Form **990-PF**

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

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

For	calend	lar year 2023 or tax year beginning , a	and ending				
		foundation			A Emple	oyer identification num	ber
${f T}$	HE A	ALBERT G & OLIVE H SCHLINK FC	UN				
		DATION			34-	-6574722	
		nd street (or P.O. box number if mail is not delivered to street add	ress) Ro	om/suite	B Telep	ctions)	
		FIFTH STREET			419	9-502-6198	
		wn, state or province, country, and ZIP or foreign postal code			C If exe	mption application is pen-	ding, check here
		USKY OH 44870					
G	check a		n of a former public ch	iarity		reign organizations, chec	
		Final return Amended				reign organizations meeti % test, check here and a	
		Address change Name cha			65	76 test, Gleck fiele and a	macii computation .
		type of organization: X Section 501(c)(3) exempt private				ate foundation status was	1 1
	Section	1 4947(a)(1) nonexempt charitable trust Other taxable			sectio	n 507(b)(1)(A), check he	re Ц
I F	air mar	ket value of all assets at J Accounting method:				foundation is in a 60-mor	1 1
eı	nd of y	ear (from Part II, col. (c), Other (specify)			under	section 507(b)(1)(B), ch	eck nere
lir	e 16)	\$ 33,973,854 (Part I, column (d), must					(d) Dishumomonto
P	art i	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	(a) Revenue and expenses per books	(b) Net inv incon		(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)					
	2	Check X if the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments	3,845		3,845		
	4	Dividends and interest from securities	724,437	72	24,437		
	5a	Gross rents					
ക	b	Net rental income or (loss)					gy Manager via Toldinia
Ž	6a	Net gain or (loss) from sale of assets not on line 10 $$ STMT $$ 1	1,309,429				
Revenue	b	Gross sales price for all assets on line 6a 1,366,476					
	7	Capital gain net income (from Part IV, line 2)			33,401		
	8	Net short-term capital gain				0	e-
	9	Income modifications					
	10a	Gross sales less returns and allowances					11 12 12 12 11 11 11 11
	b	Less: Cost of goods sold				21	
	С	Gross profit or (loss) (attach schedule)					i svenou vosti
	11	Gross profit or (loss) (attach schedule) Other income (attach schedule) STMT 2	23,195				
	12	Total. Add lines 1 through 11	2,060,906	7 (51,683	0	<u>, 6,4 ,2 (5,2,5)</u>
Ŋ	13	Compensation of officers, directors, trustees, etc	76 , 800				
Expenses	14	Other employee salaries and wages					
ē	15	Pension plans, employee benefits					
.X	16a	Legal fees (attach schedule)					
Ş.	b	Accounting fees (attach schedule) STMT 3	8,895		5,960		2,935
	С	Other professional fees (attach schedule) STMT 4	84,536		28,742		55,794
ם	17	Interest Taxes (attach schedule) (see instructions) STMT 5			4 5711		
J.S	18	Taxes (attach schedule) (see instructions) STMT 5	4,711		4,711		
Έ	19	Depreciation (attach schedule) and depletion					
Ad	20	Occupancy	C 107		2 002		4,044
and Administrati	21	Travel, conferences, and meetings	6,127		2,083 559		1,085
a	22	Printing and publications	1,645		1,448		714
	23	Printing and publications Other expenses (att. sch.) STMT 6	2,162		1,340		, 1. 1
atii	24	Total operating and administrative expenses.	101 076		43,503	0	64,572
Operating		Add lines 13 through 23	184,876 1,499,740		.0,000		1,499,740
Ö	25	Contributions, gifts, grants paid	1,684,616		13,503	0	1,564,312
	26	Total expenses and disbursements. Add lines 24 and 25	1,004,010		,		
	27	Subtract line 26 from line 12: Excess of revenue over expenses and disbursements	376,290				
	b	Net investment income (if negative, enter -0-)			18,180		
	C	Adjusted net income (if negative, enter -0-)				0	

8,814,248 end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 2 376,290 3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 9,190,538 4 4 Add lines 1, 2, and 3

5 Decreases not included in line 2 (itemize) SEE STATEMENT 10 44,248 9,146,290 6 Total net assets or fund balances at end of year (line 4 minus line 5) — Part II, column (b), line 29

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Pa	rt IV Capital Gains and	Losses for Tax on Investm	ent Income					
		kind(s) of property sold (for example, real euse; or common stock, 200 shs. MLC Co.)		(b) How acquired P — Purchase D — Donation		ite acquired , day, yr.)	(d) Date sold (mo., day, yr.)	
1a	CAPITAL GAIN DIS	TRIBUTIONS						
b								
С								
d								
6								
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis ense of sale			n or (loss) f) minus (g))	
а	33,401						33,401	
b								
С								
d								
е								
	Complete only for assets showing g		(I) Gains (Col. (h) gain minus					
	(i) FMV as of 12/31/69		ss of col. (i) il. (j), if any	CC		less than -0-) or rom col. (h))		
а					<u> </u>		33,401	
b								
С								
d								
e								
2	Capital gain net income or (net ca	apital loss) If gain, also enter		•	2	33,401		
3	Net short-term capital gain or (los	s) 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		<u></u>		3			
-		d on Investment Income (Se		1940(b), or 4948–	-see i	nstructio	ns)	
1a		scribed in section 4940(d)(2), check h		iter "N/A" on line 1.	٦			
	Date of ruling or determination le	tter: (attach co	by of letter if neces	sary — see Instruct	ions)	1	9,983	
b		ter 1.39% (0.0139) of line 27b. Exem			İ			
		o)			الـ			
2	Tax under section 511 (domestic	section 4947(a)(1) trusts and taxable	foundations only; of	hers, enter -0-)		2	0 000	
3						3	9,983	
4		section 4947(a)(1) trusts and taxable		hers, enter -0-)		4	0 003	
5		me. Subtract line 4 from line 3. If zero	or less, enter -0			5	9,983	
6	Credits/Payments:		1.	. 1 .	900			
a		d 2022 overpayment credited to 2023			,800			
b	Exempt foreign organizations — I	ax withheld at source		ib				
C		nsion of time to file (Form 8868)		Sc Sd				
d	Backup withholding erroneously					7	8,800	
7	Total credits and payments. Add	ent of estimated tax. Check here	if Form 2220 is off			8	0,000	
8		d 8 is more than line 7, enter amount	•			9	1,183	
9 10		nan the total of lines 5 and 8, enter the				10		
10 11		: Credited to 2024 estimated tax	amount of or paid	Refunded		11		
11	THE THE SHOULD OF THE 10 TO DE	. Ordated to 2027 estimated tax					Form 990-PF (2023)	

Pa	rt VI-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			
-	instructions for the definition	1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities.			
С	Did the foundation file Form 1120-POL for this year?	1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.			
ď	(1) On the foundation. \$ (2) On foundation managers. \$			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
•	on foundation managers. \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
_	If "Yes," attach a detailed description of the activities.	- - -		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
3	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х
4.	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	X	<u> </u>
4a		4b	X	
b	If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	21	Х
5		-		<u> </u>
c	If "Yes," attach the statement required by General Instruction T. Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
6				
	By language in the governing instrument, or By state legislation that offsetively amonds the governing instrument so that no mandatory dispetions that			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? N/A	e		
		7	Χ	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV		Λ	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			
	OH			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	ا ا		
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation N/A	8b		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2023 or the tax year beginning in 2023? See instructions for Part XIII. If "Yes,"			3.7
	complete Part XIII	9		<u>X</u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10		<u>X</u>
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement. See instructions	12		<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Χ	
	Website address N/A			
14	The books are in care of CURTIS KOCH Telephone no. 419-5	02-0	51,98	₹
	1115 FIFTH STREET			
	Located at SANDUSKY OH ZIP+4 44870	<i></i>		م
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — check here			. Ц
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2023, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		<u>X</u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country	<u> </u>		
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Pa	rt 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)		X
	(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)		X
	(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	1b		X
С	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 2023?	1d		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		·	
а	At the end of tax year 2023, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for			
	tax year(s) beginning before 2023? If "Yes," list the years	2a		X
	20 , 20 , 20 , 20	,		
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		14.5	
	all years listed, answer "No" and attach statement — see instructions.)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			١,,
	during the year?	3a		X
b	If "Yes," did it have excess business holdings in 2023 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	200		
	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	l :	2.0	3.7
	foundation had excess business holdings in 2023.)	3b		X
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable			\ _V
	purposes?	4a		Х
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		Louis de l	
	in 2023?	4b	O DE	(0000)

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Pa	art VI-B Statements Regarding Activities for Which Form	1720 May Be F	Required (con	tinued)	T					
5a	• • • • • • • • • • • • • • • • • • • •					Yes				
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4				5a(1)		X			
	(2) Influence the outcome of any specific public election (see section 4955); or to	carry on, directly of	or							
	indirectly, any voter registration drive?				5a(2)		<u>X</u>			
	(3) Provide a grant to an individual for travel, study, or other similar purposes?				5a(3)		X			
	(4) Provide a grant to an organization other than a charitable, etc., organization of	described in section	ı 4945(d)							
	(4)(A)? See instructions	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			5a(4)		_X			
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or	educational purpos	es, or for							
	the prevention of cruelty to children or animals?				5a(5)		<u> X</u>			
b	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unde									
-	in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions N/A									
С	O to the second second section and second se									
d	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from									
•	maintained expenditure responsibility for the grant?			N/A	5d					
	If "Yes," attach the statement required by Regulations section 53.4945-5(d).									
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay	premiums on a pe	ersonal							
vu		•			6a		Χ			
b	benefit contract? Did the foundation, during the year, pay premiums, directly or indirectly, on a pers	sonal benefit contra	ct?		6b		Х			
	If "Yes" to 6b, file Form 8870.	orial portain cornia								
70	At any time during the tax year, was the foundation a party to a prohibited tax she	ltar transaction?			7a	İ	Х			
7a b	If "Yes," did the foundation receive any proceeds or have any net income attributa				7b					
	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,0				75					
8	excess parachute payment(s) during the year?				8		Х			
D.	excess paracrule payment(s) during the year?				<u> </u>	l				
Г	Contractors	unuacion mane	igers, inginy	r aid Employ	ccs,	anu				
4 1	ist all officers, directors, trustees, and foundation managers and their com	nonestion See in	etructions							
	ast an officers, directors, trustees, and foundation managers and their comp			(d) Contributions to	T					
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not pald, enter -0-)	employee benefit plans and deferred compensation		pense ad r allowar				
SE	E STATEMENT 11									
2	Compensation of five highest-paid employees (other than those included of "NONE."	n line 1 — see ins	structions). If no	ne, enter						
	(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation		oense ad r allowar				
NC	NE .									
					1					

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

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Part VII Information About Officers, Directors, Trustees, Foundation Mana Contractors (continued)		
3 Five highest-paid independent contractors for professional services. See instruction	ns. If none, enter "NONI	E."
(a) Name and address of each person pald more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		
Part VIII-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information organizations and other beneficiaries served, conferences convened, research papers produced, etc.	such as the number of	Expenses
1 N/A		
2		
3		
4	,	
,		
Part VIII-B Summary of Program-Related Investments (see instructions)		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1 N/A		
2		

All other program-related investments. See instructions,

Total. Add lines 1 through 3

Form 990-PF (2023) THE ALBERT G & OLIVE H SCHLINK FOUN 34-6574722 Page 8 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see Part IX instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., 1 30,846,149 1a Average monthly fair market value of securities а 495,485 1b Average of monthly cash balances b Fair market value of all other assets (see instructions) 1c C 1d Total (add lines 1a, b, and c) d Reduction claimed for blockage or other factors reported on lines 1a and Acquisition indebtedness applicable to line 1 assets 2 2 3 Subtract line 2 from line 1d 3 Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see 4 470,125 Net value of noncharitable-use assets. Subtract line 4 from line 3 5 5 543. Minimum investment return. Enter 5% (0.05) of line 5 6 6 Part X Distributable Amount (see instructions) (Section 4942(i)(3) and (i)(5) private operating foundations and certain foreign organizations, check here and do not complete this part.) 1,543,575 Minimum investment return from Part IX, line 6 9,983 Tax on investment income for 2022 from Part V, line 5 2a Income tax for 2022. (This does not include the tax from Part V.) b Add lines 2a and 2b C Distributable amount before adjustments. Subtract line 2c from line 1 3 3 Recoveries of amounts treated as qualifying distributions 4 4 5 5 Add lines 3 and 4

Deduction from distributable amount (see instructions) 7 Qualifying Distributions (see instructions) 1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26 1,564,312 1a Program-related investments — total from Part VIII-B b 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., 2 2 purposes 3 Amounts set aside for specific charitable projects that satisfy the: Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3b b Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4 1,564,312 4

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Pa	rt XII Undistributed Income (see instructions)				
		(a) Corpus	(b) Years prior to 2022	(c) 2022	(d) 2023
1	Distributable amount for 2023 from Part X, line 7	,			1,533,592
2	Undistributed income, if any, as of the end of 2023:				
	* **			1,413,409	
a	Enter amount for 2022 only			1/110/100	
3	Total for prior years: 20 , 20 , 20 , 20 20 20				
	- · · · · · · · · · · · · · · · · · · ·				
h	From 2018 From 2019			. •	
~	From 2020				
ч	E 0004				
	From 2021 From 2022				
f	Total of lines 3a through e				
4	Qualifying distributions for 2023 from Part XI,				
7	line 4: \$1,564,312_				
а	Applied to 2022, but not more than line 2a			1,413,409	
	Applied to undistributed income of prior years				
~	(Election required — see instructions)				
c	Treated as distributions out of corpus (Election				·
·	required — see instructions)				
d	Applied to 2023 distributable amount				150,903
	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2023				
	(If an amount appears in column (d), the same				
	amount must be shown in column (a).)				
6	Enter the net total of each column as				
	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
	Prior years' undistributed income. Subtract				
	line 4b from line 2b				
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable				
	amount — see instructions				
е	Undistributed income for 2022, Subtract line				
	4a from line 2a. Taxable amount see				
	instructions				
f	Undistributed income for 2023. Subtract lines				
	4d and 5 from line 1. This amount must be			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	distributed in 2024				1,382,689
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required — see instructions)				
8	Excess distributions carryover from 2018 not			,	
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2024.				
	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9:				
a	Excess from 2019		·		
b	Excess from 2020				
C	Excess from 2021	1			
d	Excess from 2022	1		, and	
6	Excess from 2023	<u> </u>	<u> </u>		Form 990-PF (2023)

Pa	art XIII Private Operating Fou	ndations (see in	structions and Pa	rt VI-A, question s	71	
1a	If the foundation has received a ruling or o			ing		
	foundation, and the ruling is effective for 2			····		10.10(1)(E)
b	Check box to indicate whether the foundat		iting foundation describ		1942(j)(3) or	4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year	(F) 2022	Prior 3 years	(d) 2020	—— (e) Total
	income from Part I or the minimum	(a) 2023	(b) 2022	(c) 2021	(a) 2020	
	investment return from Part IX for					
	each year listed					
b	85% (0.85) of line 2a					
С	Qualifying distributions from Part XI,					
	line 4, for each year listed					
d	Amounts included in line 2c not used directly					
_	for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities.					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
3	alternative test relied upon:					
а	"Assets" alternative test — enter:					
_	(1) Value of all assets					
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test — enter 2/3					
	of minimum investment return shown in					
	Part IX, line 6, for each year listed					
С	"Support" alternative test — enter:					
	(1) Total support other than gross					
	investment income (interest,				1	
	dividends, rents, payments on					
	securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization					
Da	(4) Gross investment income	ation (Complete	this part only if	the foundation b	ad \$5,000 or m	ore in assets at
, ,	any time during the ye			inc roundation ii	αα ψο,ουο οι πι	ore in assets at
1	Information Regarding Foundation Mar		3.13.13.1			
a	List any managers of the foundation who h	-	than 2% of the total	contributions received I	by the foundation	
	before the close of any tax year (but only i					
	N/A					
b	List any managers of the foundation v	vho own 10% or m	ore of the stock of	a corporation (or an	equally large por	tion of the
	ownership of a partnership or other entity)	of which the foundation	on has a 10% or great	er interest.		
	N/A					
2	Information Regarding Contribution, Gr		-			
	Check here if the foundation only		•	•	•	
	unsolicited requests for funds. If the founds		nts, etc., to individuals	or organizations unde	er other conditions,	
	complete items 2a, b, c, and d. See instruc		41			
а	The name, address, and telephone numbe		the person to whom a	applications should be	addressed:	
	CURTIS KOCH 419-502-6 1115 FIFTH STREET SAN		1870			
h	The form in which applications should be s			v should include:		
b	SEE STATEMENT 12	SUDMINICU AND INDIMA	шон ани такепаіз (пе	y anound monde.		
С	Any submission deadlines:					
-	NONE					
d	Any restrictions or limitations on awards, si	uch as by geographic	al areas, charitable fie	lds, kinds of institution	s, or other	
	factors:	, G . G	,			
	NONE					

Part XIV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment								
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount				
Name and address (home or business)	or substantial contributor	reapient						
a Paid during the year AMERICAN LUNG ASSN OF OHIO 226 STATE RT 61 E NORWALK OH 44857	NONE	PC CF	ARITABLE	10,000				
AMERICAN RED CROSS 300 CENTRAL AVE SANDUSKY OH 44870	NONE	PC SASTER CYCLE	SERVICES	74,100				
ARTISTS OPEN STUDIO 306 S NORWALK RD NORWALK OH 44857	NONE	PC EDU	CATIONAL	20,000				
BOWLING GREEN STATE UNIVERS 705 RIDGE ST BOWLING GREEN OH 43403	ITY NONE	PC EDU	CATIONAL	75,000				
CANCER SERVICES 505 EAST PERKINS AVE SANDUSKY OH 44870	NONE	PC CF	ARITABLE	5,000				
CARE & SHARE 241 JACKSON STREET SANDUSKY OH 44870	NONE	PC CF	ARITABLE	15,000				
CLEVELAND MUSEUM OF NATURAI 1 WADE OVAL DRIVE CLEVELAND OH 44109	HISTORY NONE	PC CE	ARITABLE	100,000				
CLEVELAND SIGHT CENTER 1909 E 101ST STREET CLEVELAND OH 44106-8696	NONE	PC CF	ARITABLE	20,000				
CLEVELAND ZOOLOGICAL SOCIET 3900 WILDLIFE WAY CLEVELAND OH 44109	Y NONE	PC CF	ARITABLE	7,500				
29 CHAPEL STREET MONROEVILLE OH 44847	HURCH NONE	PC CF	ARITABLE	12,500 1,499,740				
b Approved for future payment			3a 	1,499,740				
N/A								
Total			3b	F 000 PE (2022)				

Enter gross am	nounts unless otherwise indicated.	Unrelated b	ousiness income	Excluded by	section 512, 513, or 514	(e)	
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)	
1 Program se	ervice revenue:					(Cob monoconor)	
a							
b							
c							
d							
е				 			
f							
	nd contracts from government agencies	-	·····				
	p dues and assessments			1 /1	2 0/15		
	savings and temporary cash investments			14	3,845		
	and interest from securities			T.4	724,437		
	ncome or (loss) from real estate:			 			
a Debt-fir	nanced property						
b Not de	bt-financed property	-					
6 Net rental I	ncome or (loss) from personal property	 					
7 Other Inves	stment income					1,309,429	
8 Gain or (los	ss) from sales of assets other than inventory					1,309,429	
9 Net income	or (loss) from special events		····			server	
10 Gross pron 11 Other rever	t or (loss) from sales of inventory						
	R FAIR K-1					-3,079	
	R FAIR	713110	26,274	 		3,013	
		710110	20/2/1				
e							
	dd columns (b), (d), and (e)		26,274		728,282	1,306,350	
	line 12, columns (b), (d), and (e)	L				2,060,906	
	in line 13 instructions to verify calculations.)						
Part XV-B		complishmer	nt of Exempt P	urposes	Walter Tolling Tolling		
Line No.	Explain below how each activity for which income in of the foundation's exempt purposes (other than by	s reported in colu	mn (e) of Part XV-A	contributed		complishment	
N/A						w	
						·	
.,							
				······································			

Form **990-PF** (2023)

Part :		Information Rega Organizations	arding Tra	ansfers To an	d Transacti	ons and Re	elationships Wi	th Noncharita	ble Ex	emp	t
1 Die		nization directly or indi	rectly engage	e in any of the follo	owing with any	other organizat	tion described			Yes	No
		11(c) (other than section									
org	ganizations	s?									
a Tra	ansfers fro	m the reporting found	ation to a no	oncharitable exemp	ot organization o	of:					
	Cash								1a(1)	ļ	X
		ssets							1a(2)	 	X
	her transa										\ v
(1)	Sales of	assets to a noncharit	able exempt	organization					1b(1)		X
(2)	Purchas	es of assets from a no	oncharitable (exempt organization	on	• • • • • • • • • • • • • • • •	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		1b(2)	 	X
(3)	Rentalic	f facilities, equipment,	or other ass	ets					1b(3) 1b(4)	 	X
(4)	Reimbur	sement arrangements	·		· · · · · · · · · · · · · · · · · · ·					 	X
(D)	Loans o	r loan guarantees ance of services or me		r fundraicing colicit	tatione				1b(6)		X
		arice of services of ma acilities, equipment, ma								<u> </u>	X
		r to any of the above i								.L	
		goods, other assets, o									
		transaction or sharing									
	ine no.	(b) Amount involved		e of noncharitable exem			Description of transfers, tra		arrangem	ents	
N/A											
									·····		
			ļ								
									·		
de	scribed in	ation directly or indirect section 501(c) (other aplete the following sol	than section						_ Y	es X	No
) Name of organization		(b) Type of	organization		(c) Descrip	tion of relationship			
N/	A										
	Under nen	alties of perjury, I declare that	it I have examine	ed this return, including	accompanying sche	dules and statemer	nts, and to the best of my	knowledge and bellef, I	t is true,		
Sign Here	correct, an	d complete. Declaration of p	reparer (other th	an taxpayer) is based o	on all information of	which preparer has	any knowledge.	May the IRS di with the prepar See instruction	lscuss this r		No
11616							PRES/SECR				
	Signature	of officer or trustee			Date		Title			_	
	Print/T'y _l	pe preparer's name			Preparer's signa	ture		Date		Check	
Paid						T	CD3	05/	01/04	self-em	ployed
repare	r KEVII	T> 2/ 3/23/TE	CPA	TIC C COM		KIEFFER,	CPA		01/24 00569	1226	
Use On	ly Firm's n	400 5	NICKI V. MARK		PANY				-166		
	Firm's a	iddress 422 V		NEI 51. NH 44870-	-2410				9-62		

Supplementary Information (continued) Part XIV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient show any relationship to Purpose of grant or status of recipient Amount contribution any foundation manager Name and address (home or business) or substantial contributor a Paid during the year DIABETES EDUCATION & CAMPING ASSOCI PC 1138 SPRING COVE ROAD NONE EDUCATIONAL 15,000 FLORENCE AL 35634 ERIE COUNTY ECONOMIC DEVELOPMENT CO PC NONE 247 COLUMBUS AVENUE CHARITABLE SANDUSKY OH 44870 20,000 ERIE COUNTY HUMANE SOCIETY 1911 SUPERIOR STREET NONE PC SANDUSKY OH 44870 CHARITABLE 20,000 EVERSIGHT VISION 6700 EUCLID AVENUE, STE 1 NONE PC CLEVELAND OH 44103 BLINDNESS 25,000 EXPONENT PHILANTHROPY 1720 NORTH STREET, NW NONE PC WASHINGTON DC 20036 CHARITABLE 1,500 FCEDO ENDOWMENT 93 EAST MAIN ST NONE PC 25,000 NORWALK OH 44857 EDUCATIONAL FIRELANDS HISTORICAL SOCIETY PC PO BOX 572 NONE EDUCATIONAL NORWALK OH 44857 33,532 FIRELANDS HABITAT FOR HUMANITY 7602 MILAN ROAD NONE PC SANDUSKY OH 44870 CHARITABLE 135,000 FIRELANDS SYMPHONY ORCHESTRA PC 334 EAST WASHINGTON ST NONE SANDUSKY OH 44870 CHARITABLE 24,000 FIRST PRESBYTERIAN CHURCH 21 FIRELANDS BLVD NONE PC NORWALK OH 44857 RELIGIOUS 15,000 Total 3a b Approved for future payment N/A

Total

Part XIV Supplementary Information (continued)

3 Grants and Contributions Paid During		r Future Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year FISHER TITUS FOUNDATION 272 BENEDICT AVE NORWALK OH 44857	NONE	PC CH	ARITABLE	110,000
HURON COUNTY COMMUNITY FOUN 12 BENEDICT AVENUE NORWALK OH 44857	DATION NONE	PC CF	ARITABLE	25,000
HURON COUNTY HUMANE SOCIETY 246 WOODLAWN AVENUE NORWALK OH 44857	NONE	PC CF	ARITABLE	10,047
KINDER CASA 77 STATE STREET NORWALK OH 44857	NONE	PC EDU	CATIONAL	15,000
KIWANIS CLUB OF SANDUSKY PO BOX 1686 SANDUSKY OH 44870	NONE	PC CHARITABLE/EDU	CATIONAL	5,000
LEADER DOGS FOR THE BLIND 1039 S ROCHESTER ROCHESTER HILLS MI 48307	NONE	PC CF	ARITABLE	50,000
LEFTY GROVE BASEBALL LEAGUE PO BOX 918 NORWALK OH 44857	NONE	PC CF	ARITABLE	7,500
NATIONAL FOUNDATION FOR CAN 4600 EAST WEST HIGHWAY BETHESDA MD 20814	CER RESE NONE	PC CF	ARITABLE	1,500
NEW LIFE FURNITURE BANK 11335 REED HARTMAN HWY CINCINNATI OH 45241	NONE	PC CF	ARITABLE	30,000
NORWALK AREA FOOD BANK 99 WHITTLESEY AVE #C NORWALK OH 44857	NONE	PC CI	ARITABLE	12,500
b Approved for future payment	<u></u>	1	3a	
N/A				
Total				Form 990-PF (2023)

Form 990-PF (2023) THE ALBERT G & OLIVE H SCHLINK FOUN 34-6574722

Part XIV Supplementary Information (continued)

Part XIV Supplementary Information (c 3 Grants and Contributions Paid During		r Future Payment		, <u>, , , , , , , , , , , , , , , , , , </u>
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
a Paid during the year NORWALK CITY PARKS & REC DE 100 REPUBLIC STREET NORWALK OH 44857		PC ED	UCATIONAL	35,522
NORWALK CITY SCHOOL DISTRIC 134 BENEDICT AVE NORWALK OH 44857	T NONE	PC ED	UCATIONAL	27,450
NORWALK CITY SCHOOLS ENDOWN PO BOX 445 NORWALK OH 44857	ENT FUND NONE	PC ED	JCATIONAL	25,000
NORWALK PUBLIC LIBRARY 46 WEST MAIN STREET NORWALK OH 44857	NONE	PC C	HARITABLE	25,000
OH-GO 3616 PLUMBROOK CIRCLE SANDUSKY OH 44870	NONE	PC C.	HARITABLE	12,500
PREVENT BLINDNESS OHIO 1500 W THIRD AVE COLUMBUS OH 43212	NONE	PC C.	HARTIABLE	18,000
REHAB CENTER FOR NEUROLOGIC 1306 GARBRY RD PIQUA OH 45356	AL DEVEL NONE	PC C.	HARITABLE	5,000
RESEARCH TO PREVENT BLINDNE 360 LEXINGTON AVE, FL 22 NEW YORK NY 10017-6528	SS NONE	PC C.	HARITABLE	15,000
SALK INSTITUTE 10010 N TORREY PINES ROAD LA JOLLA CA 92037	NONE	PC C.	HARITABLE	30,000
SALVATION ARMY 3333 COLUMBUS AVENUE SANDUSKY OH 44870	NONE	PC C	ARITABLE 3a	14,631
b Approved for future payment			va	,
N/A				
Total	<u> </u>	L	3b	
				QQQ-PE (2022)

Part XIV Supplementary Information (continued)

3 Grants and Contributions Paid During		r Future Payme	nt		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient		Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	redpient			****
a Paid during the year SANDUSKY AREA MARITIME MUSE 125 MEIGS ST SANDUSKY OH 44870	UM NONE	PC	CH	ARITABLE	15,000
SANDUSKY EDUCATION FOUNDATE 100 E WATER ST SANDUSKY OH 44870	ON NONE	PC	EDU	CATIONAL	50,000
SANDUSKY HIGH SCHOOL 2130 HAYES AVE SANDUSKY OH 44870	NONE	PC	E	DUCATION	27,414
SANDUSKY JR SAILORS INC 422 WEST MARKET STREET SANDUSKY OH 44870	NONE	PC	EDU	CATIONAL	30,092
SANDUSKY LIBRARY & FOLLETT 114 WEST ADAMS STREET SANDUSKY OH 44870	HOUSE NONE	PC	CH	ARITABLE	1,362
SECOND HARVEST FOOD BANK 7445 DEER TRAIL LANE LORAIN OH 44053	NONE	PC	CH	ARITABLE	35,000
SERVING OUR SENIORS 310 E BOALT STREET SANDUSKY OH 44870	NONE	PC	CH	ARITABLE	20,000
SPOTLIGHT SOCIETY 776 DOGWOOD LANE VERMILION OH 44089	NONE	PC	CH	ARITABLE	4,000
ST. FRANCIS SENIOR MINISTRI 182 ST. FRANCIS AVENUE TIFFIN OH 44883	ES NONE	PC	F	ELIGIOUS	15,000
STEIN HOSPICE SERVICES 1200 SYCAMORE LINE SANDUSKY OH 44870	NONE	PC	CH	ARITABLE	28,265
b Approved for future payment				3a	
N/A					
Total				3b	000 BE (0000)

Supplementary Information (continued) Part XIV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient show any relationship to Purpose of grant or status of Amount contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year TEAM FIRST BOOK OF HURON COUNTY PC NONE PO BOX 147 EDUCATIONAL 10,000 NORWALK OH 44857 THE CLEVELAND ORCHESTRA PC 11001 EUCLID AVENUE NONE CHARITABLE 43,000 CLEVELAND OH 44106 THE SIGHT CENTER OF NW OHIO PC1909 E 101ST STREET NONE CHARITABLE 50,325 CLEVELAND OH 44106-8696 UNITED FUND 2 SEMINARY STREET NONE PC NORWALK OH 44857 EDUCATIONAL 10,000 UNITED WAY OF ERIE COUNTY 135 EAST WASHINGTON NONE PC CHARITABLE SANDUSKY OH 44870 10,000 UNIVERSITY OF MICHIGAN PC NONE 500 STATE STREET EDUCATION 10,000 ANN ARBOR MI 48109 VICTORY TEMPLE SOUP KITCHEN PC 1613 HAYES AVE NONE SANDUSKY OH 44870 CHARITABLE 12,500 3a Total b Approved for future payment N/A Total

5/1/2024 9:31 AM

SCHLFOUN THE ALBERT G & OLIVE H SCHLINK FOUN
34-6574722
FYE: 12/31/2023

of Assets
5
- Sale
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Form
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Statement

Des	Description		How Received					
Whom Sold	Date Acquired	Date Sold	Sale Price	Cost	Expense	Depreciation	Net Gain / Loss	g
APPLE INC			PURCHASE					
	2/11/15	2/11/15 12/13/23 \$	67,444 \$	10,961 \$		€.	\$ 56,483	183
CONSTELLATION ENERGY			PURCHASE					
	12/10/85 12/13/23	12/13/23	16,641	2,295			14,346	346
INTEL CORP			PURCHASE					
	1/16/04	1/16/04 12/13/23	7,146	5,766			: / T	1,380
LILLY ELI & CO			PURCHASE					
	1/03/84		838,532	5,255			833,277	277
NORTHROP GRUMMAN CORP			PURCHASE					
	11/27/78 12/13/23	12/13/23	157,918	2,578			155,340	340
SANDOZ GROUP AG SPON			PURCHASE					
	9/15/10	9/15/10 10/04/23	21	10				디
SHERWIN WILLIAMS CO			PURCHASE					
	5/04/81	12/13/23	97,436	7			97,429	429
EATON CORP			PURCHASE					
		12/13/23	122,272	19,714			102,558	558
LINDE PLC NEW FOREIGN	STOCK		PURCHASE					
3/04/10 12/13/23	3/04/10	12/13/23	25,665	10,461			15,204	204
TOTAL		\$\sqrt{\sq}}}}}}}}\sqrt{\sqrt{\sqrt{\sq}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}	1,333,075 \$	57,047 \$	0	\$	\$ 1,276,028	328

Statement 2 - Form 990-PF, Part I, Line 11 - Other Income

Description	Reve	Revenue per Books	Net Investment Income	Adjusted Net Income
CEDAR FAIR K-1 CEDAR FAIR	€.	-3,079 26,274	<i>د</i> ٠	w
TOTAL	\$	23,195	\$	\$

SCHLFOUN THE ALBERT G & OLIVE H SCHLINK FOUN

Federal Statements

5/1/2024 9:31 AM

34-6574722 FYE: 12/31/2023

	Charitable Purpose		\$ 2,935		Charitable	Purpose	\$ 354 55,440	\$ 55,794		Charitable Purpose	<i>«</i>
nting Fees	Adjusted Net	W.	O O	fessional Fees	Adjusted	Net	જ	\$	axes	Adjusted Net	₩.
- Form 990-PF, Part I, Line 16b - Accounting Fees	Net Investment		\$ 5,960	orm 990-PF, Part I, Line 16c - Other Professional Fees	Net	Investment	\$ 182	\$ 28,742)-PF, Part I, Line 18 - T	Net Investment	\$ 4,711
	Total		\$ 8,895	: 4 - Form 990-PF, Part		Total	\$ 536 84,000	\$ 84,536	Statement 5 - Form 990-PF, Part I, Line 18 - Taxes	Total	\$ 4,711
Statement 3	Description	ACCOUNTING	TOTAL	Statement 4 - Fo	:	Description	INVESTMENT FEES MANAGEMENT SERVICES	TOTAL		Description	FOREIGN INCOME TAX ON DIVIDENDS

TOTAL

5/1/2024 9:31 AM 2-9 606 42 714 149,460 85,578 259,498 1,007,702 711,657 342,682 1,615,414
210,372
158,886
53,304
288,112
1,903,923 114,583 1,632,780 175,725 166,085 127,642 260,431 Charitable Fair Market Purpose Value S S Statement 7 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments /aluation Basis of Adjusted COST COST COST COST COST COST COST COST COST COST COST COST COST COST COST COST COST COST COST Statement 6 - Form 990-PF, Part I, Line 23 - Other Expenses ഗ 94,630 327,394 318,963 132,038 59,196 130,205 35,940 75,611 52,375 431,441 27,655 59,182 111,075 258,235 23,203 71,058 94,436 68,649 18,849 40,941 End of Year 1,448 Investment Federal Statements Ś 84,378 333,333 273,887 126,880 55,410 91,815 38,235 55,356 40,939 60,469 38,389 57,010 422,683 27,655 48,174 100,411 21,428 29,730 67,742 81,149 16,107 Beginning of Year 1,835 2,162 SCHLFOUN THE ALBERT G & OLIVE H SCHLINK FOUN Total S EVERSOURCE ENERGY FKA NORTHEAST UTIL EXELON FKA CONSTELLATION ENERGY AMERICAN ELECTRIC POWER DOMINION RESOURCES, INC Description Description COLGATE-PALMOLIVE CO CONSTELLATION ENERGY LABORATORIES OHIO FILING FEES ALTRIA GROUP INC. DUKE ENERGY CORP CATERPILLER INC FYE: 12/31/2023 CEDAR FAIR LP COCA COLA INC ENBRIDGE INC INSURANCE AMEREN CORP EXXON MOBIL DOVER CORP EATON CORP AFLAC INC.

APPLE INC

AT&T

ABBOTT ABBVIE CSX CORP

DOW INC

TOTAL

OTHER

EXPENSES

34-6574722

SCHLFOUN THE ALBERT G & OLIVE H SCHLINK FOUN 34-6574722 FYE: 12/31/2023

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Invest
Stock
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- Form 990-PF.
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- Form 990-PF.

Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
FEDERATED HERMES INST HIGH YIELD BON	~ '	87,83	COST	78,27
FEDEX First.tyv anvigor CMT obd fr	3, 16 2, 02	9,65	COST	9,58
ADVISOR INVESTME	78,522	80,834	COST	68,256
GENERAL MILLS	9,40	5,74	COST	90,79
GLAXO WELLCOME PLC	7,67	7,67	COST	56,91
HUNTINGTON INGALLS	5,79	5,79	COST	, 07
ILLINOIS TOOL WORKS, INC	3,02	8,19	COST	77,91
_	2,03	8,17	COST	27,78
J P MORGAN CHASE & CO	, 51	,17	COST	50,27
JOHN HANCOCK INVESTORS	20,48	21,49	COST	15,96
JOHNSON & JOHNSON CO	73,49	93,12	COST	74,45
KIMBERLY CLARK CORP	19,87	24,63	COST	32,08
LILLY ELI & CO	6,35	1,51	COST	0,40
LINDE PLC	70,49	60,02	COST	93,87
\sim	05,35	09,04	COST	71,93
	8,12	74,03	COST	13,41
MICROSOFT CORP	94,97	03,21	COST	,154,06
ĒΪ	, 93	8,53	COST	446,64
NORTHRUP GRUMMAN	04,89	39,85	COST	,322,44
	7,18	6,34	COSI	80,63
PEPSICO, INC	57,76	62,41	COST	81,04
PFIZER	1,38	2,18	COST	77,32
PRICE I ROWE GROUP INC	2,53	7,53	COST	18,45
PROCTOR & GAMBLE	6,01	9,61	COST	51,96
PRUDENTIAL FINANCIAL INC	66,9	2,29	COST	31,97
ROYAL DUTCH PETROLEUM CO	50,63	50,63	COST	20 ' 92
SANDOZ GROUP AG SPON ADR		75	COST	1,42
SHERWIN-WILLIAMS CO	20,86	3,71	COST	15,33
TECHNOLOGY SECTOR SPDR TRUST	18,21	25,10	COST	66,82
UNION PACIFIC CORP	0,16	0,79	COST	1,45
	40,88	60,85	COST	66,71
	24,20	56,02	COST	29,93
INTERM-TERM	79,76	81,76	COST	67,44
$\overline{}$, 17	9,39	COST	18,05
VERLZON COMMUNICATIONS MET ENERGY GROTTP INT	<u>م</u> د	χ Σ <	COST	2 -
	7 1) r	1	7 7 00

5/1/2024 9:31 AM 7-9 91,012 32,600,230 52,691 52,691 Net FM< Fair Market Value Fair Market Value s Statement 9 - Form 990-PF, Part II, Line 11 - Land, Building, and Equipment Investments End Accumulated 7,706 Statement 7 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments (continued) 7,706 Depreciation Basis of Valuation Basis of Valuation Statement 8 - Form 990-PF, Part II, Line 10c - Corporate Bond Investments COST COST 23,449 49,130 49,130 7,776,227 7,706 7,706 Cost / Basis End of Year End of Year End Federal Statements 21,095 49,130 49,130 7,146,715 Beginning of Year Beginning of Year Beginning Net Book SCHLFOUN THE ALBERT G & OLIVE H SCHLINK FOUN WESTROCK CO-MEADWESTVACO MERGER OCCIDENTAL PETROLEUM CORP Description Description Description OFFICE FURNITURE FYE: 12/31/2023 TOTAL TOTAL TOTAL 34-6574722

5/1/2024 9:31 AM

SCHLFOUN THE ALBERT G & OLIVE H SCHLINK FOUN Federal Statements

FYE: 12/31/2023

Statement 10 - Form 990-PF, Part III, Line 5 - Other Decreases

Description	 Amount
FEDERAL EXCISE TAX	\$ 17,974
CEDAR FAIR UNRELATED INCOME	 26,274
TOTAL	\$ 44,248

SCHLFOUN THE ALBERT G & OLIVE H SCHLINK FOUN 34-6574722 FYE: 12/31/2023	SCHLINK FOUN Federal	Statement	Ş	ς.	5/1/2024 9:31 AM
Statement 11 - Form 990-PF		e 1 - List of C	Part VII. Line 1 - List of Officers, Directors, Trustees, Etc.	rustees, Etc.	
Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
CURTIS J. KOCH 1115 FIFTH STREET SANDUSKY OH 44870	PRES/SECR	20.00	14,400	0	0
JAMES O. MILLER 1115 FIFTH STREET SANDUSKY OH 44870	TRUSTEE	5.00	14,400	0	0
JUDITH SOMMERS 895 N. MEADOW LANE NORWALK OH 44857	TRUSTEE	5.00	4,800	0	0
JANET C. KOCH 4311 AUTUMN RIDGE LANE SANDUSKY OH 44870	TRUSTEE	5.00	14,400	0	0
JEFFREY CRANSTON 543 WOODBURY AVENUE COLUMBUS OH 43223	TRUSTEE	5.00	14,400	0	0
MICHAEL KOCH 1115 FIFTH STREET SANDUSKY OH 44870	TRUSTEE	5.00	14,400	0	0
					1

SCHLFOUN THE ALBERT G & OLIVE H SCHLINK FOUN 34-6574722 Federal Statements

FYE: 12/31/2023

Statement 12 - Form 990-PF, Part XIV, Line 2b - Application Format and Required Contents

Description

ALBERT G & OLIVE H SCHLINK FOUNDATION GUIDELINES:

1. ALL ORGANIZATIONS MUST BE ABLE TO REPRESENT THAT THEY ARE EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) AND ARE NOT PRIVATE FOUNDATIONS, AS OF THE DATE OF THE GRANT REQUEST OR AS OF ANY TIME DURING THE FUNDING PERIOD, WITHIN THE MEANING OF APPROPRIATE INTERNAL REVENUE LAWS.

2. NO MORE THAN ONE GRANT REQUEST MAY BE SUBMITTED BY ANY ORGANIZATION IN ANY 12 MONTH PERIOD. MULTI-YEAR GRANTS WILL CARRY STIPULATIONS THAT NO ADDITIONAL REQUEST WILL BE MADE OF THE FOUNDATION FOR A MINIMUM OF THREE YEARS FOLLOWING THE PAYMENT OF THE LAST INSTALLMENT OF A MULTI-YEAR GRANT.

- 3. THE FOLLOWING TYPES OF REQUESTS FOR MONEY WILL NOT BE MADE:
- (A) PURCHASE OF BLOCKS OF TICKETS;
- (B) INDIVIDUAL SCHOLARSHIPS;
- (C) GRANTS TO INDIVIDUALS FOR ANY PURPOSE;
- (D) GRANTS TO ORGANIZATIONS FOR TRAVEL TO CONFERENCES;
- (E) GRANTS FOR OR TO MEMBERSHIPS
- (F) GRANTS TO CONDUIT ORGANIZATIONS (GRANTS TO QUALIFIED GRANTEE WHICH, IN TURN PASSES FUNDS THROUGH TO ANOTHER ORGANIZATION WHICH IS NOT EXEMPT IN ITS OWN RIGHT);
- (G) GRANTS TO ANY INSTITUTION, REGARDLESS OF INTERNAL REVENUE STATUS, WHICH IN POLICY OR IN ACTUAL PRACTICE, DISCRIMINATE AGAINST INDIVIDUALS ON ACCOUNT OF RACE, CREED, SEX OR ETHNIC ORIGIN;
- (H) GRANTS FOR EMERGENCY PURPOSES;
- (I) GRANTS FOR SPECIAL BENEFIT PROGRAMS, SUCH AS FUND RAISING PROJECTS, SPECIAL APPEARANCES, SOCIAL EVENTS, ETC.;
- (J) GRANTS FOR BASIC RESEARCH OR EVALUATION OF EXISTING PROJECTS;
- (K) GRANTS FOR THE CONSTRUCTION OF STATUES, MEMORIALS OR THE LIKE;
- (L) GRANTS TO COVER DEFICITS OR FOR THE PLACEMENT IN AN ESCROW FUND OR FOR THE PLACEMENT IN AN ENDOWMENT FUND. GRANTS WILL NOT BE MADE FOR CAPITAL PROJECTS WHICH HAVE BEEN COMMENCED OR FOR WHICH FUNDING HAS BEEN OBTAINED BY THE ASSUMPTION OF DEBT THROUGH THE ISSUANCE OF BONDS, ETC; (M) SPONSORSHIP OF FILMS, RADIO OR TELEVISION OR SIMILAR MEDIA PROJECT;
- (N) ASSISTANCE TO ORGANIZATIONS WHICH WERE ORIGINALLY FUNDED BY, OR ARE CONTINUALLY SUPPORTED BY, TAX DERIVED MONIES; THIS INCLUDES GRANTS TO ORGANIZATIONS WHICH HAVE LOST SIGNIFICANT GOVERNMENT FUNDING;
- (O) PRESCHOOLS, DAY CARE CENTERS, ETC...
- 4. IN THE CASE OF GRANTS TO ORGANIZATIONS FOR OTHER THAN PURPOSES, GRANTS FOR OPERATIONAL EXPENSES WILL BE MADE ONLY WHERE THE ORGANIZATION MEETS ANY ONE OR MORE OF THE FOLLOWING CRITERIA:
- (A) THE PROJECT IS TO ASSIST PROGRAM RELATED, RESIDENTIAL OR NONRESIDENTIAL ORGANIZATIONS SERVING THE DISABLED, THE AGED OR THE PHYSICALLY OR MENTALLY DISADVANTAGED;
- (B) GRANTS IN CONNECTION WITH PUBLIC SITES OR HISTORIC CENTERS ARE MADE ONLY WHEN THE GRANT PERMITS THE SITE OR

SCHLFOUN THE ALBERT G & OLIVE H SCHLINK FOUN 34-6574722 Federal Statements

FYE: 12/31/2023

Statement 12 - Form 990-PF, Part XIV. Line 2b - Application Format and Required Contents (continued)

Description

BUILDING TO BE USED BY COMMUNITY BASED ORGANIZATIONS AND PROVIDES ACTUAL ACCESS TO SENIOR CITIZENS, PHYSICALLY HANDICAPPED, ETC.

(C) ORGANIZATIONS WHICH PROVIDE FOR YOUTH REHABILITATION PROGRAMS, INCLUDING ALCOHOL AND DRUG DETOXIFICATION ORGANIZATIONS, MAY BE FUNDED WHERE THEY ARE NOT GOVERNMENTAL, BUT ARE RESIDENTIAL IN NATURE PROVIDING BOTH INPATIENT AND OUT PATIENT ASSISTANCE, AND HAVE BEEN IN EXISTENCE FOR AT LEAST THREE YEARS.

5. GRANTS TO RELIGIOUS ORGANIZATIONS ARE FAVORED AS ARE GRANTS TO ASSIST PROGRAMS FOR THE AGED ESPECIALLY THE VISUALLY HANDICAPPED, SO LONG AS SUCH PROJECTS DO NOT DUPLICATE EXISTING OR GOVERNMENTAL PROJECTS.

Form 990-PF, Part XIV, Line 2c - Submission Deadlines

Description	

NONE

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

Description

NONE

OMB No. 1545-0047 **Exempt Organization Business Income Tax Return** Form 990-T 2023 (and proxy tax under section 6033(e)) For calendar year 2023 or other tax year beginning _______, and ending _______ Open to Public Inspection Go to www.irs.gov/Form990T for instructions and the latest information. for 501(c)(3) Department of the Treasury Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). Organizations Only Internal Revenue Service Name of organization (| Check box if name changed and see instructions.) D Employer identification number Check box if THE ALBERT G & OLIVE H SCHLINK FOUN address changed 34-6574722 Exempt under section FOUNDATION Print Number, street, and room or suite no. If a P.O. box, see instructions. E Group exemption number X = 501(C)(3)(see instructions) 1115 FIFTH STREET Type 220(e) 408(e) City or town, state or province, country, and ZIP or foreign postal code 408A 530(a) Check box if SANDUSKY 9,146,290 529(a) 529A an amended return. Book value of all assets at end of year Other trust State college/university 501(c) corporation 501(c) trust 401(a) trust Check organization type 6417(d)(1)(A) Applicable entity Credit from Form 8941 Refund shown on Form 2439 Elective payment amount from Form 3800 Check if filing only to claim Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation Enter the number of attached Schedules A (Form 990-T) During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? If "Yes," enter the name and identifying number of the parent corporation 419-502-6198 CURTIS KOCH Telephone number The books are in care of Total Unrelated Business Taxable Income Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions) 1 2 Reserved 3 Add lines 1 and 2 3 Charitable contributions (see instructions for limitation rules) 4 4 Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3 5 5 Deduction for net operating loss. See instructions 6 6 Total of unrelated business taxable income before specific deduction and section 199A deduction. 7 26,274 Subtract line 6 from line 5 8 8 Specific deduction (generally \$1,000, but see instructions for exceptions) 9 Trusts. Section 199A deduction. See instructions 9 1,000 10 Total deductions. Add lines 8 and 9 10 Unrelated business taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero 11 Tax Computation 308 Organizations taxable as corporations. Multiply Part I, line 11 by 21% (0.21) Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on Schedule D (Form 1041) Part I, line 11 from: Tax rate schedule or 3 Proxy tax. See instructions 3 4 Other tax amounts. See instructions 4 5 Alternative minimum tax 5 Tax on noncompliant facility income. See instructions 6 5,308 7 Total. Add lines 3 through 6 to line 1 or 2, whichever applies Tax and Payments Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 1a 1b Other credits (see instructions) General business credit, Attach Form 3800 (see instructions) 1c C Credit for prior year minimum tax (attach Form 8801 or 8827) 1d d Total credits. Add lines 1a through 1d 2 5,308 Subtract line 1e from Part II, line 7 Amount due from Form 4255 За 3b Amount due from Form 8611 b 3с Amount due from Form 8697 C Amount due from Form 8866 d Other amounts due (see instructions) Total amounts due. Add lines 3a through 3e Total tax. Add lines 2 and 3f (see instructions). Check if includes tax previously deferred under 5,308 section 1294. Enter tax amount here

Current net 965 tax liability paid from Form 965-A, Part II, column (k)

DAA

Form	990-T (2023) THE ALBERT G & OL	IVE H SCHLI	NK FOUN	34-65747	722		P	age 2	
Par	t III Tax and Payments (continued)								
6a	Payments: Preceding year's overpayment credited to	the current year		6a					
	Current year's estimated tax payments. Check if sec								
	applies			6b	6,840				
С	Tax deposited with Form 8868			6c					
d	Foreign organizations: Tax paid or withheld at source	e (see instructions)		6d					
	Backup withholding (see instructions)			6e					
f	Credit for small employer health insurance premiums	(attach Form 8941)		6f					
	Elective payment election amount from Form 3800			6g					
y h	Payment from Form 2439	****************		6h					
	O			61					
٠,	Other (see instructions)			0)		7	6	840	
7	Total payments. Add lines 6a through 6j	0000 :#bd				8	<u> </u>	040	
	Estimated tax penalty (see instructions). Check if Fo					9		Ω	
	Tax due. If line 7 is smaller than the total of lines 4,					10	1	532	
10	Overpayment, If line 7 is larger than the total of line	s 4, 5, and 8, enter ar	nount overpaid	' 1	Refunded	11		<u> </u>	
11	Enter the amount of line 10 you want: Credited to 2	024 estimated tax	ther Inform	ention (see instr					
	t IV Statements Regarding Certain						Yes	No	
	At any time during the 2023 calendar year, did the o						168	No	
	over a financial account (bank, securities, or other) in	-							
	FinCEN Form 114, Report of Foreign Bank and Fina	incial Accounts. If "Yes	s," enter the na	ame of the foreign of	country			v	
^	here				o familian trust			$\frac{X}{X}$	
	During the tax year, did the organization receive a di		s it the grantor	or, or transletor to,	a loreign trus	Lf		12	
	If "Yes," see instructions for other forms the organiza				C				
3	Enter the amount of tax-exempt interest received or	accrued during the tax	c year		Ф				
	Enter available pre-2018 NOL carryovers here \$					ver			
	shown on Schedule A (Form 990-T). Don't reduce th	ie NOL carryover shov	vn here by any	deduction reported	d on				
	Part I, line 6.								
	Post-2017 NOL carryovers. Enter the Business Activ								
	the amounts shown below by any NOL claimed on a	ny Schedule A, Part II							
	Business Activity Code			Available post-201	7 NOL carryo	ver			
			\$					1	
		\$							
	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
			\$ \$						
6a	Reserved for future use		\$						
b	Reserved for future use Reserved for future use		\$ \$						
6a b Pai	Reserved for future use Reserved for future use		\$ \$						
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<u> </u>	Reserved for future use Reserved for future use t V Supplemental Information		\$ \$						
<u> </u>	Reserved for future use Reserved for future use t V Supplemental Information e any additional information. See instructions.		\$ \$						
<u>b</u> Pai	Reserved for future use Reserved for future use t V Supplemental Information e any additional information. See instructions. Under penalties of perjury, I declare that I have examinated the supplemental information.	ned this retum, including	\$ \$ \$ accompanying :	schedules and statem	nents, and to the	best of my knov			
<u> </u>	Reserved for future use Reserved for future use t V Supplemental Information e any additional information. See instructions.	ned this retum, including	\$ \$ \$ accompanying :	schedules and statem	nents, and to the	b best of my knov as any knowledge	dedge and		
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Pau Provid	Reserved for future use Reserved for future use t V Supplemental Information e any additional information. See instructions. Under penalties of perjury, I declare that I have exami belief, it is true, correct, and complete. Declaration of	ned this retum, including preparer (other than taxp	\$ saccompanying sayer) is based of	schedules and statem	nents, and to the	b best of my knov as any knowledge May the li with the p (see instr	Aledge and and and and an area of the second and an area of the second and area of the seco		
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Sigr Hero	Reserved for future use Reserved for future use I V Supplemental Information e any additional information. See instructions. Under penalties of perjury, I declare that I have examinate belief, it is true, correct, and complete. Declaration of signature of officer Signature of officer Print/Type preparer's name KEVIN D. KIEFFER, CPA Firm's name PAYNE NICKLES & COMPAN Firm's address	ned this retum, including preparer (other than taxposters) PRES/ Title Preparer's signature KEVIN D. KIEI	\$ state of the sta	schedules and statem	nents, and to the	check If self-employed Firm's EIN 34-1664 Phone no.	Aledge and at the separer shown actions)? PTIN P005692	No No	

SCHEDULE A (Form 990-T)

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

B Employer identification number

2023

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

Department of the Treasury Internal Revenue Service

A Name of the organization

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

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

34-6574722 THE ALBERT G & OLIVE H SCHLINK FOUN 713110 C Unrelated business activity code (see instructions) E Describe the unrelated trade or business CEDAR FAIR LP **Unrelated Trade or Business Income** (A) Income (B) Expenses (C) Net Part I Gross receipts or sales 1a c Balance 1c Less returns and allowances ____ h Cost of goods sold (Part III, line 8) 2 2 Gross profit. Subtract line 2 from line 1c 3 3 Capital gain net income (attach Sch D (Form 1041 or 4a Form 1120)). See instructions 4a Net gain (loss) (Form 4797) (attach Form 4797). See 4b instructions 4c Capital loss deduction for trusts Income (loss) from a partnership or an S corporation (attach 5 statement) SEE STMT 1 26,274 26,274 6 Rent income (Part IV) 6 Unrelated debt-financed income (Part V) 7 Interest, annuities, royalties, and rents from a controlled 8 organization (Part VI) 8 Investment income of section 501(c)(7), (9), or (17) organizations (Part VII) Exploited exempt activity income (Part VIII) 10 10 11 11 Advertising income (Part IX) Other income (see instructions; attach statement) 12 12 Total. Combine lines 3 through 12 13 26,274 26,274 13 Deductions Not Taken Elsewhere See instructions for limitations on deductions. Deductions must be Part II directly connected with the unrelated business income Compensation of officers, directors, and trustees (Part X) 1 2 2 Salaries and wages Repairs and maintenance 3 3 4 Bad debts 4 Interest (attach statement). See instructions 5 Taxes and licenses 6 Depreciation (attach Form 4562). See instructions 7 Less depreciation claimed in Part III and elsewhere on return 8a 8b 8 9 9 Depletion _____ 10 Contributions to deferred compensation plans 11 Employee benefit programs 11 Excess exempt expenses (Part VIII) 12 12 Excess readership costs (Part IX) 13 Other deductions (attach statement) 14 15 Total deductions. Add lines 1 through 14 15 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, 16 26,274 column (C) 17 Deduction for net operating loss. See instructions 17 26,274 18 Unrelated business taxable income. Subtract line 17 from line 16 Schedule A (Form 990-T) 2023 For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2023

Schedule A (Form 990-T) 2023 THE ALBERT G & OLIVE H SCHLINK FOUN 34-6574722

Part VI Interest, An	nuities, Roy	alties, and F	Rents From	Controlle	d Organiza	tions	(see instru	ictions	3)	
	Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions) Exempt Controlled Organization									
Name of controlled organization		2. Employer Identification number	inco	t unrelated me (loss) instructions)	4. Total of specified payments made		Part of column 4 that is included in the controlling organization's gross income		6. Deductions directly connected with income in column 5	
(1)										
(2)										
(3)										
(4)										
		No	nexempt Conti	olled Organiz	ations					
Incom				ents made that I control		Part of column 9 Is included in the Illing organization's gross income			Deductions directly connected with income in column 10	
(1)										
(2)										
(3)										
(4)						calumns 5		ļ	Add columns 6 and 11.	
TotalsPart VII Investment I	Income of a	Section 50	1(c)(7) (9)	or (17) Ord	lir	here and one 8, column			Enter here and on Part I, line 8, column (B).	
			ount of income	T	ductions	1	4. Set-asides	'T	5, Total deductions	
1. Description of Income		227 1110	23 Filliaght of Hoofile		directly connected (attach statement)		(attach statement)		and set-asides (add columns 3 and 4)	
(1)										
(2)										
(3)										
(4)										
		Enter her	unts in column 2. re and on Part I, , column (A).						Add amounts in column 5. Enter here and on Part I, line 9, column (B).	
Totals		<u></u>				<u> </u>				
Part VIII Exploited Exploi	<u> cempt Activi</u>	ty Income,	Other Than	Advertisir	ng Income	(see ir	nstructions)		
 Description of exploited ac 	*									
2 Gross unrelated business i								2		
•								3		
4 Net income (loss) from unr	line 10, column (B) Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete							3		
								4		
5 Gross income from activity	that is not unre	elated business i	ncome					5		
6 Expenses attributable to in	Expenses attributable to income entered on line 5							6		
	Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line 4. Enter here and on Part II, line 12						,			
4. Enter here and on Part	II, IINE 12							7 Sebod	ulo A /Form 990 T) 2022	

