Form **990-PF**

Return of Private Foundation

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

OMB No. 1545-0047 Open to Public Inspection

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.

| rui (| alell | dai year 2020 of tax year beginning 001 | 1, 2020 | , and ending | JUN 30, 404 | 1 |
|-------------------------------------|-------|---|--|--|--|--|
| Nar | ne of | foundation | | | A Employer identification | n number |
| T | HE | P & G ALUMNI FOUNDATIO | N, INC. | | 45-376531 | 8 |
| | | nd street (or P.O. box number if mail is not delivered to street | | Room/suite | B Telephone number | 1140 |
| _1 | 70 | 8 MARTHA AVENUE | | | 443-253-7 | 818 |
| | 12.77 | own, state or province, country, and ZIP or foreign p | ostal code | | C If exemption application is | |
| _ | | CINNATI, OH 45223 | | | | |
| | | all that apply: Initial return | Initial return of a fo | ormer public charity | D 1. Foreign organization | ns, check here |
| | | Final return | Amended return | | | 30020 |
| | | Address change | Name change | | Foreign organizations no check here and attach or check here. | neeting the 85% test, |
| H C | heck | type of organization: X Section 501(c)(3) ex | | THE CONTRACTOR OF THE CONTRACT | E If private foundation s | |
| | _ | | Other taxable private founda | tion | | 1)(A), check here |
| I Fa | | rket value of all assets at end of year J Accounti | | X Accrual | F If the foundation is in a | |
| | | | ther (specify) | | | 1)(B), check here |
| è | | 82,892. (Part I, colum | | is.) | andar coolien cor (b)(| I)(D), GNOON NOTOP |
| Pa | rt I | | (a) Revenue and | (b) Net investment | (c) Adjusted net | (d) Disbursements |
| | | Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) | expenses per books | income | income | for charitable purposes (cash basis only) |
| | 1 | Contributions, gifts, grants, etc., received | 25,750. | Sideo-endle for | N/A | |
| | 2 | Check if the foundation is not required to attach Sch. B | (196-4974) (196-499-49) | 10000000000000000000000000000000000000 | Januak Gerraria | |
| | 3 | Interest on savings and temporary cash investments | 14. | 14. | | STATEMENT 1 |
| | 4 | Dividends and interest from securities | | | | 24979 Earth (450/51) |
| | 5a | Gross rents | | | | \$160 A. 256 P. H. H. H. |
| | | Net rental income or (loss) | Registeration of the Control of the | wikimanikitajiitoti | MARKANA COMMANAS | e zzaczałujenych |
| • | | Net gain or (loss) from sale of assets not on line 10 | | 488 12 FEBRUARI | atrifique de the saffe | 3 Eac Fiz (5) 7-6 - 1 |
| n | Ь | Gross sales price for all | -0-4582-4453580-02 | | Microsophia (C | Barrasa TXAVXERATIA |
| Revenue | 7 | Capital gain net income (from Part IV, line 2) | | 0. | Personal desired | 2.02360000000000000000000000000000000000 |
| ď | 8 | Net short-term capital gain | | Thomas designation | | |
| | 9 | Income modifications | 4-2475784788866 | MWW. | | ige-dayselfactor. |
| | 10a | Gross sales less returns and allowances | | ACTOR STATES | SPEED OF SERVICE SERVICE | . Stradus, Januari |
| | | Less: Cost of goods sold | WWW. Commence of the commence | AGTALANT BERTIEF | Standard SV Yalk | |
| | | Gross profit or (loss) | | Asiate and The | | ##£\$\$\$\$\%\\\ |
| | 11 | Other income | · · · · · · · · · · · · · · · · · · · | | | Wattier |
| _ | 12 | Total. Add lines 1 through 11 | 25,764. | 14. | | Legen Willele Germanica |
| | 13 | Compensation of officers, directors, trustees, etc. | 0. | 0. | | 0. |
| | 14 | Other employee salaries and wages | | WIND - 10 YE - | - CONTRACTOR OF THE PARTY OF TH | |
| | 15 | Pension plans, employee benefits | | | | |
| Ses | 16a | Legal fees . | 20755 | | 1 | |
| en | b | Accounting fees | | 1,00 | | 1 30 |
| EX | C | Other professional fees | | | | |
| ě | 17 | Interest | | | | |
| rat | 18 | Taxes | | | | |
| ist | 19 | Depreciation and depletion | 22330 | | | SPACE AND ASSOCIATION |
| Ē | 20 | Occupancy | | | | |
| Ad | 21 | Travel, conferences, and meetings | | United 2010 | EPWerts. | - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 |
| Į, | 22 | Printing and publications | | | A CONTRACT | |
| g | 23 | Other expenses STMT 2 | 2,778. | 0. | | 0. |
| ati | 24 | Total operating and administrative | | . 1000011 | | |
| Operating and Administrative Expens | | expenses. Add lines 13 through 23 | 2,778. | 0. | | 0. |
| 0 | 25 | Contributions, gifts, grants paid | 0. | Burrania de | galeser Arktons var | 0. |
| | 26 | Total expenses and disbursements. | Comments Heat Historian Comments and Comment | | | |
| _ | | Add lines 24 and 25 | 2,778. | 0. | | 2,778. |
| | 27 | Subtract line 26 from line 12: | | a special confession | | er top ellesteries |
| | a | Excess of revenue over expenses and disbursements | 22,986. | | | |
| | b | Net investment income (if negative, enter -0-) | Housework Grade Av | 14. | | V prothpopping |
| | | Adjusted net income (if negative, enter 0) | ANNE CONTRACTOR | Filograph (Consumo) | N/A | |

023501 12-02-20 LHA For Paperwork Reduction Act Notice, see instructions.

| Part | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only | Beginning of year | End o | of year |
|--|--|--|---|--|
| 1 411 | column should be for end-of-year amounts only. | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| 1 | Cash - non-interest-bearing | 5,129. | 3,101. | 3,101. |
| 2 | Savings and temporary cash investments | 54,777. | 79,791. | |
| | Accounts receivable > | | | |
| | Less: allowance for doubtful accounts | | | |
| 4 | Pledges receivable ► | | Artheid Aire | |
| | Less: allowance for doubtful accounts ▶ | | | satisfies situated in a field of |
| 5 | Grants receivable | | *************************************** | |
| | Receivables due from officers, directors, trustees, and other | | | |
| | disqualified persons | | | |
| 7 | Other notes and loans receivable | | | |
| | Less: allowance for doubtful accounts | | | The state of the first of the first |
| <u>v</u> 8 | Inventories for sale or use | | | |
| Assets o o | Prepaid expenses and deferred charges | | | *************************************** |
| ₹ 10a | Investments - U.S. and state government obligations | | | |
| | Investments - corporate stock | | | |
| c | Investments - corporate bonds | *************************************** | | |
| 11 | Investments - land, buildings, and equipment; basis | | | Find the second season of the |
| | Less; accumulated depreciation | In the filtred half called the Amhlescart E. | | a ind the America (1946) in the |
| 12 | Investments - mortgage loans | | | |
| 13 | Investments - other | | | |
| 14 | Land, buildings, and equipment basis | | | |
| 17 | Less: accumulated depreciation | | | stikerent i kellisur |
| 15 | Other assets (describe | *************************************** | | |
| 1 | Total assets (to be completed by all filers - see the | | | |
| 10 | instructions. Also, see page 1, item I) | E0 000 | 00 000 | 00 000 |
| 17 | Accounts payable and accrued expenses | | 82,892, | |
| 18 | | | | |
| | Grants payable | | | |
| .00 | Deferred revenue | | | |
| 20 G 21 | Loans from officers, directors, trustees, and other disqualified persons | | | Ansterdebbliotelori (Antico) |
| | Mortgages and other notes payable | | | |
| 22 | Other liabilities (describe) | | | al plant fall takini tang ay balan kat s ay tan |
| 00 | Total liabilities (add lines 17 through 00) | 0 | • | |
| 20 | Total liabilities (add lines 17 through 22) | 0. | 0. | |
| S | Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30. | | | |
| 9 | | | | |
| E 25 | Net assets without donor restrictions | | | |
| eg 23 | Net assets with donor restrictions | *************************************** | | |
| בַּן | Foundations that do not follow FASB ASC 958, check here | | | |
| ᄄ | and complete lines 26 through 30. | 0 | | |
| b 26 € | Capital stock, trust principal, or current funds | 0. | 0. | |
| Set 27 | Paid-in or capital surplus, or land, bldg., and equipment fund | 0. | 0. | |
| Y 28 | Retained earnings, accumulated income, endowment, or other funds | <u>59,906.</u> | 82,892. | , |
| Net Assets or Fund Balan 5 2 2 2 6 2 2 6 2 6 5 6 6 7 6 6 7 6 7 6 7 6 7 6 7 6 7 6 7 | Total net assets or fund balances | 59,906. | 82,892. | and Experience of VATOR Veligion. |
| | Tatal Pak William and the second seco | F0 006 | 00 000 | |
| 30 | Total liabilities and net assets/fund balances | | 82,892. | |
| Part | III Analysis of Changes in Net Assets or Fund E | Balances | | |
| 1 Total | net assets or fund balances at beginning of year - Part II, column (a), line | 20 | | |
| | st agree with end-of-year figure reported on prior year's return) | | | E0 00C |
|) Enter | | | | 59,906. |
| | | | 2 | 22,986. |
| 4 Add | r increases not included in line 2 (itemize) lines 1, 2, and 3 | | | 0. |
| | agage not included in line 9 (itemize). In | | _ | 82,892. |
| | net assets or fund balances at end of year (line 4 minus line 5) - Part II, o | volume (b) line 20 | | 82,892. |
| o ividi | The assets of furid balances at end of year finite 4 minus line 3) - Part II, C | onarini (a), lille 23 | Б | Form 990-PF (2020) |

| (a) List and describe 2-story brick w | the kind(s) of property sold (for a arehouse; or common stock, 200 | example, real estate, shs. MLC Co.) | | (b) How acquired P - Purchase D - Donation | (c) Date acquired (mo., day, yr.) | (d) Date sold (mo., day, yr.) |
|--|--|--|--|--|--|-------------------------------|
| a | | | | D Donation | | |
| NO | NE | West. | | | | |
| | | | | | | |
| | *************************************** | TAKE A | | | | |
| | | | | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or othe plus expense o | | | (h) Gain or (loss) ((e) plus (f) minus (| g)) |
| ****** | | | | *************************************** | | . |
| | | | ······································ | | | |
| | | | | | - 1101100 | *** |
| ************** | | | ~ | | | |
| | | | | THE PARTY OF THE P | | 44.44.4 |
| Complete only for assets showing | ng gain in column (h) and owned | by the foundation on 12/3 | 1/69. | | (I) Gains (Col. (h) gain | minus |
| (i) FMV as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of c over col. (j), it | | C | ol. (k), but not less thar Losses (from col. (l | 1-0-) ог |
| | | 7.11 | | | EVHIUM. | |
| 4,0 4,4 | | | | | • | **** |
| | | | | | | |
| | | | | | | |
| ************************************** | | | | | | |
| If gain, also enter in Part I, line 8, Part I, line 8 art V Qualification U | es) as defined in sections 1222(5) column (c). See instructions. If (I | oss), enter -0- in | n Net I |) 3 nvestment In | come | |
| If gain, also enter in Part I, line 8, Part I, line 8 art V Qualification U SECTION Reserved (a) | ss) as defined in sections 1222(5) column (c). See instructions. If (I Inder Section 4940(e) f ON 4940(e) REPEALED (b) | o and (6): loss), enter -0- in or Reduced Tax of ON DECEMBER | 20, 201 | nvestment In 9 - DO NOT (| COMPLETE. | (d) |
| If gain, also enter in Part I, line 8, Part I, line 8 art V Qualification U SECTION Reserved (a) Reserved | ss) as defined in sections 1222(5) column (c). See instructions. If (Inder Section 4940(e) f ON 4940(e) REPEALED (b) Reserve | o and (6): loss), enter -0- in for Reduced Tax of ON DECEMBER | 20, 201 Re | nvestment In 9 - DO NOT (| Re: | (d) served |
| If gain, also enter in Part I, line 8, Part I, line 8 Art V Qualification U SECTION Reserved (a) Reserved Reserved | ss) as defined in sections 1222(5) column (c). See instructions. If (I Inder Section 4940(e) f ON 4940(e) REPEALED (b) Reserver | o and (6): loss), enter -0- in or Reduced Tax of ON DECEMBER | 20, 201 Re | nvestment In 9 - DO NOT (| Re: | 7100 |
| If gain, also enter in Part I, line 8, Part I, line 8 Art V Qualification U SECTION Reserved (a) Reserved Reserved Reserved Reserved | ss) as defined in sections 1222(5) column (c). See instructions. If (Inder Section 4940(e) f ON 4940(e) REPEALED (b) Reserve | o and (6): loss), enter -0- in or Reduced Tax of ON DECEMBER | 20, 201 Re | nvestment In 9 - DO NOT (| Re: | 7.00 |
| If gain, also enter in Part I, line 8, Part I, line 8 Cart V Qualification U SECTION Reserved (a) Reserved Reserved Reserved Reserved Reserved Reserved | ss) as defined in sections 1222(5) column (c). See instructions. If (I Inder Section 4940(e) f ON 4940(e) REPEALED (b) Reserver | o and (6): loss), enter -0- in or Reduced Tax of ON DECEMBER | 20, 201 Re | nvestment In 9 - DO NOT (| Re: | (d) served |
| If gain, also enter in Part I, line 8, Part I, line 8 Part V Qualification U SECTION Reserved Reserved Reserved Reserved Reserved Reserved Reserved Reserved Reserved Reserved | ss) as defined in sections 1222(5) column (c). See instructions. If (I Inder Section 4940(e) f ON 4940(e) REPEALED (b) Reserver | o and (6): loss), enter -0- in or Reduced Tax of ON DECEMBER | 20, 201 Re | nvestment In 9 - DO NOT (| Re: | 7100 |
| Part I, line 8 Part V Qualification U SECTION Reserved (a) Reserved | ss) as defined in sections 1222(5) column (c). See instructions. If (I Inder Section 4940(e) f ON 4940(e) REPEALED (b) Reserver | o and (6): loss), enter -0- in or Reduced Tax of ON DECEMBER | 20, 201 Re | nvestment In 9 - DO NOT (| Re: | 7.00 |
| If gain, also enter in Part I, line 8, Part I, line 8 Part V Qualification U SECTION Reserved | ss) as defined in sections 1222(5) column (c). See instructions. If (I Inder Section 4940(e) f ON 4940(e) REPEALED (b) Reserve. | o and (6): loss), enter -0- in reduced Tax of the control of the c | 20, 201 Re | nvestment In 9 - DO NOT (| Re: | 7.00 |
| If gain, also enter in Part I, line 8, Part I, line 8 Part V Qualification U SECTION Reserved | ss) as defined in sections 1222(5) column (c). See instructions. If (I Inder Section 4940(e) f ON 4940(e) REPEALED (b) Reserver | ond (6): loss), enter -0- in or Reduced Tax of DON DECEMBER d | 20, 201 Re | nvestment In 9 - DO NOT (| Re: | 7100 |
| If gain, also enter in Part I, line 8, Part I, line 8 Part V Qualification U SECTION Reserved | ss) as defined in sections 1222(5) column (c). See instructions. If (I Inder Section 4940(e) f ON 4940(e) REPEALED (b) Reserver | ond (6): loss), enter -0- in or Reduced Tax of DON DECEMBER d | 20, 201 Re | nvestment In 9 - DO NOT (| Re: | 7.00 |
| If gain, also enter in Part I, line 8, Part I, line 8 Part I, line 8 Part I Qualification U SECTION Reserved | ss) as defined in sections 1222(5) column (c). See instructions. If (I Inder Section 4940(e) f ON 4940(e) REPEALED (b) Reserver | ond (6): loss), enter -0- in or Reduced Tax of DON DECEMBER d | 20, 201 Re | nvestment In 9 - DO NOT (| Re: | 7.00 |
| If gain, also enter in Part I, line 8, Part I, line 8 Part V Qualification U SECTION Reserved | ss) as defined in sections 1222(5) column (c). See instructions. If (I Inder Section 4940(e) f ON 4940(e) REPEALED (b) Reserver |) and (6): loss), enter -0- in Or Reduced Tax of ON DECEMBER | 20, 201 Re | nvestment In 9 - DO NOT (| Re: 2 4 | 7.00 |
| If gain, also enter in Part I, line 8, Part I, line 8 Part V Qualification U SECTION Reserved | ss) as defined in sections 1222(5) column (c). See instructions. If (I Inder Section 4940(e) f ON 4940(e) REPEALED (b) Reserver |) and (6): loss), enter -0- in Or Reduced Tax of ON DECEMBER | 20, 201 Re | nvestment In 9 - DO NOT (| Re: 2 2 3 4 | 7100 |

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X

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

year 2020 or the tax year beginning in 2020? See the instructions for Part XIV. If "Yes," complete Part XIV

Form 990-PF (2020) THE P & G ALUMNI FOUNDATION, INC. 45-3765318 Page 5 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 11 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? 13 Website address > PGALUMNIFOUNDATION.ORG 14 The books are in care of ► RICHARD BEAGLE Telephone no. > 410-243-4821Located at ▶1708 MARTHA AVENUE, CINCINNATI, OH ZIP+4 **▶45223** 15 Section 4947(a)(1) nonexempt charitable trusts filling Form 990-PF in lieu of Form 1041 - check here 16 At any time during calendar year 2020, 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? X 16 See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the 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? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X 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)? Yes X No (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) 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 Organizations relying on a current notice regarding disaster assistance, check here c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2020? X 10 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation. defined in section 4942(j)(3) or 4942(j)(5)); a At the end of tax year 2020, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2020? 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 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? b If "Yes," did it have excess business holdings in 2020 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,

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4a

4b

X

X

Schedule C, to determine if the foundation had excess business holdings in 2020.) 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2020?

023551 12-02-20

| P | Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign for | oundations, see | instructions.) |
|----|--|---------------------|---|
| 1 | | | |
| а | Average monthly fair market value of securities | 1a | 0. |
| Ь | Average of monthly cash balances | 1b | 71,399. |
| C | Fair market value of all other assets | 1c | /1,333. |
| d | Total (add lines 1a, b, and c) | 1d | 71,399. |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | · | 11,333. |
| | |). | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 71,399. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 1,071. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 70,328. |
| 6 | Minimum investment return. Enter 5% of line 5 | | 3,516. |
| P | art XI Distributable Amount (see instructions) (Section 4942(i)(3) and (i)(5) private operating foundations | and certain | 3,310. |
| _ | foreign organizations, check here and do not complete this part.) | | |
| 1 | Minimum investment return from Part X, line 6 | . 1 | 3,516. |
| 2a | Tax on investment income for 2020 from Part VI, line 5 | 444 | |
| þ | Income tax for 2020. (This does not include the tax from Part VI.) | | |
| C | Add lines 2a and 2b | . 2c | 0. |
| 3 | distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 3,516. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 3,516. |
| 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 | 3,516. |
| P | art XII Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | 1323 | *************************************** |
| а | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | 1a | 2,778. |
| þ | 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: | g see | |
| a | 2 /b | 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 | 2,778. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment | | 4 |
| | income. Enter 1% of Part I, line 27b | . 5 | 0. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 2.778. |
| | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation | n qualifies for the | section |
| | 4940(e) reduction of tax in those years. | | |

Part XIII Undistributed Income (see instructions)

| 1.110-00 | (a) Corpus | (b) Years prior to 2019 | (c) 2019 | (d) 2020 |
|--|--|--|--|---|
| Distributable amount for 2020 from Part XI, line 7 | | | | 3,516. |
| 2 Undistributed income, if any, as of the end of 2020; | ition Citati | | | 3,310. |
| a Enter amount for 2019 only | | | 0. | |
| b Total for prior years: | | _ | | |
| 3 Excess distributions carryover, if any, to 2020: | | 0. | | |
| a From 2015 35,304. | | | | |
| 150040 | | | | |
| 10 000 | | | | |
| JE 0040 2C 224 | | | | |
| e From 2019 | | | | |
| f Total of lines 3a through e | 159,848. | | | |
| 4 Qualifying distributions for 2020 from | 133,040. | | | |
| Part XII, line 4: ►\$2,778. | | | | |
| a Applied to 2019, but not more than line 2a | | | _ | |
| b Applied to undistributed income of prior | | | 0. | |
| years (Election required - see instructions) | | 0. | | |
| c Treated as distributions out of corpus | A STATE OF THE STA | The second secon | | |
| (Floatian required and instructions) | 0. | | | |
| d Applied to 2020 distributable amount | Zileti bennesa steament is a stratina | | | 2 770 |
| e Remaining amount distributed out of corpus | 0. | | | 2,778. |
| 5 Excess distributions company applied to 2000 | 0. | eterre je vija të tirija vë përima e je je nga të përima e je je nga të përima e je je nga të përima e je je n Të je nga je je vija të përima e je je nga të përima e je je nga të përima e je nga të përima e je nga të përi | | KESTOLETO BERTYTTO DEFENDEN |
| (if an amount appears in column (d), the same amount must be shown in column (a).) | 738. | | | 738. |
| 6 Enter the net total of each column as indicated below: | | | | |
| a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 | 159,110. | | | |
| 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 | | | | Maragamora ze za est. Odraka za zarod Britania |
| amount - see instructions | | 0.1 | | |
| e Undistributed income for 2019. Subtract line | | | Alexander of the control of the cont | |
| 4a from line 2a. Taxable amount - see instr. | | | 0. | |
| f Undistributed income for 2020. Subtract | Vária (viel) illinovestri | | Balkernar exameters diven e | |
| lines 4d and 5 from line 1. This amount must | | | | |
| be distributed in 2021 | | | | 0. |
| 7 Amounts treated as distributions out of | | | | PARING SEVERAL CONTROL |
| 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 2015 | | | | |
| not applied on line 5 or line 7 | 34,566. | | | |
| 9 Excess distributions carryover to 2021. | | | | |
| Subtract lines 7 and 8 from line 6a | 124,544. | | | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2016 78,205. | | | | |
| b Excess from 2017 10,008. | | | | |
| c Excess from 2018 36,331. | | | | |
| d Excess from 2019 | | | | |
| e Excess from 2020 | | | | |

023581 12-02-20

10

| 3 Grants and Contributions Paid During the | | Payment | ************************************** | |
|--|--|--------------------------------------|--|---|
| 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 recipient | Purpose of grant or contribution | Amount |
| a Paid during the year | or Substantial Contributor | reolpient | | |
| | | | | |
| NONE | | | | |
| NONE | | | | |
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| - CALLEY | | | | *************************************** |
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| | | | | |
| | | | | |
| Total | | | ▶ 3a | 0, |
| b Approved for future payment | | | - Va | 0, |
| | | | | |
| NONE | | | | |
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| | | | | |
| Total | | | В зь | |
| | | | × 30 | 0. |

| Part XVI-A | Analysis of Income-Producing | Activities |
|------------|------------------------------|------------|
|------------|------------------------------|------------|

| Enter gross amounts unless otherwise indicated. | Unrelated | business income | Exclude | ed by section 512, 513, or 514 | (e) |
|--|-----------------|---|--|---|---|
| | (a) Business | (b) | (c) Exclu- | (d) | Related or exempt |
| 1 Program service revenue: | code | Amount | sion code | Amount | function income |
| a | | | | | |
| b | _ | 27.71 | | | |
| <u> </u> | - | *************************************** | | | *************************************** |
| d | | | | | |
| e | - | -12-2 | | | |
| T Food and appropriate from account | _ | | | | *************************************** |
| g Fees and contracts from government agencies | | | | | |
| Membership dues and assessments Interest on savings and temporary cash | | *************************************** | | | |
| | | | | | |
| investments 4 Dividends and interest from securities | | *************************************** | 14 | 14. | |
| 5 Net rental income or (loss) from real estate: | | | | | ***** |
| a Debt-financed property | Servation at | | | | zerograficzek, cese, |
| b Not debt-financed property | | 11/10/11 | | | *************************************** |
| 6 Net rental income or (loss) from personal | | *************************************** | | | |
| property | | | | | |
| 7 Other investment income | | ······································· | | | |
| 8 Gain or (loss) from sales of assets other | | | | | *************************************** |
| than inventory | | | | | |
| 9 Net income or (loss) from special events | - | | | | |
| 10 Gross profit or (loss) from sales of inventory | • | | | | |
| 11 Other revenue: | | | | | ·········· |
| a | | | | | |
| b | | | | | |
| C | | | | | |
| d | | - III. | | *************************************** | |
| e | | | | | **L |
| 2 Subtotal. Add columns (b), (d), and (e) | | 0 | • 42744 | 14. | 0. |
| 3 Total. Add line 12, columns (b), (d), and (e) | | | | 13 | 14. |
| See worksheet in line 13 instructions to verify calculations.) | | | | | 7.7. |
| Part XVI-B Relationship of Activities | to the Accom | inlishment of E | vomet ! | Durana | |
| | to the Accon | pusiment of E | xempt i | 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). |
|---------------|---|
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023621 12-02-20

Form 990-PF (2020) THE P & G ALUMNI FOUNDATION, INC. 45-3765318 Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) Yes No (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: X 1a(1) X 1a(2) b Other transactions: (1) Sales of assets to a noncharitable exempt organization X (2) Purchases of assets from a noncharitable exempt organization X 1b(2)(3) Rental of facilities, equipment, or other assets X 1b(3) (4) Reimbursement arrangements _____ X (5) Loans or loan guarantees X 1b(5) (6) Performance of services or membership or fundraising solicitations X c Sharing of facilities, equipment, mailing lists, other assets, or paid employees X d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no. (b) Amount involved (c) Name of noncharitable exempt organization (\mathbf{d}) Description of transfers, transactions, and sharing arrangements N/A2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship THE P&G ALUMNI NETWORK. 501(C)(4) INC. SEE STATEMENT 5 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. May the IRS discuss this

Form **990-PF** (2020)

return with the preparer shown below? See instr.

X Yes

P02040349

PTIN

Firm's EIN $\triangleright 31-1452011$

Phone no. (513) 455-8200

Sign

Here

Paid

Preparer

Use Only

Date

Preparer's signature

Signature of officer or trustee

Print/Type preparer's name

JAKE BURKE

Firm's name ► BURKE & SCHINDLER, PLL

CINCINNATI, OH 45202

Firm's address ▶ 901 ADAMS CROSSING

TREASURER

Check [

self-employed

Title

Date

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No. 1545-0047

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

2020

| T | HE P & G ALUMNI FOUNDATION, INC. | 45-3765318 |
|---|---|---|
| Organization type (check | one): | |
| Filers of: | Section: | |
| Form 990 or 990-EZ | 501(c)() (enter number) organization | |
| | 4947(a)(1) nonexempt charitable trust not treated as a private foundation | |
| | 527 political organization | |
| Form 990-PF | X 501(c)(3) exempt private foundation | |
| | 4947(a)(1) nonexempt charitable trust treated as a private foundation | |
| | 501(c)(3) taxable private foundation | |
| | | |
| Check if your organization in Note: Only a section 501(c) | s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rul | o. Coo instructions |
| General Rule | | e. See instructions. |
| | | |
| For an organization property) from any | n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor's | \$5,000 or more (in money or stotal contributions. |
| Special Rules | | |
| any one contributo | n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support to and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount line 1. Complete Parts I and II. | or 16h, and that received from |
| contributor, during literary, or education | n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a the year, total contributions of more than \$1,000 exclusively for religious, charitable, sciennal purposes, or for the prevention of cruelty to children or animals. Complete Parts I (en) instead of the contributor name and address), II, and III. | entific |
| is checked, enter h purpose. Don't con | a described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from an exclusively for religious, charitable, etc., purposes, but no such contributions totaled more the total contributions that were received during the year for an exclusively religious, applete any of the parts unless the General Rule applies to this organization because it respectively, contributions totaling \$5,000 or more during the year | re than \$1,000. If this box charitable, etc., |
| but it must answer "No" on | at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (For Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its For ne filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF). | rm 990, 990-EZ, or 990-PF), m 990-PF, Part I, line 2, to |

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

Name of organization

Employer identification number

THE P & G ALUMNI FOUNDATION, INC.

45-3765318

| Part I | Contributors (see instructions). Use duplicate copies of Part I i | f additional space is needed. | |
|------------|---|-------------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | DEBORAH M. KIELTY | \$\$ | Person X Payroll |
| (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 |
| 5 | | \$ | Person Payroll Noncash (Complete Part Il 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 Onnocash Complete Part II for noncash contributions.) |

Name of organization

Employer identification number

THE P & G ALUMNI FOUNDATION, INC.

45-3765318

| Part II | Noncash Property (see instructions). Use duplicate copies of F | Part II if 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 |
| | | \$ | Allera |
| (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 |
| | | | |
| l | | \$ | |

Name of organization Employer identification number THE P & G ALUMNI FOUNDATION, INC. 45-3765318 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (d) Description of how gift is held (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

| / 7\ | | | | | |
|----------------------|--|---|--|---|---|
| REVE | | | | (C) ENT ADJUSTED NET INCOME | |
| | 14. | | 14. | | |
| | 14. | | 14. | | |
| OTHER E | XPENSES | | | STATEMENT | 2 |
| | NET INVEST- ADJ | | | | |
| 1. 2,570. 207. | | 0 | • | (|).). |
| 2,778. | | 0 | • | (| <u> </u> |
| | OTHER E (A) EPENSES ER BOOKS 1. 2,570. 207. | OTHER EXPENSES (A) (FOR EXPENSES NET IN MENT | PER BOOKS 14. 14. OTHER EXPENSES (A) (B) RPENSES NET INVEST- ER BOOKS MENT INCOME 1. 0 2,570. 0 207. 0 | PER BOOKS INCOME 14. 14. 14. 14. OTHER EXPENSES (A) (B) (C) ADJUSTED NET INVEST- ER BOOKS MENT INCOME NET INCOME 1. 0. 2,570. 0. 207. 0. | PER BOOKS INCOME NET INCOME 14. 14. 14. 14. OTHER EXPENSES STATEMENT (A) (B) (C) (D) (D) (D) (D) (D) (D) (D) (D) (D) (D |

EXPLANATION

THE STATE OF OHIO DOES NOT REQUIRE THE ORGANIZATION TO PROVIDE A COPY OF THE FORM 990-PF. THE STATE OF OHIO DOES REQUIRE THE ORGANIZATION TO FILE AN ANNUAL REPORT WITH THE STATE OF OHIO. THE ORGANIZATION IS CURRENT WITH ITS ANNUAL FILINGS.

| | LIST OF OFFICERS, D AND FOUNDATION MANA | STATEMENT 4 | | |
|--|--|-------------------|---------------------------------|---------|
| NAME AND ADDRESS | TITLE AND AVRG HRS/WK | COMPEN- SATION | EMPLOYEE BEN PLAN CONTRIB | EXPENSE |
| SUE WILKE 1708 MARTHA AVENUE CINCINNATI, OH 45223 | TRUSTEE 10.00 | 0. | 0. | 0. |
| THOMAS DRUM 1708 MARTHA AVENUE CINCINNATI, OH 45223 | TRUSTEE 3.00 | 0. | 0. | 0. |
| ED TAZZIA 1708 MARTHA AVENUE CINCINNATI, OH 45223 | TRUSTEE 2.00 | 0. | 0. | 0. |
| DEBORAH M. KIELTY 1708 MARTHA AVENUE CINCINNATI, OH 45223 | CHAIRMAN 20.00 | 0. | 0. | 0. |
| NISHANT SAXENA 1708 MARTHA AVENUE CINCINNATI, OH 45223 | TRUSTEE 1.00 | 0. | 0. | 0. |
| PATRICIA MCKAY 1708 MARTHA AVENUE CINCINNATI, OH 45223 | DEVELOPMENT CH | AIR 0. | 0. | 0. |
| MARGARET SZEMPRUCH 1708 MARTHA AVENUE CINCINNATI, OH 45223 | TRUSTEE 12.00 | 0. | 0. | 0. |
| VINCE SPIZIRI 1708 MARTHA AVENUE CINCINNATI, OH 45223 | VICE CHAIRMAN 4.00 | 0. | 0. | 0. |
| MARIANNE IYER 1708 MARTHA AVENUE CINCINNATI, OH 45223 | EXECUTIVE DIRE | CTOR (PREVIO | OUS) | 0. |
| IDA ABDALKHANI 1708 MARTHA AVENUE CINCINNATI, OH 45223 | TRUSTEE 1.00 | 0. | 0. | 0. |
| RICK BEAGLE 1708 MARTHA AVENUE CINCINNATI, OH 45223 | TREASURER 5.00 | 0. | 0. | 0. |

| THE P & G ALUMNI FOUNDATION, IN | C. | | 45-37 | 65318 |
|--|--------------------------|----|-------|-------|
| ALIYU MOHAMMED ALI 1708 MARTHA AVENUE CINCINNATI, OH 45223 | SECRETARY 6.00 | 0. | 0. | 0. |
| MATTHEW BARNHILL 1708 MARTHA AVENUE CINCINNATI, OH 45223 | TRUSTEE 2.50 | 0. | 0. | 0. |
| GIOACCHINO COSTA 1708 MARTHA AVENUE CINCINNATI, OH 45223 | TRUSTEE 1.00 | 0. | 0. | 0. |
| MARYANN O'CONOR 1708 MARTHA AVENUE CINCINNATI, OH 45223 | TRUSTEE 3.00 | 0. | 0. | 0. |
| ANNABEL TONGE 1708 MARTHA AVENUE CINCINNATI, OH 45223 | TRUSTEE 5.00 | 0. | 0. | 0. |
| ALEX MALOUF 1708 MARTHA AVENUE CINCINNATI, OH 45223 | TRUSTEE 4.50 | 0. | 0. | 0. |
| SARAH WOODS 1708 MARTHA AVENUE CINCINNATI, OH 45223 | EXECUTIVE DIRECTOR 20.00 | 0. | 0. | 0. |
| TOTALS INCLUDED ON 990-PF, PAGE 6 | , PART VIII | 0. | 0. | 0. |

990-PF

AFFILIATION WITH TAX-EXEMPT ORGANIZATIONS PART XVII, LINE 2, COLUMN (C)

STATEMENT

5

NAME OF AFFILIATED OR RELATED ORGANIZATION

THE P&G ALUMNI NETWORK, INC.

DESCRIPTION OF RELATIONSHIP WITH AFFILIATED OR RELATED ORGANIZATION

TO PROVIDE ASSISTANCE TO LOW/MODERATE INCOME COMMUNITIES IN AND AROUND THE REGIONS WHERE ACTIVE MEMBERS OF THE P&G ALUMNI NETWORK LIVE AND WORK, THROUGH PROGRAMS AND ACTIVITIES THAT WILL IMPROVE THE QUALITY OF LIFE IN THESE COMMUNITIES, EASE COMMUNITY TENSIONS, ELIMINATE PREJUDICE AND DISCRIMINATION WITHIN THESE COMMUNITIES, AND/OR IMPROVE ACCESS TO EDUCATIONAL RESOURCES IN THESE COMMUNITIES.