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Form **990-PF**

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

OMB No 1545-0052

**2011**

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 calendar year 2011 or tax year beginning , and ending

Name of foundation <b>BEN D. SPAGOLIO CHARITABLE TRUST C/O ROBERT N. BOHORAD, TRUSTEE</b>		A Employer identification number <b>13-7345617</b>
Number and street (or P.O. box number if mail is not delivered to street address) <b>1940 W. NORWEGIAN ST., PO BOX 1280</b>		B Telephone number (see instructions) <b>570-622-1811</b>
City or town, state, and ZIP code <b>POTTSVILLE PA 17901-7280</b>		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ <b>213,473</b>	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	1 Contributions, gifts, grants, etc., received (attach schedule)	1,000			
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	2,592	2,592		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	2,543			
	b Gross sales price for all assets on line 6a	2,543			
	7 Capital gain net income (from Part IV, line 2)		2,543		
	8 Net short-term capital gain			0	
	9 Income modifications				
	10a Gross sales less returns & allowances				
b Less: Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)					
12 Total. Add lines 1 through 11	6,135	5,135	0		
<b>Operating and Administrative Expenses</b>	13 Compensation of officers, directors, trustees, etc.	0			
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule) <b>STMT 1</b>	937			
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions) <b>STMT 2</b>	41			
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (att. sch.) <b>STMT 3</b>	24			
	24 Total operating and administrative expenses. Add lines 13 through 23	1,002	0	0	0
	25 Contributions, gifts, grants paid	9,300			9,300
26 Total expenses and disbursements. Add lines 24 and 25	10,302	0	0	9,300	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	-4,167				
b Net investment income (if negative, enter -0-)		5,135			
c Adjusted net income (if negative, enter -0-)			0		

For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2011)

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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing			
	2 Savings and temporary cash investments	6,612	6,333	6,333
	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 instructions)			
	7 Other notes and loans receivable (att. schedule) ▶			
	Less: allowance for doubtful accounts ▶	0		
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U.S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule) <b>SEE STMT 4</b>	191,438	187,550	207,140
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment: basis ▶			
Less: accumulated depreciation (attach sch.) ▶				
12 Investments—mortgage loans				
13 Investments—other (attach schedule)				
14 Land, buildings, and equipment: basis ▶				
Less: accumulated depreciation (attach sch.) ▶				
15 Other assets (describe ▶)				
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	198,050	193,883	213,473	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶)			
	23 Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. ▶ <input type="checkbox"/>			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ▶ <input checked="" type="checkbox"/>			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg., and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds	198,050	193,883	
	30 Total net assets or fund balances (see instructions)	198,050	193,883	
31 Total liabilities and net assets/fund balances (see instructions)	198,050	193,883		

**Part III Analysis of Changes in Net Assets or Fund Balances**

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	198,050
2 Enter amount from Part I, line 27a	2	-4,167
3 Other increases not included in line 2 (itemize) ▶	3	
4 Add lines 1, 2, and 3	4	193,883
5 Decreases not included in line 2 (itemize) ▶	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	193,883

**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.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a <b>WADDELL &amp; REED CAP GAIN DIST</b>			
b <b>PUBLICLY TRADED SECURITIES</b>			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a <b>1,268</b>			<b>1,268</b>
b <b>9,000</b>		<b>7,725</b>	<b>1,275</b>
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gain (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
a			<b>1,268</b>
b			<b>1,275</b>
c			
d			
e			

2 Capital gain net income or (net capital loss) <span style="float: right;">{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }</span>	2	<b>2,543</b>
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8	3	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  Yes  No  
If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2010	<b>10,003</b>	<b>208,301</b>	<b>0.048022</b>
2009	<b>12,059</b>	<b>194,826</b>	<b>0.061896</b>
2008	<b>13,528</b>	<b>243,647</b>	<b>0.055523</b>
2007	<b>9,158</b>	<b>264,503</b>	<b>0.034623</b>
2006	<b>9,129</b>	<b>249,843</b>	<b>0.036539</b>

2 Total of line 1, column (d)	2	<b>0.236603</b>
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	<b>0.047321</b>
4 Enter the net value of noncharitable-use assets for 2011 from Part X, line 5	4	<b>217,994</b>
5 Multiply line 4 by line 3	5	<b>10,316</b>
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	<b>51</b>
7 Add lines 5 and 6	7	<b>10,367</b>
8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.	8	<b>9,300</b>

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)**

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b	1	103
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	103
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	103
6	Credits/Payments:		
a	2011 estimated tax payments and 2010 overpayment credited to 2011	6a	
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d	7	
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> 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	103
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	
11	Enter the amount of line 10 to be: Credited to 2012 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11	

**Part VII-A Statements Regarding Activities**

	Yes	No
1a		X
1b		X
1c		X
2		X
3		X
4a		X
4b		N/A
5		X
6	X	
7	X	
8a		
8b	X	
9		X
10		X

**Part VII-A Statements Regarding Activities (continued)**

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ N/A	13	X	
14	The books are in care of ▶ <b>ROBERT N. BOHORAD</b> Telephone no ▶ <b>570-622-1811</b> <b>P.O. BOX 1280</b>			
	Located at ▶ <b>POTTSVILLE</b> PA ZIP+4 ▶ <b>17901-7280</b>			
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	15		
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country ▶	16	Yes	No X

**Part 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6)	Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here	N/A	1b
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 2011?	N/A	1c
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)):		
a	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2011? If "Yes," list the years ▶ 20 20 20 20 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
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 ▶ 20 20 20 20		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2011.)	N/A	3b
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a X
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 2011?		4b X

**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:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?  Yes  No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?  Yes  No

(3) Provide a grant to an individual for travel, study, or other similar purposes?  Yes  No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)  Yes  No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  Yes  No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?  Yes  No  
 Organizations relying on a current notice regarding disaster assistance check here  N/A

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  Yes  No  
 If "Yes," attach the statement required by Regulations section 53.4945-5(d).  N/A

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No  
 If "Yes" to 6b, file Form 8870.  N/A

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Yes  No

b If Yes, did the foundation receive any proceeds or have any net income attributable to the transaction?  Yes  No

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(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
ROBERT N. BOHORAD P.O. BOX 1280 POTTSVILLE PA 17901-7280	TRUSTEE 2.00	0	0	0
JAMES C. BOHORAD P.O. BOX 1280 POTTSVILLE PA 17901-7280	TRUSTEE 2.00	0	0	0

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "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) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000  0

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**

**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "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**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
2	
3	
4	

**Part IX-B Summary of Program-Related Investments (see instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
2	
All other program-related investments. See instructions	
3	
Total. Add lines 1 through 3 <span style="float: right;">▶</span>	

**Part X** Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b>	Average monthly fair market value of securities	<b>1a</b>	214,009
<b>b</b>	Average of monthly cash balances	<b>1b</b>	7,305
<b>c</b>	Fair market value of all other assets (see instructions)	<b>1c</b>	0
<b>d</b>	Total (add lines 1a, b, and c)	<b>1d</b>	221,314
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d	<b>3</b>	221,314
<b>4</b>	Cash deemed held for charitable activities. Enter 1½% of line 3 (for greater amount, see instructions)	<b>4</b>	3,320
<b>5</b>	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	217,994
<b>6</b>	Minimum investment return. Enter 5% of line 5	<b>6</b>	10,900

**Part XI** Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here  and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6	<b>1</b>	10,900
<b>2a</b>	Tax on investment income for 2011 from Part VI, line 5	<b>2a</b>	103
<b>b</b>	Income tax for 2011. (This does not include the tax from Part VI.)	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b	<b>2c</b>	103
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1	<b>3</b>	10,797
<b>4</b>	Recoveries of amounts treated as qualifying distributions	<b>4</b>	
<b>5</b>	Add lines 3 and 4	<b>5</b>	10,797
<b>6</b>	Deduction from distributable amount (see instructions)	<b>6</b>	
<b>7</b>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	<b>7</b>	10,797

**Part XII** Qualifying Distributions (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	<b>1a</b>	9,300
<b>b</b>	Program-related investments—total from Part IX-B	<b>1b</b>	
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required)	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule)	<b>3b</b>	
<b>4</b>	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	9,300
<b>5</b>	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)	<b>5</b>	0
<b>6</b>	Adjusted qualifying distributions. Subtract line 5 from line 4	<b>6</b>	9,300

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
<b>1</b> Distributable amount for 2011 from Part XI, line 7				<b>10,797</b>
<b>2</b> Undistributed income, if any, as of the end of 2011:				
<b>a</b> Enter amount for 2010 only			<b>9,140</b>	
<b>b</b> Total for prior years: 20____, 20____, 20____				
<b>3</b> Excess distributions carryover, if any, to 2011:				
<b>a</b> From 2006				
<b>b</b> From 2007				
<b>c</b> From 2008				
<b>d</b> From 2009				
<b>e</b> From 2010				
<b>f</b> Total of lines 3a through e				
<b>4</b> Qualifying distributions for 2011 from Part XII, line 4: ▶ \$ <b>9,300</b>				
<b>a</b> Applied to 2010, but not more than line 2a			<b>9,140</b>	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions)				
<b>c</b> Treated as distributions out of corpus (Election required—see instructions)				
<b>d</b> Applied to 2011 distributable amount				<b>160</b>
<b>e</b> Remaining amount distributed out of corpus				
<b>5</b> Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a).)				
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b				
<b>c</b> 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				
<b>d</b> Subtract line 6c from line 6b. Taxable amount—see instructions				
<b>e</b> Undistributed income for 2010. Subtract line 4a from line 2a. Taxable amount—see instructions				
<b>f</b> Undistributed income for 2011. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2012				<b>10,637</b>
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
<b>8</b> Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions)				
<b>9</b> Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a				
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2007				
<b>b</b> Excess from 2008				
<b>c</b> Excess from 2009				
<b>d</b> Excess from 2010				
<b>e</b> Excess from 2011				

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2011, enter the date of the ruling ▶

b Check box to indicate whether the foundation is a private operating foundation described in section  4942(j)(3) or  4942(i)(5)

	Tax year				(e) Total
	(a) 2011	(b) 2010	(c) 2009	(d) 2008	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
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					
3 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					

**Part XV Supplementary Information** (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)  
**N/A**

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest  
**N/A**

2 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.  
**ROBERT N. BOHORAD, TRUSTEE 570-622-1811**  
**P.O. BOX 1280 POTTSVILLE PA 17901-7280**

b The form in which applications should be submitted and information and materials they should include:  
**SEE STATEMENT 5**

c Any submission deadlines:  
**NONE**

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:  
**NONE**

**Part XV** Supplementary Information (continued)

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year <b>SEE STATEMENT 6</b>				<b>9,300</b>
<b>Total</b>				<b>9,300</b>
b Approved for future payment <b>N/A</b>				
<b>Total</b>				





Federal Statements

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

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
LIPKIN, MARSHALL, BOHORAD & THORNB	\$ 937	\$	\$	\$
TOTAL	\$ 937	\$ 0	\$ 0	\$ 0

Statement 2 - Form 990-PF, Part I, Line 18 - Taxes

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
2010 FEDERAL EXCISE TAX	\$ 19	\$	\$	\$
FOREIGN INCOME TAX WITHHELD	22			
TOTAL	\$ 41	\$ 0	\$ 0	\$ 0

Statement 3 - Form 990-PF, Part I, Line 23 - Other Expenses

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
EXPENSES				
BANK SERVICE CHARGES	24			
TOTAL	\$ 24	\$ 0	\$ 0	\$ 0

## Federal Statements

## Statement 4 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
AMERICAN GROWTH & BALANCED FUNDS - C	\$ 89,281	\$ 86,854	COST	\$ 100,835
WADDELL & REED WR ADVISOR FUNDS:				
SCIENCE AND TECHNOLOGY	4,416	4,819	COST	4,718
ACCUMULATIVE	7,386	6,004	COST	8,248
BOND	137	137	COST	
GOVERNMENT SECURITIES	100	100	COST	
SMALL CAP	5,068	5,695	COST	6,391
ASSET STRATEGY	23,495	23,830	COST	28,146
IVY GLOBAL NATURAL RESOURCES	6,704	6,704	COST	5,518
IVY INTERNATIONAL CORE EQUITY	7,689	7,952	COST	7,778
IVY PACIFIC OPPORTUNITIES	3,592	3,742	COST	3,324
IVY LIMITED-TERM BOND	15,811	13,650	COST	13,696
ADVISORS DIVIDEND OPPORTUNITIES	27,759	28,063	COST	28,486
TOTAL	\$ 191,438	\$ 187,550		\$ 207,140

# Federal Statements

## Statement 5 - Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

### Description

LETTER FORM, TO INCLUDE THE PURPOSE FOR WHICH THE FUNDS  
WILL BE USED

## Form 990-PF, Part XV, Line 2c - Submission Deadlines

### Description

NONE

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

### Description

NONE

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## Federal Statements

Statement 6 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the  
Year

Name	Address	Relationship	Status	Purpose	Amount
HILLSIDE SPCA	POTTSVILLE PA 17901	N/A	P.O. BOX 233 501(C)(3)	FOR ASSISTANCE TO ANIMALS	175
MUSCULAR DYSTROPHY ASSOC.	ALLENTOWN PA 18106	N/A	5940 HAMILTON BLVD. 501(C)(3)	FOR ASSISTANCE WITH RESEARCH	200
ORWIGSBURG BOROUGH	ORWIGSBURG PA 17961	N/A	NORTH WARREN ST. 501(C)(3)	FOR ASSISTANCE WITH AMBULANCE SERVIC	65
SCHUYLKILL COUNTY COUNCIL FOR ARTS	POTTSVILLE PA 17901	N/A	1440 MAHANTONGO STREET 501(C)(3)	FOR ASSISTANCE WITH ARTS	550
TRYALL FUND	NEW YORK NY 10022	N/A	641 LEXINGTON AVE. 501(C)(3)	FOR ASSISTANCE IN EDUCATION	200
SUSAN G. KORMAN FOR CURE	DALLAS TX 75244	N/A	5005 LBJ FREEWAY 501(C)(3)	ASSISTANCE WITH MEDICAL RESEARCH	100
SCHUYLKILL COUNTY YMCA	POTTSVILLE PA 17901	N/A	219 N. 12TH ST. 501(C)(3)	TO PROMOTE CHRISTIAN PRINCIPLES	345
POTTSVILLE PUBLIC LIBRARY	POTTSVILLE PA 17901	N/A	215 W. MARKET ST. 501(C)(3)	FOR ASSISTANCE WITH EDUCATION/BOOKS	435
PHILHARMONIC CTR FOR ARTS	NAPLES FL 34108	N/A	5833 PELICAN BAY BLVD. 501(C)(3)	FOR ASSISTANCE WITH ARTS	2,001
SCHUYLKILL HEALTH CARE	POTTSVILLE PA 17901	N/A	SOUTH JACKSON ST. 501(C)(3)	PUBLIC CHARITY	435
BLUE MOUNTAIN EAGLE FOUND	ORWIGSBURG PA 17961	N/A	675 REDDALE ROAD 501(C)(3)	FOR ASSISTANCE WITH YOUTH	100
LEUKEMIA AND LYMPHOMA SOC	PITTSFIELD MA 01202	N/A	PO BOX 4072 501(C)(3)	FOR ASSISTANCE WITH LEUKEMIA RESEARC	50
TRUSTEES OF PHILLIPS ACADEMY	ANDOVER MA 01810	N/A	180 MAIN STREET SCHOOL	FOR ASSISTANCE WITH EDUCATION	50
AVENUES	POTTSVILLE PA 17901	N/A	2 PARK STREET 501(C)(3)	FOR ASSISTANCE TO THE DISABLED	225
CONSUMER REPORTS FOUND.	YONKERS NY 10703	N/A	101 TRUMAN AVE. 501(C)(3)	FOR ASSISTANCE WITH EDUCATION	25
LEAGUE OF WOMEN VOTERS ED FUND	WASHINGTON DC 20036	N/A	1730 NORTH ST. NW 501(C)(3)	FOR ASSISTANCE WITH EDUCATION	25
NAPLES MUSEUM OF ART	NAPLES FL 34108	N/A	5833 PELICAN BAY BLVD. 501(C)(3)	FOR ASSISTANCE TO THE ARTS	187
NAPLES COUNCIL ON WORLD AFFAIRS	FORT MYERS FL 33913	N/A	12290 TREELINE AVE. 501(C)(3)	FOR ASSISTANCE WITH EDUCATION	200
OHOB ZEDECK SISTERHOOD	POTTSVILLE PA 17901	N/A	2400 WEST END AVE. CHURCH	FOR ASSISTANCE WITH RELIGION	25

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## Federal Statements

## Statement 6 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

Name	Address	Relationship	Status	Purpose	Amount
POTTSVILLE ROTARY CHARITIES	POTTSVILLE PA 17901	N/A	POTTSVILLE	PUBLIC CHARITY	350
RENAISSANCE ACAD OF FL	8695 COLLEGE PARKWAY	N/A	8695 COLLEGE PARKWAY	FOR ASSISTANCE WITH EDUCATION	135
FORT MYERS FL 33919	SCHOOL	N/A	368 S. CENTER ST.	FOR ASSISTANCE TO WOMEN	200
SCHUYLKILL WOM. IN CRISIS	POTTSVILLE PA 17901	N/A	501(C)(3)	FOR ASSISTANCE WITH RELIGION	75
ST. KATHERINE'S CHURCH	NAPLES	N/A	CHURCH	FOR ASSISTANCE WITH HEALTHCARE	15
NAPLES FL 34108	POTTSVILLE	N/A	501(C)(3)	FOR ASSISTANCE WITH RELIGION	50
SCHUYLKILL HEALTHCARE AUXILIARY	POTTSVILLE PA 17901	N/A	28006 PHILLIPS STREET	FOR ASSISTANCE WITH EDUCATION	32
CHURCH WORLD SERVICE	ELKHART IN 46515	N/A	501(C)(3)	FOR ASSISTANCE WITH HEALTHCARE	50
COLLIER COUNTY PUBLIC LIBRARY	NAPLES FL 34109	N/A	2385 ORANGE BLOSSOM ROAD	FOR ASSISTANCE WITH EDUCATION	10
NAPLES FL 34109	HAGERSTOWN	N/A	501(C)(3)	FOR ASSISTANCE WITH EDUCATION	50
DOCTORS WITHOUT BORDERS	HAGERSTOWN MD 21741	N/A	FORT MEYERS	FOR ASSISTANCE WITH EDUCATION	10
EDISON MUSEUM	FORT MEYERS FL	N/A	501(C)(3)	FOR ASSISTANCE WITH EDUCATION	50
HABITAT FOR HUMANITY	AMERICUS GA 31709	N/A	PO BOX 1729	FOR ASSISTANCE TO UNDER-PRIVILEGED	25
POTTSVILLE CHAPTER OF HADASSAH	POTTSVILLE PA 17901	N/A	2400 WEST END AVENUE	FOR ASSISTANCE WITH RELIGION	50
POTTSVILLE PA 17901	HAWK MOUNTAIN SANCTUARY	N/A	1700 HAWK MOUNTAIN ROAD	FOR ASSISTANCE WITH WILDLIFE PRESERV	100
HAWK MOUNTAIN SANCTUARY	KEMPTON PA 19529	N/A	501(C)(3)	FOR ASSISTANCE WITH EDUCATION	25
KEMPTON PA 19529	HOLOCAUST MUSEUM OF SW FLORIDA	N/A	4760 TAMiami TR N	FOR ASSISTANCE WITH EDUCATION	20
HOLOCAUST MUSEUM OF SW FLORIDA	NAPLES FL 34103	N/A	501(C)(3)	FOR ASSISTANCE WITH EDUCATION	100
NAPLES FL 34103	INTERNATIONAL PLANNED PARENTHOOD	N/A	120 WALL STREET	FOR ASSISTANCE WITH EDUCATION	25
INTERNATIONAL PLANNED PARENTHOOD	NEW YORK NY 10269	N/A	501(C)(3)	FOR ASSISTANCE TO HANDICAPPED	100
NEW YORK NY 10269	NATIONAL WHEELCHAIR BASKETBALL ASSO	N/A	1130 ELKTON STREET	FOR ASSISTANCE WITH EDUCATION	50
NATIONAL WHEELCHAIR BASKETBALL ASSO	COLORADO SPRINGS CO 80907	N/A	501(C)(3)	FOR ASSISTANCE WITH EDUCATION	100
COLORADO SPRINGS CO 80907	NATIVITY BVM HIGH SCHOOL	N/A	LAWTON HILL	FOR ASSISTANCE WITH FIRE FIGHTING	50
NATIVITY BVM HIGH SCHOOL	POTTSVILLE PA 17901	N/A	SCHOOL	FOR ASSISTANCE WITH EDUCATION	50
POTTSVILLE PA 17901	BOROUGH OF ORWIGSBURG FIRE DEPT	N/A	PO BOX 205	FOR ASSISTANCE WITH EDUCATION	50
BOROUGH OF ORWIGSBURG FIRE DEPT	ORWIGSBURG PA 17961	N/A	FIRE CO.	FOR ASSISTANCE WITH EDUCATION	50
ORWIGSBURG PA 17961	PENNSYLVANIA HERITAGE SOCIETY	N/A	400 NORTH STREET	FOR ASSISTANCE WITH EDUCATION	50
PENNSYLVANIA HERITAGE SOCIETY	HARRISBURG PA 17120	N/A	501(C)(3)		

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## Federal Statements

Statement 6 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the  
Year (continued)

Name	Address	Relationship	Status	Purpose	Amount
PEOPLE FOR THE AMERICAN WAY FOUND	2000 M ST NW				
WASHINGTON DC 20077			501(C)(3)	FOR ASSISTANCE WITH EDUCATION	50
PLANNED PARENTHOOD FEDERATION OF AM	PO BOX 97166				
WASHINGTON DC 20077			501(C)(3)	FOR ASSISTANCE WITH EDUCATION	100
POTTSVILLE TEENERS' BASEBALL LEAGUE	436 ADAMS STREET				
POTTSVILLE PA 17901				YOUTH SPORTS FOR ASSISTANCE WITH YOUTH SPORTS	20
PRINCETON CLUB OF SW FLORIDA	NAPLES				
NAPLES FL			501(C)(3)	FOR ASSISTANCE WITH EDUCATION	40
PRINCETON UNIVERSITY	PRINCETON				
PRINCETON NJ				SCHOOL FOR ASSISTANCE WITH EDUCATION	1,185
READING PUBLIC MUSEUM	500 MUSEUM ROAD				
READING PA 19611			501(C)(3)	FOR ASSISTANCE WITH EDUCATION	120
SEXUAL ASSAULT RESOURCE COUNS CTR	LEBANON				
LEBANON PA			501(C)(3)	FOR ASSISTANCE TO VICTIMS	50
SHELTER FOR ABUSED WOMEN & CHILDREN	LAKEWOOD BOULEVARD				
NAPLES FL 34112			501(C)(3)	FOR ASSISTANCE TO VICTIMS	100
SJOGREN'S SYNDROME FOUNDATION	6707 DEMOCRACY BOULEVARD				
BETHESDA MD 20817			501(C)(3)	FOR ASSISTANCE WITH EDUCATION	35
SOVEREIGN MAJESTIC THEATRE	NORTH CENTRE STREET				
POTTSVILLE PA 17901			501(C)(3)	FOR ASSISTANCE WITH ARTS	100
SPECIAL OLYMPICS GEORGIA	4000 DEKALB PARKWAY				
ATLANTA GA 30340			501(C)(3)	FOR ASSISTANCE TO HANDICAPPED	100
ST. JOHN'S UCC CHURCH	236 MARKET STREET				
ORWIGSBURG PA 17961				CHURCH FOR ASSISTANCE WITH RELIGION	25
THE HILL SCHOOL	POTTSTOWN				
POTTSTOWN PA				SCHOOL FOR ASSISTANCE WITH EDUCATION	50
THE MAIN IDEA AT CAMP WALDEN	DENMARK				
DENMARK ME			501(C)(3)	FOR ASSISTANCE WITH EDUCATION	100
THE TAUSSIG CANCER INS AT CLEVELAND	9500 EUCLID				
CLEVELAND OH 44195			501(C)(3)	FOR ASSISTANCE WITH EDUCATION	50
TRUSTEES OF UNIV OF PENNSYLVANIA	3910 CHESTNUT STREET				
PHILADELPHIA PA 19194				SCHOOL FOR ASSISTANCE WITH EDUCATION	295
UPPER SCHUYLKILL HIGH SCHOOL	4210 HOLLYWOOD BOULEVARD				
HAZLE TWP PA 18202				SCHOOL FOR ASSISTANCE WITH EDUCATION	100

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### Federal Statements

**Statement 6 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)**

Name	Address	Relationship	Status	Purpose	Amount
					9,300

TOTAL

0 4 5 0 2 4

**Federal Statements****Taxable Dividends from Securities**

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business Code</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>US Obs (\$ or %)</u>
WADDELL & REED	\$ 1,177			PA	
AMERICAN FUNDS	1,414			PA	
VANGUARD	1			PA	
TOTAL	<u>\$ 2,592</u>				

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box  **Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 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 copies needed).

Enter filer's identifying number, see instructions

Type or print	Name of exempt organization or other filer, see instructions. <b>BEN D. SPAGOLIO CHARITABLE TRUST C/O ROBERT N. BOHORAD, TRUSTEE</b>	Employer identification number (EIN) or <input checked="" type="checkbox"/> <b>13-7345617</b>
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. <b>1940 W. NORWEGIAN ST., PO BOX 1280</b>	Social security number (SSN) <input type="checkbox"/>
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>POTTSVILLE PA 17901-7280</b>	

Enter the Return code for the return that this application is for (file a separate application for each return) 04

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

- The books are in the care of **JAMES C. BOHORAD CO-TRUSTEE**  
Telephone No. **570-622-1811** FAX No. **570-622-4850**
- 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 the whole group, check this box . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension is for.

- I request an additional 3-month extension of time until **11/15/12**.
- For calendar year **2011**, or other tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_
- If the tax year entered in line 5 is for less than 12 months, check reason:  Initial return  Final return  
 Change in accounting period
- State in detail why you need the extension  
**ADDITIONAL TIME IS REQUESTED TO GATHER INFORMATION TO PREPARE A COMPLETE AND ACCURATE RETURN.**

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	\$
8b 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	\$
8c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$

**Signature and Verification must be completed for Part II only.**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature Title **CPA** Date **8/13/12**  
Form 8868 (Rev. 1-2012)