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Form **990-PF**

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

OMB No 1545-0052 <u> 2011</u>

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.						2017						
		dar year 2011			NOV					DEC 31, 2011		
		foundation		-				-		A Employer identification	number	
_A	TG	OOTH FO	UNDATIO)N						45-3582341		
_		ind street (or PO I			to street	address)			Room/suite	B Telephone number		
		<u>0 MORNI</u>		DRIVE						717-761-72	10	
		own, state, and								C If exemption application is po	ending, check here	
_		P HILL,		011			ladalahan afa		- LL .			
G (check	all that apply:		al return		片	Initial return of a f	ormer public	cnarny	D 1. Foreign organizations	, cneck nere	
				ıl return		님	Amended return Name change			Foreign organizations med 2. check here and attach col	eting the 85% test,	
<u></u>	hack	type of organiz		ress change	/c\/3\ av	emnt nr	vate foundation			1		
Γ	_	ction_4947(a)(1					vate foundation (able private found	lation		E If private foundation stat under section 507(b)(1)	_	
L F		rket value of all			Accountir				rual	F If the foundation is in a 6		
		Part II, col (c),		, , , ,	_	her (spe				under section 507(b)(1)		
•	\$, (-,,	- 18,8	63. (Par	t I, colui	mn (d) r	nust be on cash	basis.)			(-,,	
Pa	rt I	Analysis of R	evenue and Expounts in columns (penses			Revenue and		nvestment	(c) Adjusted net	(d) Disbursements	
		necessarily equa	ounts in columns (t al the amounts in c	b), (c), and (d) n column (a))	iay not		enses per books		ome	income	for charitable purposes (cash basis only)	
	1	Contributions,	gıfts, grants, etc	c., received			42,900.					
	2		if the foundation is not	required to attach	Sch B							
	3	Interest on saving cash investments	s and temporary				8.		8.	8.	STATEMENT 1	
	4	Dividends and	ınterest from se	ecurities				ļ				
	5a	Gross rents									,	
	b	Net rental income	or (loss)									
ē	6a	Net gain or (loss) Gross sales price		s not on line 10								
Revenue	_b	assets on line 6a							0.			
ě	7	· ·	come (from Part I)	v, line 2)					<u> </u>			
	8	Net short-term Income modifi										
	102	Gross sales less and allowances										
;	Ι.	Less Cost of goo	ds sold									
3	l	Gross profit or						1				
)	11	Other income	, ,									
.) 	12	Total. Add line	s 1 through 11				42,908.		8.	8.		
	13	•	officers, directors,			_	0.		0.	0.	0.	
		Other employe										
S	15	Pension plans,	employee bene			-						
ıse	16a	Legal fees		STMT	2		695.		0.	0-	0.	
<u>e</u>	b	Accounting fee		C TTV TT	,		0.5.0	<u> </u>		0.	· /	
e E	C	Other profession	onal tees	STMT	3		850.		0.	44111 .000	2012	
Ξţ	17	Interest Taxes						-	 .	NAI (!) 7	2 <u>012 8 </u>	
stre	18 19	Depreciation a	nd deniation							1-0000	1 (2)	
Ë	20	Occupancy	iu uepietion							7 - 10 - 1 - 1	Vi, e con	
Adı	21		nces, and meet	ınas								
P	22	Printing and pi	•									
Operating and Administrative Expenses	23	Other expense										
atir	24		g and administ	rative								
per			d lines 13 throu				1,545.		0.	0.	0.	
0	25	Contributions,					22,500.				22,500.	
	26	•	s and disburse	ments.							_	
		Add lines 24 a					24,045.	1	0.	0.	22,500.	
	27	Subtract line 2	6 from line 12:				4000	4				
	۱ ۾		e over expenses a				18,863.	-				
		1	t income (if nega					 	8.			
		₃a net i	ncome (if negativ	e, enter -0-)						8.		

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Form 990-PF (2011)

ATGOOTH FOUNDATION

		OUNDATION						4	5-358	2341	Page 3
Capital Gains	and Loss	ses for Tax on In	vestmen	t Income							
		(s) of property sold (e.g. common stock, 200 shs			(b)	How ac - Purc - Dona	equired hase ation	(c) Date (mo., c	acquired lay, yr.)	(d) Dat (mo., d	
1a											
b NO	NE										
C											
d					<u> </u>						
<u>e</u>	·				L				l		
(e) Gross sales price		oreciation allowed or allowable)		st or other basis expense of sale					ain or (loss) s (f) minus (
a											
<u>b</u>			 							_	
<u> </u>											
d											
e	<u> </u>			10.10.1.100							
Complete only for assets shown	T			····					ol. (h) gain i not less than		
(i) F.M.V. as of 12/31/69		Adjusted basis of 12/31/69		cess of col. (1) col. (j), if any					(from col. (f		
<u>a</u>											
b											
_C											
<u>d</u>											
<u>e</u>											
2 Capital gain net income or (net ca	apıtal loss)	If gain, also enter If (loss), enter -0-	ın Part I, line ın Part I, line	7 : 7	}	2					
3 Net short-term capital gain or (lo	ss) as defined	d in sections 1222(5) an	d (6):								
If gain, also enter in Part I, line 8,	column (c).				\						
If (loss), enter -0- in Part I, line 8	I	-tion 4040/s\ for	Daduasa	I Tow on NoA		3					
		ction 4940(e) for					ient in	come			
(For optional use by domestic privat	e foundations	s subject to the section 4	940(a) tax oi	n net investment in	come	e.)				N/A	
If section 4940(d)(2) applies, leave t	his part blank	(.									
Was the foundation liable for the sec			ount of any v	ear in the hace nei	rıod?					Yes	□ No
If "Yes," the foundation does not qua				•	ilou.						
1 Enter the appropriate amount in					es.						
(a) Base period years Calendar year (or tax year beginn		(b) Adjusted qualifying dist		Net value of no	(c)	rıtable-	use asset	s	Dıstrıb (col. (b) dıvı	(d) ution ratio ded by col.	(c))
2010									, , ,		3_77
2009			_,								
2008									•		
2007											
2006											_
									•		
2 Total of line 1, column (d)								2			
3 Average distribution ratio for the	5-year base (period - divide the total o	n line 2 by 5,	or by the number	of ye	ars		-			
the foundation has been in existe	ence if less th	an 5 years						3			
4 Enter the net value of noncharita	ble-use asset	s for 2011 from Part X, I	ıne 5					4			_
5 Multiply line 4 by line 3								5			
6 Enter 1% of net investment incom	me (1% of Pa	ırt I, lıne 27b)						6			
7 Add lines 5 and 6								7			
8 Enter qualifying distributions from	m Part XII, lın	ne 4						8			
If line 8 is equal to or greater tha	n line 7, chec	k the box in Part VI, line	1b, and com	plete that part usin	ıg a 1	% tax	rate.				

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	Excise Tax Based on Investment Income (Section 4940	(a),	49	40(b), 4	940(e), or 4	1948	- see	instruc	tion	<u>s)</u>
1a	Exempt operating foundations described in section 4940(d)(2), check here and en	ter "N	/A" c	on line 1.)					
	Date of ruling or determination letter: (attach copy of letter if nece									
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here		an	d enter 1%	, }	1				0.
	of Part I, line 27b						Classes.			7
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% $$				l.(b). ノ			No.		لــــا
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Other	iers e	nter	-0-)		2	<u> </u>			<u>0.</u>
3	Add lines 1 and 2					3	<u> </u>			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Other	hers e	enter	· - 0-)		4	<u> </u>			0.
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-					5				0.
6	Credits/Payments:	ı								-
а	2011 estimated tax payments and 2010 overpayment credited to 2011	_6a	_			<u>-</u>				ليف ش د
b	Exempt foreign organizations - tax withheld at source	6b	\perp							
C	Tax paid with application for extension of time to file (Form 8868)	6c	┸							
d	Backup withholding erroneously withheld	6d								
	Total credits and payments. Add lines 6a through 6d					7				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attack	hed				8	<u> </u>			
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed				>	9				0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				, •	10				
	Enter the amount of line 10 to be: Credited to 2012 estimated tax				Refunded >	11				
94	Statements Regarding Activities									
1a	During the tax year, did the foundation attempt to influence any national, state, or local legisla	ation (or di	d it partici	oate or intervene	e in		Y		No
	any political campaign?							1a		<u>X</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpose							1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	cop	ies (of any ma	tenals publish	ed or				
	distributed by the foundation in connection with the activities.							*		. ;
	Did the foundation file Form 1120-POL for this year?							1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the				_			=		
	(1) On the foundation. \blacktriangleright \$ (2) On foundation managers.				0.	_				:
е	Enter the reimbursement (if any) paid by the foundation during the year for political expendition	ure ta	x im	posed on	foundation					
	managers. ► \$0.									
2	Has the foundation engaged in any activities that have not previously been reported to the IRS	S?						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 in		nent,	, articles o	incorporation,	or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes							3		<u>X</u>
	Did the foundation have unrelated business gross income of \$1,000 or more during the year	?					./3	4a		<u>X</u> _
	If "Yes," has it filed a tax return on Form 990-T for this year?					N	I/A	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	h a = 1						ŀ		
Ь	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied eith	ier.						· - · · · · · · · · · · · · · · · · · ·		-274 12
	 By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory 	diroo	tion	a that agai	liet with the etat	o love				
	remain in the governing instrument?	unec	LIUII	S that com	iict with the star	C IAW		6	×= \$	X
7	Did the foundation have at least \$5,000 in assets at any time during the year?								x	<u> </u>
′	If "Yes," complete Part II, col. (c), and Part XV.								Λ	T.
Q.	Enter the states to which the foundation reports or with which it is registered (see instruction	e) 🕨	•	NONE	!			÷.		-4
od	Eurer the states to millen the logingation reports of mith millen it is registered (see instituction	J) =	_	140141	1					
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Att	Ornev	v Ger	neral (or d	esionate)					
U	of each state as required by General Instruction G? If "No," attach explanation)	, 40		oo.g.iato/			8b	х	
9	Is the foundation claiming status as a private operating foundation within the meaning of sec	tion 4	1942	(ı)(3) nr 4	942(j)(5) for calc	endar				
•	year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," co				- :=()/(=/ 101 0411			9		X
10	Did any persons become substantial contributors during the tax year? If "Yes" attach a schedule				addresses S	TMT	١ 4	10	x	

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	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 advise	ry privileges?			
	If "Yes," attach statement (see instructions)		12	Ì	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	Х	
	Website address ► N/A		•		
14	The books are in care of ► MICHAEL DEVLIN Telephone	no. ▶ 717-76	1-76	26	
	Located at ▶ 3130 MORNINGSIDE DRIVE, CAMP HILL, PA	ZIP+4 ▶17			
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	N/	'A	
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank,			/es	No
	securities, or other financial account in a foreign country?	!	16		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign				
	country	ſ			
	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.		1	/es	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?	Yes X No			ł
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				
	a disqualified person?	Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X 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)?	Yes X No			
	(6) Agree to pay money or property to a government official? (Exception Check "No"	1 100 [22] 100			
	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.)	Yes X No			
h	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	, 100 -22 110			
•	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here	►	שו		
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				
۰	before the first day of the tax year beginning in 2011?		1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	ion	10		
_	defined in section 4942(j)(3) or 4942(j)(5)):	011			
9	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) begin	10100			
u	and the control of th	Yes X No			
	If "Yes," list the years	, 100 22 100			
h	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incor	rect			
Ü	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and att				
	statement - see instructions.)	N/A	2b		
^	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	11/21	LU		
·	•				
30	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time				
Jd	during the year?	Yes X No			
	If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons				
O	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7))				
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedul	•			
	The state of the s	ec, N/A	24		
4.	Form 4720, to determine if the foundation had excess business holdings in 2011) Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	N/A	3b 4a	\dashv	x
	Did the foundation mivest during the year any amount in a mainter that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purp	noce that	44		_
0	had not been removed from jeopardy before the first day of the tax year beginning in 2011?	1035 HIGH	4b		x
	had not been removed from Jeopardy before the hist day of the tax year beginning in 2011.		40		

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ATGOOTH FOUNDATION

(a) Name and address of each person paid more than \$50,000

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NONE

Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount 1 N/A All other program-related investments. See instructions. Total. Add lines 1 through 3

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			3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	undations, s	ee instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		<u> </u>
а	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	29,633.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	29,633.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	29,633.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	444.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	29,189.
6	Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	244.
	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a foreign organizations check here and do not complete this part.)	ınd certain	
1	Minimum investment return from Part X, line 6	1	244.
2a		<u> </u>	
Z a	Income tax for 2011. (This does not include the tax from Part VI.)	-	
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	244.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	244.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	244.
	Qualifying Distributions (see instructions)	1 ' 1	
	addinying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	22,500.
þ	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	22,500.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	22,500.

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

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4940(e) reduction of tax in those years.

Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for line 7	2011 from Part XI,		_		244.
2 Undistributed income, if any,	as of the end of 2011				_
a Enter amount for 2010 o	nly .			0.	
b Total for prior years:					
3 Excess distributions carr	vover if any to 2011:		0.	and the second second	
a From 2006	yover, if any, to 2011.				
b From 2007					
c From 2008					
d From 2009					
e From 2010					
f Total of lines 3a through	e	0.			
4 Qualifying distributions for					
Part XII, line 4: ►\$					
a Applied to 2010, but not				0.	
b Applied to undistributed				-	
years (Election required -			0.		
c Treated as distributions of		·			
(Election required - see in	nstructions)	0.			
d Applied to 2011 distribut	able amount				244.
e Remaining amount distri	buted out of corpus	22,256.			
5 Excess distributions carryove (If an amount appears in columnust be shown in column (a)	mn (d), the same amount	0.			0.
6 Enter the net total of eac indicated below:	ch column as				
a Corpus Add lines 3f, 4c, and	4e Subtract line 5	22,256.			
b Prior years' undistributed	d income. Subtract				
line 4b from line 2b			<u> </u>		
c Enter the amount of prior undistributed income for deficiency has been issue the section 4942(a) tax h assessed	which a notice of ed, or on which		0.		
d Subtract line 6c from line	e 6b. Taxable				
amount - see instructions	S		0.		-4
e Undistributed income for	2010. Subtract line				
4a from line 2a. Taxable	amount - see ınstr.			0.	
f Undistributed income for					
lines 4d and 5 from line	1. This amount must	1			
be distributed in 2012					0.
7 Amounts treated as distr					
corpus to satisfy require		_ 0.			
section 170(b)(1)(F) or 4 8 Excess distributions carr	· ·				
not applied on line 5 or li	•	0.			
9 Excess distributions car					
Subtract lines 7 and 8 fro		22,256.			
10 Analysis of line 9:		22,2000			
a Excess from 2007					
b Excess from 2008					
c Excess from 2009					
d Excess from 2010					
e Excess from 2011	22,256.				

	FOUNDATION			45-35	82341 Page
Private Operating F	oundations (see in:	structions and Part VII	A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter that	it is a private operating			
· foundation, and the ruling is effective fo	r 2011, enter the date of t	he ruling	. •		
b Check box to indicate whether the found	dation is a private operatir	ng foundation described in	n section	4942(j)(3) or 4	942())(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
investment return from Part X for		_			
each year listed					1
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)	<u> </u>				
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	1				
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 Supplementary Info	rmation (Comple	te this part only i	if the foundation	on had \$5 000 or m	ore in assets
at any time during t			ii tile loullaati	Jii iiaa 45,000 or iii	ore in assets
					- · · · - · · - · · · · · · · · · · · ·
1 Information Regarding Foundation		4ha = 00/ af 4ha 4a4al aa a4		the foundation hafare the ale	and of any toy
a List any managers of the foundation wh year (but only if they have contributed n			noutions received by	the loulidation before the cit	ise of any lax
, , , ,	1010 111411 \$0,000). (0000	0011011 001 (0)(=)-/			
NONE b List any managers of the foundation wh		a stock of a corporation /	ar an agually large no	urtion of the ourserable of a r	artnarahın ar
other entity) of which the foundation ha			or an equally large po	irtion of the ownership of a p	Janunership of
**	o a 1070 or grouter interes				
NONE		0 1 1 1: 1 5			
2 Information Regarding Contribut					wasta for friends. If
Check here \(\bigcup \leftarrow					
				, complete items za, b, c, an	u u.
a The name, address, and telephone num			addressed:		
DANIEL EICHELBERGER,			4		
3130 MORNINGSIDE DRI					
b The form in which applications should t			iould include:		
NO PRESCRIBED APPLIC	ATION PROCE	SS	_		
c Any submission deadlines:					
NONE					
d Any restrictions or limitations on award		al areas, charitable fields,	kinds of institutions,	or other factors:	
NO PARTICULAR RESTRI	CTIONS	-			

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or contribution Foundation show any relationship to status of Amount any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year PUBLIC CHARITY OPERATING EXPENSES WITE 4801 LINDLE ROAD HARRISBURG , PA 17111 2,500. PROJECT SHARE PUBLIC CHARITY OPERATING EXPENSES 5 NORTH ORANGE STREET CARLISLE, PA 17013 4,000. PUBLIC CHARITY OPERATING EXPENSES BETHESDA MISSION 2101 NORTH FRONT STREET HARRISBURG, PA 17110 4,000. SALVATION ARMY PUBLIC CHARITY OPERATING EXPENSES 1122 GREEN STREET HARRISBURG, PA 17102 4,000. TODD BAIRD LINDSEY FOUNDATION PRIVATE OPERATING EXPENSES PO BOX 724 FOUNDATION CARLISLE PA 17013 4.000 SEE CONTINUATION SHEET(S) ▶ 3a Total 22,500. b Approved for future payment NONE Total

Analysis of Income-Producing Activities

nter gross amounts unless otherwise indicated. 1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclusion code	(d) Amount	(e) Related or exempt function income
a			ļ		
b	_				
C	_		1		
d	_				-
e	_		-		
To the state of th			-		
g Fees and contracts from government agencies			+		
Membership dues and assessments Interest on savings and temporary cash			+		<u> </u>
investments			14	8.	
4 Dividends and interest from securities			1	0.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property		- ·-· , · ·-· · ,			
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
B Gain or (loss) from sales of assets other			1		
than inventory					
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a	_				
b	_				
c					
d	_				
e					
2 Subtotal. Add columns (b), (d), and (e)		0.	•		0.
3 Total Add line 12, columns (b), (d), and (e)				13 _	8.
See worksheet in line 13 instructions to verify calculations Relationship of Activities		mplishment of E	xemp	t Purposes	
Line No. Explain below how each activity for which is the foundation's exempt purposes (other the			A contril	buted importantly to the accor	mplishment of
		,			
· -					
•					
· · · · · · · · · · · · · · · · · · ·	<u></u>				

2011) ATGOOTH FOUNDATION 45-3582341 Information Regarding Transfers To and Transactions and Relationships With Noncharitable

	<u> </u>	Exempt Organ	ıizations			•		
1	· Did the or	ganization directly or indi	rectly engage in any of the followi	ng with any other organizatio	on described in sectio	n 501(c) of	Y	es No
	the Code (other than section 501(c	c)(3) organizations) or in section 5	27, relating to political organ	izations?			
а	Transfers	from the reporting found	lation to a noncharitable exempt o	rganization of:			-	
	(1) Cash						1a(1)	Х
	(2) Other						1a(2)	X
b	Other tran						製 金額	臺灣是
•		of assets to a noncharita	able exempt organization				1b(1)	Х
	• •		oncharitable exempt organization				1b(2)	X
	` '	il of facilities, equipment,	. •				1b(3)	X
		bursement arrangements					1b(4)	X
		s or loan guarantees	,				1b(5)	X
		-	embership or fundraising solicitation	one			1b(6)	X
_			ailing lists, other assets, or paid en				1c	X
			"Yes," complete the following sch		vave chow the fair ma	arkat value of the goods		
u		•	foundation. If the foundation receiv	• •				,
			other assets, or services received.		c in any danouotion (onaring arrangement,	0110111111	
3) L		(b) Amount involved	(c) Name of noncharitable		(d) Description of	of transfers, transactions, an	d sharing arrang	ements
		(0)	N/A		(0, 2000., p.10			-
			N/A					
					<u> </u>			
								
			 					
		 	 		+-			
			 					
								
					1			
			1					
	-							
			· · · · · · · · · · · · · · · · · · ·					
) a	Is the four	idation directly or indirec	tly affiliated with, or related to, one	e or more tax-exempt organiz	rations described			
		•	r than section 501(c)(3)) or in sec	• •		[Yes	X No
h		emplete the following sch				•		
	11 100, 00	(a) Name of org		(b) Type of organization	(c) Description of relation	ship	
		N/A		,,,,	· · · · · · · · · · · · · · · · · · ·	, ,	•	
		21,722						
			· · · · · ·					
			that I have examined this return, including				lay the IRS disci	iss this
Si	gn and be	elief, it is true, correct, and cor	mplete Declaration of preparer (other that	an taxpayer) is based on all informa	ation of which preparer h	as any knowledge re	turn with the proposed to the	eparer
H€	ere	$1 \times 1 \times$		151111	TREASU		X Yes	□ No
	Sign	ature of officer or trustee	;	Date	Title			
		Print/Type preparer's na	ame Preparer's s	signature	Date (Check If PTIN		
				110.11/	-//	self- employed		
Pa	nid	CHARLES R	NEBEL, JR	1/1/VM1	5/2//2	P0	014382	23
Pr	eparer		ER & RITTER	1		Firm's EIN ► 23-1		
Us	se Only			<u> </u>				
		Firm's address ▶ 14	1 WEST HIGH STR	REET				
			RITCIE DA 1701		Phone no 717-	249-34	114	

Form **990-PF** (2011)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2011

Name of the organ	Employer identification number							
	45-3582341							
Organization type	ATGOOTH FOUNDATION (check one)							
Filers of:	Section:							
Form 990 or 990-E2	501(c)() (enter number) organization							
	4947(a)(1) nonexempt charitable trust not treated as a private foundation							
	527 political organization							
Form 990-PF	X 501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust treated as a private foundation							
	501(c)(3) taxable private foundation							
	ization is covered by the General Rule or a Special Rule. n 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special R	ule See instructions						
-	anization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in n r Complete Parts I and II.	noney or property) from any one						
Special Rules								
509(a)(1) a	on 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the re and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the bunt on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II.							
total contr	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III							
contribution If this box purpose [ion 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contons for use exclusively for religious, charitable, etc., purposes, but these contributions did not to is checked, enter here the total contributions that were received during the year for an exclusive on ot complete any of the parts unless the General Rule applies to this organization because charitable, etc., contributions of \$5,000 or more during the year.	otal to more than \$1,000 rely religious, charitable, etc ,						
but it must answer	ization that is not covered by the General Rule and/or the Special Rules does not file Schedule "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on Par							

Name of organization

Employer identification number

ATGOOTH FOUNDATION

45-3582341

e :	Contributors (see instructions) Use duplicate copies of Part I if addition	al space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	LETORT GROUP LLC 3130 MORNINGSIDE DRIVE CAMP HILL, PA 17011	\$ 42,900.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II of there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Name of organization

Employer identification number

ATGOOTH FOUNDATION

45-3582341

	Noncash Property (see instructions). Use duplicate copies of Part II if a	additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Employer identification number

			'7\ /8\ ar/10\ arganizations that total more than \$1 000 for t					
	year. Complete columns (a) through (e) and t	he following line entry. For organization	7), (8), or (10) organizations that total more than \$1,000 for t is completing Part III, enter					
	the total of exclusively religious, charitable, et	c., contributions of \$1,000 or less for t	he year. (Enter this information once)					
	Use duplicate copies of Part III if addition	al space is needed						
No.	(h) Dumana of sift	(a) I loo of sift	(d) Description of how gift is held					
rti	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
	•							
-								
_ -								
-								
	(e) Transfer of gift							
	let transier of Aur							
	Transferacie name address and 7ID + 4							
-	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee							
-								
-								
-			· · · · · · · · · · · · · · · · · · ·					
No			· · · · · · · · · · · · · · · · · · ·					
No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
rt I	(2) / E. pecc c. g	(0,000 0) g	(-,					
_								
_ _								
_								
L								
	(e) Transfer of gift							
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee							
		-						
-								
-								
-								
No.		<u> </u>						
m rt i	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
	. 							
-								
_ -								
- - - -								
- - - -								
_		(e) Transfer of gift						
_ -		.,						
	Transferee's name, address, a	.,	Relationship of transferor to transferee					
	Transferee's name, address, a	.,	Relationship of transferor to transferee					
	Transferee's name, address, a	.,	Relationship of transferor to transferee					
	Transferee's name, address, a	.,	Relationship of transferor to transferee					
-	Transferee's name, address, a	.,	Relationship of transferor to transferee					
		nd ZIP + 4						
- - - - - - - - - - - -	Transferee's name, address, a	.,	Relationship of transferor to transferee (d) Description of how gift is held					
		nd ZIP + 4						
No.		nd ZIP + 4						
No.		nd ZIP + 4						
No.		nd ZIP + 4						
No.		nd ZIP + 4	(d) Description of how gift is held					
No.		(c) Use of gift	(d) Description of how gift is held					
	(b) Purpose of gift	(c) Use of gift (e) Transfer of gift	(d) Description of how gift is held					
		(c) Use of gift (e) Transfer of gift	(d) Description of how gift is held					
No. m	(b) Purpose of gift	(c) Use of gift (e) Transfer of gift	(d) Description of how gift is held					
	(b) Purpose of gift	(c) Use of gift (e) Transfer of gift	(d) Description of how gift is held					

ATGOOTH FOUNDATION

Supplementary Information 3 Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation status of recipient Purpose of grant or contribution show any relationship to any foundation manager or substantial contributor Amount Name and address (home or business) PUBLIC CHARITY OPERATING EXPENSES CENTRAL PENNSYLVANIA FOOD BANK 3908 COREY ROAD 4,000. HARRISBURG, PA 17109 Total from continuation sheets 4 000.

FORM 990-PF INTEREST ON SAV	INGS AND TEM	PORARY CASH I	NVESTMENTS	STATEMENT
SOURCE				AMOUNT
LETORT TRUST				
TOTAL TO FORM 990-PF, PART I	=	8		
FORM 990-PF	LEGAL	FEES		STATEMENT
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABI PURPOSES
LEGAL FEE	695.	0.	0	. (
TO FM 990-PF, PG 1, LN 16A	695.	0.	0	. (
FORM 990-PF	OTHER PROFESSIONAL FEES			STATEMENT
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABI PURPOSES
IRS USER FEE	850.	0.	0	. (
TO FORM 990-PF, PG 1, LN 160	850.	0.	0	. (

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT	4
NAME OF CONTRIBUTOR	ADDRESS		
LETORT GROUP LLC	3130 MORNINGSIDE DRIVE CAMP HILL, PA 17011		