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Form **990-PF**

Department of the Treasury Internal Revenue Service

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.

2009

OMB No 1545-0052

For	cale	ndar year 2009, or tax yea	ar beginning		, and ending						
G	Checl	k all that apply:	Initial return		Initial return of a f	•	harity	Final retur	'n		
_		Name of four dates	Amended return		Address chan	ge	لـــا	Name change			
	e the	וספו מס פונות						A Employer identification number			
	label herwi	•	AL M. APFELE	ATTM				20-668632	5		
U	print		O box number if mail is not de		street address)		Room/suite	B Telephone number	<u> </u>		
	r typ		FIFTH STREET		,			•	-9421		
	Spe	City or town state a		·				C If exemption application is			
Ins	tructi	ons SUNBURY, I						D 1. Foreign organization	· <u> </u>		
Н	Check		X Section 501(c)(3) ex	xempt or	vate foundation			Foreign organizations makes here and attach of the control of	neeting the 85% test,		
	Se	ection 4947(a)(1) nonexen			xable private found	ation					
I F		arket value of all assets at		ing meth	od: X Cash	Accr	ual	E If private foundation st under section 507(b)(1			
(f	rom i	Part II, col. (c), line 16)		ther (spe				F If the foundation is in a	60-month termination		
	-\$	672	2,268. (Part I, colu	ımn (d) ı	must be on cash	basis.)		under section 507(b)(1			
ɔ '	art l	(The total of amounts in colunecessarily equal the amount	mns (b), (c), and (d) may not		Revenue and enses per books	(b) Net int		(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)		
<u> </u>	1	Contributions, gifts, gran	ts, etc., received		143,767.		S. 17 1 17 3	· N/A	· v.XQQ		
-	2		on is not required to attach Sch. B			\$9. 75.	, ii 4',	* '	X 22.2		
3	3	Interest on savings and temporals investments	orary					-	* * *		
	4	Dividends and interest fro	om securities		11,253.	1	1,253.		STATEMENT 1		
) ,	5a	Gross rents							10%、囊、		
	b	Net rental income or (loss)					2.000	1980 1 W	1/20 T T T T T T T T T T T T T T T T T T T		
و ا	6a	Net gain or (loss) from sale of Gross sales price for all			-36,568.		47.44				
Revenue	b	assets on line 6a	131,875.			,	* 7	\$7.5°	- 3 × 3		
Š	7	Capital gain net income (from	•				0.		2		
	8	Net short-term capital ga	IN								
	9	Income modifications Gross sales less returns	I								
	١.	and allowances					\$	***	\$ 7, 4(3°)		
		Less Cost of goods sold Gross profit or (loss)							3 2 3		
		Other income									
	12	Total, Add lines 1 through	ıh 11		118,452.	1	1,253.				
	13	Compensation of officers, dire			0.		0.		0.		
	14	Other employee salaries a	and wages	-							
	15	Pension plans, employee	benefits								
nses	16a	Legal fees									
ea Lea	b	Accounting fees	STMT 2		1,013.		0.		0.		
ă	C	Other professional fees	STMT 3		297.		0.		0.		
Ë	17	Interest	_								
tra	18	Taxes	STMT 4		129.		0.		0.		
iri	19	Depreciation and depletion	on						* ** ·		
Operating and Administrative Expe	20	Occupancy Travel, conferences, and	VED.								
Þ	21	Printing and publications		-							
ā	23	Other expenses 7 1 2							<u> </u>		
ij	24	Total operating and adm	2010 O								
era	27	expenses: Aud lines 13 t	o a		1,439.		0.		0.		
ŏ	25	Contributions, Gifts, gran	Spain		23,074.		` `	*****	23,074.		
		Total expenses and disb						**			
_	L	Add lines 24 and 25			24,513.		0.		23,074.		
	27	Subtract line 26 from line	: 12:			£	Mya 84		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	a	Excess of revenue over expen	ses and disbursements		93,939.		•		1.		
	b	Net investment income (if negative, enter -0-)		. 199	1	l,253.	× 1.85	*		
0225	C 01	Adjusted net income (if ne		1	>			N/A			
9235	210	LHA For Privacy Act a	nd Paperwork Reduction	Act Notic	ce see the instruct	ions		77 (Form 990-PF (2009)		

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		- 00111			
0/0	MTC	TENT.	M	ADERT.RAIT	м

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		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	End of year					
Р	aπ	II , Balance Sheets 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.							
		Savings and temporary cash investments	306,042.	268,632.	268,632.					
		Accounts receivable ►								
	•	Less: allowance for doubtful accounts ▶		*** *** ***						
	4	Diadaga yang yahir								
	'	Less; allowance for doubtful accounts	HA DOMINIO HINGARING COREMA - AND ON PA							
	5	Grants receivable	·							
	l .	Receivables due from officers, directors, trustees, and other								
	6									
	_	disqualified persons	· · · · · · · · · · · · · · · · · · ·							
	′									
		Less: allowance for doubtful accounts								
Assets		Inventories for sale or use								
SS		Prepaid expenses and deferred charges								
•		Investments - U.S. and state government obligations		227 226	006 445					
	b	Investments - corporate stock STMT 5	255,641.	237,986.	236,447.					
	C	Investments - corporate bonds STMT 6	13,892.	163,893.	167,189.					
	11	Investments - land, buildings, and equipment basis								
		Less accumulated depreciation			 					
	12	Investments - mortgage loans								
	13	Investments - other								
	14	Land, buildings, and equipment: basis ►								
		Less accumulated depreciation								
	15	Other assets (describe ►								
	16	Total assets (to be completed by all filers)	575,576.	670,511.	672,268.					
	_	Accounts payable and accrued expenses								
	18	Grants payable								
	19	Deferred revenue								
Liabilities	20	F								
를	1	Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable			,					
Ë	21				, ,					
	22	Other liabilities (describe)								
		Total Cabillata (add keep 47 through 00)	0.	0.						
_	23	Total liabilities (add lines 17 through 22)								
		Foundations that follow SFAS 117, check here								
ģ	l	and complete lines 24 through 26 and lines 30 and 31.								
ဦ		Unrestricted	· · · · · · · · · · · · · · · · · · ·							
亨	25	Temporarily restricted								
ä	26	Permanently restricted								
Ĕ		Foundations that do not follow SFAS 117, check here								
F		and complete lines 27 through 31.	_	_						
S	27	Capital stock, trust principal, or current funds	0.	0.						
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.						
Net Assets or Fund Balances	29	Retained earnings, accumulated income, endowment, or other funds	575,576.	670,511.						
Šet	30	Total net assets or fund balances	575,576.	670,511.						
_										
	31	Total liabilities and net assets/fund balances	575,576.	670,511.	*					
		III Analysis of Changes in Net Assets or Fund Ba	alances							
LP	art	III	alalices							
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line 3	30							
		st agree with end-of-year figure reported on prior year's return)		1	575,576.					
2	•	r amount from Part I, line 27a		2	93,939.					
		r increases not included in line 2 (itemize) ACCRUED INCO	OME ADJUSTMENT	-	996.					
		lines 1, 2, and 3		4	670,511.					
		eases not included in line 2 (itemize)		5	0.					
-		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (h), line 30	6	670,511.					
<u>. </u>	i Uld	The assets of fund balances at one of year time 4 finites line 3) - 1 art 11, 60	idinii (D), iiilo OO		Form 990-PF (2009)					

C/O MICHEAL M. APFELBAUM

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	Part IV Capital Gains and Losses for Tax on Investment Income										
(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)							low acquire - Purchase - Donation	d (c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)	
_			SELL 1000 GR				P		2/06/07	08/04/09	
	1815 SH ISHARE			0 INDE	X FD		<u>P</u>		01/10/05	08/04/09	
_	148 SH ISHARES					<u> </u>	P		2/06/07	08/04/09	
d CAPITAL GAINS DIVIDENDS											
(e) Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale									(h) Gain or (loss (e) plus (f) minus		
- 2	23,268.		`		29,95	9.				-6,691.	
Ŀ	00 004				126,57					-26,768.	
_					11,91	2.				-3,483.	
	374.	ļ				_				374.	
_6		<u></u>			10/04/00						
_	Complete only for assets shown	T	· · · · · · · · · · · · · · · · · · ·						Gains (Col. (h) gain k), but not less tha		
_	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any				Losses (from col. ((h))	
										<u>-6,691.</u>	
						-				-26,768. -3,483.	
						\dashv				374.	
-	•						•				
2	Capital gain net income or (net ca	apıtal loss)	If gain, also enter If (loss), enter -0-			}	2			-36,568.	
3	Net short-term capital gain or (lo	ss) as defu									
_	If gain, also enter in Part I, line 8,	, column (c	` '	- (-/-		}					
	If (loss), enter -0- in Part I, line 8 Part V Qualification U		ection 4940(e) for	Doduces	Toy on Not	<u> </u>	3	Inco	N/A		
_	 							IIICO	iiie		
(F	or optional use by domestic private	e iouiiualic	ons subject to the section 4	940(a) lax UII	Het myesunem in	come.	•)				
lf :	section 4940(d)(2) applies, leave t	his part bla	ink.								
W	as the foundation liable for the sec	tion 4942	tax on the distributable amo	ount of any ye	ear in the base peri	od?				Yes X No	
	Yes," the foundation does not qua										
1	Enter the appropriate amount in	each colun		ctions before	making any entrie					(4)	
	Base periód years Calendar year (or tax year beginni	ing in)	, , ,		Net value of nor	Net value of noncharitable-use assets			Distribution ratio (col. (b) divided by col. (c))		
_	2008			6,939.			462,9				
	2007 2006			8,092. 3,268.		341,808. 163,203.					
_	2005			0.			66,7			.000000	
_	2004		-				0071			•000000	
_										090201	
	Total of line 1, column (d) Average distribution ratio for the	5-year has	e period - divide the total o	n line 2 by 5	or by the number	of vea	rs		2	.080291	
Ĭ	the foundation has been in existe			iiio 2 0	or by the number	0. ,00			3	.020073	
4	Enter the net value of noncharitat	ble-use ass	ets for 2009 from Part X, II	ne 5					4	522,130.	
5 Multiply line 4 by line 3						5	10,481.				
6	Enter 1% of net investment incon	ne (1% of l	Part I, line 27b)						6	113.	
7	Add lines 5 and 6								7	10,594.	
8	Enter qualifying distributions from								8	23,074.	
	If line 8 is equal to or greater than See the Part VI instructions.	n line 7, ch	eck the box in Part VI, line	1b, and comp	lete that part using) a 1%	tax rate.				

X

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

year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV

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

Pa	Int VII-A Statements Regarding Activities (continued)	<u> </u>		
_	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
•	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		x
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
-	August 17, 2008?	12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► S F & COMPANY Telephone no. ► 717-76	1-0	211	
•	Located at ▶ 1027 MUMMA ROAD, WORMLEYSBURG, PA ZIP+4 ▶17			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			$\cdot \Box$
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
Pε	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	l i		
	termination of government service, if terminating within 90 days.)			
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 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			
	before the first day of the tax year beginning in 2009?	1c		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 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	`		77.61
	before 2009? Yes X No	,,	: 3	
	If "Yes," list the years			. 3
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	F }		
	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.	2 2	Žė;	
	• ,	2	,	
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 2009 as a result of (1) any purchase by the foundation or disqualified persons after	, , , , , , , , ,	b (, ,,
	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			\$ 34
	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,	· <u> </u>	12	. 3
	Form 4720, to determine if the foundation had excess business holdings in 2009.) N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	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 2009?	4b		X
		ո 990	-PF(2009)

		Form	990-PF (2009)
Total number of other employees paid over \$50,000			
· · · · · · · · · · · · · · · · · · ·			
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3 Five highest-paid independent contractors for professional services. If none, ent	er "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		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant state number of organizations and other beneficiaries served, conferences convened, research papers pro	stical information such as the oduced, etc.	Expenses
1 N/A		
2		
3		
·		
4		
Dort IV B O		<u> </u>
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year of	n lines 1 and 2	Amount
1 N/A	i ilios i una z.	74110411
Ι Μ/Α		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		0.
		Form 990-PF (2009)

P	art X. Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	0.
b		1b	262,123.
C		1c	267,958.
d	Total (add lines 1a, b, and c)	1d	530,081.
е	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	530,081.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	7,951.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	522,130.
6	Minimum investment return. Enter 5% of line 5	6	26,107.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	ıd certaın	
1	Minimum investment return from Part X, line 6	1	26,107.
2a			
b	Income tax for 2009. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	113.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	25,994.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	25,994.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	25,994.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	, , , , , , , , , , , , , , , , , , , ,	1a	23,074.
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	23,074.
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	113. 22,961.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	ualifies for	the section
	4940(e) reduction of tax in those years.		

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,	<u> </u>	· · · · · · · · · · · · · · · · · · ·		
line 7				25,994.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only		:	23,074.	
b Total for prior years:				· · · · · · · · · · · · · · · · · · ·
		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004				
b From 2005				
c From 2006				
d From 2007		•		
e From 2008				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from				19.4
Part XII, line 4: ► \$ 23,074.				
a Applied to 2008, but not more than line 2a			23,074.	
b Applied to undistributed income of prior			20,072	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.		•	
d Applied to 2009 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2009	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				<u></u>
6 Enter the net total of each column as indicated below:				
2 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				
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				25,994.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	0.			
0 Analysis of line 9:				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009				
				Form 000 BE (0000)

ELLEN WEIS GOLDSTEIN

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here 🕨 🗶 if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

- a The name, address, and telephone number of the person to whom applications should be addressed:
- b The form in which applications should be submitted and information and materials they should include:
- c Any submission deadlines:
- d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

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Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient a Paid during the year CONGREGATION BETH EL RELIGIOUS 1,000. SUPPORT OF GENERAL ORGANIZATIOPERATIONS OF TEMPLE 249 ARCH ST SUNBURY, PA 17801 DEGENSTEIN COMMUNITY PUBLIC 4,000. GENERAL PUBLIC LIBTARY LIBRARY LIBRARY NEW ITEMS 40 SOUTH FIFTH ST SUNBURY, PA 17801 SUSQUEHANNA UNIVERSITY JEWISH LIFE AND 18,074. UNIVERSITY-GOLDSTEIN FUND LEARNING FOR JEWISH LIFE AND LEARNING - UNIVERSITY 23,074. ➤ 3a **b** Approved for future payment NONE 0. Total **▶** 3b 923611 02-02-10 Form **990-PF** (2009)

Enter gross amounts unless otherwise indicated.	Unrelated b	usiness income		by section 512, 513, or 514	(e)	
	(a) Business	(b) Amount	Exclu- sion	(d) Amount	Related or exempt function income	
1 Program service revenue:	code		code	- Tunount	Tunotion moonio	
å	-					
b	_ 					
c	_					
d	_					
e						
g Fees and contracts from government agencies			 			
						
2 Membership dues and assessments						
3 Interest on savings and temporary cash investments						
4 Dividends and interest from securities			14	11,253.		
5 Net rental income or (loss) from real estate:						
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal						
property						
7 Other investment income						
8 Gain or (loss) from sales of assets other						
than inventory			14	374.	-36,942	
9 Net income or (loss) from special events						
O Gross profit or (loss) from sales of inventory						
1 Other revenue:						
a						
b						
C						
d						
e						
2 Subtotal. Add columns (b), (d), and (e)		().	11,627.	-36,942	
3 Total. Add line 12, columns (b), (d), and (e)				13		
See worksheet in line 13 instructions to verify calculations.	.)					

				ъ.		ооср		o o	p		
Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).										
8	LOSS	ON	SALE	OF	INVESTMENTS	HELD	то	SUPPORT	THE	FOUNDATION'S	PURPOSE
•											
					<u>-</u>						
										·	
			_			-	•				
		_									
	 					_					

923621 02-02-10

(6) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

(5) Loans or loan guarantees

1b(5)

1b(6)

1c

	20 000			90 .0
Pε	art XVII Information Regarding Transfers To and Transactions and Relationships With Nonchari	table	•	
	Exempt Organizations	_		
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of		Yes	No
	the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
а	Transfers from the reporting foundation to a noncharitable exempt organization of:			
	(1) Cash	1a(1)		X
	(2) Other assets	1a(2)		X
b	Other transactions:	_		
	(1) Sales of assets to a noncharitable exempt organization	1b(1)		_X_
	(2) Purchases of assets from a noncharitable exempt organization	1b(2)		_X_
	(3) Rental of facilities, equipment, or other assets	1b(3)		X
	(4) Reimbursement arrangements	1b(4)		X

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

columi	n (d) the value of the goods, o	ther assets, or services received.		·		
(a) Line no	(b) Amount involved	(c) Name of noncharitable	e exempt organization	(d) Description	on of transfers, transacti	ons, and sharing arrangements
		N/A				
+						·
						
+	-					
		···				
		··· <u>·</u>		·		
2a Is the f	foundation directly or indirectly	y affiliated with, or related to, one	or more tax-exempt organ	nizations described		
	` '	than section 501(c)(3)) or in sec	tion 527?			Yes X No
b If Yes,	" complete the following sche		I			
	(a) Name of orga	inization	(b) Type of organization		(c) Description of re	elationship
	N/A			 		
						·
			<u> </u>		 ,	
Under pe	nalties of perjury, I declare that I ha	ve examined this return, including acco	I ompanying schedules and state	ments, and to the best	of my knowledge and be	elief, it is true, correct,
and comp	plete Declaration of preparer (other	than taxpayer or fiduciary) is based on		er has any knowledge		
	XX4/ NO	nde	10/5/10	<u>TRUST</u>	EE	
Sig	nature of officer or trustee		Date	Title		
T "	Preparer's				Check if	Preparer's identifying number
Sign Here d er's only	signature	ma land con		4/14/12 8	mployed ►	600570F8
Pai G C			& CO., P.C		EIN ▶	
& S	if self-employed), 1027	MUMMA ROAD			_	
	address, and ZIP code WORM	ÆYSBURG, PA 17	043		Phone no. 7	17-761-0211
						Form 990-PF (2009)

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

▶ Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2009

Employer identification number

	C/O MICHEAL M. APFELBAUM	20-6686325
Organization type (check	· · · · · · · · · · · · · · · · · · ·	
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 chantable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
contributor Com	on filing Form 990, 990·EZ, or 990·PF that received, during the year, \$5,000 or more (in maplete Parts I and II.	oney or property) from any one
Special Rules		
509(a)(1) and 17(1(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the reg D(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the n (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II	
aggregate contri	1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributions of more than \$1,000 for use <i>exclusively</i> for religious, charitable, scientific, literary, for cuelty to children or animals. Complete Parts I, II, and III.	
contributions for If this box is che purpose. Do not	1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contri- use <i>exclusively</i> for religious, charitable, etc., purposes, but these contributions did not agonized the contributions that were received during the year for an <i>exclusive</i> complete any of the parts unless the General Rule applies to this organization because in the contributions of \$5,000 or more during the year	ggregate to more than \$1,000. ely religious, chantable, etc,
	that is not covered by the General Rule and/or the Special Rules does not file Schedule E on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2	

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

that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

923451 02-01-10

Name of organization

THE GB FOUNDATION

C/O MICHEAL M. APFELBAUM

20-6686325

Employer identification number

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	J WEIS CLUT FBO ELLEN GOLDSTEIN 43 SOUTH FIFTH ST SUNBURY, PA 17801	\$18,949. 	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	JCW CHAR LEAD TR DTD 11/23/04 43 SOUTH FIFTH ST SUNBURY, PA 17801	\$124,818. 	Person X Payroll
(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)
(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)
(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.)
(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)

SOURCE GROSS AMOUNT DIVIDENDS AMOUNT	FORM 990-PF DIVIDEN	DS AND	INTER	EST FROM	SECUI	RITIES	STATEMENT	1
TOTAL TO FM 990-PF, PART I, LN 4	SOURCE		GROSS AMOUNT				• •	
FORM 990-PF ACCOUNTING FEES STATEMENT (A) (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARITAL PER BOOKS MENT INCOME NET INCOME PURPOSI FOUNDATION RETURN PREPARATION 1,013. 0. TO FORM 990-PF, PG 1, LN 16B 1,013. 0. FORM 990-PF OTHER PROFESSIONAL FEES STATEMENT (A) (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARITAL PER BOOKS MENT INCOME NET INCOME PURPOSI BANK FEE 297. 0. TO FORM 990-PF, PG 1, LN 16C 297. 0. FORM 990-PF TAXES STATEMENT (A) (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARITAL FORM 990-PF TAXES STATEMENT	CITIBANK 93768	_		11,627.		374.	11,25	3.
(A)	TOTAL TO FM 990-PF, PART I,	LN 4 =		11,627.		374.	11,25	3.
DESCRIPTION EXPENSES NET INVEST- ADJUSTED CHARITAL PER BOOKS MENT INCOME NET INCOME PURPOSITION FOUNDATION RETURN PREPARATION TO FORM 990-PF, PG 1, LN 16B 1,013. 0. TO FORM 990-PF OTHER PROFESSIONAL FEES STATEMENT (A) (B) (C) (D) (D) (EXPENSES NET INVEST- ADJUSTED CHARITAL PURPOSITION BANK FEE 297. 10. TO FORM 990-PF, PG 1, LN 16C 297. 10. TO FORM 990-PF, PG 1, LN 16C 297. 10. TO FORM 990-PF TAXES STATEMENT (A) (B) (C) (D) (D) (D) (D) (D) (D) (D) (D) (D) (D	FORM 990-PF	ACC	COUNTI	NG FEES			STATEMENT	2
TO FORM 990-PF, PG 1, LN 16B	DESCRIPTION	EXPE	NSES	NET INV	EST-	ADJUSTED	CHARITAB	
FORM 990-PF OTHER PROFESSIONAL FEES STATEMENT (A) (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARITAI PER BOOKS MENT INCOME NET INCOME PURPOSI TO FORM 990-PF, PG 1, LN 16C 297. 0. TOFORM 990-PF TAXES STATEMENT (A) (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARITAI		1	L,013.		0.			0.
TO FORM 990-PF, PG 1, LN 16C (A) (B) EXPENSES NET INVEST- ADJUSTED CHARITAIN PER BOOKS MENT INCOME NET INCOME PURPOSITION TO FORM 990-PF, PG 1, LN 16C (A) (B) (C) (D) CHARITAIN (D) FORM 990-PF, PG 1, LN 16C (A) (B) (C) (D) (D) (D) (D) (D) (D) (D	TO FORM 990-PF, PG 1, LN 16B	1	L,013.		0.			0.
DESCRIPTION EXPENSES NET INVEST- ADJUSTED CHARITAI PER BOOKS MENT INCOME NET INCOME PURPOSI TO FORM 990-PF, PG 1, LN 16C 297. TAXES STATEMENT (A) EXPENSES NET INVEST- ADJUSTED CHARITAI (B) C(C) C(D) EXPENSES NET INVEST- ADJUSTED CHARITAI	FORM 990-PF	OTHER I	PROFES	SIONAL FI	EES		STATEMENT	3
TO FORM 990-PF, PG 1, LN 16C 297. 0.	DESCRIPTION	EXPE	ISES	NET INVI	EST-	ADJUSTED	CHARITAB	
FORM 990-PF TAXES STATEMENT (A) (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARITAE	BANK FEE		297.		0.			0.
(A) (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARITAE	TO FORM 990-PF, PG 1, LN 16C		297.		0.			0.
EXPENSES NET INVEST- ADJUSTED CHARITAN	FORM 990-PF		TAX	ES			STATEMENT	4
	DESCRIPTION	EXPEN	ISES	NET INVE		ADJUSTED	CHARITAB	
FOREIGN 129. 0.	FOREIGN		129.	-	0.			0.
TO FORM 990-PF, PG 1, LN 18 129. 0.	TO FORM 990-PF, PG 1, LN 18		129.		0.			0.

FORM 990-PF	CORPORATE STOCK		STATEMENT 5
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
ARTO INTL EQUITYFUND COLUMBIA FDS SER TR I LAZARD EMERGING MKTS PORTOLIO ISHARES TR MSCI SAFE FUND ISHARES TR RUSSELL 3000		20,814. 15,432. 19,072. 52,157. 130,511.	19,058. 12,502. 19,279. 40,686. 144,922.
TOTAL TO FORM 990-PF, PART II,	LINE 10B	237,986.	236,447.
FORM 990-PF	CORPORATE BONDS		STATEMENT 6
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
PIMCO TOTAL RETURN - FUND D		163,893.	167,189.
TOTAL TO FORM 990-PF, PART II, 1	LINE 10C	163,893.	167,189.

Form 8868 (Rev. 4-2009)		- <u></u>	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		► 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 i	needed)	
Name of Exempt Organization	Emp	loyer identificat	ion number
Type or THE GB FOUNDATION			
print C/O MICHEAL M. APFELBAUM	2	0-668632	5
File by the extended Number, street, and room or suite no. If a P.O box, see instructions	For I	RS use only	
due date for 43 SOUTH FIFTH STREET			
filing the return See Instructions City, town or post office, state, and ZIP code For a foreign address, see instructions SUNBURY, PA 17801			
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 990-BL Form 990-PF Form 990-T (trust other than above) Form 4720	=	orm 5227	Form 8870
STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previou	sly file	ed Form 8868.	
box ▶ If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all 1 request an additional 3-month extension of time until 5. For calendar year 2009, or other tax year beginning 6. If this tax year is for less than 12 months, check reason: Initial return 7. State in detail why you need the extension ADDITIONAL TIME REQUIRED TO FILE A COMPLETE AND ACCURA	s is fo	Change in accou	n is for
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	\$	<u> </u>
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			
previously with Form 8868	8b	\$	233.
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 have examined 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 c	f my knowledge an	ıd belief,
Sinnature ► Title ► TRUSTEE	Date	•	

Form **8868** (Rev. 4-2009)

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 bo	x .		▶ 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 Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no co	pies	needed).	
Name of Exempt Organization	Emp	loyer identific	ation number
Type or THE GB FOUNDATION			
print C/O MICHEAL M. APFELBAUM	2	0-66863	25
File by the extended Number, street, and room or suite no. If a P O. box, see instructions	Forl	RS use only	
due date for fling the 43 SOUTH FIFTH STREET			
City, town or post office, state, and ZIP code. For a foreign address, see instructions SUNBURY, PA 17801			
Check type of return to be filed (File a separate application for each return):	1	N.C.	
Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A	F	orm 5227	Form 8870
Form 990-BL X Form 990-PF Form 990-T (trust other than above) Form 4720	F	orm 6069	
STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previous	ly file	ed Form 8868.	
			
S F & COMPANY	2		
 The books are in the care of ► 1027 MUMMA ROAD - WORMLEYSBURG, PA 1704 Telephone No. ► 717-761-0211 FAX No. ► 717-975-9750 	<u> </u>		
Telephone No. ► 717-761-0211 FAX No. ► 717-975-9750 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			win shock this
box . If it is for part of the group, check this box and attach a list with the names and EINs of all r			·
4 I request an additional 3 month extension of time until NOVEMBER 15, 2010.	101110	CIS dic exteris	1011 13 101.
5 For calendar year 2009, or other tax year beginning and ending			
6 If this tax year is for less than 12 months, check reason: Initial return Final return		Change in acc	ounting period
7 State in detail why you need the extension		oriango maco	odinang pontod
ADDITIONAL TIME REQUIRED TO FILE A COMPLETE AND ACCURA	rE:	RETURN.	
two best to the state of the st			
Ba 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	\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated	13.5		
tax payments made. Include any prior year overpayment allowed as a credit and any amount paid			
previously with Form 8868.	8b	\$	233.
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			
Inder penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the I t is true, correct, and complete, and that I am authorized to prepare this form.	est of	my knowledge	and belief,
Signature > Jame / Mana Title TRUSTEE	Date		1-17
The state of the s			58 (Rev. 4-2009)
-/			

COPT