EXTENDED TO NOVEMBER 15, 20
Return of Private Foundation

Form 990-P

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047 Open to Public Inspection

For calendar year 2022 or tax year beginning		, and ending	1.000	- 16 C P
Name of foundation	. 200		A Employer identification	number
SPORTY'S FOUNDATION			20-8417126	al car with many
Number and street (or P.O. box number if mail is not delivered to street		Room/suite	B Telephone number	News of the Control
CLERMONT COUNTY/SPORTY'S			513-735-91	00
City or town, state or province, country, and ZIP or foreign BATAVIA, OH $45103-9747$	postal code		C If exemption application is po	ending, check here
G Check all that apply: Initial return	Initial return of a for	rmer public charity	D 1. Foreign organizations	, check here
Final return	Amended return		2 5	-1'1b-050/ b-1
Address change	Name change		Foreign organizations me check here and attach co	mputation
H Check type of organization: X Section 501(c)(3)			E If private foundation stat	
Section 4947(a)(1) nonexempt charitable trust			under section 507(b)(1)	(A), check here
Fair market value of all assets at end of year J Accoun		Accrual	F If the foundation is in a 6	
(from Part II, col. (c), line 16)	Other (specify)	e /	under section 507(b)(1)	(B), check here
Part Analysis of Revenue and Expenses			(a) Adiusted set	(d) Disbursements
(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
Contributions, gifts, grants, etc., received				(odoli pasis Olliy)
2 Check if the foundation is not required to attach Sch. B	20,000			No. Charles Law St.
3 Interest on savings and temporary cash investments	1,358.	1,358.	1,358.	STATEMENT 1
4 Dividends and interest from securities				
5a Gross rents				
b Net rental income or (loss)			Control of the Contro	Andrew Trans
6a Net gain or (loss) from sale of assets not on line 10	. 100,042		THE STATE OF STATE	
Gross sales price for all assets on line 6a				
b Gross sales price for all assets on line 10 7 Capital gain net income (from Part IV, line 2)		0.		
8 Net short-term capital gain			0.	
9 Income modifications Gross sales less returns		and the last	St. In Sukon service on Jack	Charles Links in 172
10a and allowances				
b Less: Cost of goods sold				
c Gross profit or (loss) 11 Other income				
12 Total. Add lines 1 through 11	27,413.	1,358.	1,358.	
13 Compensation of officers, directors, trustees, etc.		0.	0.	0.
14 Other employee salaries and wages			15 r uler weed	edicación is la
15 Pension plans, employee benefits			" (f) 3g (f)(g)	office Don All San E
16a Legal fees b Accounting fees c Other professional fees		1 . p = 1 = 1 = 1 = 1		Maddallor et 1
b Accounting fees			VITA PROS TITO	opaka baya. 14
			THING BERTH	
17 Interest		1-1-1-1	cally hear about	AND THE RESERVE AND TO
18 Taxes STMT 2	1.	250 m	<u> </u>	groupe, were the St. O.
19 Depreciation and depletion	1000		1.4 11 27 7.52 30	是是100000000000000000000000000000000000
20 Occupancy				
21 Travel, conferences, and meetings 22 Printing and publications			STATE OF STREET	51 THE P. STORY
22 Printing and publications 23 Other expenses	18.01.616	TO I LA TON O		
17 Interest 18 Taxes STMT 2 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23	ç	6 1 p 5 1 p 5 1 p 5	Department	Windows and the
expenses. Add lines 13 through 23	1.	0.	0.	0.
25 Contributions, gifts, grants paid	06 500		The second of the second of	86,500.
26 Total expenses and disbursements.			Salar William	remain termina differen
Add lines 24 and 25	86,501.	0.	0.	86,500.
27 Subtract line 26 from line 12:	- 1100000000000000000000000000000000000		Non train	Panil Innacional Z
a Excess of revenue over expenses and disbursements	-59,088.			
b Net investment income (if negative, enter -0-)		1,358.		
c Adjusted net income (if negative, enter -0-)			1,358.	

223501 12-06-22 LHA For Paperwork Reduction Act Notice, see instructions.

Б		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only.	Beginning of year	End o	
	art	column should be for end-of-year amounts only.	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
		Savings and temporary cash investments	340,506.	281,418.	281,418.
		Accounts receivable			
		Less; allowance for doubtful accounts			
	4	Pledges receivable			
		Less: allowance for doubtful accounts			
	5	Grants receivable			
		Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts	And And District an employed and an employed district a sequence.		And the state of t
s	8	Inventories for sale or use	8,480.	8,480.	8,480.
Assets		Prepaid expenses and deferred charges	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•	-
As		Investments - U.S. and state government obligations			
	i i	Investments - corporate stock			
		Investments - corporate bonds			
	l ''	Investments - land, buildings, and equipment: basis			
	12	Less: accumulated depreciation			
		Investments - other Land, buildings, and equipment; basis			
	14				
	45	Less: accumulated depreciation		<u> </u>	
		Other assets (describe			
	10	Total assets (to be completed by all filers - see the	348,986.	289,898.	289,898.
-	47	instructions. Also, see page 1, item I)	340,300.	200,000.	205,050.
	1	Accounts payable and accrued expenses			
	18	Grants payable			
ies		Deferred revenue			
ië E	20	Loans from officers, directors, trustees, and other disqualified persons			The same of the sa
Liabilities	21	Mortgages and other notes payable			
	22	Other liabilities (describe)			
	١,,	T-A-1 P-1-194 (- dd P 47 4b 00)	0.	0.	
	23	Total liabilities (add lines 17 through 22)	V •	V •	
		Foundations that follow FASB ASC 958, check here X			
Balances		and complete lines 24, 25, 29, and 30.	348,986.	289,898.	
<u>a</u>	24	Net assets without donor restrictions	340,300.	209,090.	
	25	Net assets with donor restrictions			
пd		Foundations that do not follow FASB ASC 958, check here			
Func	١	and complete lines 26 through 30.			
s or	26	Capital stock, trust principal, or current funds			
Assets	27	Paid-in or capital surplus, or land, bldg., and equipment fund			100 PM 100 PM
As	28	Retained earnings, accumulated income, endowment, or other funds	349 096	200 000	
Net	29	Total net assets or fund balances	348,986.	289,898.	
_	١.,	T to I that the condensation of the decision of	348,986.	289,898.	
_	30	Total liabilities and net assets/fund balances		209,090.	
P	art	Analysis of Changes in Net Assets or Fund E	Balances		
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	29		
		st agree with end-of-year figure reported on prior year's return)		1	348,986.
2		amount from Part I, line 27a			-59,088.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	289,898.
5	Decr	eases not included in line 2 (itemize)		5	0.
6	<u>To</u> ta	net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 29	6	289,898.
					Form 990-PF (2022)

2-story brick warehouse; or common stook, 200 shs. MLC Co.) Co. D. Donation D.	Part IV Ca	apital Gains a	and Losses for Tax on Ir	nvestment	ncome		.,			-
NONE	(a)	List and describe 2-story brick wa	the kind(s) of property sold (for exal rehouse; or common stock, 200 sha	mple, real estate s. MLC Co.)	•	(b) }	How acquired - Purchase - Donation	(c) Date a	acquired ay, yr.)	(d) Date sold (mo., day, yr.)
(e) Gross sales price (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (ce) plus (f) minus (g)) (a)	1a									
(e) Gross sales price (f) Depreciation allowed (or allowable) (g) Cost or other basis plus expense of sale ((ii) plus (f) minus (g)) a	b	NO	NE							
e (e) Gross sales price (f) Depreciation allowed (or allowable) (g) Cost or other basis plus expense of sale (e) plus (f) minus (g)) a										
(e) Gross sales price (f) Depreciation allowed (or allowable) (pus expense of sale (le) plus (f) minus (g)) a b c d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/3 1/69. (i) FMV as of 12/3 1/69 (j) Adjusted basis as of 12/3 1/69 (k) Excess of col. (i) over col. (j), if any c 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 (if (loss)), enter -0- in Part I, line 7 (if (loss)), enter -0- in Part I, line 7 (if (loss)), enter -0- in Part I, line 7 (if (loss)), enter -0- in Part I, line 7 (if (loss)), enter -0- in Part I, line 7 (if (loss)), enter -0- in Part I, line 7 (if (loss)), enter -0- in Part I, line 8 (if (loss)), enter -0- in Part I, line 7 (if (loss)), enter -0- in Part I, line 8 (if (loss)), enter -0- in Part I, l	***************************************									
(e) plus (f) minus (g)) a b Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. (i) FMV as of 12/31/69 (i) Adjusted basis (k) Excess of col. (i) col. (ii), bit not less than -0-) or Losses (from col. (iii)) a (ii) FMV as of 12/31/69 (iii) Adjusted basis (k) Excess of col. (i) col. (iii), bit not less than -0-) or Losses (from col. (iii)) a d d d d f (g) Adjusted basis (k) Excess of col. (i) col. (iii), bit not less than -0-) or Losses (from col. (iii)) a b Graphal gain net income or (net capital loss) (if gain, also enter in Part I, line 7 2 Capital gain net income or (net capital loss) (if gain, also enter in Part I, line 7 2 Capital gain net income or (net capital loss) (if gain, also enter in Part I, line 7 3 Net short-term capital gain or (loss) as defined in section 12/22(5) and (6); If gain, also enter in Part I, line 8 (iii) Example operating foundations described in section 12/22(5) and (6); Bart V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see instructions) 1a Exempt operating foundations described in section 4940(a), 4940(b), or 4948 - see instructions) 1a Exempt operating foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b) 2 Tax under section 511 (domnestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 6 Crotist-Payments: a 2022 estimated tax payments and 2021 overpayment or estimated to 2022 6 Each or	е		10 D	T /->0+			***************************************	(5) (2)	ain ar (laas)	***************************************
b	(e) Gross	sales price		(g) Cost plus ex	or other bas bense of sale	e e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. (i) FMV as of 12/31/69 (j) Adjusted basis (k) Excess of col. (i) col. (ii), but not less than -0-) or Losses (from col. (iii)) a	a									
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Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. (i) FMV as of 12/31/69 (ii) Adjusted basis (N) Excess of cot. (i) over cot. (j), if any cot. (so., but not less than -0-) or Losses (from cot. (h)) a b										
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(i) FMV as of 12/31/69 (ii) Adjusted basis as of 12/31/69 (iv) Adjusted basis and 12/40/69 (iv) Adjusted basis as of 12/31/69 (iv) Adjusted basis as of 12/3		v for assets showin	g gain in column (h) and owned by	the foundation of	n 12/31/69.		<u></u>	(I) Gains (C	ol (h) nain	minus
(I) FMV as of 12/31/69 as of 12/31/69 over col. (I), if any Losses (Infinit col. (III)) a b	- Complete on	y 101 000010 0110 1111					C	ol. (k), but r	not less that	n -0-) or
b c d d d d d d d d d d d d d d d d d d	(i) FMV as	of 12/31/69						Losses	(from col. (h))
b c d d d d d d d d d d d d d d d d d d	a									
d c 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 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8 Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see instructions) 1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary - see instructions) b All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) 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-) 3 Add lines 1 and 2 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax paid with application for extension of time to file (Form 8868). 6 Credits/Payments: a 2022 estimated tax payments and 2021 overpayment credited to 2022 6 B Cortice and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be: Credited to 2023 estimated tax Refunded										
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3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):						}				
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Part						٦				
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enter 4% (0.04) 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-) 3 Add lines 1 and 2 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 6 Credits/Payments: a 2022 estimated tax payments and 2021 overpayment credited to 2022 6 b Exempt foreign organizations - tax withheld at source 6 c C Tax paid with application for extension of time to file (Form 8868) 6 c O • 6 b O • 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be: Credited to 2023 estimated tax Refunded								1		19.
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5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 6 Credits/Payments: a 2022 estimated tax payments and 2021 overpayment credited to 2022 b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be: Credited to 2023 estimated tax Refunded		************								
6 Credits/Payments: a 2022 estimated tax payments and 2021 overpayment credited to 2022 b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be; Credited to 2023 estimated tax Refunded 11	•							··· ⊢		
a 2022 estimated tax payments and 2021 overpayment credited to 2022 b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld Total credits and payments. Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than 7, enter amount owed Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be; Credited to 2023 estimated tax Refunded 10			me. Subtract line 4 from line 3. If Ze	ero or iess, enter	-0-					19.
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 5d 0. 7 Total credits and payments. Add lines 6a through 6d 7 0. 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8 0. 9 Tax due. If the total of lines 5 and 8 is more than 7, enter amount owed 9 19. 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Enter the amount of line 10 to be; Credited to 2023 estimated tax Refunded 11			and 2021 avarnayment credited to 2	022	ا دء ا			n.l		
c Tax paid with application for extension of time to file (Form 8868) 6c 0. d Backup withholding erroneously withheld 7 0. 7 Total credits and payments. Add lines 6a through 6d 7 0. 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8 0. 9 Tax due. If the total of lines 5 and 8 is more than 7, enter amount owed 9 1.9. 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Enter the amount of line 10 to be; Credited to 2023 estimated tax Refunded 11				022						
d Backup withholding erroneously withheld 6d 0. 7 Total credits and payments. Add lines 6a through 6d 7 0. 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8 0. 9 Tax due. If the total of lines 5 and 8 is more than 7, enter amount owed 9 1.9. 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 2023 estimated tax Refunded 11		• •	***************************************							
7 Total credits and payments. Add lines 6a through 6d 7 0. 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8 0. 9 Tax due. If the total of lines 5 and 8 is more than 7, enter amount owed 9 1.9. 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 2023 estimated tax Refunded 11										
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than 7, enter amount owed 9 19 19. 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Enter the amount of line 10 to be; Credited to 2023 estimated tax Refunded 11								7	Name to Complete and Complete at	0.
9 Tax due. If the total of lines 5 and 8 is more than 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be: Credited to 2023 estimated tax 12 Refunded 13	8 Enter any p	enalty for underpay	ment of estimated tax. Check here [if Form 22	220 is attach	ied		l o		
11 Enter the amount of line 10 to be: Credited to 2023 estimated tax Refunded 11								9		19.
					erpaid					
	11 Enter the an	nount of line 10 to I	pe: Credited to 2023 estimated tax				Refund	ied 11		- 000 DF (2000)

Pa	int VI-A	Statements Regarding Activities			
1a		tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	
	any politica	al campaign?	1a		X
b	Did it spen	d more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		X
	If the answ	er is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
		by the foundation in connection with the activities.			
C	Did the fou	ndation file Form 1120-POL for this year?	10		X
Ó	I Enter the a	mount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the	foundation. \$ 0 . (2) On foundation managers. \$ 0 .			
€	Enter the re	eimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers.	\$0.			
2	Has the for	ındation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," att	ach a detailed description of the activities.			
3	Has the for	ındation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
	bylaws, or	other similar instruments? If "Yes," attach a conformed copy of the changes	3	2252550000000	Х
48	Did the fou	ndation have unrelated business gross income of \$1,000 or more during the year?	4a		X
		s it filed a tax return on Form 990-T for this year? N/A	4b		
		a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
		ach the statement required by General Instruction T.			
6	Are the req	uirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By langu	age in the governing instrument, or			
		legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			
		he governing instrument?	6	Х	Contraction (Agency)
7	Did the fou	ndation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV	7	X	
8a	Enter the s	tates to which the foundation reports or with which it is registered. See instructions.			
	OH				
b	If the answ	er is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
	of each sta	te as required by General Instruction G? If "No," attach explanation	8b	Х	
9		dation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			
	year 2022	or the tax year beginning in 2022? See the instructions for Part XIII. If "Yes," complete Part XIII	9	Х	
10		rsons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	X	
		during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512	2(b)(13)? If "Yes," attach schedule. See instructions	11		Х
12		ndation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," atta	ach statement. See instructions	12		X
13	Did the fou	ndation comply with the public inspection requirements for its annual returns and exemption application?	13		Х
	Website ad	dress SPORTYSFOUNDATION.ORG			
14	The books	are in care of DANIEL M. ROBINSON Telephone no. 513-73	5-9	100	
	Located at	2001 SPORTY'S DRIVE, BATAVIA, OH ZIP+4 45			
15	Section 49	47(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			\Box
		he amount of tax-exempt interest received or accrued during the year		/A	
16		during calendar year 2022, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities,	or other financial account in a foreign country?	16		Х
	See the ins	tructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign cou				
		For	m 99 0)-PF	(2022)

Part VI-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?	1a(1)		Х
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
a disqualified person?	1a(2)		X
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1a(3)		X
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1a(4)		X
(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)?	1a(5)	110100111111111111111111111111111111111	Х
(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.)	1a(6)		X
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 N/A	1b	-1.7170-017-017	
c Organizations relying on a current notice regarding disaster assistance, check here			
d 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 2022?	1d		Х
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 2022, did the foundation have any undistributed income (Part XII, lines			
6d and 6e) for tax year(s) beginning before 2022?	2a		X
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.) N/A	2b		İ
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
during the year?	3a		X
b If "Yes," did it have excess business holdings in 2022 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 2022.)	3b		
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 2022?	4b		X

Part VI-B Statements Regarding Activities for which	Form 4/20 May be F	tequirea (continu	iea)			
5a During the year, did the foundation pay or incur any amount to:					Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section				5a(1)		Х
(2) Influence the outcome of any specific public election (see section 4955);						
any voter registration drive?				5a(2)	-	X
(3) Provide a grant to an individual for travel, study, or other similar purpose				5a(3)		X
(4) Provide a grant to an organization other than a charitable, etc., organization 4945(d)(4)(A)? See instructions				5a(4)		Х
(5) Provide for any purpose other than religious, charitable, scientific, literary				04(1)		
the prevention of cruelty to children or animals?				5a(5)		Х
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify ur	nder the exceptions described i	n Regulations				
section 53.4945 or in a current notice regarding disaster assistance? See inst	tructions		N/A	5b		and an arrange
c Organizations relying on a current notice regarding disaster assistance, check						
d If the answer is "Yes" to question 5a(4), does the foundation claim exemption			/-	5d		
expenditure responsibility for the grant? N/A						
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						77
a personal benefit contract?				6a	ļ	X
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?			6b		A
If "Yes" to 6b, file Form 8870.						77
7a At any time during the tax year, was the foundation a party to a prohibited tax				7a	 	X
b If "Yes," did the foundation receive any proceeds or have any net income attrib			N/A	7b		20 (6:30 miles
8 Is the foundation subject to the section 4960 tax on payment(s) of more than	\$1,000,000 in remuneration or	•				77
excess parachute payment(s) during the year?	1 P 11 18			8		X
Part VII Information About Officers, Directors, Trus Paid Employees, and Contractors	tees, Foundation Ma	nagers, Higniy	/			
1 List all officers, directors, trustees, and foundation managers and	their compensation.					
	(b) Title, and average	(c) Compensation	(d) Contributions employee benefit pl and deferred	to	(e) Exp	ense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	" °	allowa	nces
MICHAEL WOLF	PRESIDENT		, , , , , , , , , , , , , , , , , , , ,			
2001 SPORTY'S DRIVE	1					
BATAVIA, OH 45103	0.00	0.	(0.		0.
MARK WIESENHAHN	VICE PRESIDEN	T				
2001 SPORTY'S DRIVE						
BATAVIA, OH 45103	0.00	0.	(0.		0.
JOHN T ZIMMERMAN	VICE PRESIDEN	r				
2001 SPORTY'S DRIVE						
BATAVIA, OH 45103	0.00	0.		0.		0.
DANIEL M ROBINSON	VP, SECRETARY	& TREASU	RER			
2001 SPORTY'S DRIVE						
BATAVIA, OH 45103	0.00	0.		0.		0.
2 Compensation of five highest-paid employees (other than those in		enter "NONE."	C/A		=	
(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 employee benefit pl and deferred compensation	to ans a	(e) Exp account allowa	ense , other nces
NONE	·					
Total number of other employees paid over \$50,000						0
			Fo	orm 99	0-PF	(2022)

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) C NONE	Compensation
	Compensation
NONE	
Total number of others receiving over \$50,000 for professional services Part VIII-A Summary of Direct Charitable Activities	0
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.	nses
1 PROVIDE FINANCIAL ASSISTANCE TO CHARITABLE ORGANIZATIONS THROUGH DIRECT CONTRIBUTIONS TO HELP PROMOTE AVIATION.	0.
2	
3	J
4	
Part VIII-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. Amou	unt
1 N/A	
2	
All other program-related investments. See instructions.	
Total. Add lines 1 through 3	0.

P	art IX Minimum Investment Return (All domestic foundation	s must complete this p	art. Foreign fo	undations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitat	ole, etc., purposes;			
	Average monthly fair market value of securities			1a	0.
	Average of monthly cash balances			1b	295,077.
c	Fair market value of all other assets (see instructions)			1c	
	Total (add lines 1a, b, and c)			1d	295,077.
	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	295,077.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater a	amount, see instructions)		4	4,426.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3		i	5	290,651.
6	Minimum investment return. Enter 5% (0.05) of line 5			6	14,533.
P	foreign organizations, check here X and do not complete this pa	3) and (j)(5) private operati		and certain	
1	Minimum investment return from Part IX, line 6			1	
2a	Tax on investment income for 2022 from Part V, line 5	2a			
b	Income tax for 2022. (This does not include the tax from Part V.)	2b			
C	Add lines 2a and 2b			2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	www.
4	Recoveries of amounts treated as qualifying distributions			4	***
5	Add lines 3 and 4			5	
6	Deduction from distributable amount (see instructions)			6	
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Par	t XII, line 1		7	
P	art XI Qualifying Distributions (see instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., pu				
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26			1a	86,500.
b	Program-related investments - total from Part VIII-B			1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charita	able, 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 XII, line 4			4	86,500.
					Form 990-PF (2022)

Part XII Undistributed Income (s	see manuchons)	N/A		
	(a) Corpus	(b) Years prior to 2021	(c) 2021	(d) 2022
1 Distributable amount for 2022 from Part X,		100		
line 7				
2 Undistributed income, if any, as of the end of 2022:				
a Enter amount for 2021 only				
b Total for prior years:				
Excess distributions carryover, if any, to 2022:				
a From 2017				
b From 2018				
c From 2019				
d From 2020				
eFrom 2021				The state of the state of
f Total of lines 3a through e				Section 1
Qualifying distributions for 2022 from				
Part XI, line 4: \$				
a Applied to 2021, but not more than line 2a				
b Applied to undistributed income of prior				
years (Election required - see instructions)				20,000
c Treated as distributions out of corpus				
(Election required - see instructions)				
d Applied to 2022 distributable amount				
e Remaining amount distributed out of corpus				
Excess distributions carryover applied to 2022 (If an amount appears in column (d), the same amount must be shown in column (a),)				-
Enter the net total of each column as indicated below:				
3 Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				ed as a magnitude of
b Prior years' undistributed income. Subtract				
line 4b from line 2b			- 14 (A)	
e Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable				-000 -00
amount - see instructions	The state of the s			assume the second
e Undistributed income for 2021. Subtract line 4a from line 2a. Taxable amount - see instr				
f Undistributed income for 2022. Subtract				
lines 4d and 5 from line 1. This amount must be distributed in 2023				
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)				
Excess distributions carryover from 2017				
not applied on line 5 or line 7				
Excess distributions carryover to 2023.				
Subtract lines 7 and 8 from line 6a				
Analysis of line 9:				
a Excess from 2018		an in San San San		
b Excess from 2019				
c Excess from 2020				
d Excess from 2021			10 m	4.00
e Excess from 2022				

Part XIII Private Operating Fo	oundations (see inst	tructions and Part VI-A	A, question 9)		
1 a If the foundation has received a ruling or	determination letter that i	t is a private operating			
foundation, and the ruling is effective for	2022, enter the date of th	e ruling		/07/07	
b Check box to indicate whether the found	ation is a private operating	foundation described in	sectionX	∫ 4942(j)(3) or	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2022	(b) 2021	(c) 2020	(d) 2019	(e) Total
investment return from Part IX for					
each year listed	1,358.	44.	456		4,172.
b 85% (0.85) of line 2a	1,154.	37.	388	. 1,967.	3,546.
c Qualifying distributions from Part XI,					
line 4, for each year listed	86,500.	113,100.	161,000	. 218,632.	579,232.
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities	0.	0.	0	. 0.	0.
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c	86,500.	113,100.	161,000	. 218,632.	579,232.
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					0.
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0.
b "Endowment" alternative test - enter					
2/3 of minimum investment return					
shown in Part IX, line 6, for each year listed	9,689.	11,046.	10,755	. 11,147.	42,637.
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)					0.
(2) Support from general public					
` and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					0.
(3) Largest amount of support from			****		
an exempt organization					0.
(4) Gross investment income					0.
Part XIV Supplementary Info	rmation (Complet	te this part only	f the foundatio	n had \$5,000 or m	
at any time during t				, ,	
1 Information Regarding Foundation		<u> </u>			
a List any managers of the foundation wh		han 2% of the total contr	ibutions received by th	e foundation before the clo	se of any tax
year (but only if they have contributed n	nore than \$5,000). (See se	ection 507(d)(2).)	is a notice to contact by the		
NONE					
b List any managers of the foundation wh	o own 10% or more of the	stock of a corporation (or an equally large por	tion of the ownership of a p	artnership or
other entity) of which the foundation ha			or arroquany rango por		••••••••••••••••••••••••••••••••••••••
NONE					
2 Information Regarding Contribut	ion, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms:		
				es not accept unsolicited re	auests for funds. If
the foundation makes gifts, grants, etc.,					
a The name, address, and telephone num					
SPORTY'S FOUNDATION,					
2001 SPORTY'S DRIVE,					
b The form in which applications should be			ould include:		
INITIAL WRITTEN REQU		•			
c Any submission deadlines:					
N/A					
d Any restrictions or limitations on award	s, such as by geographica	l areas, charitable fields,	kinds of institutions, or	other factors:	
N/A					

Form **990-PF** (2022)

Part XIV Supplementary Information	(continued)			, and a second
3 Grants and Contributions Paid During the Y		Payment		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	oona ibaaon	
a Paid during the year				
BOY SCOUTS OF AMERICA	NONE	PUBLIC CHARITY	EXPLORING AVIATION	
1325 WEST WALNUT HILL LANE			SCHOLARSHIP, HURRICANE	
IRVING, TX 75015			HARVEY RELIEF	30,000.
DAN BEARD COUNCIL	NONE	PUBLIC CHARITY	SCHOLARSHIP	
10078 READING ROAD				
CINCINNATI, OH 45241				6,500.
EASTERN CINCINNATI AVIATION, INC.	NONE	PUBLIC CHARITY	SCHOLARSHIP	
2001 SPORTY'S DR				
BATAVIA, OH 45103				19,000.
FLYING FOUNDATION INC.	NONE	EDUCATIONAL	DONATION	
CLERMONT COUNTY/SPORTY'S AIRPORT		INSTITUTION		
BATAVIA, OH 45103				3,500.
MCAIR AVIATION 11945 AIRPORT WAY	NONE	PUBLIC CHARITY	SCHOLARSHIP	
BROOMFIELD, CO 80021				5,000.
Total SEE COI	TINUATION SHEE	T(S)	3a	86,500.
b Approved for future payment				
	, i			
NONE				
- Company of the Comp				
Total			3b	0.

Part XV-A	Analysis of I	ncome-Producing Activities
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Enter gross amounts unless otherwise indicated.	Unrelated business income			ded by section 512, 513, or 514	(e)
g. 222 a a a a a	(a)	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue;	Business code	Amount	sion code	Amount	function income
a					
h					
C					
4					
e			1		
f			1		
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	1,358.	
4 Dividends and interest from securities			14		
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		
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
C					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0	•	1,358.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	1,358
(See worksheet in line 13 instructions to verify calculations.)					

Line No.	the foundation's exempt purposes (other than by providing funds for such purposes).						
	Form 000 PE /0000						

Form **990-PF** (2022)

		RTY'S FOU	Control of the Contro		. He	20-84		Page 13
Part X			ansfers to and	Transactions a	nd Relationsh	ps With Nonch	aritable	
	Exempt Or		20.720.			504/3	l Va	s No
	the organization directly or				n described in section	n 50 I(c)	10	5 140
	er than section 501(c)(3) on sfers from the reporting for							
							1a(1)	X
	Cash Other accets						4 (0)	X
	Other assetser transactions;							W GYE
	Sales of assets to a nonch	naritable exempt orga	nization				1b(1)	х
	Purchases of assets from							Х
	Rental of facilities, equipm							Х
	Reimbursement arrangen						10 0 10	X
10.00	Loans or loan guarantees						7000 CT0000	Х
	Performance of services of							Х
2.2	ring of facilities, equipmen							X
d If th	e answer to any of the abo	ve is "Yes," complete	the following schedul	e. Column (b) should alv	vays show the fair m	arket value of the good	s, other assets,	
or s	ervices given by the report	ting foundation. If the	foundation received I	ess than fair market valu	e in any transaction	or sharing arrangemen	t, show in	
colu	ımn (d) the value of the go		services received.		0			
(a)Line no	b. (b) Amount involved	d (c) Nan	ne of noncharitable ex	empt organization	(d) Description	of transfers, transactions, a	nd sharing arrange	ements
			N/A					
	i i				1			
				-				
		1						
			,					
2a Is th	ne foundation directly or in	directly affiliated with	, or related to, one or	more tax-exempt organi	zations described			
	ection 501(c) (other than s						Yes	X No
	es," complete the following	g schedule.						
	(a) Name	of organization	(b) Type of organization		c) Description of relation	onship	
	N/	'A						
					1			
			War			hart for boundaries		
o:	Under penalties of perjury, I and belief, it is true, correct,						May the IRS discu	uss this
Sign Here	1	1570 Un	1017 -	1	mp ma cup m	ъ	shown below? Se	e instr.
Here	Cignature of officer or the	1111 9)		Data	TREASURE	<u>K</u>	X Yes	No
	Signature of officer or the Print Type prepare	1/1/1/	Preparer's sign	Date	Date	Check if PT	IN	
	CHRISTOPH	No.	i Toparer 3 Sign		- 100.00	self- employed	1 × 11 × 12 × 1	
Paid	GUIDUGLI		CHRISTO	PHER GUIDU			0141075	54
Prepa				TILL GOIDO		Firm's EIN 31-1		
Use C						02 2	,	
es as = 1,2		SUITE 200	809 WRIGH	T'S SUMMIT	PARKWAY			

FORT WRIGHT, KY 41011

Form **990-PF** (2022)

Phone no. 859-331-1717

Part XIV Supplementary Informati	'S FOUNDATION		20-841	
3 Grants and Contributions Paid During th				*******
Recipient	If recipient is an individual,		_	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (nome of business)	or substantial contributor	recipient		
WEDDEN CHARACTE	TOWN.			
TEFFEN, GUSTAVE LERMONT COUNTY/SPORTY'S AIRPORT	NONE	INDIVIDUAL	A RECIPIENT OF THE	
BATAVIA, OH 45103			ASSOCATION FOR R	
SAIAVIA, OR 45103			COLINS WRITING PRIZE FOR YOUNG PILOTS	2,50
			TOW TOOMS TILDID	2,30
NIVERSITY OF CINCINNATI	NONE	EDUCATIONAL	AVIATION SCHOLARSHIPS	
600 CLIFTON AVE		INSTITUTION		
INCINNATI, OH 45241				20,00
*				
		1 1/4		
		\$ a.c.		

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990 or Form 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

Name of the organization **Employer identification number** SPORTY'S FOUNDATION 20-8417126 Organization type (check one): Filers of: Section: 501(c)() (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc.,

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year _______\$

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

Schedule B (Form 990) (2022)

Employer identification number

SPORTY'S FOUNDATION

20-8417126

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	O'MALEY FOUNDATION 4536 AIRPORT RD	\$5,000.	Person X Payroll
	CINCINNATI, OH 45226		noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	SANDRA SHEVERS		Person X Payroll
	1172 RIVERSIDE DRIVE CINCINNATI, OH 45202	\$13,846.	Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Occupate Part II for noncash contributions.)

Name of organization

Employer identification number

SPORTY'S FOUNDATION

20-8417126

Part II	Noncash Property (see instructions). Use duplicate copies of Part II it	f additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		- - - - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		- - - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		- - - - - - - - -	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		- - - - - - - - -	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		- - - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		- - - - - - - - - -	1

Name of organization

Employer identification number

SPORTY'	S FOUNDATION			20-8417126	
Part III E	xclusively religious, charitable, etc., contribution om any one contributor. Complete columns (a) in completing Part III, enter the total of exclusively religious, charts se duplicate copies of Part III if additional s	through (e) and the following line entry. paritable, etc., contributions of \$1,000 or les s	For organizations	that total more than \$1,000 for the yea	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held	
		(e) Transfer of gift			
	Transferee's name, address, ar		Relationship of tra	nsferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held	
	Transferee's name, address, ar	(e) Transfer of gift	Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	eription of how gift is held	
_		(e) Transfer of gift			
-	Transferee's name, address, an	d ZIP + 4	Relationship of tra	nsferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held	
		(e) Transfer of gift			
	Transferee's name, address, an	•	Relationship of tra	nsferor to transferee	
_					

FORM 990-PF INTEREST ON SAV	INGS AND TE	MPORARY	CASH I	NVESTMENTS	STATEMENT	1
SOURCE	(A) REVENUE PER BOOKS			(B) NVESTMENT NCOME	(C) ADJUSTED NET INCOME	
INTEREST INCOME		1,358.	(1)	1,358.	1,3	58.
TOTAL TO PART I, LINE 3		1,358.		1,358.	1,358.	
FORM 990-PF	ТА	XES			STATEMENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS	NET I	B) NVEST- INCOME	(C) ADJUSTED NET INCOM		
EXCISE TAX ON INVESTMENT INCOME	1	•	0.		0.	0.
TO FORM 990-PF, PG 1, LN 18	1	•	0.		0.	0.
	F SUBSTANTI PART VI-A,		RIBUTOR	S	STATEMENT	3
NAME OF CONTRIBUTOR	ADD	RESS				
SPORTSMAN'S MARKET INC		1 SPORT		VE		

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			au prominer vo de les comments de les décentes de les comments de la comment de la com
			ta data titra ett va er tila ja vela og atte pydra fra drahe ett anna titlad a alle eller ti
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