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

2009

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements

For cale	endar year 2009, or tax year beginning	, 2009	, and ending	,
G Che	eck all that apply   Initial return   Initia	al Return of a former p	ublic charity	Final return
	Amended return	X Address	· —	change
	Name of foundation		I A	Employer identification number
Use th	ne	DETAITED EXMIT	1	20-8017815
Otherw			Room/suite R	Telephone number (see the instructions)
print	t	delivered to street dadiessy	I B	•
or typ	P.O. BOX 263	State	ZIP code C	(610) 933-4225
Instructi	ecific City or town		اح	If exemption application is pending, check here
	ROCKLAND		19732 D	1 Foreign organizations, check here
H Ç		(c)(3) exempt private for		2 Foreign organizations meeting the 85% test, check
	Section 4947(a)(1) nonexempt charitable tru		private foundation	here and attach computation
		ounting method X C	ash Accrual E	If private foundation status was terminated under section 507(b)(1)(A), check here
(fi	from Part II, column (c), line 16)	Other (specify)	F	If the foundation is in a 60-month termination
<b>►</b> \$	397,629. (Part I, c	column (d) must be on		under section 507(b)(1)(B), check here
Part I	Analysis of Revenue and	(a) Revenue and	(b) Net investment	(c) Adjusted net (d) Disbursements
L	Expenses (The total of amounts in	expenses per books	income	(c) Adjusted net income (d) Disbursements for charitable
	columns (b), (c), and (d) may not neces-	onponded por section	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	purposes
	sarily equal the amounts in column (a) (see the instructions)			(cash basis only)
- 1	1 Contributions, gifts, grants, etc, received (att sch)		<del> </del>	<del> </del>
		···	<u></u>	
	2 Ck X if the foundn is not req to att Sch B 3 Interest on savings and temporary			
	cash investments			
	4 Dividends and interest from securities	3,883.	3,883.	
	5a Gross rents	•	·	
	b Net rental income or (loss)	,	L-6a Stmt	
R	6a Net gain/(loss) from sale of assets not on line 10	6,097.	2 00 00	
Ë	<b>b</b> Gross sales price for all 57 202	ì		
Σ	assets on line 6a 7 Capital gain net income (from Part IV, line 2)	, , , , , , , , , , , , , , , , , , ,	6,097	RECEIVED
E N	8 Net short-term capital gain		0,057	
ΰ	9 Income modifications			B ALIC O G
E	10 a Gross sales less returns and		1	1 8 AM 2 4 70 m 101
	returns and allowances			O WING STATE OF
	b Less Cost of			OGBE
	c Gross profit/(loss) (att sch)			TEN STEEL
	11 Other income (attach schedule)	<del></del>	. <u>-</u>	
	Federal Tax Refund	9,118.		<u> </u>
	12 Total. Add lines 1 through 11	19,098.	9,980	
	13 Compensation of officers, directors, trustees, etc	13,030.	J, 500	
	14 Other employee salaries and wages			
	15 Pension plans, employee benefits	·	<del></del>	
_	16a Legal fees (attach schedule)	<del></del>		<del>                                     </del>
A	1 ° '	2 200	2,300	<del> </del>
M	b Accounting fees (attach sch) L-16b Stmt	2,300.		
N i	c Other prof fees (attach sch) L-16c Stmt	1,244.	1,244	<del> </del>
OPERAT	17 Interest			<del>                                     </del>
E T	18 Taxes (attach schedule)(see instr.) Federal	2,200.		<del></del>
A A	19 Depreciation (attach sch) and depletion			
1 i	20 Occupancy			
N V G E	21 Travel, conferences, and meetings			<del>                                     </del>
A E	22 Printing and publications			<u> </u>
A E N X D P	23 Other expenses (attach schedule)			V
E	See Line 23 Stmt	369.	369	
N S	24 Total operating and administrative			
E S	expenses. Add lines 13 through 23	6,113.	3,913	
	25 Contributions, gifts, grants paid		<del></del>	
	26 Total expenses and disbursements.	<del></del>		
	Add lines 24 and 25	_6,113.	3,913	
	27 Subtract line 26 from line 12:			
	a Excess of revenue over expenses			
	and disbursements	12,985.		
	<b>b</b> Net investment income (if negative, enter -0 )		6,067	
	C Adjusted net income (if negative, enter -0-)			

orm	990-	PF (2009) THE JONATHAN B AND GLORIA A DETWILER FAMILY	FOUNDATION	20-80.	
Part	П	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year (a) Book Value	(b) Book Value	f year (c) Fair Market Value
		(See instructions )  Cash — non-interest-bearing	(a) Book value	(b) book value	(C) Fair Market Value
		-	383,107.	166,476.	166,476.
	2	Savings and temporary cash investments	303,107.	100,470.	100,470.
	3	Accounts receivable			
		Less allowance for doubtful accounts			
	4	Pledges receivable			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)			
	7	Other notes and loans receivable (attach sch)	-		
A		Less: allowance for doubtful accounts			
5	8	Inventories for sale or use			
A S E T	9	Prepaid expenses and deferred charges	· ·		
Ĭ			<del></del>		
S	i	a Investments — U S and state government obligations (attach schedule)			
		Investments — corporate stock (attach schedule)			
	(	Investments — corporate bonds (attach schedule)			
	11	Investments – land, buildings, and equipment basis			!
		Less accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule) L-13 Stmt		229,616.	231,153.
	14	Land, buildings, and equipment basis		•	
	' '	Less accumulated depreciation			
		(attach schedule)			
	15	Other assets (describe ►			
		Total assets (to be completed by all filers –			
		see instructions. Also, see page 1, item I)	383,107.	396,092.	397,629.
Ļ	17	Accounts payable and accrued expenses			1
Å	18	Grants payable			
A B	19	Deferred revenue			; i
Ţ	20	Loans from officers, directors, trustees, & other disqualified persons			Ę
ī	21	Mortgages and other notes payable (attach schedule)			l
Ť	1	Other liabilities (describe			,
E	22	Other habilities (describe			(
Š	23	Total liabilities (add lines 17 through 22)			į
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			· ·
N F	24	Unrestricted			
E U	25	Temporarily restricted			<u> </u>
ח	26	' '			
A B A L A N	_	,			<b>,</b>
5 B	1	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
ĔΩ			202 107	306 000	
TA	27	Capital stock, trust principal, or current funds	383,107.	396,092.	ı
L	28	Paid in or capital surplus, or land, building, and equipment fund			
O E R S	29	Retained earnings, accumulated income, endowment, or other funds			į
RS	30	Total net assets or fund balances (see the instructions)	383,107.	396,092.	
	31	Total liabilities and net assets/fund balances (see the instructions)	383,107.	396,092.	
Dard	311	Analysis of Changes in Net Assets or Fund Balance		330,032.	
rait	111	Analysis of Changes in Net Assets of Fund Balance			<del></del>
1	Tota end-	I net assets or fund balances at beginning of year – Part II, colum of-year figure reported on prior year's return)	nn (a), line 30 (must agre	e with	383,107.
2	Ente	r amount from Part I, line 27a		2	12,985.
3		increases not included in line 2 (itemize)		3	
4		lines 1, 2, and 3		4	396,092.
5		ases not included in line 2 (itemize)		5	330,032.
		` ' =========	Port II. solvers (b) In-		206 000
6	rota	I net assets or fund balances at end of year (line 4 minus line 5) -	– narcii, column (b), line	30   6	396,092 <u>.</u>

(a) List and describe	e the kind(s) of property sold (e.g , r se, or common stock, 200 shares ML	eal estate,	(b) How acc P — Purch D — Dona	iase	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a SECURITY SALES - SH	ORT TERM	<del></del>	P		Various	Various
b						
c						
d						
e						
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bar plus expense of sa			(h) Gain or (e) plus (f) m	
a 57,202.		5	1,105.			6,097.
ь						
С						
d						
е						
Complete only for assets shown	ng gain in column (h) and owned by	the foundation on 12/31/69			(1) Gains (Cold	ımn (h)
(ı) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a		g th	gain minus column (l an -0 ) or Losses (fr	(), but not less
a 0.	0.		0.			6,097.
ь						
C						
d						
e					<del></del>	
2 Capital gain net income or (net	capital loss).   [If gain, also If (loss), ent	enter in Part I, line 7 ler -0- in Part I, line 7	_	2		6,097.
3 Net short-term capital gain or (I	oss) as defined in sections 1222(5)	and (6)	ſ			
If gain, also enter in Part I. line	8, column (c) (see the instructions).	If (loss) enter -0.				
in Part I, line 8	a, column (c) (see the manuchons).			3		
Part V Qualification Under	Section 4940(e) for Reduce	d Tax on Net Investm	ent Inco	me	<u>—</u>	<u></u>
Was the foundation liable for the sect If 'Yes,' the foundation does not qual.  There the appropriate amount in		mplete this part	<u> </u>		Yes	X No
(a)  Base period years  Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	<b>(c)</b> Net value of noncharitable-use as:			<b>(d)</b> Distribution umn (b) divided	
2008	2,196.		0.			0.000000
2007	993,123.		0.			0.000000
2006	0.		0.			0.000000
2005						
2004						
2 Total of line 1, column (d)	<u> </u>			2		0.00000
3 Average distribution ratio for the number of years the foundation	e 5-year base period – divide the tot has been in existence if less than 5	al on line 2 by 5, or by the years		3		0.00000
4 Enter the net value of nonchard	table-use assets for 2009 from Part 2	X, line 5		4		384,513.
5 Multiply line 4 by line 3				5		0.
6 Enter 1% of net investment inco	ome (1% of Part I, line 27b)			6_		61.
7 Add lines 5 and 6				7_		61.
8 Enter qualifying distributions from				8		
If line 8 is equal to or greater the Part VI instructions	nan line 7, check the box in Part VI,	line 1b, and complete that p	art using a	a 1%	tax rate See th	e 

		<u>80178</u>			⊃age 4
Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	the instr	uctions)		
13	Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1				
	Date of ruling or determination letter (attach copy of letter if necessary · see instr.)				
l	Domestic foundations that meet the section 4940(e) requirements in Part V,	1			121.
	check here    ☐ and enter 1% of Part I, line 27b				
•	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable		<del></del>		
_	foundations only Others enter ·0·) .	2			0.
3	Add lines 1 and 2	3			<u> 121.</u>
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			<u> 121.</u>
6	Credits/Payments  2009 estimated tax pmts and 2008 overpayment credited to 2009  200 - 100				
	Exempt foreign organizations — tax withheld at source  Tax paid with application for extension of time to file (Form 8868)  6c  0.				
	Backup withholding erroneously withheld  6d				
	Total credits and payments Add lines 6a through 6d	7			200.
٠ 8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here	8		<del></del>	200.
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			79.
	Enter the amount of line 10 to be. Credited to 2010 estimated tax	11			<del></del>
	t VII-A Statements Regarding Activities				
				Yes	No
1 6	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		1a		Х
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes				
•	(see the instructions for definition)?		1 b		Х
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials publi	shed			
	or distributed by the foundation in connection with the activities				
	Did the foundation file Form 1120-POL for this year?		1 c		Х
(	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year  (1) On the foundation S  (2) On foundation managers  S				
	(1) On the foundation (2) On foundation managers S				
	foundation managers \bigs\\$				
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		Х
4 8	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		Х
	olf 'Yes,' has it filed a tax return on Form 990-T for this year?		4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
	If 'Yes,' attach the statement required by General Instruction T				]
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
	By language in the governing instrument, or				
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that con	flict		·	-
_	with the state law remain in the governing instrument?		6	X	
	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV		7	<u> </u>	
88	Enter the states to which the foundation reports or with which it is registered (see the instructions)				
	PA - Pennsylvania				
t	olf the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? If 'No,' attach explanation		8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4 for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' complete I	942(j)(5) Part XIV	,   _		 X
10					<del>                                     </del>
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their nar and addresses	nes	10		х
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Form 990-PF (2009)

Form 990-PF (2009) THE JONATHAN B AND GLORE Part VII-B   Statements Regarding Activiti			20-801	7815	Page 6
		4720 May be Requ	uneu (continuca)	1 1	
<ul><li>5a During the year did the foundation pay or incur</li><li>(1) Carry on propaganda, or otherwise attempt</li></ul>	•	(section 4945(e))?	Yes X	No	
(2) Influence the outcome of any specific publi	c election (see section 4			No	
on, directly or indirectly, any voter registration drive?  (3) Provide a grant to an individual for travel, study, or other similar purposes?  Yes					,
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	an a charitable, etc, org 4940(d)(2)? (see instruc	anization described ctions)	Yes X	No	1
(5) Provide for any purpose other than religiou educational purposes, or for the prevention	s, charitable, scientific, of cruelty to children or	literary, or r animals?	Yes X	No	
<b>b</b> If any answer is 'Yes' to 5a(1)-(5), did <b>any</b> of the described in Regulations section 53 4945 or in (see instructions)?	ne transactions fail to qua a current notice regardi	ualify under the exception ng disaster assistance	ons	5 b	
Organizations relying on a current notice regar	ding disaster assistance	e check here	▶ □		1
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsulf 'Yes,' attach the statement required by Regui	ibility for the grant?		Yes	No	
6a Did the foundation, during the year, receive an			П., П		
on a personal benefit contract? <b>b</b> Did the foundation, during the year, pay premit			Yes X	No 6b	X
If 'Yes' to 6b, file Form 8870					
7a At any time during the tax year, was the found					
<b>b</b> If yes, did the foundation receive any proceeds	or have any net income	attributable to the tran	saction?	7b	
Part VIII Information About Officers, D	irectors, I rustees,	Foundation Manag	gers, Hignly Pald E	mpioyees	5,
and Contractors  1 List all officers, directors, trustees, foundation	managers and their co	mneneation (see instru	ictions)		
List all officers, directors, trustees, foundation	(b) Title and average	(c) Compensation	(d) Contributions to	(e) Expens	e account
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allo	owances
Jonathan B Detwiler					
701 Thomas Jefferson Road	Trustee				0
Wayne PA 19087	1.00	0.	0.		0.
Gloria A Detwiler 701 Thomas Jefferson Road	Trustee				
Wayne PA 19087	1.00	0.	0.		0.
James B Detwiler					
701 Thomas Jefferson Road	Managing Trustee				
Wayne PA 19087	1.00	0.	0.		0.
See Information about Officers, Directors, Trustees, Etc					
		0.	0.		0.
2 Compensation of five highest-paid employee	s (other than those incl	uded on line 1— see ins	tructions). If none, ente	r 'NONE.'	
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation		e account, owances
NONE			F		
0					
0				-	
0					
0		-			
	<u>L</u>	L			
Total number of other employees paid over \$50,000 BAA	TEEA0306 (	07/06/09		I	None 0-PF (2009)

· . · · ,

Total. Add lines 1 through 3

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Form 990-PF (2009)

Par	Minimum Investment Return (All domestic foundations must complete this part. For see instructions.)	reign	foundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes		115 500
	Average monthly fair market value of securities	1 a	115,577.
	Average of monthly cash balances	1 b	274,792.
	Fair market value of all other assets (see instructions)	1 c	200 260
	Total (add lines 1a, b, and c)	1 d	390,369.
E	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	390,369.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	5,856.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	384,513.
6	Minimum investment return. Enter 5% of line 5	6	19,226.
Par	<b>TXI</b> Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating and certain foreign organizations check here ► ☐ and do not complete this pa		oundations
1	Minimum investment return from Part X, line 6	1	19,226.
2 a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009 (This does not include the tax from Part VI)		
c	Add lines 2a and 2b	2 c	121.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	19,105.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	19,105.
6	Deduction from distributable amount (see instructions)	6	
	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	19,105.
Par	TXII Qualifying Distributions (see Instructions)	·	
	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes:		
	Expenses, contributions, gifts, etc – total from Part I, column (d), line 26	1 a	
	Program-related investments – total from Part IX-B	1b	<del> </del>
	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	<del></del>
3	Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required)	3a	
	Cash distribution test (attach the required schedule)	3ь	
4	Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
•	Enter 1% of Part I, line 27b (see instructions)	6	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether qualifies for the section 4940(e) reduction of tax in those years.	er the fo	oundation
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Form **990-PF** (2009)

### Part XIII Undistributed Income (see instructions)

		<b>(a)</b> Corpus	<b>(b)</b> Years prior to 2008	<b>(c)</b> 2008	<b>(d)</b> 2009
	Distributable amount for 2009 from Part XI,				19,105.
	Undistributed income, if any, as of the end of 2009		*		
	Enter amount for 2008 only				<del></del>
	Total for prior years 20, 20, 20				
	Excess distributions carryover, if any, to 2009				
_	From 2004			, , ,	
_	From 2005	ч	4 .		
	From 2006 From 2007 1,000,000.		* } ,	4 3. 4 4 3	,
	From 2008 2, 315.				
_	Total of lines 3a through e	1,002,315.			
	Qualifying distributions for 2009 from Part	* * *	, , ,		.,
	XII, line 4· ► \$	, <sub>4</sub>	1 2 X 5 x 2 8 8 8 8 X 3 3 3 3	, , , , , ,	
	Applied to 2008, but not more than line 2a	<b>₩</b>	^ %"3# / <i>3</i>	The state of the s	
	Applied to undistributed income of prior years				* * *
	(Élection required – see instructions)		Y. (1971) ### ### (1972)	2	<u> </u>
	Treated as distributions out of corpus (Election required – see instructions)			×.	•
	Applied to 2009 distributable amount				
	Remaining amount distributed out of corpus	0.			· · · · · · · · · · · · · · · · · · ·
	Excess distributions carryover applied to 2009	19,105.	7. 10 14 178		19,105.
	(If an amount appears in column (d), the same amount must be shown in column (a) )				
		V. A. A. A. America			
	Enter the net total of each column as			, , , ,	
	indicated below:	983,210.	,	, , , , , , , , , , , , , , , , , , ,	
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	963,210.	<u> </u>		
	Prior years' undistributed income Subtract line 4b from line 2b		0.		
	Enter the amount of prior years' undistribut-				
	ed income for which a notice of deficiency has been issued, or on which the section				
	4942(a) tax has been previously assessed				
	Subtract line 6c from line 6b Taxable				
	amount – see instructions		0.		
_	Undistributed income for 2008 Subtract line 4a from		` ·	ا م	
	line 2a Taxable amount — see instructions			0.	
	Undistributed income for 2009 Subtract lines 4d and 5 from line 1. This amount must be				
	distributed in 2010				0.
	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
	,				
	Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)	0.			
9	Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	983,210.			
10	Analysis of line 9	555,210.		-	
	Excess from 2005 0.				
	Excess from 2006 0.	1			
С	Excess from 2007 980, 895.	]			
	Excess from 2008 2, 315.	]			
е	Excess from 2009 0.	<u></u>			

a 16 tha farmalation has been also the color			VII-A, question		N/A
a If the foundation has received a ruling or our is effective for 2009, enter the date of the	determination letter	that it is a private of	operating foundation,	and the ruling	
<b>b</b> Check box to indicate whether the foundat	-	erating foundation d	escribed in section	4942(j)(3) or	4942(j)(5)
a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum investment return from Part X for each year listed	(a) 2009	<b>(b)</b> 2008	<b>(c)</b> 2007	(d) 2006	(e) Total
<b>b</b> 85% of line 2a		·			
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test - enter					
(1) Value of all assets		-			
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test - enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income	<u>                                     </u>				
rt XV Supplementary Information assets at any time during the	(Complete this	s part only if the	e organization h	ad \$5,000 or mo	re in
Information Regarding Foundation Mana a List any managers of the foundation who close of any tax year (but only if they have	have contributed m	ore than 2% of the than \$5,000) (See	total contributions resection 507(d)(2))	ceived by the founda	tion before the
<b>b</b> List any managers of the foundation who a partnership or other entity) of which the	own 10% or more of foundation has a 1	of the stock of a cor 0% or greater inter	poration (or an equal est	lly large portion of th	e ownership of
2 Information Regarding Contribution, Grad Check here X if the foundation only a requests for funds If the foundation make complete items 2a, b, c, and d	makes contributions s gifts, grants, etc,	s to preselected cha (see instructions) t	aritable organizations to individuals or orga	and does not accep	t unsolicited conditions,
a The name, address, and telephone number	er of the person to v	wnom applications :	snould be addressed		
	submitted and infor	mation and materia	als they should includ	le <sup>.</sup>	<del></del>
<b>b</b> The form in which applications should be					
<b>b</b> The form in which applications should be <b>c</b> Any submission deadlines					

3 Grants and Contributions Paid During the Ye	ar or Approved for Futu	re Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient		
Name and address (home or business)  a Paid during the year	substantial contributor	recipient		
	<u> </u>			
Total	<del></del>		<u>► 3a</u>	<del></del>
b Approved for future payment  Total			► 3b	

Enter gross amounts unless otherwise indicated	Unrelated	business income	Excluded by	section <u>512, 513, or 514</u>	
Program service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion code	<b>(d)</b> Amount	(e) Related or exempt function income (see the instructions)
a		<del></del>			
b					
c					
d					
e					
f					
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	3,883.	
5 Net rental income or (loss) from real estate.	. *				
a Debt-financed property					
<b>b</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			18	6,097.	
9 Net income or (loss) from special events			<b></b>		
10 Gross profit or (loss) from sales of inventory			<u> </u>	<u> </u>	·
11 Other revenue					
a					
b					
c					
d					
e					<del></del>
12 Subtotal Add columns (b), (d), and (e)			<u> </u>	9,980.	
13 Total. Add line 12, columns (b), (d), and (e)				13	9,980.
(See worksheet in the instructions for line 13 to verify	calculations)				
Part XVI-B Relationship of Activities to the	ne Accomplish	ment of Exemi	ot Purpose	es.	

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) (See the instructions)
<del></del>	
	<del> </del>

## Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

Did th							I I		
relatır	ne organization directly in the organization 501(c) ong to political organizations	f the Code (of	ngage in any of the f ther than section 501	following with (c)(3) organ	n any other organizatio izations) or in section!	n 527,		Yes	No
a Trans	fers from the reporting	foundation to	a noncharitable exer	npt organiza	tion of		[		
(1) C	ash						1 a (1)		Х
(2) 0	ther assets						1 a (2)		Х
<b>b</b> Other	transactions								
(1) S	ales of assets to a nonc	charitable exe	mpt organization				16 (1)		X
<b>(2)</b> Pi	urchases of assets from	a noncharita	ible exempt organiza	tion			1 b (2)		Х
(3) R	ental of facilities, equip	ment, or othe	r assets				1 b (3)		X
<b>(4)</b> R	leimbursement arranger	nents					1 b (4)		Χ
<b>(5)</b> Lo	oans or loan guarantees	s					1 b (5)		Х
<b>(6)</b> P	erformance of services	or membersh	ip or fundraising soli	citations			1 b (6)		X
s Sharır	ng of facilities, equipme	nt, mailing lis	its, other assets, or p	aid employe	es		1 c		Х
d If the	answer to any of the ab	oove is 'Yes,'	complete the followin	g schedule	Column (b) should alw	ays show the fair	market value	of	
any tr	oods, other assets, or seransaction or sharing ar	rangement, s	how in column (d) the	value of the	e goods, other assets,	or services receiv	ed		
Line no	(b) Amount involved	(c) Name	of noncharitable exempt of	rganization	(a) Description of tr	ansfers, transactions,	and sharing arran	gement	<u> </u>
				<u>.                                    </u>		<u> </u>			
			-		<del> </del>				
					<del> </del>				
					<u> </u>				
				<del></del>			<del></del>		
. —									
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	<u> </u>								
			<del></del>		<del>                                     </del>				
	ļ		<del></del> _		<del>                                     </del>				
					<del></del>				
	ļ. ——								
descri	foundation directly or in ibed in section 501(c) o s,' complete the followin	f the Code (of	ated with, or related ther than section 501	to, one or m (c)(3)) or in	ore tax-exempt organiz section 527?	ations	Yes	X	No
descri	ibed in section 501(c) o	f the Code (of ng schedule	ther than section 501	to, one or m (c)(3)) or in organization	section 527?	ations (c) Description of		X	No
descri	ibed in section 501(c) o s,' complete the followin	f the Code (of ng schedule	ther than section 501	(c)(3)) or in	section 527?	<del></del>		X	No
descri	ibed in section 501(c) o s,' complete the followin	f the Code (of ng schedule	ther than section 501	(c)(3)) or in	section 527?	<del></del>		X	No
descri	ibed in section 501(c) o s,' complete the followin	f the Code (of ng schedule	ther than section 501	(c)(3)) or in	section 527?	<del></del>		X	No
descri b If 'Yes	ibed in section 501(c) o s,' complete the followin	f the Code (of	(b) Type of	organization	es and statements, and to the h preparer has any knowledge	(c) Description of	relationship		
describing if 'Yes	alties of perjury, I declare that I	f the Code (of	(b) Type of	organization	es and statements, and to the h preparer has any knowledge	best of my knowledge	relationship		
describ If 'Yes	ibed in section 501(c) o s,' complete the followin (a) Name of organization	f the Code (of	(b) Type of  (b) Type of	organization	es and statements, and to the h preparer has any knowledge  8-15-10  Date	best of my knowledge  Title	and belief, it is true	e, correc	ct, an
describ If 'Yes	alties of perjury, I declare that I	f the Code (of	(b) Type of  (b) Type of	organization	es and statements, and to the h preparer has any knowledge Date	best of my knowledge  Title	relationship	e, correc	ct, and
nder penamplete i	alties of perjury. I declare that I Declaration of preparer (other)  Preparer's signature  Firm's name (or POWD)	f the Code (of ag schedule on his payer of the kan taxpayer of the	(b) Type of  (b) Type of  (b) Type of  (b) Type of  (c) Type of  (d) Type of  (d) Type of  (e) Type of	organization	es and statements, and to the h preparer has any knowledge  8-15-10  Date	best of my knowledge  Title  Check if self-	and belief, it is true	e, correc	et, and
describ If 'Yes	alties of perjury. I declare that I Declaration of preparer (other)  Preparer's signature	have examined for the control of the	(b) Type of  (b) Type of  (b) Type of  (c) Type of  (d) Type of  (d) Type of  (e) Type of	organization	es and statements, and to the h preparer has any knowledge  8-15-10  Date  Date  Date	best of my knowledge  Title  Check if self-employed	and belief, it is true	e, correc	ct, and

#### Form 990-PF Part I, Line 6a

#### **Net Gain or Loss From Sale of Assets**

· . · . . . .

2009

Employer Identification Number Name 20-8017815 THE JONATHAN B AND GLORIA A DETWILER FAMILY FOUNDATION Asset Information: SECURITY SALES\_SHORT TERM - SEE ATTACHED Description of Property: How Acquired Purchased Various Date Acquired Name of Buver Date Sold Various 51,105. Sales Price 57, 202. Cost or other basis (do not reduce by depreciation) Valuation Method: Sales Expense: 6,097. Accumulation Depreciation Total Gain (Loss) Description of Property How Acquired Date Acquired Name of Buyer Date Sold Cost or other basis (do not reduce by depreciation) Sales Price Valuation Method Sales Expense Accumulation Depreciation Total Gain (Loss) Description of Property How Acquired Date Acquired Name of Buyer Date Sold Cost or other basis (do not reduce by depreciation) Sales Price Valuation Method Sales Expense Total Gain (Loss) Accumulation Depreciation Description of Property: How Acquired Date Acquired Name of Buyer Date Sold Cost or other basis (do not reduce by depreciation) Sales Price Valuation Method Sales Expense Accumulation Depreciation: Total Gain (Loss) Description of Property How Acquired Date Acquired Date Sold Name of Buyer Cost or other basis (do not reduce by depreciation) Sales Price Valuation Method Sales Expense Accumulation Depreciation: Total Gain (Loss) Description of Property Date Acquired How Acquired Date Sold Name of Buyer Sales Price Cost or other basis (do not reduce by depreciation) Valuation Method: Sales Expense. Accumulation Depreciation Total Gain (Loss) Description of Property How Acquired Date Acquired Name of Buyer Date Sold Cost or other basis (do not reduce by depreciation) Sales Price Valuation Method Sales Expense Accumulation Depreciation: Total Gain (Loss) Description of Property: How Acquired Date Acquired: Date Sold Name of Buyer Sales Price Cost or other basis (do not reduce by depreciation) Valuation Method Sales Expense Accumulation Depreciation Total Gain (Loss)

Form 990-PF, Page 1, Part I, Line 23

Other expenses:	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
Miscellaneous	359.	359.		
Postage & Delivery	10.	10.		

Total \_\_\_\_\_369. \_\_\_\_369.

Form 990-PF, Page 6, Part VIII, Line 1

Information about Officers, Directors, Trustees, Etc.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Person X Business Ralph P Detwiler				
701 Thomas Jefferson Road	Trustee			
Wayne PA 19087	1.00	0.	0.	0.
Person X Business		n		
Michelle D Halle				
701 Thomas Jefferson Road	Trustee			I
<u>Wayne PA 19807</u>	1.00	0.	0.	0.
Person X Business				
John M Wolf, Jr.				
701 Thomas Jefferson Road	Trustee			
Wayne PA 19807	1.00	0.	0.	0.

Total

Form 990-PF, Page 1, Part I Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Benjamin J Moses & Co	Accounting & Tax	2,300.	2,300.		

Total <u>2,300.</u> <u>2,300.</u>

Form 990-PF, Page 1, Part I

Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Barnstone Advisors,	Investment Mgmt	1,244.	1,244.		

229,616.

Form 990-PF, Page 1, Part I

Total

Continued

231,153.

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Total	· <u>·</u>	1,244.	1,244.		<u>.                                    </u>
Form 990-PF, Pa <b>L-13 Stmt</b>	ge 2, Part II, Line 13				
				End o	of Year
	Line 13 - Investment	s - Other:		Book Value	Fair Market Value
SEE ATTACHED	SCHEDULE			229,616.	231,153.

## Part II, Line 13 Columns b & c - As of 12/31/2009 As of 12/31/2009

6 Se 1

				Page
Shares	Quote/Price est	Cost Basis	Gain/Loss	Balance
2,810.427	9 140	25,147	540	25,687
2,486 972	12 140	30,899	-707	30,192
2,079 704	11 970	25,375	-481	24,894
245 000	68 070	15,183	1,494	16,677
3,691 598	8 120	30,084	-109	29,976
250 000	111 440	26,957	903	27,860
3,951 111	12 690	50,398	-259	50,140
365 000	41.000	15,106	-141	14,965
250 000	43 050	10,465	298	10,763
		229,616	1,537	231,153
	2,810.427 2,486 972 2,079 704 245 000 3,691 598 250 000 3,951 111 365 000	2,810.427 9 140 2,486 972 12 140 2,079 704 11 970 245 000 68 070 3,691 598 8 120 250 000 111 440 3,951 111 12 690 365 000 41.000	2,810.427       9 140       25,147         2,486 972       12 140       30,899         2,079 704       11 970       25,375         245 000       68 070       15,183         3,691 598       8 120       30,084         250 000       111 440       26,957         3,951 111       12 690       50,398         365 000       41.000       15,106         250 000       43 050       10,465	2,810.427       9 140       25,147       540         2,486 972       12 140       30,899       -707         2,079 704       11 970       25,375       -481         245 000       68 070       15,183       1,494         3,691 598       8 120       30,084       -109         250 000       111 440       26,957       903         3,951 111       12 690       50,398       -259         365 000       41.000       15,106       -141         250 000       43 050       10,465       298

### Capital Gains - Last year

1. Sec. 1.

4 Sec. 4

1/1/2009 through 12/31/2009

	Account	Secunty	Shares	Bought	Sold	Gross Proceeds	Cost Basis	Realized Gain/L
SHORT	TERM		·		<del></del>			
Bams	stone Advisors, LLC	SEI Core Fixed Income Fund #64	563 063	3/26/2009	7/7/2009	5,276	5,003	3 273
Barns	stone Advisors, LLC	SEI Core Fixed Income Fund #64	0 548	4/1/2009	7/7/2009	5	5	5 0
Barns	stone Advisors, LLC	SEI Core Fixed Income Fund #64	2 777	5/1/2009	7/7/2009	26	25	5 1
Bams	stone Advisors, LLC	SEI Core Fixed Income Fund #64	2 656	6/1/2009	7/7/2009	25	24	· 1
Barns	stone Advisors, LLC	SEI Core Fixed Income Fund #64	2 446	7/1/2009	7/7/2009	23	22	? 1
Bams	stone Advisors, LLC	SEI Ultra Short Bond Fund #41	174 466	3/26/2009	7/7/2009	1,518	1,452	? 66
Barns	stone Advisors, LLC	SEI Enhanced Income Fund #77	161 840	3/26/2009	7/7/2009	1,094	1,034	60
Bams	stone Advisors, LLC	SEI Inst High Yield Bond Fund #59	87 015	3/26/2009	7/7/2009	506	417	7 89
Barns	stone Advisors, LLC	SEI Core Fixed Income Fund #64	0 453	8/3/2009	9/30/2009	5	4	, 0
Barns	stone Advisors, LLC	SEI Real Estate Fund #74	178 891	3/26/2009	10/8/2009	1,636	1,056	580
Barns	stone Advisors, LLC	SEI Real Estate Fund #74	3 413	3/30/2009	10/8/2009	31	20	) 11
Barns	stone Advisors, LLC	SEI Real Estate Fund #74	21 058	8/21/2009	10/8/2009	193	124	68
Bams	stone Advisors, LLC	SEI Real Estate Fund #74	1 202	10/5/2009	10/8/2009		7	
	stone Advisors, LLC	SEI Ultra Short Bond Fund #41	1,388 034	3/26/2009	10/8/2009	•	11,677	
Barns	stone Advisors, LLC	SEI Ultra Short Bond Fund #41	0 758	4/1/2009	10/8/2009	7	6	
	stone Advisors, LLC	SEI Ultra Short Bond Fund #41	3 774	5/1/2009	10/8/2009		32	
Bams	stone Advisors, LLC	SEI Ultra Short Bond Fund #41	3 680	6/1/2009	10/8/2009	33	31	2
Barns	stone Advisors, LLC	SEI Ultra Short Bond Fund #41	3 633	7/1/2009	10/8/2009	33	31	
Barns	stone Advisors, LLC	SEI Ultra Short Bond Fund #41	3 228	8/3/2009	10/8/2009		27	2
	stone Advisors, LLC	SEI Ultra Short Bond Fund #41	229 178	8/21/2009	10/8/2009	•	1,928	
Barns	stone Advisors, LLC	SEI Ultra Short Bond Fund #41	3 698	9/1/2009	10/8/2009		31	
	stone Advisors, LLC	SEI GI Managed Volatility Fund #76	218 341	3/26/2009	10/8/2009	-	1,521	
	stone Advisors, LLC	SEI GI Managed Volatility Fund #76	35 342	8/21/2009	10/8/2009		246	
	stone Advisors, LLC	SEI Inst TR US MGD Volatility-A #72	377 834	3/26/2009	10/9/2009	•	3,068	
	stone Advisors, LLC	SEI Inst TR US MGD Volatility-A #72	1 659	3/30/2009	10/9/2009		13	
_	stone Advisors, LLC	SEI Inst TR US MGD Volatility-A #72	1 672	7/6/2009	10/9/2009		14	
	stone Advisors, LLC	SEI Inst TR US MGD Volatility-A #72	57 849	8/21/2009	10/9/2009		470	
	stone Advisors, LLC	SEI Inst TR US MGD Volatility-A #72	1 408	10/5/2009	10/9/2009		11	
	stone Advisors, LLC	SEI Enhanced Income Fund #77	777 127	3/26/2009	10/13/2009	•	5,043	
	stone Advisors, LLC	SEI Enhanced Income Fund #77	6 185	3/30/2009	10/13/2009		40	
	stone Advisors, LLC	SEI Enhanced Income Fund #77	2 559	7/6/2009	10/13/2009		17	
	stone Advisors, LLC	SEI Enhanced Income Fund #77	126 496	8/21/2009	10/13/2009		821	
	stone Advisors, LLC	SEI Enhanced Income Fund #77	9 213	10/6/2009	10/13/2009	· ·	60	
-	stone Advisors, LLC	SEI Inst High Yield Bond Fund #59	1,168 215	3/26/2009	10/14/2009		5,820	
_	stone Advisors, LLC	SEI Inst High Yield Bond Fund #59	2 573	4/1/2009	10/14/2009		13	
	stone Advisors, LLC	SEI Inst High Yield Bond Fund #59	9 551	5/1/2009	10/14/2009		48	
	stone Advisors, LLC	SEI Inst High Yield Bond Fund #59	7 054	6/1/2009	10/14/2009		35	
_	stone Advisors, LLC	SEI Inst High Yield Bond Fund #59	5 488	7/1/2009	10/14/2009		27	
	stone Advisors, LLC	SEI Inst High Yield Bond Fund #59	9 607	8/3/2009	10/14/2009		48	
	stone Advisors, LLC	SEI Inst High Yield Bond Fund #59	173 727	8/21/2009	10/14/2009	· ·	866	
	stone Advisors, LLC	SEI Inst High Yield Bond Fund #59	9 260	9/1/2009	10/14/2009		46	
	stone Advisors, LLC	SIMT U.S. Fixed Income Fund Class A	529 519	7/7/2009	10/15/2009	· ·	5,308	
	stone Advisors, LLC	SIMT U.S. Fixed Income Fund Class A	0 949	8/3/2009	10/15/2009		10	
	stone Advisors, LLC	SIMT U.S. Fixed Income Fund Class A	87 776	8/21/2009	10/15/2009		880	
	stone Advisors, LLC	SIMT U.S. Fixed Income Fund Class A	1 522	9/1/2009	10/15/2009		15	
	stone Advisors, LLC	SIMT Real Return Fund Class A	317 712	7/7/2009	10/16/2009		3,181	
	stone Advisors, LLC	SIMT Real Return Fund Class A	53 031	8/21/2009	10/16/2009		531	
IUIAL	SHORT TERM					57,202	51,105	6,097

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

# ication for Extension of Time To le an Exempt Organization Return

Department of the Treasury Internal Revenue Service ► File a separate application for each return.

OMB No 1545-1709

THE STATE OF STATE	7 0011100		
If you are	e filing for an Automatic 3-Month	Extension, complete only Part I and check this box	× x
<ul> <li>If you are</li> </ul>	e filing for an Additional (Not Aut	omatic) 3-Month Extension, complete only Part II (on page 2 of th	
		dy been granted an automatic 3-month extension on a previously	
Part I	Automatic 3-Month Extens	sion of Time. Only submit original (no copies needed	).
A corporation	required to file Form 990-T and	requesting an automatic 6-month extension - check this box and o	complete Part I only
All other corp	oorations (including 1120-C filers) eturns	), partnerships, REMICS, and trusts must use Form 7004 to reques	t an extension of time to file
the additional Form 990-T.	I below (6 months for a corporation to the low (6 months for a corporation) 3-month extension (6 months are corporation)	lectronically file Form 8868 if you want a 3-month automatic extension required to file Form 990-T). However, you cannot file Form 886 on or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a completed and signed page 2 (Part II) of Form 8868. For more definite for Charities & Nonprofits.	8 electronically if (1) you want
	Name of Exempt Organization		Employer identification number
Type or			
print	THE JONATHAN B AND (	GLORIA A DETWILER FAMILY FOUNDATION	20-8017815
File by the due date for	Number, street, and room or suite number	If a P.O box, see instructions	
filing your return See	701 THOMAS JEFFERSON	N RD	
instructions	City, town or post office, state, and ZIP co	de For a foreign address, see instructions	
	WAYNE		PA 19087
Check type o	f return to be filed (file a separat	e application for each return):	
X Form 990		Form 990-T (corporation)	720
Form 990	)-BL [	Form 990-T (section 401(a) or 408(a) trust) Form 5	227
Form 990	)-EZ	Form 990-T (trust other than above) Form 6	069
Form 990	)-PF	Form 1041-A Form 8	870
Telephone  If the orga  If this is for	e No. ► anization does not have an office or a Group Return, enter the orga	FAX No. ► or place of business in the United States, check this box nization's four digit Group Exemption Number (GEN) ne group, check this box . ► and attach a list with the names	If this is for the whole group,
	sion will cover.		and 2000 or an included
1 I reques	t an automatic 3-month (6 month	s for a corporation required to file Form 990-T) extension of time	
until A	ug 16 _ , 20 10 , to file	the exempt organization return for the organization named above.	
The exte	ension is for the organization's ref	turn for:	
► X	calendar year 20 <u>09</u> or		
<b>▶</b> □	tax year beginning	, 20, and ending, 20	
	x year is for less than 12 months		Change in accounting period
3a If this an nonrefur	oplication is for Form 990-BL, 990 ndable credits. See instructions	0-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	3a \$ 1,000.
<b>b</b> If this apmade. In	oplication is for Form 990-PF or 9 iclude any prior year overpaymen	90-T, enter any refundable credits and estimated tax payments at allowed as a credit	3b\$ 8,918.
c Balance deposit v See inst	with FTD coupon or, if required, b	a. Include your payment with this form, or, if required, y using EFTPS (Electronic Federal Tax Payment System).	3c \$ 0.
Caution. If you payment instri		fund withdrawal with this Form 8868, see Form 8453-EO and Form	n 8879-EO for

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 4-2009)

Form <b>8868</b>	(Rev 4-2009) THE JONATHAN B AND GLORIA A DETWILER FAMILY FOUNDATION	ON 20-8	017815	Page 2
• If you a	re filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and chec	k this box	<u> </u>	<b>▶</b> X
Note. Only	complete Part II if you have already been granted an automatic 3-month extension on a previous	ously filed For	m 8868	_
	re 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	nal (no cop	ies needed	1)
	Name of Exempt Organization	Employer	dentification num	ber
Type or				
print	THE JONATHAN B AND GLORIA A DETWILER FAMILY FOUNDATION	20-80		
File by the	Number, street, and room or suite number. If a P O box, see instructions	For IRS us	only	
File by the extended due date for		L		
filing the return See	P.O. BOX 263			1
instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions			
	ROCKLAND DE 19732			<u>,                                      </u>
	e of return to be filed (File a separate application for each return)		П-	4050
Form 99		•	<b>—</b>	6069
Form 99			∐ Form	ı 8870
Form 99		·	- 0000	<del></del>
	not complete Part II if you were not already granted an automatic 3-month extension on a pre	viously filed	Form 8868.	
	oks are in care of ► POWDERMILL FINANCIAL SOLUTIONS, LLC one No ► (302) 658-6777  FAX No ► (302) 658-6777			
	rganization does not have an office or place of business in the United States, check this box			▶ □
	s for a Group Return, enter the organization's four digit Group Exemption Number (GEN)		If th	nis is for the
	p, check this box ► . If it is for part of the group, check this box ► and attach a list	t with the nar		
	ne extension is for	st with the flai	iles and Elivs	or an
	lest an additional 3-month extension of time until Nov 15 , 20 10			
	alendar year 2009 , or other tax year beginning , 20 , and endir	na	. 20	
	tax year is for less than 12 months, check reason   Initial return   Final return		ge in account	na period
	in detail why you need the extension		<b>3</b>	
	itional information is needed in order to file a complete	- <i></i>		
	accurate return.			
8a If this	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less an	у Т		
nonre	fundable credits. See instructions	8	3a \$	121.
<b>b</b> If this	application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated and application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated and application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated and application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated and estimated application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated applications are considered as a second control of the form of the fo	ated tax		
paym with F	ents made. Include any prior year overpayment allowed as a credit and any amount paid prev Form 8868	lously	3 <b>b</b> \$	200.
c Balan	nce Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, det	oosit		
with F	nce Due. Subtract line 8b from line 8a Include your payment with this form, or, if required, depart coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See in	strs 8	3c \$	0.
	Signature and Verification			
Under penalties correct, and co	s of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of implicit and that I amouthorized to pepale this form	my knowledge ar	na beliet, it is true	•
Const.	Title CPA		Date ► 08/	13/10
Signature (	THE CIA		Date 007	13/10

FIFZ0502 03/11/09

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

BAA