times 5\% (0.05)}{365}$...	24 \$	\$	\$	\$
25 Number of days on line 20 after 9/30/2019 and before 1/1/2020	25			
26 Underpayment on line 17 x $\frac{\text{Number of days on line 25} \times 5\% (0.05)}{365}$...	26 \$	\$	\$	\$
27 Number of days on line 20 after 12/31/2019 and before 4/1/2020	27	SEE ATTACHED WORKSHEET		
28 Underpayment on line 17 x $\frac{\text{Number of days on line 27} \times 5\% (0.05)}{366}$...	28 \$	\$	\$	\$
29 Number of days on line 20 after 3/31/2020 and before 7/1/2020	29			
30 Underpayment on line 17 x $\frac{\text{Number of days on line 29} \times \%}{366}$	30 \$	\$	\$	\$
31 Number of days on line 20 after 6/30/2020 and before 10/1/2020	31			
32 Underpayment on line 17 x $\frac{\text{Number of days on line 31} \times \%}{366}$	32 \$	\$	\$	\$
33 Number of days on line 20 after 9/30/2020 and before 1/1/2021	33			
34 Underpayment on line 17 x $\frac{\text{Number of days on line 33} \times \%}{366}$	34 \$	\$	\$	\$
35 Number of days on line 20 after 12/31/2020 and before 3/16/2021	35			
36 Underpayment on line 17 x $\frac{\text{Number of days on line 35} \times \%}{365}$	36 \$	\$	\$	\$
37 Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37 \$	\$	\$	\$
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 \$			290.

* 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.

**FORM 990-PF
UNDERPAYMENT OF ESTIMATED TAX WORKSHEET**

Name(s) L & L NIPPERT CHARITABLE FOUNDATION INC ATTN: CARTER F. RANDOLPH, PH.D.					Identifying Number 31-1351011
(A) *Date	(B) Amount	(C) Adjusted Balance Due	(D) Number Days Balance Due	(E) Daily Penalty Rate	(F) Penalty
		-0-			
05/15/19	9,928.	9,928.			
05/15/19	-5,403.	4,525.	31	.000164384	23.
06/15/19	10,995.	15,520.	15	.000164384	38.
06/30/19	0.	15,520.	77	.000136986	164.
09/15/19	10,462.	25,982.			
09/15/19	-24,381.	1,601.	91	.000136986	20.
12/15/19	10,461.	12,062.			
12/15/19	-9,928.	2,134.	16	.000136986	5.
12/31/19	0.	2,134.	136	.000136612	40.
Penalty Due (Sum of Column F):					290.

* Date of estimated tax payment, withholding credit date or installment due date.

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
TD AMERITRADE	75,626.	75,626.	
TOTAL TO PART I, LINE 3	75,626.	75,626.	

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
TD AMERITRADE	1,750,764.	0.	1,750,764.	1,750,764.	
TO PART I, LINE 4	1,750,764.	0.	1,750,764.	1,750,764.	

FORM 990-PF OTHER INCOME STATEMENT 3

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
MISCELLANEOUS	2,181.	0.	
TOTAL TO FORM 990-PF, PART I, LINE 11	2,181.	0.	

FORM 990-PF ACCOUNTING FEES STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	8,060.	4,030.		4,030.
TO FORM 990-PF, PG 1, LN 16B	8,060.	4,030.		4,030.

FORM 990-PF

OTHER PROFESSIONAL FEES

STATEMENT 5

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT FEES	310,227.	310,227.		0.
TO FORM 990-PF, PG 1, LN 16C	310,227.	310,227.		0.

FORM 990-PF

TAXES

STATEMENT 6

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAX	21,847.	21,847.		0.
FEDERAL EXCISE TAX PAYMENTS	43,809.	0.		0.
TO FORM 990-PF, PG 1, LN 18	65,656.	21,847.		0.

FORM 990-PF

OTHER EXPENSES

STATEMENT 7

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
GRANT PROCESSING AND APPROVAL	17,175.	0.		17,175.
MEMBERSHIPS AND DUES	550.	0.		550.
POSTAGE	875.	0.		875.
WEBSITE	200.	0.		100.
FILING FEES	200.	0.		200.
TO FORM 990-PF, PG 1, LN 23	19,000.	0.		18,900.

FORM 990-PF

CORPORATE STOCK

STATEMENT 8

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
AMERITRADE INSTITUTIONAL- CORPORATE STOCKS	53,880,283.	77,207,347.
TOTAL TO FORM 990-PF, PART II, LINE 10B	53,880,283.	77,207,347.

FORM 990-PF

CORPORATE BONDS

STATEMENT 9

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
AMERITRADE INSTITUTIONAL- FIXED INCOME	642,865.	689,765.
TOTAL TO FORM 990-PF, PART II, LINE 10C	642,865.	689,765.

FORM 990-PF

OTHER INVESTMENTS

STATEMENT 10

DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
AMERITRADE INSTITUTIONAL- EXCHANGE TRADED FUNDS	COST	2,343,668.	2,374,936.
TOTAL TO FORM 990-PF, PART II, LINE 13		2,343,668.	2,374,936.

FORM 990-PF

PART VIII - LIST OF OFFICERS, DIRECTORS
TRUSTEES AND FOUNDATION MANAGERS

STATEMENT 11

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
DR. CARTER F. RANDOLPH 4200 MALSARY ROAD CINCINNATI, OH 45242	PRESIDENT & TRUSTEE 4.00	30,000.	0.	0.
LAWRENCE H. KYTE, JR. 4200 MALSARY ROAD CINCINNATI, OH 45242	VICE PRESIDENT & TRUSTEE 0.10	0.	0.	0.
GUY RANDOLPH, JR. 4200 MALSARY ROAD CINCINNATI, OH 45242	TRUSTEE 0.10	0.	0.	0.
MARTIN COOPER 4200 MALSARY ROAD CINCINNATI, OH 45242	SECRETARY & TRUSTEE 0.10	0.	0.	0.
BRAD LINDNER 4200 MALSARY ROAD CINCINNATI, OH 45242	TREASURER & TRUSTEE 0.10	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		30,000.	0.	0.

GENERAL EXPLANATION

STATEMENT 12

FORM/LINE IDENTIFIER AND DESCRIPTION/RETURN REFERENCE

FORM 990-PF, PART VII-B, LINE 1A QUESTION 3 - PROFESSIONAL FEES PAID TO D

EXPLANATION:

PROFESSIONAL FEES OF \$326,780 WERE PAID TO THE RANDOLPH COMPANY, A COMPANY, WHICH THROUGH ATTRIBUTION, IS WHOLLY OWNED BY CARTER F RANDOLPH PH.D, THE PRESIDENT/TRUSTEE OF THE FOUNDATION.

GENERAL EXPLANATION

STATEMENT 13

FORM/LINE IDENTIFIER AND DESCRIPTION/RETURN REFERENCE

FORM 990-PF, PART VIII, LINE 1 AND PART VII-B, LINE 1A QUESTION 4 - COMPE

EXPLANATION:

THE \$30,000 IN COMPENSATION REPORTED BY CARTER RANDOLPH IS FOR ADMINISTRATION SERVICES. IT WAS PAID TO CFRPHD, LLC - A SINGLE-MEMBER LLC OWNED BY CARTER F RANDOLPH PH.D, THE PRESIDENT/TRUSTEE OF THE FOUNDATION.

Form **990-W**
 (Worksheet)

**Estimated Tax on Unrelated Business Taxable
 Income for Tax-Exempt Organizations**

OMB No. 1545-0047

(and on Investment Income for Private Foundations) FORM 990-T

2020

Department of the Treasury
 Internal Revenue Service

▶ Go to www.irs.gov/Form990W for instructions and the latest information.
 ▶ Keep for your records. Do not send to the Internal Revenue Service.

1	Unrelated business taxable income expected in the tax year				1
2	Tax on the amount on line 1. See instructions for tax computation				2
3	Alternative minimum tax for trusts. See instructions				3
4	Total. Add lines 2 and 3				4
5	Estimated tax credits. See instructions				5
6	Subtract line 5 from line 4				6
7	Other taxes. See instructions				7
8	Total. Add lines 6 and 7				8
9	Credit for federal tax paid on fuels. See instructions				9
10a	Subtract line 9 from line 8. Note: If less than \$500, the organization is not required to make estimated tax payments. Private foundations, see instructions		10a		
b	Enter the tax shown on the 2019 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		10b		
c	2020 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				10c

		(a)	(b)	(c)	(d)
11	Installment due dates. See instructions	11			
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			
13	2019 Overpayment. See instructions	13			
14	Payment due (Subtract line 13 from line 12)	14			

LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-W** (2020)

**ESTIMATED TAX
 OVERPAYMENT APPLIED 1,478.
 AMOUNT DUE 0.**

Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

2019

For calendar year 2019 or other tax year beginning _____, and ending _____

▶ Go to www.irs.gov/Form990T for instructions and the latest information.

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Department of the Treasury
Internal Revenue Service

Open to Public Inspection for
501(c)(3) Organizations Only

<p>A <input type="checkbox"/> Check box if address changed</p> <p>B Exempt under section <input checked="" type="checkbox"/> 501(c)(3)) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a)</p>	Print or Type	<p>Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.) L & L NIPPERT CHARITABLE FOUNDATION INC ATTN: CARTER F. RANDOLPH, PH.D.</p> <p>Number, street, and room or suite no. If a P.O. box, see instructions. 4200 MALSARY ROAD</p> <p>City or town, state or province, country, and ZIP or foreign postal code BLUE ASH, OH 45242-5510</p>	<p>D Employer identification number (Employees' trust, see instructions.) 31-1351011</p> <p>E Unrelated business activity code (See instructions.) 900099</p>
--	---------------------	---	---

<p>C Book value of all assets at end of year 57,637,492.</p>	<p>F Group exemption number (See instructions.) ▶</p> <p>G Check organization type ▶ <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust</p>
---	--

H Enter the number of the organization's unrelated trades or businesses. ▶ 1 Describe the only (or first) unrelated trade or business here ▶ **SEE STATEMENT 14**. If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V.

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No
 If "Yes," enter the name and identifying number of the parent corporation. ▶

J The books are in care of ▶ **CARTER F. RANDOLPH** Telephone number ▶ **513-891-7144**

Part I Unrelated Trade or Business Income	(A) Income	(B) Expenses	(C) Net
1a Gross receipts or sales			
b Less returns and allowances			
c Balance	1c		
2 Cost of goods sold (Schedule A, line 7)	2		
3 Gross profit. Subtract line 2 from line 1c	3		
4a Capital gain net income (attach Schedule D)	4a		
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b		
c Capital loss deduction for trusts	4c		
5 Income (loss) from a partnership or an S corporation (attach statement)	5		
6 Rent income (Schedule C)	6		
7 Unrelated debt-financed income (Schedule E)	7		
8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F)	8		
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	9		
10 Exploited exempt activity income (Schedule I)	10		
11 Advertising income (Schedule J)	11		
12 Other income (See instructions; attach schedule)	12		
13 Total. Combine lines 3 through 12	13	0.	

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Deductions must be directly connected with the unrelated business income.)			
14 Compensation of officers, directors, and trustees (Schedule K)			14
15 Salaries and wages			15
16 Repairs and maintenance			16
17 Bad debts			17
18 Interest (attach schedule) (see instructions)			18
19 Taxes and licenses			19
20 Depreciation (attach Form 4562)	20		
21 Less depreciation claimed on Schedule A and elsewhere on return	21a		21b
22 Depletion			22
23 Contributions to deferred compensation plans			23
24 Employee benefit programs			24
25 Excess exempt expenses (Schedule I)			25
26 Excess readership costs (Schedule J)			26
27 Other deductions (attach schedule)			27
28 Total deductions. Add lines 14 through 27			28 0.
29 Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13			29 0.
30 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)			30 0.
31 Unrelated business taxable income. Subtract line 30 from line 29			31 0.

Part III Total Unrelated Business Taxable Income	
32	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions) 0.
33	Amounts paid for disallowed fringes 0.
34	Charitable contributions (see instructions for limitation rules) 0.
35	Total unrelated business taxable income before pre-2018 NOLs and specific deduction. Subtract line 34 from the sum of lines 32 and 33 0.
36	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions) 0.
37	Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35 1,000.
38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions) 0.
39	Unrelated business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37, enter the smaller of zero or line 37 0.

Part IV Tax Computation	
40	Organizations Taxable as Corporations. Multiply line 39 by 21% (0.21) 0.
41	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 39 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041) 41
42	Proxy tax. See instructions 42
43	Alternative minimum tax (trusts only) 43
44	Tax on Noncompliant Facility Income. See instructions 44
45	Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies 0.

Part V Tax and Payments	
46a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 46a
b	Other credits (see instructions) 46b
c	General business credit. Attach Form 3800 46c
d	Credit for prior year minimum tax (attach Form 8801 or 8827) 46d
e	Total credits. Add lines 46a through 46d 46e
47	Subtract line 46e from line 45 0.
48	Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach schedule) 48
49	Total tax. Add lines 47 and 48 (see instructions) 0.
50	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3 0.
51a	Payments: A 2018 overpayment credited to 2019 1,478.
b	2019 estimated tax payments 51b
c	Tax deposited with Form 8868 51c
d	Foreign organizations: Tax paid or withheld at source (see instructions) 51d
e	Backup withholding (see instructions) 51e
f	Credit for small employer health insurance premiums (attach Form 8941) 51f
g	Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other Total 51g
52	Total payments. Add lines 51a through 51g 1,478.
53	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/> 53
54	Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed 54
55	Overpayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid 1,478.
56	Enter the amount of line 55 you want: Credited to 2020 estimated tax 1,478. Refunded 0.

Part VI Statements Regarding Certain Activities and Other Information (see instructions)		Yes	No
57	At any time during the 2019 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here ▶		X
58	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file.		X
59	Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$		

Sign Here 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.

Paid Preparer Use Only	Print/Type preparer's name GREGORY A. DEYHLE	Preparer's signature	Date 06/04/20	Check <input type="checkbox"/> if self-employed	PTIN P00341594
	Firm's name ▶ MELLOTT & MELLOTT, P.L.L.	Firm's address ▶ 312 WALNUT STREET - SUITE 2500 CINCINNATI, OH 45202-4025		Firm's EIN ▶ 31-6063298	Phone no. 513-241-2940

May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

FORM 990-T DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED STATEMENT 14
BUSINESS ACTIVITY

INVESTMENT IN PUBLICLY TRADED PARTNERSHIP

TO FORM 990-T, PAGE 1

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions. L & L NIPPERT CHARITABLE FOUNDATION INC ATTN: CARTER F. RANDOLPH, PH.D.	Taxpayer identification number (TIN) 31-1351011
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 4200 MALSARY ROAD	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. BLUE ASH, OH 45242-5510	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 | 4

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

CARTER F. RANDOLPH

- The books are in the care of ▶ **4200 MALSARY ROAD - CINCINNATI, OH 45242**
Telephone No. ▶ **513-891-7144** Fax No. ▶ **513-792-9199**
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **NOVEMBER 16, 2020**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ calendar year **2019** or
▶ tax year beginning _____, and ending _____.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions. L & L NIPPERT CHARITABLE FOUNDATION INC ATTN: CARTER F. RANDOLPH, PH.D.	Taxpayer identification number (TIN) 31-1351011
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 4200 MALSARY ROAD	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. BLUE ASH, OH 45242-5510	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 | 7

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

CARTER F. RANDOLPH

- The books are in the care of ▶ **4200 MALSARY ROAD - CINCINNATI, OH 45242**
Telephone No. ▶ **513-891-7144** Fax No. ▶ **513-792-9199**
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **NOVEMBER 16, 2020**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ calendar year **2019** or
▶ tax year beginning _____, and ending _____.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$ 0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$ 1,478.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$ 0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.