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OMB No 1545-0052 2007

Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

G	Check aii	r year 2007, or tax year beginning that apply Initial return	12/ Final return	Amended return	Address change	Name change
		Name of foundation			A Employe	er identification number
υ	se the IRS	THE GARBOSE FAMILY FOUN	DATION			
	label.	WILLIAM M. GARBOSE & LY	NNE L. GARBOSE,	TTEES	_23-	7818372
C	)therwise,	Number and street (or P O box numb			Room/suite BTelephone	number (see page 10 of the instruction
	print					
٠.	or type. ee Specific	425 STUMP ROAD			(21	5) 361-5100
	ee Specific structions.	City or town, state, and 71P code		*	C If exemption application pending, check here	
•••					D 1 Foreign organiza	
		MONTGOMERYVILLE, PA 189	36		2 Foreign organiza	ations meeting the
H	Check typ	pe of organization X Section 501	(c)(3) exempt private f	oundation	85% test, check computation	here and attach
$\prod$	Section	4947(a)(1) nonexempt charitable trust	Other taxable pr	ivate foundation	E If private foundation	on status was terminated
ı	Fair mark	et value of all assets at end   J Acco	$\underline{un}ting$ method $\underline{x}C$	ash Accrual		o)(1)(A), check here .
	of year (fro	om Part II, col (c), line	Other (specify)		F If the foundation is	in a 60-month termination
_	16) ▶ \$	524, 294. (Part I,	column (d) must be on	cash basis )	under section 507(b	o)(1)(B), check here
P		lysis of Revenue and Expenses (The	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		of amounts in columns (b), (c), and (d) not necessarily equal the amounts in	expenses per	income	income	for charitable purposes
_		nn (a) (see page 11 of the instructions) )	books			(cash basis only)
	1 Contrib	utions, gifts, grants, etc , received (attach schedule)	12,540.			
	2 Check	if the foundation is not required to attach Sch. B				
-	3 Interes	st on savings and temporary cash investments				
	4 Divide	ends and interest from securities	22,460.	22,460.		STMT 1
	5 a Gross	rents				<u> </u>
	b Net re	ntal income or (loss)				1
9	6a Net ga	ain or (loss) from sale of assets not on line 10	4,128.			
		sales price for all 31, 654.				<u></u>
Revenue	7 Capita	al gain net income (from Part IV, line 2) 。		21,162.		
-		hort-term capital gain				
	9 Incom	ne modifications				
ľ		sates less returns lowances · · · ·				
		Cost of goods sold .				<u> </u>
- {		s profit or (loss) (attach schedule)				
İ	11 Other	nncome (attach schedule)	ļ			
4		. Add lines 1 through 11	39,128.	43,622.		
		ensation of officers, directors, trustees, etc				<u> </u>
		r employee salaries and wages			<del></del>	
26		ion plans, employee benefits				<u> </u>
	16a Legal	fees (attach schedule)	ļ			ļ
Ĭ	b Accou	unting fees (attach schedule) ED	ļ			
Š	c Other	r professional fees (attach schedule)		<u> </u>		<del> </del>
ī	17 Intere	est				<del> </del>
E	18 Taxes	(attach schedule) (bed pade Working herructions)	109.	ļ		
副	19 Depre	eciation (attach schedule) and depletion				<del> </del>
P		pancy OGDEN UT				
힏		el, conferences, and meetings	<del> </del>			<del></del>
ē		ng and publications				<del> </del>
Ĕ		r expenses (attach schedule) S.TMT . 3	150.	150.		
ĕ		operating and administrative expenses.	}			
Operating and Administrative Ex		ines 13 through 23	259.	150.		ļ
٦	25 Contr	ributions, gifts, grants paid	65,558.			65,558
$\neg$		xpenses and disbursements Add lines 24 and 25	65,817.	150.		65,558
		act line 26 from line 12				
		of revenue over expenses and disbursements				
- [	b Net in	nvestment income (if negative, enter -0-)		43,472.		
		-4-4-4:	1	I .	-0-	1
	c Adjus	sted net income (if negative, enter -0-)  Act and Paperwork Reduction Act Notice	<u> </u>			Form 990-PF (200



Page 2

orm.	991	1-PF	(2007)

1 Cash - non-interest-bearing   21,934   16,722     2 Savings and temporary cash meatments   3 Accounts receivable   4     3 Accounts receivable   4     4 Pledges receivable   5     5 Grants receivable   6     6 Receivable due from officers, directors, trustees, and other disqualified persons (altude schedule)   2     8 Inventiones for facility of control of	6	ari II	Ralance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End	of year
2 Savings and temporary cash investments	<b></b>	alu ii	Datance Sheets	amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
2 Savings and temporary cash investments		1	Cash - non-interest-bear	ing	21,934.	16,722.	
4 Pelegaes receivable							
4 Pelegaes receivable		3	Accounts receivable				
Pedages receivable   Less allowance for doubtful accounts   S			Less allowance for dou	btful accounts ▶			
So Grants received to Complete United States Schedule   STOTE 1   STOTE STATES							
5 Receivable 6 Receivable due from officers, directors, inustees, and other disqualified persons (attach schedule) (see page 16 of the instructions)  7 Other notes and loans receivable (attach schedule) ■ Less allowance for duotiful accounts ■ 9 Prepare exemises and ordered charges 19 Prepare exemises and ordered charges 19 Prepare exemises and ordered charges 10 Investments - usor parts back (attach schedule) STMT, 4  10 Investments - corporate bonds (attach schedule) 11 Investments - corporate bonds (attach schedule) 12 Investments - corporate bonds (attach schedule) 13 Investments - such fortification ■ 14 Lead Subvisions 14 Lead Subvisions 15 Investments - such fortification ■ 16 Total assets (to be completed by all filers - see the instructions Also, see page 1, tent f) . 817, 268. 790, 579. 524, 294. 17 Accounts payable and accrued expenses 18 Grants reparts 19 Deferred revenue 19 Deferred revenue 10 Loans from officers, directors, rustees, and other disqualified persons 10 Loans from officers, directors, rustees, and other disqualified persons 10 Loans from officers, directors, rustees, and other disqualified persons 10 Loans from officers, directors, rustees, and other disqualified persons 10 Loans from officers, directors, rustees, and other disqualified persons 11 Grants payable 12 Total liabilities (describe ▶ 12 Total liabilities (describe ▶ 13 Total liabilities (describe ▶ 14 Lead Subvisions that follow SFAS 117, check here ■ 16 Foundations that do not follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. 12 Unrestricted .	İ		Less allowance for dou	btful accounts	Ì		
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Tother notes and loans receivable (attach schedule)  Less allowance for doubtful accounts ►  Inventiones for sale or use  Inventiones for sale or use  Inventiones for sale or use  Investments - Corporate stock (attach schedule)  Investments - Other (attach schedule)  I				1	•		
Tother notes and loans receivable (attach schedule)  Less allowance for doubtful accounts ►  Inventiones for sale or use  Inventiones for sale or use  Inventiones for sale or use  Investments - Corporate stock (attach schedule)  Investments - Other (attach schedule)  I			disqualified persons (atta	ach schedule) (see page 16 of the instructions)			
Less allowance for doubtful accounts   8 Inventories for sale or use   9 Prepaid expenses and deferred charges   9 Prepaid expenses and deferred charges   10 Investments - Use and state government obligations (ellich schedule)   11 Investments - corporate bonds (clatich schedule)   12 Investments - corporate bonds (clatich schedule)   13 Investments - such durings   14 Investments - mortgage loans   15 Investments - other clatich schedule)   16 Total assets (describe   16 Total assets (describe   16 Total assets (describe   17 Investments - mortgage loans   18 Grants payable and accrued expenses   19 Deferred revenue   19 Deferred revenue   19 Deferred revenue   19 Deferred revenue   10 Deferred revenue   10 Deferred revenue   10 Deferred revenue   11 Carta installation   12 Investments - mortgage loans   13 Investments - mortgage loans   14 Investments - mortgage loans   15 Other installations Also, see gage 1, dem i)   16 Total assets (describe   17 Deferred revenue   18 Grants payable and accrued expenses   18 Grants payable and accrued expenses   19 Deferred revenue   19 Deferred revenue   19 Deferred revenue   10 Deferred revenue   10 Deferred revenue   10 Deferred revenue   11 Total liabilities (describe   12 Unrestricted						<del></del>	
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b Investments - corporate stock (attach schedule). STMT, 4. 795, 334. 773, 857. 524, 294.  Investments - corporate bonds (attach schedule). STMT, 4. 795, 334. 773, 857. 524, 294.  Investments - mortgage loans Investments - other (attach schedule) Investments	AS			· · · · · · · · · · · · · · · · · · ·	<u>-</u>		
c investments - corporate bonds (attach schedule).  11 Investments - and, buildings.  12 Investments - mortgage loans  13 Investments - mortgage loans  14 Land, buildings, and  15 sequents - and equipment basis  16 clated scheduling  16 Total assets (de be completed by all filers - see the  17 Instructions Also, see page 1, item I).  18 Grants payable and accrued expenses  19 Deferred revenue  20 Loans from officers, directors, frustees, and other disqualified persons  21 Mortgages and other notes payable (attach schedule)  22 Other liabilities (add lines 17 through 22).  Foundations that follow SFAS 117, check here ▶  23 Total liabilities (add lines 17 through 22).  Foundations that follow SFAS 117, check here ▶  24 Unrestriedd.  25 Temporarily restricted  26 Permanently restricted  27 Capital stock, frust principal, or current funds  28 Paid-in or capital surplus, or land, bldg, and equipment fund  29 Part and in a capital surplus, and equipment fund  20 Part and a complete lines 27 through 31. ▶ ▼  27 Capital stock, frust principal, or current funds  28 Paid-in or capital surplus, or land, bldg, and equipment fund  29 Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances (see page 17 of the instructions)  1 Total net assets or fund balances (see page 17 of the instructions)  1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  2 — 266, 689,  3 Other increases not included in line 2 (itemize) ▶  3 Add lines 1, 2, and 3  4 Add lines 1, 2, and 3  4 790, 579.					795,334.	773,857.	524, 294.
and oquipment basis Loss accumulated deprecation   12 Investments - mortgage loans		C	Investments - corporate	e bonds (attach schedule)			
12   Investments - Other (attach schedule)		• •					
13   Investments - other (attach schedule)			(attach schedule)				
14 Land, buildings, and   Less accumulated depreciation					<del></del>	<del></del>	<del> </del>
Less accumulated deprecation   Cother assets (clearchibe   15 Other assets (clearchibe   16 Total assets (to be completed by all filers - see the instructions Also, see page 1, tiern II)   17 Accounts payable and accrued expenses   18 Grants payable   19 Deferred revenue   20 Loans from officers, directors, trustees, and other disqualified persons   21 Mortgages and other notes payable (attach schedule)   22 Other liabilities (add lines 17 through 22)   23 Total liabilities (add lines 17 through 22)   24 Unrestricted   25 Temporarily restricted   26 Permanently restricted   27 Poundations that follow SFAS 117, check here   28 Part III   29 Retained earnings, accumulated income, endowment, or other funds   29 Retained earnings, accumulated income, endowment, or other funds   29 Retained earnings, accumulated income, endowment, or other funds   29 Retained earnings, accumulated income, endowment, or other funds   29 Retained earnings, accumulated income, endowment, or other funds   29 Retained earnings, accumulated income, endowment, or other funds   20 Retained earnings, accumulated income, endowment, or other funds   20 Retained earnings, accumulated income, endowment, or other funds   20 Retained earnings, accumulated income, endowment, or other funds   20 Retained earnings, accumulated income, endowment, or other funds   21 Total liabilities and net assets/fund balances (see page 17 of the instructions)   21 Total liabilities and net assets/fund balances (see page 17 of the instructions)   22 Total liabilities and net assets/fund balances (see page 17 of the instructions)   23 Total liabilities and net assets/fund balances (see page 17 of the instructions)   24 Unrear figure reported on prior year's return)   25 Total liabilities and net assets/fund balances (see page 17 of the instructions)   26 Total liabilities of Changes in Net Assets or Fund Balances   27	ļ	14	Land, buildings, and	<b>&gt;</b>		<del></del>	
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instructions Also, see page 1, item i)					····		
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31 Total liabilities and net assets/fund balances (see page 17 of the instructions)	556	29	Retained earnings, accum-	ulated income, endowment, or other funds	817, 268.	790,579.	
31 Total liabilities and net assets/fund balances (see page 17 of the instructions)	Ä	30	Total net assets or fund	d balances (see page 17 of the			1
31 Total liabilities and net assets/fund balances (see page 17 of the instructions)	Ž		instructions)		817, 268.	790,579.	
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end-of-year figure reported on prior year's return)       1       817, 268.         2 Enter amount from Part I, line 27a       2       −26, 689.         3 Other increases not included in line 2 (itemize) ▶       3         4 Add lines 1, 2, and 3       4       790, 579.	P	art li					
2 Enter amount from Part I, line 27a       2 -26,689.         3 Other increases not included in line 2 (itemize) ▶       3         4 Add lines 1, 2, and 3       4 790,579.	1						
2 Enter amount from Part I, line 27a       2 -26,689.         3 Other increases not included in line 2 (itemize) ▶       3         4 Add lines 1, 2, and 3       4 790,579.		end-	of-year figure reporte	d on prior year's return)		1	<u>817, 2</u> 68.
3 Other increases not included in line 2 (itemize) ▶ 3 4 Add lines 1, 2, and 3 4 790, 579.		Ente	r amount from Part I,	line 27a		2	-26,689.
4 Add lines 1, 2, and 3 790, 579.	3	Othe	r increases not includ	led in line 2 (itemize) ▶		3	
	4	Add	lines 1, 2, and 3				790,579.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 790, 579.	5	Decr	eases not included in			3	
	6_	Tota	I net assets or fund ba	alances at end of year (line 4 minus l	line 5) - Part II, column (b)	), line 30 6	790,579.

JSA 7E1420 2 000

2-story brick warehouse, or common stock, 200 shs MLC Co.)  1a SEE PART I V SCHEDULE b  c (e) Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale e (e) Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale b c d e c d e (e) Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale b c d d e (f) Depreciation allowed (g) Cost or other basis plus expense of sale (e) plus (f) minus (g d d e C Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (ii) Gains (Col (h) gain col (k), but not less than Losses (from col (k), but not less than Losses (from col (k), but not less than Losses (from col (k)) and in the plus plus expense of sale e 2 Capital gain net income or (net capital loss)	minus					
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C c d e e e e e e e e e e e e e e e e e e						
C c d e e e e e e e e e e e e e e e e e e						
C apital gain net income or (net capital loss)						
d e  2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7   If (loss), enter -0- in Part I, line 7   If (loss), enter -0- in Part I, line 7   If (loss), enter -0- in Part I, line 8, column (c) (see pages 13 and 17 of the instructions)   If (loss), enter -0- in Part I, line 8, column (c) (see pages 13 and 17 of the instructions)   If (loss), enter -0- in Part I, line 8, column (c) (see pages 13 and 17 of the instructions)   If (loss), enter -0- in Part I, line 8,	•					
2 Capital gain net income or (net capital loss)						
If (loss), enter -0- in Part I, line 7  Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)  If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions)  If (loss), enter -0- in Part I, line 8.  Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income  (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )  If section 4940(d)(2) applies, leave this part blank  Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  Yes," the foundation does not qualify under section 4940(e) Do not complete this part  Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries (a)  Base pend years Calendar year (or tax year beginning in)  Adjusted qualifying distributions  Adjusted qualifying distributions  Net value of noncharitable-use assets  (co)  Distribution ratio (col (b) divided by col (col (b) divided by col (col (b) divided by col (col (b) divided by col (col (col (b) divided by col (col (col (col (col (col (col (col						
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)  If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions)  If (loss), enter -0- in Part I, line 8.  Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income  (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)  If section 4940(d)(2) applies, leave this part blank  Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  Yelf "Yes," the foundation does not qualify under section 4940(e) Do not complete this part  1 Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries  (a)  Base pend years  Calendar year (or tax year beginning in)  Adjusted qualifying distributions  Adjusted qualifying distributions  2006  143,870.  889,019.  0.  2005  116,927.  772,253.  0.  2004  99,427.  715,240.  0.  2003	1,162.					
If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions)  If (loss), enter -0- in Part I, line 8	1,102.					
(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income  (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income  (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income  (If section 4940(d)(2) applies, leave this part blank  Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  (If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part  1 Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries  (Ia)  (Ib)  (Ic)  (Id)  (I						
(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income  (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income  (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income  (If section 4940(d)(2) applies, leave this part blank  Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  (If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part  1 Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries  (Ia)  (Ib)  (Ic)  (Id)  (I						
Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part  1 Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries  (a)  Base period years Calendar year (or tax year beginning in)  Adjusted qualifying distributions  (b)  Adjusted qualifying distributions  Net value of nonchantable-use assets  (col (b) divided by col (col (b)						
Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries         (a) Base penod years Calendar year (or tax year beginning in)       (b) Adjusted qualifying distributions       (c) Net value of nonchantable-use assets       (d) Distribution ratio (col (b) divided by col (b) divided by col (col (col (b) divided by col (col (col (col (b) divided by col (col (col (col (col (col (col (col	′es 🔀 No					
(a) Base penod years Calendar year (or tax year beginning in)         (b) Adjusted qualifying distributions         (c) Net value of nonchantable-use assets         (d) Distribution ratio (col (b) divided by col						
Calendar year (or tax year beginning in)         Adjusted qualifying distributions         Net value of nonchantable-use assets         Distribution ratio (col (b) divided by col di						
2005     116,927.     772,253.     0.       2004     99,427.     715,240.     0.       2003     131,162.     751,525.     0.						
2004     99,427.     715,240.     0.       2003     131,162.     751,525.     0.	161830					
2003 131,162. 751,525. 0.	151410					
191/100.	139012					
	174528					
	426160					
2 Total of line 1, column (d)	052940					
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by	032940					
the must be of the foundation by the first the first transfer to the first transfer to the first transfer to the first transfer to the first transfer to the first transfer to the first transfer to the first transfer to the first transfer transfer to the first transfer tran	210588					
,	21000					
4 Enter the net value of noncharitable-use assets for 2007 from Part X, line 5						
5 Multiply line 4 by line 3 5						
6 Enter 1% of net investment income (1% of Part I, line 27b)	09,801.					
7 Add lines 5 and 6 7	09,801.					
8 Enter qualifying distributions from Part XII, line 4	09,801. 49,476.					
If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions on page 18  JSA 751430 2 000  Form 990	09,801. 49,476. 435.					

	990-PF (2007)  Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of t	ha :==		age 4
		ne ins	tructio	onsi
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
<b>.</b>	Date of ruling letter (attach copy of ruling letter if necessary - see instructions)			0.00
O	Domestic foundations that meet the section 4940(e) requirements in Part V, check			<u>869.</u>
	here ▶ and enter 1% of Part I, line 27b			
	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			0.60
3	Add lines 1 and 2			<u>869.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			<u>none</u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		-	<u>869.</u>
6	Credits/Payments			
a	2007 estimated tax payments and 2006 overpayment credited to 2007 6a NONE			
b				
	Tax paid with application for extension of time to file (Form 8868)			
	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d			NONE
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			<u>42,</u>
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			<u>911.</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2008 estimated tax   Refunded   11			
	t VII-A Statements Regarding Activities			·
1 a	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?	1 a		X
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19	4.		,
	of the instructions for definition)?	1 b		<u> X</u>
	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		.,	/ -
C	Did the foundation file Form 1120-POL for this year?	1 c	N	A
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
_	(1) On the foundation S (2) On foundation managers S			
е	Enter the reimbursement (if any) paid by the organization during the year for political expenditure tax imposed on		i	
_	foundation managers  \$	_		.,
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	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 of			.,
_	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a_		( X
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	N	/ A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T	,		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	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?	6	X	<del> </del>
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 XV	7	X	<u> </u>
8 a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) ▶			
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8 b	Х	
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 2007 or the taxable year beginning in 2007 (see instructions for Part XIV)? If			
	"Ves " complete Part XIV	اما		l v

names and addresses

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

_				_
	990-PF (2007)  VII-A Statements Regarding Activities (continued)			Page 5
		·	<del></del>	
11a	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			١
	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11a		X
b	If "Yes," did the foundation have a binding written contract in effect on August 17, 2006, covering the interest,			١,,
	rents, royalties, and annuities described in the attachment for line 11a?	( ]		X
	, , , , , , , , , , , , , , , , , , , ,	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	<u>.                                    </u>
	Website address ▶N/A			
14	The books are in care of ► WILLIAM GARBOSE Telephone no ► 215-36			
	Located at ▶425 STUMP RD, MONTGOMERYVILLE, PA ZIP+4 ▶ 18936			т
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-F in lieu of Form 1041 - Check here	• • •		· Ш
Par	and enter the amount of tax-exempt interest received or accrued during the year			
Ιαι		Т	I Vaa	No
4.	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	$\vdash$	Tes	NO
ia	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?  Yes X No			
	the state of the s			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Ī		1
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	ŀ		ł
	(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)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if			1
	the foundation agreed to make a grant to or to employ the official for a penod after			
	termination of government service, if terminating within 90 days)		ł	
ь	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 page 22 of the instructions)?	1ь	N/	A
	Organizations relying on a current notice regarding disaster assistance check here			
С	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 2007?	1 c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2007, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2007?			
	If "Yes," list the years ▶			
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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 page 22 of the instructions)	2 b	N/	А
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	<b>&gt;</b>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business			
	enterprise at any time during the year?		1	
ь	If "Yes," did it have excess business holdings in 2007 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 Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2007 )	3 Ь		Х
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	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 2007?	4b		X

Form 990-PF (2007)				Pa
Part VII-B Statements Regarding Activities	es for Which Form 4	720 May Be Requ	iired (continued)	
<ul> <li>5a During the year did the foundation pay or incur any (1) Carry on propaganda, or otherwise attempt to in (2) Influence the outcome of any specific public electrical directly or indirectly, any voter registration drive?</li> <li>(3) Provide a grant to an individual for travel, study,</li> <li>(4) Provide a grant to an organization other than a section 509(a)(1), (2), or (3), or section 4940(d)</li> <li>(5) Provide for any purpose other than religious, cheducational purposes, or for the prevention of care.</li> </ul>	or other similar purposes? charitable, etc., organization (2)? (see page 22 of the instantiable, scientific, literary, of the control of the control of the instantiable, scientific, literary, of the control of the co	or to carry on, on described in structions)	Yes X N Yes X N Yes X N	0
b If any answer is "Yes" to 5a(1)-(5), did any of the tran Regulations section 53 4945 or in a current notice of Organizations relying on a current notice regarding of	regarding disaster assistan disaster assistance check h	ce (see page 22 of the	instructions)?	5b N/A
c If the answer is "Yes" to question 5a(4), does the form because it maintained expenditure responsibility for If "Yes," attach the statement required by Regulations	the grant? s section 53 4945-5(d)		A Yes N	o
<ul> <li>6a Did the foundation, during the year, receive any fun on a personal benefit contract?</li> <li>b Did the foundation, during the year, pay premiums,</li> </ul>				o 6b
If you answered "Yes" to 6b, also file Form 8870  7a At any time during the tax year, was the foundation	a party to a prohibited tay	shalter transaction?	Yes X N	_
b If yes, did the foundation receive any proceeds or h				
Part VIII Information About Officers, Direc and Contractors	tors, Trustees, Foun	dation Managers,	Highly Paid Empl	OVERS
and contractors			,	oyees,
1 List all officers, directors, trustees, foundation	on managers and their			-
1 List all officers, directors, trustees, foundation (a) Name and address	on managers and their  (b) Title, and average hours per week devoted to position			-
(a) Name and address WILLIAM GARBOSE	(b) Title, and average hours per week devoted to position	(c) Compensation (second compensation (lf not paid, enter -0-)	e page 23 of the instr (d) Contributions to employee benefit plans	ructions). (e) Expense account
(a) Name and address WILLIAM GARBOSE P. O. BOX 642	(b) Title, and average hours per week devoted to position  TRUSTEE	compensation (se (c) Compensation (If not paid, enter	e page 23 of the instr (d) Contributions to employee benefit plans	ructions). (e) Expense account
(a) Name and address WILLIAM GARBOSE	(b) Title, and average hours per week devoted to position  TRUSTEE	(c) Compensation (second compensation (lf not paid, enter -0-)	e page 23 of the instr (d) Contributions to employee benefit plans and deferred compensation	(e) Expense account other allowances
(a) Name and address  WILLIAM GARBOSE P. O. BOX 642 LYNNE GARBOSE	(b) Title, and average hours per week devoted to position  TRUSTEE	(c) Compensation (second compensation (lf not paid, enter -0-)	e page 23 of the instr (d) Contributions to employee benefit plans and deferred compensation	(e) Expense account other allowances
(a) Name and address  WILLIAM GARBOSE P.O. BOX 642 LYNNE GARBOSE P.O. BOX 642	(b) Title, and average hours per week devoted to position  TRUSTEE	(c) Compensation (second compensation (lf not paid, enter -0-)	e page 23 of the instr (d) Contributions to employee benefit plans and deferred compensation	(e) Expense account other allowances
(a) Name and address  WILLIAM GARBOSE P. O. BOX 642 LYNNE GARBOSE P. O. BOX 642	(b) Title, and average hours per week devoted to position TRUSTEE TRUSTEE	(c) Compensation (see (c) Compensation (lf not paid, enter 0-)	e page 23 of the instr (d) Contributions to employee benefit plans and deferred compensation NONE	(e) Expense account other allowances
(a) Name and address  WI LLI AM GARBOSE P. O. BOX 642  LYNNE GARBOSE P. O. BOX 642  Compensation of five highest-paid employees	(b) Title, and average hours per week devoted to position  TRUSTEE  TRUSTEE  TRUSTEE  (b) Title and average	(c) Compensation (see (c) Compensation (lf not paid, enter 0-)	e page 23 of the instr (d) Contributions to employee benefit plans and deferred compensation NONE	(e) Expense account other allowances
(a) Name and address  WI LLI AM GARBOSE P. O. BOX 642 LYNNE GARBOSE P. O. BOX 642  Compensation of five highest-paid employees enter "NONE."	(b) Title, and average hours per week devoted to position  TRUSTEE  TRUSTEE  TRUSTEE  (other than those ince the course per week devoted to position the course per we	Compensation (sec. (c) Compensation (lif not paid, enter 0-)  NONE	e page 23 of the instr  (d) Contributions to employee benefit plans and deferred compensation  NONE  ee page 23 of the instructions to employee benefit plans and deferred	(e) Expense account other allowances  NONE  Structions). If none,
(a) Name and address  WI LLI AM GARBOSE P. O. BOX 642 LYNNE GARBOSE P. O. BOX 642  Compensation of five highest-paid employees enter "NONE."  (a) Name and address of each employee paid more than \$50,00	(b) Title, and average hours per week devoted to position  TRUSTEE  TRUSTEE  TRUSTEE  (other than those ince the course per week devoted to position the course per we	Compensation (sec. (c) Compensation (lif not paid, enter 0-)  NONE	e page 23 of the instr  (d) Contributions to employee benefit plans and deferred compensation  NONE  ee page 23 of the instructions to employee benefit plans and deferred	(e) Expense account other allowances  NONE  Structions). If none,

and Contractors (cont	<del></del>		
	tractors for professional services (see pa		
(a) Name and address of	each person paid more than \$50,000	(b) Type of service	(c) Compensation
<u> </u>			
		<del></del>	
	·		
otal number of others receiving over	\$50,000 for professional services		. NONE
	· · · · · · · · · · · · · · · · · · ·		
Part IX-A Summary of Direct C	naritable activities		
	able activities during the tax year. Include relevant statis, conferences convened, research papers produced, etc.		Expenses
1_NONE			
2			
~			
3			•
4			,
Part IX-B Summary of Program	-Related Investments (see page 24 of	the instructions)	
Describe the two largest program-related inve	stments made by the foundation during the tax year on	lines 1 and 2	Amount
1_NONE			
2			
All other program-related investments. See page	ge 24 of the instructions		
9 11011111			
<u> </u>			
	~		
Total. Add lines 1 through 3			

Pa	Minimum Investment Return (All domestic foundations must complete this part. Fore see page 24 of the instructions.)	ign foundation	ns,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes	ł	
а	Average monthly fair market value of securities	1a	701,274.
b	Average of monthly cash balances	1b	19, 336.
C	Fair market value of all other assets (see page 25 of the instructions)	1c	NONE
d		1d	720,610.
е	Reduction claimed for blockage or other factors reported on lines 1a and		<del></del>
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3	720,610.
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see page 25		
	of the instructions)	4	10,809.
5	of the instructions)  Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	709,801.
6	Minimum investment return. Enter 5% of line 5	6	35, 490.
Pa	The proof of the instructions and certain foreign organizations check here   □ and do not complete this	ate operating	
1	Minimum investment return from Part X, line 6	1	35,490.
2 a	Tax on investment income for 2007 from Part VI, line 5		
b		7	
С		7 2c	869.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	34,621.
4	Recoveries of amounts treated as qualifying distributions	4	01/021
5			34,621.
6	Add lines 3 and 4  Deduction from distributable amount (see page 25 of the instructions)	6	3.7 021.
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	34,621.
		<del></del>	J4, 021.
	Qualifying Distributions (see page 26 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а		1a	65,558.
þ		1b	NONE
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	NONE
b		1 1	NONE
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4		_ 65,558.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	65,558.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wh	ether the found	ation
	qualifies for the section 4940(e) reduction of tax in those years	- · · · · · · · ·	•

Pa	rt XIII Undistributed Income (see page	26 of the instruction	ns)		
1	Distributable amount for 2007 from Part XI.	(a) Corpus	(b) Years prior to 2006	(c) 2006	(d) 2007
	line 7		· ·		34,621.
2	Undistributed income, if any, as of the end of 2006				
	Enter amount for 2006 only				
b	2225		NONE		
3	Excess distributions carryover, if any, to 2007				
	From 2002 230, 833.				
h	From 2003 549, 357.				
c	From 2004				
d					
e					
-	Total of lines 3a through e	1,024,730.			
4	Qualifying distributions for 2007 from Part XII,	27.02.17.00.			
•	line 4 ▶ \$65,558.				
а	Applied to 2006, but not more than line 2a		İ		
		·, <u></u>			
D	Applied to undistributed income of prior years (Election required - see page 27 of the instructions)				
С	Treated as distributions out of corpus (Election required - see page 27 of the instructions)				
d	Applied to 2007 distributable amount				34,621.
е	Remaining amount distributed out of corpus	30,937.			
5	Excess distributions carryover applied to 2007				
6	(If an amount appears in column (d), the same amount must be shown in column (a))  Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,055,667.			ŀ
	Prior years' undistributed income Subtract				
	line 4b from line 2b		NONE		1
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 page 27 of the instructions		NONE		
е	Undistributed income for 2006 Subtract line 4a from line 2a Taxable amount - see page				
	27 of the instructions				
f	Undistributed income for 2007 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2008.				
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(q)(3) (see page 27 of the				
	instructions)				
8	Excess distributions carryover from 2002 not applied on line 5 or line 7 (see page 27 of the instructions)	230, 833.			
9	Excess distributions carryover to 2008.				
	Subtract lines 7 and 8 from line 6a	824,834.			
10	Analysis of line 9				
а	Excess from 2003 549, 357.				
b	Excess from 2004 65, 028.				
c	Excess from 2005				-
d					
e	Excess from 2007				}

Form	n 990-PF (2007)					Page <b>10</b>
Pa	rt XIV Private Oper	ating Foundations	see page 27 of th	e instructions and Pa	art VII-A, question 9)	NOT APPLICABLE
1 a	If the foundation has r	eceived a ruling or d	etermination letter th	at it is a private ope	rating	
	foundation, and the ruling			*	. ▶└	
b	Check box to indicate whi	ether the foundation is a	private operating four	ndation described in section	n 4942(	j)(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years	<del></del>	(e) Total
	justed net income from Part	(a) 2007	(b) 2006	(c) 2005	(d) 2004	ļ
	I or the minimum investment return from Part X for each					
	year listed		·			
b	85% of line 2a					
c	Qualifying distributions from Part					
	XII, line 4 for each year listed			<b></b>		<u> </u>
d	Amounts included in line 2c not used directly for active conduct					
	of exempt activities			<del>                                     </del>	·	<del>                                     </del>
е	Qualifying distributions made directly for active conduct of					
	exempt activities Subtract line					
,	2d from fine 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test - enter					
	(1) Value of all assets	<del></del>			<del></del>	<u> </u>
	(2) Value of assets qualifying under section					
ь	4942(j)(3)(B)(i) "Endowment" alternative test-		,,,,			<del> </del>
b	enter 2/3 of minimum invest-					
	ment return shown in Part X,		ļ			
_	line 6 for each year listed					<del> </del>
C	"Support" alternative test - enter (1) Total support other than					
	gross investment income			ļ		
	(interest, dividends, rents, payments on securities					
	loans (section 512(a)(5)),					
	or royalties) (2) Support from general					<del></del>
	public and 5 or more					
	exempt organizations as provided in section 4942					
	(j)(3)(B)(iii)					+
	port from an exempt					
	organization (4) Gross investment income		<del> </del>	<del></del>		
Pa	4	ary Information (C	omplete this part	only if the foundati	on had \$5,000 or m	ore in assets at any
	time during	the year - see page	28 of the instruct	tions.)		•
1	Information Regarding	•				
а	List any managers of					
	before the close of any	tax year (but only if the	ney have contributed	more than \$5,000) (	See section 507(0)(2)	)
		LYNNE GARBOSE				
b	List any managers of					y large portion of the
	ownership of a partner	snip or other entity) o	r which the foundation	on has a 10% or greate	er interest	
	N/A					
2	Information Regarding	Contribution Grant	Gift Loan Scholan	ship etc Programs	· · · · · · · · · · · · · · · · · · ·	
-	Check here ▶ X if t	=		•		
	unsolicited requests for	or funds. If the foun	makes contributions dation makes gifts	orants etc (see nac	e 28 of the instructions	and does not accept
	organizations under oth					ono, to mamada o
a	The name, address, a	nd telephone number	of the person to who	om applications should	be addressed	
_			ролоски по			
b	The form in which appl	lications should be su	bmitted and informa	tion and materials they	y should include	
_	N/A					
C	Any submission deadli	nes				
	N/A					
d	Any restrictions or li	mitations on awards	, such as by geog	raphical areas, charit	able fields, kinds of	institutions, or other
	factors		· · ·			
	N/A					

Part XV Supplementary Information (continued)									
3 Grants and Contributions Paid Durin	g the Year or Appro	oved for Fi	uture Payment						
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount					
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	,					
a Paid during the year				-					
SEE STATEMENT 5		İ	į						
	1								
	•								
Total	<u> </u>	<del></del>	▶ 3a	65,558.					
b Approved for future payment									
		ļ							
		Ì							
		1							
	]								
	<u> </u>		> 3h	·					
Total			<b>▶</b> 2 h	l					

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated		Unrela	ated business income	Excluded by	y section 512, 513, or 514	(e) Related or exempt	
1	Program	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d)	function income (See page 28 of the instructions)
			-				the matractions /
					<del> </del>		
						<u> </u>	
	d						
	e				<del> </del>		<del></del>
	'						
	_	and contracts from government agencies					
		ship dues and assessments					
		n savings and temporary cash investments					
		s and interest from securities			14	22,460.	
5		al income or (loss) from real estate					
		t-financed property					
		debt-financed property			ļ		
		I income or (loss) from personal property .					
7	Other in	vestment income					
8	Gain or (I	oss) from sales of assets other than inventory			18	4,128.	
9	Net inco	me or (loss) from special events					
		rofit or (loss) from sales of inventory					
		venue a					
	_						
	е						
12	Subtotal	Add columns (b), (d), and (e)				26,588.	
		dd line 12, columns (b), (d), and (e)			<del></del>		26,588.
(Se	e worksh	neet in line 13 instructions on page 29	to verify calci	ulations )			207,000.
	rt XVI-				empt Purp	oses	· · · · · · · · · · · · · · · · · · ·
	ne No.	Explain below how each activi		· <del></del>			tributed importantly to
LI		the accomplishment of the fo	undation's	exempt purposes (of	ther than b	ov providing funds for	such purposes) (See
	▼	page 29 of the instructions )				, presiding railed to:	
		NOT APPLICABLE			·	<del></del>	
		NOT THE DECEMBER					
_		······································	· <del></del> -			· · · · · · · · · · · · · · · · · · ·	
							******
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_					<del></del>		······································
		<u> </u>			<del></del>		

Par	t XVII	Information Exempt Orga		ransfers To and T	ransac	tions a	nd Relation	ships With	Nonc	harit	able
1	Did th	ne organization directly (	or indirectly eng	age in any of the following	ng with a	ny other o	organization desc	cribed in section		Yes	No
	501(c	) of the Code (other than	section 501(c)(3	) organizations) or in section	on 527, re	lating to po	olitical organizatio	ons?			
а	Trans	fers from the reporting fo	oundation to a no	oncharitable exempt organiz	ation of						
	(1) Ca	ash							1a(1)		X
	(2) 0	ther assets							1a(2)		_X
b	Other	transactions							'		i
	(1) Sa	ales of assets to a nonch	naritable exempt o	organization					1b(1)		<u>X</u> _
	(2) P	urchases of assets from	a noncharitable e	exempt organization					1b(2)		X
	(3) R	ental of facilities, equipm	ent, or other asse	ets					1b(3)		<u>X</u> _
	(4) R	eimbursement arrangeme	ents						1b(4)		_X_
										, ,	_X
	(6) P	erformance of services o	or membership or	fundraising solicitations .					1b(6)		X
		• • • •	· -	ther assets, or paid employe							X
d				mplete the following sched							
	other	assets, or services giver	by the reporting	ng foundation. If the found	dation rec	eived less	than fair market	t value in any tra	insactio	n or s	haring
	arranç	gement, show in column i	(d) the value of th	ne goods, other assets, or so	ervices re	ceived					
(a) L	ine no	(b) Amount involved	(c) Name of	noncharitable exempt organiza	tion	(d) Descr	iption of transfers,	transactions, and sh	anng arra	ingeme	nts
		N/A				N/A					
			1								
								<del></del>	_		
										_	
		ļ		-							
			ļ								
	section	•	her than section !	ated with, or related to, of 501(c)(3)) or in section 527						es X	 ] No
		(a) Name of organization		(b) Type of organ	ization		(c) D	escription of relation	nship		
		penalties of petitry, I decl	lare that I have ex plote Declaration	camined this return, including of preparer (other than taxpa)	yer or fiduo	lying scheductary) is bas	ed on all informati	s, and to the best on of which prepai	of my k er has a	nowled ny kno	ge and wledge
ē	s	ignature of officer or trustee				Date	Tit	le			
Sign Here	Paid Preparer's Use Only	Preparer's signature	n MOHO	m. Daniel	Date	11/10	Check if self-employed	Preparer's (See Signal instruction) P00026	iture on (	PTIN page 30	) of the
•	Pai epa se (	Firm's name (or yours if	ASHER	& COMPANY, LTD.	<del></del>		EII				
	្រុំ	self-employed)_address			וווידר 1	700	<del>_</del>				

Phone no 215-564-1900

19103

and ZIP code

PHI LADELPHI A,

## Schedule B

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

**Schedule of Contributors** 

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of organization

Supplementary Information for line 1 of Form 990, 990-EZ, and 990-PF (see instructions)

Employer identification number

THE GARBOSE FAMILY	FOUNDATION		
<u>WILLIAM M. GARBOSE</u>			23-7818372
Organization type (check o	ne)		
Filers of:	Section:		
Form 990 or 990-EZ	X 501(c)( ) (enter number) organic	zation	
	4947(a)(1) nonexempt charitable	trust not treated as a private	foundation
	527 political organization		
Form 990-PF	X 501(c)(3) exempt private foundat	ion	
	4947(a)(1) nonexempt charitable	trust treated as a private fou	ndation
	501(c)(3) taxable private foundate	ion	
	s covered by the <b>General Rule</b> or a <b>Special R</b> s for both the General Rule and a Special Rule		(c)(7), (8), or (10)
General Rule -			
	iling Form 990, 990-EZ, or 990-PF that rece one contributor (Complete Parts I and II)	ived, during the year, \$5,000	or more (in money or
Special Rules -			
under sections 509	c)(3) organization filing Form 990, or Form 9 B(a)(1)/170(b)(1)(A)(vi), and received from all or 2% of the amount on line 1 of these forms	ny one contributor, during the	
during the year, ag	c)(7), (8), or (10) organization filing Form 99 gregate contributions or bequests of more the or educational purposes, or the prevention of	han \$1,000 for use exclusively	for religious, charitable,
during the year, so not aggregate to n the year for an exc applies to this orga	c)(7), (8), or (10) organization filing Form 99 me contributions for use <i>exclusively</i> for religion ore than \$1,000. (If this box is checked, entitusively religious, charitable, etc., purpose Danization because it received nonexclusively.	ous, charitable, etc., purpose er here the total contributions to not complete any of the Par religious, charitable, etc., cor	s, but these contributions did that were received during ts unless the <b>General Rule</b> htributions of \$5,000 or more
990-EZ, or 990-PF), but they	are not covered by the General Rule and/or the must check the box in the heading of their lead on the meet the filing requirements of Schedu	Form 990, Form 990-EZ, or on	line 2 of their Form
For Paperwork Reduction Act Not for Form 990, Form 990-EZ, and F	ice, see the Instructions		lule B (Form 990, 990-EZ, or 990-PF) (200

THE GARBOSE FAMILY FOUNDATION

WILLIAM M. GARBOSE & LYNNE L. GARBOSE, TTEES

Employer identification number 23-7818372

Part I Contributors	(See Specific Instructions	)
---------------------	----------------------------	---

(a)	(b)	(c) Aggregate contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
1	WILLIAM & LYNNE GARBOSE  P. O. BOX 642  MONTGOMERYVILLE, PA 18936	\$ 12,540.	Person  Payroll  Noncash  (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d) Type of contribution
No.	Name, address, and ZIP + 4	Aggregate contributions	
		\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d) Type of contribution
No.	Name, address, and ZIP + 4	Aggregate contributions	
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c) Aggregate contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Name of organization THE GARBOSE FAMILY FOUNDATION
WILLIAM M. GARBOSE & LYNNE L. GARBOSE, TTEES

Employer identification number 23-7818372

Part II	Noncash	<b>Property</b>	(See S	pecific	Instructions.)	)

(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1_			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		  _ \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

	APITAL GA	NS AND LO	SSES FOR	R TAX ON	INVEST	M	ENI INCOM	<u>1</u>
Kınd of F			Description				Date acquired	Date sold
Gross sale price less	Depreciation allowed/	Cost or other	FMV as of	Adj basis as of	Excess of FMV over	D	Gain or	
expenses of sale	allowable	basis	12/31/69	12/31/69	adı basıs	H	(loss)	
		145 SHS ALCO				D		12/05/2007
5,014.		PROPERTY TYP	E: SECURIT.	LES			3,037.	
		95 GLAXO SMI PROPERTY TYP		r es		D		12/05/2007
4,904.		1,831.	2. 0200.121.	. 20			3,073.	
		310 SHS US E	ANCODD					12/05/2007
		PROPERTY TYP		I ES				12/03/2007
9,952.		2,927.					7,025.	
		185 SHS JOHN	SON & JOHN	SON		D		10/06/2008
11 70.		PROPERTY TYP						
11,784.		3,757.					8,027.	
TOTAL GAIN(LO	2551						21,162.	
TOTAL CILLIN EX	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				••••		========	
		ĺ						
					İ			
					·			
JSA 751730 1 000								

JSA 7E1730 1 000

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

	NET	INVESTMENT	INCOME	1 1 1 1 1 1	22,460.		22,460.	
REVENUE	AND	EXPENSES	PER BOOKS	1 1 1 1 1 1	22,460.	1 1 1 1 1 1 1	22,460.	
							TOTAL	
			DESCRIPTION		MERRILL LYNCH			

## FORM 990PF, PART I - TAXES

REVENUE
AND
EXPENSES
DESCRIPTION
PER BOOKS
----FEDERAL TAX PAYMENTS
109.
TOTALS
109.

2BM0SD 4188 09/28/2010 11:41:16 V07-8.7

	NET	INCOME	150.	150.
	REVENUE AND EXPENSES	PER BOOKS	150.	150.
FORM 990PF, PART I - OTHER EXPENSES		DESCRIPTION	INVESTMENT EXPENSES	TOTALS

ENDING FMV 	524,294.
ENDING BOOK VALUE	773,857.
BEGINNING BOOK VALUE	795,334.
	TOTALS
DESCRIPTION	MERRILL LYNCH ACCOUNT

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

AMOUNT ----

PURPOSE OF GRANT OR CONTRIBUTION

SEE ATTACHED SCHEDULE

RECIPIENT NAME AND ADDRESS

PUBLIC

65,558

TOTAL CONTRIBUTIONS PAID

65,558 

**5**6

### SCHÉDULE D (Form 1041)

**Capital Gains and Losses** 

OMB No 1545-0092

Department of the Treasury Internal Revenue Service Name of estate or trust

► Attach to Form 1041, Form 5227, or Form 990-T. See the separate instructions for Form 1041 (also for Form 5227 or Form 990-T, if applicable).

THE GARBOSE FAMILY FOUNDATION

Employer identification number

	<u> ILLIAM M. GARBOSE &amp; LYNNE I</u>		TTEES	- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·-	23-7818372	<u></u>
	: Form 5227 filers need to complete only					
Par	t I Short-Term Capital Gains and	Losses - Assets	Held One Yea	ar or Less		
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales price	(e) Cost or other bas (see page 40 of th instructions)	
1a						
				· · · · · · · · · · · · · · · · · · ·		
			-			
	······································					
— ь	Enter the short-term gain or (loss), if an	v from Schedule F	)-1 line 1h			1 b
2	Short-term capital gain or (loss) from Fo					
						2
3 4	Net short-term gain or (loss) from partn Short-term capital loss carryover Enter					3
•	Carryover Worksheet					4 (
5	Net short-term gain or (loss). Combine column (3) on the back	lines la through 2	in column (t) i	Enter nere and on III	ne 13,	5
200					• • • • • • • • • • • • • • • • • • • •	5
aı	t II Long-Term Capital Gains and Los  (a) Description of property	(b) Date	T T	етеаг	(e) Cost or other bas	sis (f) Gain or (loss)
	(Example 100 shares 7% preferred of "Z" Co )	acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales price	(see page 40 of the instructions)	
6a						
			<del>  </del>			
			<u> </u>			
b	Enter the long-term gain or (loss), if any	, from Schedule D	-1, line 6b			<b>6b</b> 21,162.
7	Long-term capital gain or (loss) from Fo	orms 2439, 4684,	6252, 6781, an	d 8824		7
В	Net long-term gain or (loss) from partne	erships, S corporat	tions, and other e	estates or trusts		8
9	Capital gain distributions					9
D	Gain from Form 4797, Part I					
1	Long-term capital loss carryover. Enter	the amount, if any	r, from line 14 of	f the 2006 Capital Lo	ss	0
2	Carryover Worksheet  Net long-term gain or (loss). Combine li	nes 6a through 11	l ın column (f) l	Enter here and on la	ne 14a,	1 (
	column (3) on the back				▶   1	21, 162.

Par	Summary of Parts I and II Caution: Read the instructions before completing this pa	rt	(1) Beneficiaries' (see page 41)	(2) Estate's or trust's	(3) Total
13	Net short-term gain or (loss)	13			
14	Net long-term gain or (loss):				
а	Total for year	14a			21, 162.
b	Unrecaptured section 1250 gain (see line 18 of the wrksht)	14b			
	28% rate gain			İ	
	Total net gain or (loss). Combine lines 13 and 14a ▶	15			21, 162.
Note	: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Fo				ımn (2), are net gains, go
to Pa	t V, and <b>do not</b> complete Part IV If line 15, column (3), is a net loss, complete F	Part IV a	and the Capital Loss Ca	rryover Worksheet,	as necessary
Par	t IV Capital Loss Limitation				
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, F	Part I, III	ne 4c, if a trust), the s	maller of	
а	The loss on line 15, column (3) or b \$3,000.  If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, pag			16	()
Note	: If the loss on line 15, column (3), is more than \$3,000, <b>or</b> if Form 1041, pag over Worksheet on page 42 of the instructions to figure your capital loss carryov	e 1, lin	e 22 (or Form 990-T, i	line 34), is a loss, c	omplete the Capital Loss
	VI Tax Computation Using Maximum Capital Gains Rates	e,			
_	1041 filers. Complete this part only if both lines 14a and 15 in colu	ımn /2	) are daine or an ai	mount is optored	un Port I or Port II and
	is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is moi			nount is entered	in Part for Part II and
	ion: Skip this part and complete the worksheet on page 43 of the instr				
E	ther line 14b, col (2) or line 14c, col (2) is more than zero, or		-		
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero				
	990-T trusts. Complete this part only if both lines 14a and 15 ar				
	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this par	t and	complete the works	sheet on page 43	of the instructions if
eithe	r line 14b, col (2) or line 14c, col (2) is more than zero				
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	34) .	17		
18	Enter the smaller of line 14a or 15 in column (2)				
	but not less than zero				
19	Enter the estate's or trust's qualified dividends				
	from Form 1041, line 2b(2) (or enter the qualified				
	dividends included in income in Part I of Form 990-T) 19				1
20	Add lines 18 and 19	····			
21	If the estate or trust is filing Form 4952, enter the				•
	amount from line 4g, otherwise, enter -0 ▶ 21				
22	Subtract line 21 from line 20 $$ If zero or less, enter -0- $$		22		
23	Subtract line 22 from line 17 If zero or less, enter -0		23		
24	Enter the smaller of the amount on line 17 or \$2,150		24		
25	Is the amount on line 23 equal to or more than the amount on line 24	17			
	Yes. Skip lines 25 through 27, go to line 28 and check the "No"				
	No. Enter the amount from line 23		25		
26	Subtract line 25 from line 24				
27	Multiply line 26 by 5% ( 05)			27	
28	Are the amounts on lines 22 and 26 the same?		1 1		
	Yes. Skip lines 28 thru 31, go to line 32	ne 22	28		1
				1	· ·
29	Enter the amount from line 26 (If line 26 is blank, enter -0-)		29		I
30	Subtract line 29 from line 28				
31	Multiply line 30 by 15% ( 15)	• • •		31	· · · · · · · · · · · · · · · · · · ·
32	Figure the tax on the amount on line 23 Use the 2007 Tax R				
	instructions		• • • • • • • • • • • • • • • • • • • •	32	
	Add hara 07 24 and 20				
33	Add lines 27, 31, and 32				
34	Figure the tax on the amount on line 17 Use the 2007 Tax R		. •	3	
3 F	Instructions				
35	Tax on all taxable income. Enter the smaller of line 33 or   Schedule G. Form 1041 (or line 36 of Form 200 T)			1 1	
	Schedule G, Form 1041 (or line 36 of Form 990-T)			35	

Name of estate or trust as shown on Form 1041. Do not enter name and employer identification number if shown on the other side. Employer identification number						cation number
THE GARBOSE FAMILY FOUNDATION 23-7818372  Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year						
6a						
145	SHS ALCOA		12/05/2007	5,014.	1,977.	3,037.
95 0	LAXO SMITHKLINE		12/05/2007	4,904.	1,831.	3,073.
310	SHS US BANCORP		12/05/2007	9,952.	2,927.	7,025.
185	SHS JOHNSON & JOHNSON	~~~~~	10/06/2008	11,784.	3,757.	8,027.
-						
		<del></del>				
					· · · · · · · · · · · · · · · · · · ·	
					·	
		<u> </u>				
6h Total	. Combine the amounts in column	(f) Enter here and	d on Schedule D. lin	ne 6h		21 162
UD. TOTAL	. Combine the amounts in column	(i) Liner liere alle	o on ocheque D, III		Schedule	21, 162. D-1 (Form 1041) 2007

# PORM 990-PF, PART XV - CHARITABLE CONTRIBUTIONS PAID DURING THE YEAR

ORGANIZATION NAME	EXEMPT STATUS	RESTRICTIONS	AMOUNT
MISCELLANDOUS \$500 OR LESS	501(c)(3)	NONE	3,003
AKIBA HEBREW ACADEMY 272 S BRYN MAWP AVENUE BRIN MAWR PA	50](c)(3)	NONE	1,800
ALEX'S LEMONADE STAND 333 F. LNACASTER AVENUE # 414 WYNNEWOOD, PA 19096	501(c)(3)	NONE	2,300
CHILDREN'S HOSPITAL OF PHILADELPHIA 34TH ST & CIVIC CENTER BLVD PHILADFLPHIA, PA 19104-4399	501(C)(3)	NONE	10,989
COMMUNITY PARTNERSHIP SCHOOL 1936 N JUDSON STREET PHILADELPHIA, PA 19121	501(c)(3)	NONE	6,491
CONGREGATION BETH OR P O BOX 660 SPRINGHOUSE, PA 19477	501(C)(3)	NONE	3,700
FEDERATION DAY CARE 2100 ARCH STREET PHILADELPHIA, PA 19103	501(C)(3)	NONE	1,000
FROM THE HEART 30-31 HAMPSTEAD CIRCLE WYNNEWOOD, PA 19096	501(C)(3)	NONE	15,000
GESU SCHOOL 1700 WEST THOMPSON STREET PHILADELPHIA, PA 1912!	501 (C) (3)	NONE	6,200
JUVENILE DIABETES RESEARCH FOUNDATION			1,000
JEWISH RELIEF AGENCY 116 BALA AVENUE BALA CYNWYD, PA 19004	501(C)(3)	NONE	500
KATE SVITEK FOUNDATION 1501 N Beecham Road Ambler, PA 19002	501(C)(3)	NONE	750
MADLYN & LEONARD ABRAMSON CENTER FOR JEWISH LIFE 1425 HORSHAM RD NOPTH WALES, PA 19454	501(C)(3)	NONE	1,600
OROT 328 3RD STREET LAKEWOOD, NJ 08701	501(C)(3)	NONE	1,000
PHILADELPHIA OUTWARD BOUND 3250 WEST SEDGELFY DRIVE PHILADELPHIA, PA 19130			650
PHILADELPHIA RONALD MCDONALD HOUSE 3921-25 CHESTNUT STREET PHILADELPHIA, PA 19104	501(C)(3)	NONF	8,5/5
SOUTHWEST FLORIDA KOMEN			1,000
TOTAL CONTRIBUTIONS MADE			65,558

Form 8	386B (Rev	<b>4-2009</b> )					Page 2		
		e filing for an Additional (Not Automatic) 3-Month Extension, complete only	Part II a	nd check this bo	Κ		▶ X		
		complete Part II if you have already been granted an automatic 3-month extension				m 8868	()		
	•	e filing for an Automatic 3-Month Extension, complete only Part I (on page		a providedly					
		Additional (Not Automatic) 3-Month Extension of Time. Only		original (no co	nies	neede	4)		
		Name of Exempt Organization Employer Identific							
Туре		The Garbose Family Foundation	23-7818372						
prin		Number, street, and room or suite no. If a P.O. box, see instructions		For IRS use only					
		425 STUMP ROAD	F.	l or into doc oray					
	date for the n See	City, town or post office, state, and ZIP code. For a foreign address, see Instructions		<u> </u>					
		MONTGOMERYVILLE, PA 18936		1	٠	- <b>1</b> -	ر فاهد		
		e of return to be filed (File a separate application for each return)		<u> </u>	<u> </u>				
	1 .	1 990 X Form 990-PF		Form 1041-A	F	Form	6069		
	1	990-BL Form 990-T (sec 401(a) or 408(a) trust)		Form 4720	}		8870		
$\vdash$	i	990-EZ Form 990-T (trust other than above)		Form 5227	L		0070		
STO		not complete Part II if you were not already granted an automatic 3-mol	nth exter		ously	filed Fo	rm 8868		
		s are in the care of WILLIAM GARBOSE		<u> </u>			0000		
Te	e book	ne No ► 215-361-5100 FAX No ►				_			
		panization does not have an office or place of business in the United States, c	heck this	hov		_			
		for a Group Return, enter the orga <u>niza</u> tion's four digit Group Exemption Numb			this i	 e			
		ole group, check this box				3			
		names and EtNs of all members the extension is for	DUA	, P and alle	CII B				
		lest an additional 3-month extension of time until 10/15/2009					<del></del>		
5									
6		or calendar year, or other tax year beginning 12/01/2007 and ending 11/30/2008 this tax year is for less than 12 months, check reason Initial return Final return Change in accounting period							
7		te in detail why you need the extension ADDITIONAL TIME IS NEEDED TO GATHER INFORMATION							
•	NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN								
		ABOOTER TO TABLE TO OTHER PROPERTY.							
8a	If this	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the	tentativ	e tax less anv	7	·			
	nonrefundable credits. See instructions					\$	NONE		
h	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated				100	<u>  -                                   </u>			
Ü		tax payments made Include any prior year overpayment allowed as a credit and any amount paid							
	•	pusly with Form 8868	bild billy	amount pola	8 b	e	NONE		
_		Balance Due. Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit					- 110112		
·		FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment S			8 c	•	NONE;		
	WILLI	Signature and Verification		oce matrochona	100	1 4	110111		
Unde	r penalti	es of perjury, I declare that I have examined this form, including accompanying schedules a		nts, and to the best	of my	knowledge	and belief.		
		ect, and complete, and that I am authorized to prepare this form		,	,				
						/	,		
Signa	iture 🕨	Margane & Jobus Tille & CP.	A	Date	<b>&gt;</b> :	7/13/	105		
			<del></del>	5010	Foor	68868 (5	Rev 4-2009)		
					. 99	(1			

ASHER & COMPANY, LTD

TEN PENN CENTER, 1801 MARKET STREET

PHILADELPHIA, PA 19103