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Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust

Treated as a Private Foundation

OMB No 1545-0052

Inte	rnal Re	evenue Service	Note.	The foundation may	be able	to use a copy of this retur	n to satisfy sta	ate reporting	requireme	:nts.		
Fo	r cale	ndar year 2008	, or tax yea	ar beginning	APR	1, 2008	, and e	nding	MAR	31, 2009)	
G	Chec	k all that apply	I	nitial return	F	inal return	Amended retu	ırn 🗀	Addres	s change	Name change	:
116	e the	IRS Name of	foundation						A Emplo	yer identification	n number	
0.	labe	I HANNA		_		N MEMORIAL F]			
0	therw				_	ESTORS TRUST	· · · · · · · · · · · · · · · · · · ·		23	<u>-2500519</u>	9	
	prin	ľ	,			ivered to street address)		Room/suite		none number		
	or typ e Spe	10 11 11 11 11 11 11 11 11 11 11 11 11 1		ROAD STRE	ET				(5	<u>70)455-4</u>	1731	_
	structi	ions City or to		nd ZIP code						ption application is p		믁
	-		TON,						U 1 For	eign organization	is, check here	믁
H		k type of organi				empt private foundation	-1		che	ck here and attach co	eeting the 85% test, omputation	
<u> </u>				npt charitable trust end of year J Ac		Other taxable private found in method:	Accr	ual			atus was terminated	\neg
		Part II, col (c)		end di year () Ad	_	ner (specify)	ACCI	uai		section 507(b)(1		
-	> \$	ran II, coi (c)		2 571 (Part)		nn (d) must be on cash	basis)			foundation is in a section 507(b)(1	60-month termination	\neg
		Analysis of F	Revenue an	nd Expenses	1	(a) Revenue and	(b) Net in	vaetment	ĺ	Adjusted net	(d) Disbursements	_
٠		☐ (The total of am)	iounts in colu	ımns (b), (c), and (d) ma nts ın column (a))	y not	expenses per books	inco		(6)	income	for charitable purpose (cash basis only)	s
	1			ts, etc., received		11,000.				N/A	,,,	
	2			n is not required to attach Sc	h B							
	3	Interest on savin	gs and tempos	orary								
	4	Dividends and	interest fro	om securities		136,991.	13	6,991.			STATEMENT	1
	58	Gross rents			ļ						ļ	
	t	Net rental incom	e or (loss)									
9	ը 6ն	Net gain or (loss) Gross sales price		assets not on line 10		139,927.			 	RECEI	VED	
Š		assets on line 6a		276,77	<u>4.</u>		4.2	<u> </u>				
Š		Capital gain net	-		-	 	13	9,927.	8	FFR 22	2010 9	
	8	Net short-tern		ın	-						- SS-	
	9	Income modif Gross sales less		I	-				 - -	OGDEN		
	108	and allowances Less Cost of go	ode sold						 	OGDEN	U	
		Gross profit of		L		·-· ··· · · · · · · · · · · · · · · · ·						
(N)	11	Other income	, ,			-230,093.	-23	0,106.			STATEMENT	2
_	12	Total Add lin	es 1 throug	jh 11		57,825.	4	6,812.				
MOZZZTJ -	13	Compensation of	f officers, dire	ectors, trustees, etc		0.		0.	<u> </u>			0.
<u> </u>	14	Other employe	ee salaries a	and wages	-							
	15 م	Pension plans	, employee	benefits	F							
	<u>=</u>	Legal fees		G TT V TT	<u>,</u>	2 000		1 444			1 44	_
•		Accounting fe		STMT	3	2,898.		1,444.	 		1,44	
		Other professi Interest	onal lees	STMT	4	11,856.	<u> </u>	1,856.	 		<u> </u>	0.
ر ح	18	Taxes		STMT	5	30,433.		0.				0.
	17 18 19	Depreciation a	nd denletin		-	20,423.						<u>.</u>
<u>.</u>	20	Occupancy	ina acpiciio	,,,	-							
- :a	21	Travel, confer	ences, and	meetinas	-	4,071.		0.	-		4,07	1.
9	22	Printing and p		•	ŀ			 				
Ş	23	Other expense		STMT	6	37,321.	3	5,791.				0.
c it c you	8 24	Total operation	g and adm	ninistrative								
3	[]	expenses. Ad	d lines 13 t	hrough 23		86,579.	4	<u>9,091.</u>			5,51	5.
•	25	Contributions,	gıfts, gran	ts paid		211,815.					211,81	<u>5.</u>
	26			ursements.								_
_	┿	Add lines 24 a				298,394.	4	<u>9,091.</u>			217,33	0.
		Subtract line 2			ļ	040 560						
	- 1			nses and disbursements	•	-240,569.					 	—
	- 1			if negative, enter -0-)	}			0.		N/A		
	L	Adjusted net	incomie (il v	egative, enter -0-)	ı				F	74 \ U	1	

· LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

Form 990-PF (2008)

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23-2500519

Page 2

ሮ/ດ 1	ΝΑΨΤΟΝΑΙ.	PENN	INVESTORS	ייצוואיי

D	art	Balance Sheets Attached schedules and amounts in the description	beginning or year	End of	year
	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	1,680,613.	1,192,228.	1,192,228.
	ı	Savings and temporary cash investments			
	l	Accounts receivable ►			
	٦	Less: allowance for doubtful accounts			
		Pledges receivable			
	4				
		Less; allowance for doubtful accounts			
	_	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts ▶			
ß	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ä	l .	Investments - U.S. and state government obligations			-
	l	Investments - corporate stock			
	l	Investments - corporate bonds			
	l	·		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
	''	Investments - land, buildings, and equipment, basis			
	١	Less accumulated depreciation			
	12	Investments - mortgage loans	2 272 752	2 225 572	
	13	Investments - other STMT 7	3,078,763.	3,326,579.	4,240,343.
	14	Land, buildings, and equipment: basis ▶			
		Less accumulated depreciation			·
	15	Other assets (describe			
	16	Total assets (to be completed by all filers)	4,759,376.	4,518,807.	5,432,571.
		Accounts payable and accrued expenses			
	18	Grants payable			
s	19	Deferred revenue		· · · · · · · · · · · · · · · · · · ·	
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Ē	21	Mortgages and other notes payable			
<u>:</u>	i .	· · · · · · · · · · · · · · · · · · ·			
	22	Other liabilities (describe			
		T. (4.1 1/2) - (-1.1 1	ا م	0	
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
S		and complete lines 24 through 26 and lines 30 and 31			
ဗ	24	Unrestricted			
<u>la</u>	25	Temporarily restricted			
ä	26	Permanently restricted			
or Fund Balan		Foundations that do not follow SFAS 117, check here			
Ĕ		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds	1,458,493.	1,458,493.	
Net Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Ass	29	Retained earnings, accumulated income, endowment, or other funds	3,300,883.	3,060,314.	
et	30	Total net assets or fund balances	4,759,376.	4,518,807.	
Z	٥٥	Total liet assets of fully balances	4,133,310.	4,510,007.	
		Tabel Bak Walan and not access than 4 hadrons	4 750 276	A 510 007	
_	31	Total liabilities and net assets/fund balances	4,759,376.	4,518,807.	
P	art	Analysis of Changes in Net Assets or Fund B	alances		
-	Total	not accept or fund halanges at horizonta of uses. Double solvers (-) have	20		
		net assets or fund balances at beginning of year - Part II, column (a), line	ou .		A 750 276
	•	st agree with end-of-year figure reported on prior year's return)		1	4,759,376.
		amount from Part I, line 27a		2	-240,569.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	4,518,807.
5	Decr	eases not included in line 2 (itemize)		5	0.
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	4,518,807.
					Form 990-PF (2008)

F	Part IV Capital Gains and	Losses for Tax on In	vestment	Income					
	(a) List and describe the 2-story brick warehous	e kind(s) of property sold (e.g se; or common stock, 200 shs	, real estate, s. MLC Co)		P-P	v acquired urchase onation	(c) Date (mo., c	acquired day, yr.)	(d) Date sold (mo., day, yr)
<u>1a</u>									
_ <u>b</u>	SEE ATTACHED ST	ATEMENT							
_					- -				
d					 -				
		(f) Depreciation allowed (or allowable)		t or other basis xpense of sale				Gain or (loss is (f) minus (
_a	1								
<u>_b</u>)								
d				136,84	-				139,927.
_e	complete only for assets showing gain	in column (h) and owned by:	the foundation				(I) Goine (I	Col. (h) gain	
_	Complete only for assets showing gain			cess of col. (I)				not less that	
	(i) F.M V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		col. (j), if any				(from col. (
			!		_				
_ <u>a</u>									
								*	
_ <u>`</u>									139,927.
		C If gain, also enter	r in Part Lline	7	1				<u> </u>
2	Capital gain net income or (net capital lo	(ss) $\begin{cases} \text{If gain, also enter} \\ \text{If (loss), enter -0} \end{cases}$	- in Part I, line	7		2			139,927.
2	Net short-term capital gain or (loss) as o	•							
J	If gain, also enter in Part I, line 8, colum		10 (0).)				
_	If (loss), enter -0- in Part I, line 8				نــالــ			N/A	·
F	Part V Qualification Under	Section 4940(e) for	Reduced	Tax on Net	Inves	tment Ir	come	······	
(F	or optional use by domestic private found	lations subject to the section (4940(a) tax on	net investment ir	ncome.)				
lf ·	section 4940(d)(2) applies, leave this par	t hlank							
	as the foundation liable for the section 49			•	rıod?				Yes X No
_	"Yes," the foundation does not qualify unc Enter the appropriate amount in each co				00				<u> </u>
1	(a)		uctions before	making any entiri			<u> </u>		(d)
	Base periód years	(b) Adjusted qualifying dis	tributions	Net value of no	(c) Incharita	ble-use asse	ts	Distrit	(d) oution ratio vided by col. (c))
_	Calendar year (or tax year beginning in)		4,515.			88,61		(001. (0) 011	.044741
_	2007 2006		2,476.			175,79			.042984
	2005		6,612.			383,30			.058692
	2003		3,436.	-		365,47			.050032
_	2003		2,778.			365,94			.046445
_	2000		<u> </u>		<u> </u>	,,,,,,		1	
2	Total of line 1, column (d)						2		.242895
	Average distribution ratio for the 5-year	hase period - divide the total	on line 2 by 5.	or by the number	of vears		- -		
Ĭ	the foundation has been in existence if le	•	, .,	,	,		3	1	.048579
		ood man o your o							
4	Enter the net value of noncharitable-use	assets for 2008 from Part X.	line 5				4		5,689,541.
•	Zinoi ino not talao o monana masio soo	45500 101 2500 1101111 411111						-	<u> </u>
5	Multiply line 4 by line 3						5		276,392.
Ŭ	manapy and 1 sy and c							<u> </u>	
6	Enter 1% of net investment income (1%	of Part L line 27h)					6	1	0.
,	2 7.70 5. 1152								
7	Add lines 5 and 6						7		276,392.
•							<u> </u>		
8	Enter qualifying distributions from Part	XII, line 4					8		217,330.
-	If line 8 is equal to or greater than line 7 See the Part VI instructions.	·	e 1b, and comp	lete that part usir	ng a 1% i	ax rate.			

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HANNAH S & SAMUEL COHN MEMORIAL FNDN

			50051		Page 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49	48 - :	see instr	uctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1				
	Date of ruling letter: (attach copy of ruling letter if necessary-see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1			0.
	of Part I, line 27b				
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2			0.
3	Add lines 1 and 2	3			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			0.
6	Credits/Payments:				
а	2008 estimated tax payments and 2007 overpayment credited to 2008 6a 3,520.				
b	Exempt foreign organizations - tax withheld at source 6b				
C	Tax paid with application for extension of time to file (Form 8868)				
d	Backup withholding erroneously withheld 6d				
7	Total credits and payments. Add lines 6a through 6d	7		3,5	20.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			20.
11	<u> </u>	11		2,0	00.
Pa	rt VII-A Statements Regarding Activities			1	T
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	1		Yes	No
	any political campaign?		<u>1a</u>	_	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		1 <u>b</u>	1	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	or		1	ŀ
	distributed by the foundation in connection with the activities.		i		
C	Did the foundation file Form 1120-POL for this year?		<u>1c</u>		<u> </u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation. ► \$ O . (2) On foundation managers. ► \$ O .				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
	managers. ► \$0.				l
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
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	/		-	X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N/		-	
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.				1
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
	By language in the governing instrument, or			1	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state legislation.	aw			
	remain in the governing instrument?		6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?		7	X	
	If "Yes," complete Part II, col (c), and Part XV				
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)		<u> </u>		
	PA				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		1		
	of each state as required by General Instruction G? If "No," attach explanation		<u>8b</u>	<u> </u>	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendarian	dar			
	year 2008 or the taxable year beginning in 2008 (see instructions for Part XIV)? If "Yes," complete Part XIV		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	L	X

Pana	1

	irt VII-A Statements Regarding Activities (continued)	<u>, , , , , , , , , , , , , , , , , , , </u>		<u> </u>
	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of		$\neg \neg$	
"	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
12	August 17, 2008?	12		X _
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	х	
10	Website address ► N/A			
14	The books are in care of ► MARTIN COHN Telephone no. ► 570 – 45	55-4	731	
•	Located at ► HAZLETON, PA ZIP+4 ►18			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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 the foundation agreed to make a grant to or to employ the official for a period after	ŀ		
	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	١		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? N/A	1b		
_	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			Х
2	before the first day of the tax year beginning in 2008? Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	1c		
2	defined in section 4942(j)(3) or 4942(j)(5)):			
2	At the end of tax year 2008, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
•	before 2008? Yes X No			
	If "Yes," list the years ▶			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
b	If "Yes," did it have excess business holdings in 2008 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		ļ	
	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 2008) N/A	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u>X</u>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2008?	4b		<u>X</u>
	For	m 990	-PF (2008)

HANNAH S & SAMUEL COHN MEMORIAL FNDN C/O NATIONAL PENN INVESTORS TRUST 23-2500519 Form 990-PF (2008) Page 6 Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required (continued) 5a During the year did the foundation pay or incur any amount to: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No any voter registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations N/A section 53.4945 or in a current notice regarding disaster assistance (see instructions)? 5b Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained __ Yes L__ No N/A expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 4945-5(d) 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 🗌 Yes 🗶 No Х b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b If you answered "Yes" to 6b, also file Form 8870 ___ Yes 🗶 No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? 7b Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other (c) Compensation (b) Title, and average hours per week devoted (If not paid, enter -0-) (a) Name and address to position allowances GERALD L COHN PRESIDENT MIAMI BEACH, 0.00 0 0. 0 SECRETARY MARTIN D COHN HAZLETON, PA 0. 0.00 0 0. 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other (b) Title, and average hours per week devoted to position (a) Name and address of each employee paid more than \$50,000 (c) Compensation allowances NONE

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

Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	ation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, ente	r "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	_	
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities	w +	▶ 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statis number of organizations and other beneficiaries served, conferences convened, research papers pro-	stical information such as the duced, etc	Expenses
1 N/A	3333, 4.5	
IN/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		· ·
Describe the two largest program-related investments made by the foundation during the tax year on	lines 1 and 2.	Amount
1 N/A		
2		
		
All other program related investments. Con instructions		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	>	0.
rount rea mas and south		Form 990-PF (2008)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations	, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	4,339,762.
_	Average of monthly cash balances	1b	1,436,422.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	5,776,184.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	5,776,184.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	86,643.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	5,689,541.
6	Minimum investment return. Enter 5% of line 5	6	284,477.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations at foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	284,477.
2a	Tax on investment income for 2008 from Part VI, line 5		
b	Income tax for 2008. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	284,477.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	284,477.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	284,477.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	217,330.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	217,330.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	217,330.
	Note The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the foundation	qualifies f	or the section

Form **990-PF** (2008)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2007	(c) 2007	(d) 2008
1 Distributable amount for 2008 from Part XI,				
line 7				284,477.
2 Undistributed income, if any, as of the end of 2007				
a Enter amount for 2007 only			0.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2008:				
a From 2003				
b From 2004 3, 207.				
c From 2005 50,487.				
d From 2006				
e From 2007 950.	F4 C44			
f Total of lines 3a through e	54,644.			
4 Qualifying distributions for 2008 from				
Part XII, line 4: ► \$ 217,330.			0.	
a Applied to 2007, but not more than line 2a			0.	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)				
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2008 distributable amount	•			217,330.
e Remaining amount distributed out of corpus	0.			211,3300
5 Excess distributions carryover applied to 2008	54,644.			54,644.
(If an amount appears in column (d), the same amount must be shown in column (a))	34,044.			34,044.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously				
assessed		0.		 ,
d Subtract line 6c from line 6b. Taxable		0		
amount - see instructions		0.		
e Undistributed income for 2007. Subtract line			0.	
4a from line 2a. Taxable amount - see instr. f Undistributed income for 2008. Subtract			- 0.	
lines 4d and 5 from line 1. This amount must				
be distributed in 2009				12,503.
7 Amounts treated as distributions out of				12,303.
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2003			" " " " " " " " " " " " " " " " " " " "	
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2009.		-		
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2004				
b Excess from 2005				
c Excess from 2006	ļ			
d Excess from 2007				
e Excess from 2008				
		• ———		Form 990-PF (2008)

If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Foundation

status of

recipient

PUBLIC

Form 990-PF (2008)

a Paid during the year

Recipient

Name and address (home or business)

SEE ATTACHED STATEMENT

Part XV

C/O NATIONAL PENN INVESTORS TRUST Supplementary Information (continued)

NONE

Grants and Contributions Paid During the Year or Approved for Future Payment

	23-25	00519	Page 11
Purpose of contribu	grant or	Am	nount
PURPOSE UNRESTRIC	CTED	211	1,815.
<u> </u>	▶ 3a	211	L,815.
	. 30		, 2 - 2 •

Total b Approved for future payment NONE **▶** 3b 0. Total 823611 01-02-09 Form **990-PF** (2008) 11 10180208 759340 09519B 2008.05040 HANNAH S & SAMUEL COHN MEMO 09519B_1

nter gross amounts unless otherwise indicated.	Unrelated t	usiness income		by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
Program service revenue.	code	·	code	-	
a				-	
b	i i	· · · · · · · · · · · · · · · · · · ·			
cd	1			-	
· · · · · · · · · · · · · · · · · · ·	1 1		 -	-	
e					
g Fees and contracts from government agencies					
Membership dues and assessments					-
Interest on savings and temporary cash					
investments					
Dividends and interest from securities			14	136,991.	
Net rental income or (loss) from real estate:			1 1	130/331.	
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal			1 1		
property					
Other investment income			14	-230,106.	
Gain or (loss) from sales of assets other		· · · · · · · · · · · · · · · · · · ·	=	230,100.	
than inventory			18	139,927.	
Net income or (loss) from special events	-		1-1	200,02.0	
Gross profit or (loss) from sales of inventory	· · · · · · · · · · · · · · · · · · ·				
Other revenue:					
a EXCISE TAX REFUND			01		1
b			- 		
c					
d		····			
e				-	
Subtotal. Add columns (b), (d), and (e)		().	46,812.	1
Total Add line 12, columns (b), (d), and (e)	-				46,82
ee worksheet in line 13 instructions to verify calculations.)					
art XVI-B Relationship of Activities t	to the Accom	nlishment of	Evennt D	urnosas	
ne No. Explain below how each activity for which inco the foundation's exempt purposes (other than			I-A contributed	importantly to the accomp	olishment of
		s for sacif purposes)			
1A REFUND OF EXCISE TAXES	PAID				·
					
	<u></u>	<u></u> _			
		 .			
		····		=	
					
					
			· · · · · · · · · · · · · · · · · · ·		
					-
					· ·
1					
					

823621 01-02-09

10180208 759340 09519B

Form 990-,		AH S & SAMUEL C IATIONAL PENN I			2500519	l Pa	age 13
Part X	VII Information Re	egarding Transfers To		nd Relationships With No			
	Exempt Organ					1	
	•	rectly engage in any of the follow				Yes	No
	•	(3) organizations) or in section		ations?			l
a Trans	sfers from the reporting found	ation to a noncharitable exempt (organization of				l
(1)					1a(1)		X
(2)	Other assets				1a(2)		X
-	transactions:						
٠,,	Sales of assets to a noncharita	· •			1b(1)		X
		encharitable exempt organization			15(2)		X
٠,	Rental of facilities, equipment,				1b(3)		X
	Reimbursement arrangements	•			1b(4)	 -	X
• •	oans or loan guarantees				1b(5)		X
		embership or fundraising solicitat			<u>1b(6)</u>		<u>X</u>
		ailing lists, other assets, or paid e			<u>1c</u>	<u> </u>	X
			• •	ays show the fair market value of the g		sets,	
				in any transaction or sharing arrange	ment, snow in		
	,	other assets, or services receive		T (4) =			
(a) Line no	(b) Amount involved	(c) Name of noncharitat		(d) Description of transfers, transaction	ins, and sharing a	rangeme	ents
		N/A		· · · · · · · · · · · · · · · · · · ·			
			· · · · · · · · · · · · · · · · · · ·		·		
					· · · · · ·		
							
			.				
	<u> </u>						
					· · · · · · · · · · · · · · · · · · ·		
On le the	foundation directly or indirec	tly affiliated with, or related to, or	no or more tay-exempt organize	utions described			
		er than section 501(c)(3)) or in se		ations described	Yes	X	No
	s," complete the following sch		, dilon 327 ·		L 163	ففيا	
<u> </u>	(a) Name of org		(b) Type of organization	(c) Description of re	lationship		
	N/A		1.7.7.	(0) = ==================================	r		
	N/A						
							
	· · · ·						
	·· ··· ···						
1.1m elec	anathan of a sure. I dealers that the	have averaged this sature, including on		nts, and to the best of my knowledge and be	traf it is true poss		

Preparer's identifying number Pob, 32606

(570) 283-2727

or fiduciary) is based on all information of which preparer has any knowledge

KRONICK KALADA BERDY & CO.,

KINGSTON, PA 18704

Date

Signature of officer or trustee

if self-employed), address, and ZIP code KINGSTON

Pfeparer's signature

Check if self-employed ►

Phone no.

Schedule B (Form 990, 990-EZ,

or 990-PF) Department of the Treasury Internal Revenue Service **Schedule of Contributors**

► Attach to Form 990, 990-EZ, and 990-PF.

OMB No 1545-0047

Name of the organization

Employer identification number

HANNAH S & SAMUEL COHN MEMORIAL FNDN

(C/O NATIONAL PENN INVESTORS TRUST	<u> </u>
Organization type (chec	k one).	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	on is covered by the General Rule or a Special Rule . (Note . Only a section 501(c)(7), (8), on a section as a special Rule.	or (10) organization can check boxes
General Rule		
•	ns filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in momplete Parts I and II	oney or property) from any one
Special Rules		
509(a)(1)/170(b)	01(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of (1)(A)(vi), and received from any one contributor, during the year, a contribution of the green 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1 Complete Parts I and	eater of (1) \$5,000 or (2) 2% of the
aggregate contr	01(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any orbital received from any orbital solutions or bequests of more than \$1,000 for use exclusively for religious, charitable, scient prevention of cruelty to children or animals. Complete Parts I, II, and III	
some contributi \$1,000 (If this betc, purpose C	01(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any organization filing Form 990, or Form 990-EZ, that received from any organizations disposes to the contributions dispose is checked, enter here the total contributions that were received during the year for all the contributions of the parts unless the General Rule applies to this organization becable, etc., contributions of \$5,000 or more during the year.)	d not aggregate to more than n exclusively religious, charitable,
they must answer "No" o	that are not covered by the General Rule and/or the Special Rules do not file Schedule B on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, neet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	
	nd Paperwork Reduction Act Notice, see the Instructions Schedule see instructions will be issued separately.	B (Form 990, 990-EZ, or 990-PF) (2008)

823451 12-18-08

	-		
age	7 of	1 of	Part I

Name of organization

HANNAH S & SAMUEL COHN MEMORIAL FNDN C/O NATIONAL PENN INVESTORS TRUST

Employer identification number

23-2500519

Part I Contributors ((see instructions)
-----------------------	--------------------

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	DAVID COHN & EVE COLLEN 77 RIDGE ROAD NEW ROCHELE, NY 10804	\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Occash Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Omnicash Omnicash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Part IV | Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase (a) List and describe the kind(s) of property sold, e.g., real estate, (c) Date acquired (d) Date sold 2-story brick warehouse; or common stock, 200 shs. MLC Co. (mo, day, yr.) (mo., day, yr.) D - Donation .2/18/07|09/16/08 ,000 SHS BANK OF AMERICA b FRACTIONAL SHS- BANK OF AMERICA P 09/16/08|01/27/09 c 2,000 UNITS BUCKEYE PARTNERS LP P 09/24/97|06/12/08 d 4,000 SHS CAPITAL PRODUCT PARTNERS P 109/04/08|11/24/08 #286333 P e VARIOUS UNITS GNMA VARIOUS **VARIOUS** P f RELIANT ESCROW VARIOUS VARIOUS P g FROM SCHEDULES VARIOUS VARIOUS SECTION 1231 P VARIOUS h FROM SCHEDULES K-1 VARIOUS FROM SCHEDULES K-1P VARIOUS VARIOUS k 1 m _n 0 (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (e) plus (f) minus (g) (or allowable) plus expense of sale 28,100 42,146 -14,046.a -5<u>.</u> 2. 7 b 87,306 14,693 72,613. C 62,036 -37,796. 24,240. d 244. 235. е 39,415. 39,415. f 17,721 -17,721. g <u>6,238</u> 6,238. h 91,238 91,238. 1 m n 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (ı) but not less than "-0-") (i) F.M.V. as of 12/31/69 over col. (j), if any as of 12/31/69 -14,046. a -5<u>.</u> b 72,613. С -37,796. <u>d</u> -9<u>.</u> 39,415. -17,721. g 6,238. 91,238. m n 0 { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 } 139,927. 2 Capital gain net income or (net capital loss) Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8 N/A

FORM 990-PF DIVIDENI	OS AND	INTER	EST	FROM	SECU	JRITIES	STA	ATEMENT	1
SOURCE		GROSS	AMC	UNT		PITAL GAINS DIVIDENDS	CO	OLUMN (A) AMOUNT)
K-1 DIVIDENDS K-1 INTEREST NEPA TRUST DIVIDENDS NEPA TRUST INTEREST	_		33, 41,	058. 355. 733. 845.		0. 0. 0.		24,05 33,35 41,73 37,84	55. 33.
TOTAL TO FM 990-PF, PART I, I	LN 4 =		136,	991.		0.		136,99)1. —
FORM 990-PF	OT	HER II	NCOM	ſE			STA	ATEMENT	2
DESCRIPTION		1	REV	A) ENUE BOOK	S	(B) NET INVEST- MENT INCOME		(C) ADJUSTEI NET INCOM	
PARTNERSHIP INCOME EXCISE TAX REFUND			_	-230,	106.	-230,106			
TOTAL TO FORM 990-PF, PART I	, LINE	11	-	-230,	093.	-230,106	- - = =		
FORM 990-PF	ACC	OUNTI	NG F	EES			STA	ATEMENT	3
DESCRIPTION	(A EXPEN PER B			(B) INV IT IN	EST-	(C) ADJUSTED NET INCOM		(D) CHARITAE PURPOSE	_
ACCOUNTING FEES	2	,898.		1	, 444.	•		1,44	14.
TO FORM 990-PF, PG 1, LN 16B	2	,898.		1	,444.	•		1,44	14.

FORM 990-PF C	THER PROFES	SIONAL FEE	ES 		STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOM		
TRUSTEE FEES	11,856.	11,8	356.			0.
TO FORM 990-PF, PG 1, LN 16C =	11,856.	11,8	356.			0.
FORM 990-PF	TAX	ES	<u> </u>		STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOM		
EXCISE TAXES	30,399. 34.		0.			0.
FOREIGN TAXES	011					
FOREIGN TAXES TO FORM 990-PF, PG 1, LN 18 =	30,433.		0.			0.
-		XPENSES	0.		STATEMENT	
TO FORM 990-PF, PG 1, LN 18 =	30,433.	XPENSES (B) NET INVES MENT INCO	ST-	(C) ADJUSTED NET INCOM	(D) CHARITA	6
TO FORM 990-PF, PG 1, LN 18 =	OTHER E	(B) NET INVES	ST- OME	ADJUSTED	(D) CHARITA	6 ABLE
TO FORM 990-PF, PG 1, LN 18 = FORM 990-PF DESCRIPTION INVESTMENT EXPENSE	OTHER E	(B) NET INVES MENT INCO	ST- OME 791.	ADJUSTED	(D) CHARITA	6 ABLE SES 0.
TO FORM 990-PF, PG 1, LN 18 FORM 990-PF DESCRIPTION INVESTMENT EXPENSE NON DEDUCTIBLE EXPENSES	OTHER E (A) EXPENSES PER BOOKS 35,791. 1,530.	(B) NET INVES MENT INCO 35,7	ST- OME 791.	ADJUSTED	(D) CHARITA	ABLE SES 0.
TO FORM 990-PF, PG 1, LN 18 FORM 990-PF DESCRIPTION INVESTMENT EXPENSE NON DEDUCTIBLE EXPENSES TO FORM 990-PF, PG 1, LN 23	30,433. OTHER E. (A) EXPENSES PER BOOKS 35,791. 1,530. 37,321.	(B) NET INVES MENT INCO 35,7	ST- OME 791. 0.	ADJUSTED	(D) CHARITA ME PURPOS	6 ABLE SES 0. 0.
TO FORM 990-PF, PG 1, LN 18 FORM 990-PF DESCRIPTION INVESTMENT EXPENSE NON DEDUCTIBLE EXPENSES TO FORM 990-PF, PG 1, LN 23 FORM 990-PF	30,433. OTHER EXPENSES PER BOOKS 35,791. 1,530. 37,321. OTHER INV	(B) NET INVES MENT INCO 35,7 35,7	FT- OME 791. 0. 791.	ADJUSTED NET INCOM	(D) CHARITA E PURPOS STATEMENT FAIR MARKE	ABLESES 0. 0. 7

HANNAH & SAMUEL COHN MEMORIAL FOUNDATION EIN 23-2500519 INVESTMENT SCHEDULE

	DESCRIPTION	BOOK VALUE	FAIR MARKET
	U.S. GOVERNMENT OBLIGATIONS		
343	GNMA Pool # 286333 Due 03/15/20	112 29	116 99
	COMMON STOCK		
	COMMON STOCK		
	Alavita F/K/A Surromed Ser D SR Pfd	100,000.00	100,000 00
	Bank of America Corp	28,186 00	8,204 00
	Commercial Net Lease Realty	189,839 15	198,000 00
	Enterprise Products Partners Unit	45,701.00	250,090 00
	Kınder Morgan Energy Partners	852,251.00	1,135,296 00
	Enbridge Energy	232,307 00	254,405 00
	Cohn L.L.C.	147,083 00	227,063 00
20,925	Symex Technologies	80,712 79	93,116.00
	T C. Pipelines	50,051 00	184,450 00
	Teppco Partners LP	19,791 00	90,600 00
-	Cohn Brothers LP	95,338 00	100,000 00
,	Mack Calı	167,539 40	118,860 00
1,925	Plains All American Pipeline, L P	15,517.00	70,763.00
	Williams Pipeline	72,566.00	66,334 00
	Wiltel Communications	-	
	Capital Product Partners	60,075 00	69,000 00
	Energy Transfer Partners	63,230 00	73,780 00
	Gerald LLC	137,762 00	153,725 00
	Gerald II LLC	47,260 00	52,000 00
	Family Partnership @ KNBT	25,000 00	25,000 00
	Gerald L Cohn II, LP	30,630 00	30,030.00
	Cohn Brothers II, LP	185,909 00	194,000.00
	Gerald Cohn LP	55,022 00	83,125 00
	Nustar Holdings (F/K/A Valero)	17,525.00	20,610 00
	Rae Cohn Family Partnership	72,619 00	100,000.00
	Cohn Trust at K N B T	114,416 00	112,875.00
	Cohn II, LLC	70,595 00	73,900 00
200,000	•	196,467 00	187,000 00
168,000	Chop Suey	153,074 00	168,000 00
	Total	3,326,578.63	4,240,342 99

Aventura, FL 33180 Edward & Rose Berman Hillel \$1,000.00 Jewish University Center of Pittsburgh 4607 Forbes Avenue Pittsburgh, PA 15213 James M. Barrack Hebrew Academy \$10,000.00 223 North Highland Avenue Merion Station, PA 19066 Beth Israel Temple \$1,000.00 P O. Box 2147 Hazleton, PA 18201 Bright Horizons Foundation for Children \$1,000.00 209 10th Avenue South, Suite 300 Nashville, TN 37203 CANDO Foundation \$1,500.00 200 Renaissance Center 1 South Church Street	Contributions Made 4/1/08 - 3/31/09		
590 South Avenue #A \$5,650.00 Agudas Israel Congregation \$5,650.00 77 N. Pine St. \$3,600.00 Hazleton, PA 18201 \$3,600.00 American Friends of Neve Hanna \$3,600.00 155 Fifth Avenue \$3,600.00 New York, NY 10010 \$495.00 Association of Small Foundations \$495.00 33 Wild Berry Lane, P.O. Box 117 \$495.00 Underhill, VT 05489-0117 \$6,000.00 Aventura Tumberry Jewish Center \$6,000.00 20400 N.E. 30th Avenue \$400.00 Aventura, FL 33180 \$1,000.00 Edward & Rose Berman Hillel \$1,000.00 Jewish University Center of Pittsburgh \$4607 Forbes Avenue Pittsburgh, PA 15213 \$1,000.00 James M. Barrack Hebrew Academy \$10,000.00 233 North Highland Avenue \$1,000.00 Merion Station, PA 19066 \$1,000.00 Beth Israel Temple \$1,000.00 PO, Box 2147 \$1,000.00 Hazleton, PA 18201 \$1,000.00 Bright Horizons Foundation for Children \$1,500.00	A due agay Contor	\$1,000,00	
Rochester, NY 14620 Agudas Israel Congregation 77 N. Pine St. Hazleton, PA 18201 American Friends of Neve Hanna 155 Fifth Avenue New York, NY 10010 Association of Small Foundations 33 Wild Berry Lane, P.O. Box 117 Underhill, VT 05489-0117 Aventura Tumberry Jewish Center 20400 N.E. 30th Avenue Aventura, FL 33180 Edward & Rose Berman Hillel Jewish University Center of Pittsburgh 4607 Forbes Avenue Pittsburgh, PA 15213 James M. Barrack Hebrew Academy 223 North Highland Avenue Merion Station, PA 19066 Beth Israel Temple PO. Box 2147 Hazleton, PA 18201 Bright Horizons Foundation for Children 209 10th Avenue South, Suite 300 Nashville, TN 37203 CANDO Foundation 200 Renaissance Center 1 South Church Street		\$1,000.00	
Agudas Israel Congregation \$5,650.00 77 N. Pine St.			
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1 South Church Street	200 Renaissance Center	 	h
	1 South Church Street		
	Hazleton, PA 18201	i 1	

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Central Bucks Family YMCA	\$3,334.00	
Attn: Mr. Gene Smith		
2500 Lower State Road		
Doylestown, PA 18901		
Chabad Jewish Learning Center of Laguna Beach	\$1,000.00	
30804 South Coast Highway		
Laguna Beach, CA 92651		
Chai Lifeline	\$1,000.00	
151 West 30th Street		
New York, NY 10001		
Children's Bereavement Center	\$2,000.00	
7600 South Red Road, Suite 307		
South Miami, FL 33143	1	
Congregation B'nai Israel	\$1,000.00	
3600 Riverside Boulevard		
Sacramento, CA 95818		
The CU Foundation	\$500.00	
1305 University		
Boulder, CO 80302		
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Doylestown Burpee Park	\$5,000.00	
57 West Court Street		
Doylestown, PA 18901		
Empire Justice Center	\$6,000.00	
1 West Main Street, Suite 200		
Rochester, NY 14614		
The Food Bank for Westchester	\$1,000.00	
358 Saw Mill River Road		
Millwood, NY 10546		
Foundations School Community	\$1,000.00	
14646 Sherman Way		
Van Nuys, CA 91405		
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Geisinger Health System	\$4,000.00
MC 40-00	
100 North Academy Avenue	
Danville, PA 17822	
Federated Jewish Charities	\$10,000.00
77 North Pine Street	
Hazleton, PA 18201	
Hillel of Colorado	\$1,000.00
Merage & Allon Hillel Center	
2390 South Race Street	
Denver, CO 80210-5149	
, -	
James A. Michener Art Museum	\$3,000.00 \$538 value
138 S. Pine St.	
Doylestown, PA 18901-4931	
Jewish National Fund	\$2,000.00
20803 Biscayne Blvd. #405	
Aventura, FL 33180	
Jewish Publication Society	\$1,800.00 \$1,488 tax deductible
2100 Arch Street, 2nd Floor	
Philadelphia, PA 19103	
Jewish Theological Seminary	\$20,000.00
3080 Broadway	
New York, NY 10027	
Larchmont/Mamaroneck Hunger Task Force	\$1,000.00
P.O. Box 634	
Mamaroneck, NY 10543	
Lubavitch of Central Bucks Cty	\$500.00
P.O. Box 714	
Doylestown, PA 18901	
Luzerne County Community College	\$4,000.00
1333 South Prospect Street	
Nanticoke, PA 18634-3899	
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Luzerne Foundation Hazleton Castle Endowment	\$1,000.00	
140 Main Street, Second Floor		
Luzerne, PA 18709		
Magen David Adom	\$5,000.00	
C/O Barry Goldstein		
Apt #2604		
19955 Northeast 38th Ct.		
Aventura, FL 33180		-
March of Dimes	\$200.00	
c/o Zoıla Mendoza, Wachovia Bank FL6896		
200 South Biscayne Boulevard, 15th Floor		
Miami, FL 33131		
Mayo Foundation For Medical	\$10,000.00	
Education & Research		
200 First Street SW		
Rochester, MN 55905		
·		!
Miamı Jewish Home and Hospital	\$10,000.00	
for the Aged		
5200 NE 2nd Avenue		
Miami, FL 33137		
Minsi Trails Council	\$1,000.00	
P.O. Box 20624		
Lehigh Valley, PA 18002-0624		
Mt. Sinai Medical Center Foundation	\$10,000.00	
4300 Alton Road		
Miami Beach, FL 33140-9873		
NA'Amat USA	\$10,000.00	
960 Arthur Godfrey Road, Suite #406		
Miami Beach, FL 33140	,	
National Foundation for Cancer Research	\$1,000.00	
4600 East West Highway, Suite 525		
Bethesda, MD 20814		

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National Parkinson Foundation	\$5,000.00	
1501 N.W. 9th Avenue	!	
Bob Hope Road		
Miami, FL 33136-1494		
New Orleans Hillel	\$16,000.00	
912 Broadway		
New Orleans, LA 70118-5137		
Notre Dame High School for Girls	\$1,000.00	
3000 North Mango Avenue		
Chicago, IL 60634-5289		
Open Door Family Medical Center	\$1,000.00	i
165 Main Street		
Ossining, NY 10562		
Schechter Institute of Jewish Studies Inc.	\$5,000.00	
Box #3566, P.O. Box 8500		
Philadelphia, PA 19178-3566		
	400,000,000	
The Board of Trustees of the Leland Standford Jr. Univ	\$20,000.00	
Office of Planned Giving		
326 Galvez Street		
Stanford, CA 94305-6105		
T1- F1	\$1,000.00	
Temple Emanuel 385 Ward Street	\$1,000.00	
Newton, MA 02459		
Temple Israel	\$250.00	
239 South River Street		
Wilkes-Barre, PA 18702-2492		
Temple Israel Center	\$3,000.00	
280 Old Mamaroneck Road		
White Plains, NY 10605		
Temple Shaaray Tefila	\$6,636.00	
250 E. 79th Street		
New York, NY 10021-1294		

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United Way of Greater Hazleton	\$2,200.00
134 S. Wyoming Street	
Hazleton, PA 18201	
WPBT2	\$150.00
PO Box 610002	
Mıami, FL 33261-9972	
WVIA	\$2,000.00
100 WVIA Way	
Pittston, PA 18640-6197	

Form 8868 (Rev 4-2009)			Page 2
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this both the second			▶ X
Note. Only complete Part II if you have already been granted an automatic 3 month extension on a previously filed		8868	,
If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)			
Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no co	opies r	needed)	
Name of Exempt Organization	Emp	loyer identi	fication number
Type or HANNAH S & SAMUEL COHN MEMORIAL FNDN			
C/O NATIONAL PENN INVESTORS TRUST	2	3-2500	519
File by the extended due date for filing the 12 EAST BROAD STREET	For If	RS use only	
return See Instructions HAZLETON, PA 18201			
Check type of return to be filed (File a separate application for each return)			
Form 990 Form 990-EZ Form 990-T (sec 401(a) or 408(a) trust) Form 1041-A Form 990 BL X Form 990-PF Form 990-T (trust other than above) Form 4720		orm 5227 orm 6069	Form 8870
STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previou	sly file	d Form 886	58.
MARTIN COHN ◆ The books are in the care of ▶ HAZLETON, PA - 18201			
Telephone No ► <u>570 - 455 - 4731</u> FAX No ►			
 If the organization does not have an office or place of business in the United States, check this box 			>
If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for a Group Return, enter the organization is four digit Group Exemption Number (GEN) If this is for a Group Return, enter the organization is four digit Group Exemption Number (GEN) If this is for a Group Return, enter the organization is four digit Group Exemption Number (GEN) If this is for a Group Return, enter the organization is four digit Group Exemption Number (GEN) If this is for a Group Return, enter the organization is four digit Group Exemption Number (GEN) If this is four digit Group Exemption Number (GEN) If this is four digit Group Exemption Number (GEN) If this is four digit Group Exemption Number (GEN) If this is four digit Group Exemption Number (GEN) If this is four digit Group Exemption Number (GEN) If this is four digit Group Exemption Number (GEN) If this is four digit Group Exemption Number (GEN) If this is four digit Group Exemption Number (GEN) If this is four digit Group Exemption Number (GEN) If this is four digit Group Exemption Number (GEN) If this is four digit Group Exemption Number (GEN) If this is four digit Group Exemption Number (GEN)	s is for	the whole	group, check this
box If it is for part of the group, check this box I and attach a list with the names and EINs of all	memb _'	ers the exte	nsion is for
4 Trequest an additional 3-month extension of time until FEBRUARY 15, 2010			
5 For calendar year, or other tax year beginning <u>APR 1, 2008</u> , and ending			
6 If this tax year is for less than 12 months, check reason Initial return Final return 7 State in detail why you need the extension		Change in a	ccounting period
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any			
nonrefundable credits. See instructions	8a	\$	3,520.
b If this application is for Form 990 PF, 990 T, 4720, or 6069, enter any refundable credits and estimated			
tax payments made. Include any prior year overpayment allowed as a credit and any amount paid	L		
previously with Form 8868	8b	\$	3,520.
c Balance Due. Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit			
with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	8c	\$	0.
Signature and Verification			
Under penalties of perjury, I declare that I <u>have exa</u> gnined this form, including accompanying schedules and statements, and to the it is true, correct, and complete, and that I am authorized to prepare this form	best of	f my knowled	ge and belief,
Signature Ville Title CA	Date	> //	13/09
		Form	8868 (Rev. 4-2009)

Form **8868** . (Rev. April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

Form 8868 (Rev. 4-2009)

-	re filing for an Automatic 3-Month Extension, complete only Part I and check this box	▶ X
• If you a	to ming to an Automatic C-Month Extension, Complete only 1 and 1 and 5 lock this box	
- ii you a	re filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this	form).
Do not co	omplete Part II unless you have already been granted an automatic 3-month extension on a previously fi	led Form 8868.
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies needed).	
A corpora	tion required to file Form 990-T and requesting an automatic 6-month extension - check this box and com	plete
Part I only		· ▶ □
	corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request ar Tome tax returns.	extension of time
noted belo (not autor you must	c Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic natic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consubmit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic file ov/efile and click on e-file for Chanties & Nonprofits.	cally if (1) you want the additional nsolidated Form 990-T. Instead,
Type or	Name of Exempt Organization	Employer identification number
print	HANNAH S & SAMUEL COHN MEMORIAL FNDN	
File books	C/O NATIONAL PENN INVESTORS TRUST	23-2500519
File by the due date for filing your	Number, street, and room or suite no. If a P.O. box, see instructions. 12 EAST BROAD STREET	
return See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions. HAZLETON, PA 18201	
Check ty	oe of return to be filed (file a separate application for each return).	
Forn	m 990	227
ron ریمــــــــــــــــــــــــــــــــــــ	m 990-PF Form 1041-A Form 88	370
• The bo Teleph • If the o	MARTIN COHN oks are in the care of ► HAZLETON, PA - 18201 one No. ► 570-455-4731 rganization does not have an office or place of business in the United States, check this box is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the	► □ s is for the whole group, check this
The boTelephIf the oIf this is	MARTIN COHN oks are in the care of ► HAZLETON, PA - 18201 one No.► 570-455-4731 FAX No ► rganization does not have an office or place of business in the United States, check this box	s is for the whole group, check this
The bo Teleph If the o If this is box 1 rec	MARTIN COHN oks are in the care of ► HAZLETON, PA - 18201 one No. ► 570-455-4731 rganization does not have an office or place of business in the United States, check this box is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the	s is for the whole group, check this members the extension will cover.
The bo Teleph If the o If this is box If the o	MARTIN COHN oks are in the care of ► HAZLETON, PA - 18201 one No. ► 570-455-4731 rganization does not have an office or place of business in the United States, check this box of for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this for part of the group, check this box ► and attach a list with the names and EINs of all quest an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unto NOVEMBER 15, 2009, to file the exempt organization return for the organization named a first the organization's return for calendar year or	s is for the whole group, check this members the extension will cover.
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