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# EXTENSION GRANTED 11/15/13

Form 990-PF

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

OMB No 1545-0052 **2012** 

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

an la Cubio Impantino

Fo	or cale	nd	ar year 2012 or tax year beginning , a	and ending						
	Name of			<del></del>		A Emplo	yer identification number			
							COOFFEE			
_			ITON C TAYLOR TRUST ESTATE				-6805513	<del> </del>		
			street (or P 0 box number if mail is not delivered to street address)	l Ro	oom/suite		ione number (see instructions 7-339-5060	)		
			state, and ZIP code	<u> </u>		· · · · · · · · · · · · · · · · · · ·	. $\Box$			
			SBURG PA 17325			C If exemption application is pending, check here				
G	Chec	k a	If that apply: X Initial return Initial return	n of a former public ch	arity	<b>D</b> 1 Fo	reign organizations, check hei	re 🕨 📗		
			Final return Amended		-	2 Fo	reign organizations meeting th	ne		
			Address change Name cha	nge			% test, check here and attach			
—	Chec	k tv	/pe of organization Section 501(c)(3) exempt private	foundation		E If priva	ite foundation status was term	nated under		
X	1	-		e private foundation		1	1 507(b)(1)(A), check here	<b>&gt;</b>		
l			ket value of all assets at J Accounting method		rual	F If the f	oundation is in a 60-month ter	mination		
	end o	f ve	ear (from Part II, col. (c), Other (specify)			under	section 507(b)(1)(B), check he	ere 🕨 📘		
	line 1	-		oe on cash basis)						
	Part	*****	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(b) Net inv	estment	(c) Adjusted net	(d) Disbursements for charitable		
2013			amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	expenses per books	(b) Net in		income	purposes		
_	1							(cash basis only)		
<b>8</b>	1		Contributions, gifts, grants, etc., received (attach schedule)							
	2		Check ► X if the foundation is <b>not</b> required to attach Sch B					······································		
NÖV	3		Interest on savings and temporary cash investments  Dividends and interest from securities	2,045	-	2,045	2,045			
2	4		Gross rents	2,043	<del> </del>	2,043	2,043	***************************************		
14.	-	ia L	Net rental income or (loss)							
Z	5   .	b a	Net gain or (loss) from sale of assets not on line 10	5,835						
ANNED	ا وا ا	b b	Gross sales price for all assets on line 6a 38,488							
Ç	ğ   7		Capital gain net income (from Part IV, line 2)			5,835		<del></del>		
GD.	-   '8		Net short-term capital gain				0			
	9		Income modifications							
	10		Gross sales less returns and allowances							
		b	Less Cost of goods sold							
		C	Gross profit or (loss) (attach schedule)							
	11	ĺ	Other income (attach schedule)							
	12	2	Total. Add lines 1 through 11	7,880		7,880	2,045			
_	0 13	3	Compensation of officers, directors, trustees, etc	1,075		1,075				
3	Sasua 14	1	Other employee salaries and wages							
	5   15	5	Pension plans, employee benefits							
	C   16	Sa	Legal fees (attach schedule)				-			
	8   B	þ	Accounting fees (attach schedule) STMT 1	85		85	,			
	≧	С	Other professional fees (attach schedule)							
- 1	E   17	7	Interest	· · · · · · · · · · · · · · · · · · ·	ļ					
	<u></u> 2   18	3	Taxes (attach schedule) (see instructions)		ļ					
	Ē   19	9	Depreciation (attach schedule) and depletion		<u> </u>					
7	D 20		Occupancy NOV 0 1 2013 Travel, conferences, and meetings		<del> </del> -					
7	B   2				<del> </del>					
i	E 2		Printing and publications		<del> </del>					
1	වු   <sup>23</sup>		Other expenses (att sch.) OGDEN, UT		<del> </del>					
į	Operating and Administrative EX	4	Total operating and administrative expenses.	1,160		1,160	o	0		
	<u>، ا و</u>	-	Add lines 13 through 23	855		1,100		855		
Ċ	$\frac{1}{2}$		Contributions, gifts, grants paid  Total expenses and disbursements. Add lines 24 and 25	2,015		1,160	0	855		
_	2		Subtract line 26 from line 12	2,010		-,100		- 555		
	2	и а	Excess of revenue over expenses and disbursements	:1						
		a b	Net investment income (if negative, enter -0-)	5,865		6,720				
			Adjusted net income (if negative, enter -0-)			· · · · · · · · · · · · · · · · · · ·	2,045			

	Part II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End 0	ı year
_		should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing			- ·
	2	Savings and temporary cash investments	1,583	13,248	13,248
	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			
ş	8	Inventories for sale or use			
<b>Assets</b>	9	Prepaid expenses and deferred charges			
ĕ	10a	Investments – U S and state government obligations (attach schedule)		·········	
	b	Investments – corporate stock (attach schedule) SEE STMT 2	80,380	74,580	84,819
	С	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)	81,963	87,828	98,067
	17	Accounts payable and accrued expenses	.,		
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
<u>a</u>	21	Mortgages and other notes payable (attach schedule)			
٢	22	Other liabilities (describe ▶	)		
	23	Total liabilities (add lines 17 through 22)	0	0	
ű		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
nces	24	Unrestricted			
틢	25	Temporarily restricted			
ä	26	Permanently restricted			
Net Assets or Fund Bala		Foundations that do not follow SFAS 117, check here	<b>C</b>		
Ĕ		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds			
et Set	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
1SS	29	Retained earnings, accumulated income, endowment, or other funds	81,963	87,828	
7	30	Total net assets or fund balances (see instructions)	81,963	87,828	
Ž	31	Total liabilities and net assets/fund balances (see			
		instructions)	81,963	87,828	
	Part I	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 (m	iust agree with		
	end-	of-year figure reported on prior year's return)		1	81,963
2	2 Enter	amount from Part I, line 27a		2	5,865
3	3 Othe	r increases not included in line 2 (itemize) ▶		3	
4	Add I	ines 1, 2, and 3		4	87,828
5	Decr	eases not included in line 2 (itemize)		5	
_6	<u>Total</u>	net assets or fund balances at end of year (line 4 minus line 5) - Part II, column	(b), line 30	6	87,828
_					Form 990-PF (2012)

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

6

7 Add lines 5 and 6

Part VI instructions

6 Enter 1% of net investment income (1% of Part I, line 27b)

8 Enter qualifying distributions from Part XII, line 4

	990-PF (2012) LEIGHTON C TAYLOR TRUST ESTATE 23-6805513				Pa	ige <b>4</b>
Pa	rt 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 ▶ ☐ 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	1				<u>L34</u>
	here ▶ ☐ and enter 1% of Part I, line 27b					
С	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				134
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				134
6	Credits/Payments					
а	2012 estimated tax payments and 2011 overpayment credited to 2012 6a 6a					
b	Exempt foreign organizations – tax withheld at source					
С	Tax paid with application for extension of time to file (Form 8868)  6c  134					
d	Backup withholding erroneously withheld 6d					
7	Total credits and payments Add lines 6a through 6d	7				<u> 134</u>
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
11	Enter the amount of line 10 to be Credited to 2013 estimated tax ▶ Refunded ▶	11				
_Pa	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		l		Yes	No
	participate or intervene in any political campaign?			1a		<u> </u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see			i	1	
	Instructions for the definition)?			1b		<u>X</u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials					
	published or distributed by the foundation in connection with the activities					
C	Did the foundation file Form 1120-POL for this year?			1c		<u> </u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			l		
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$	_				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			-		
	on foundation managers  \$				- 1	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		<u>X</u>
	If "Yes," attach a detailed description of the activities		ı			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of				- 1	
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		<u> </u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		. /-	4a		<u> </u>
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N	I/A	4b		77
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				₹.	
	conflict with the state law remain in the governing instrument?			6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part X	V		7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) <b>NONE</b>					
þ	If 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 General Instruction G? If "No," attach explanation SEE STMT 3			8b		X
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or					
	4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes,"					_
	complete Part XIV			9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their					<b> </b>
	names and addresses			10		<u> </u>
			F	orm 99	0-PF	(2012)

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N/A

3b

4a

X

X

Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of

Did the foundation invest during the year any amount in a manner 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 purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?

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 2012)

	990-PF (2012) LEIGHTON C TAYLOR TRUST ESTATE		805513			Pa	age <b>6</b>
Pa	rt VII-B Statements Regarding Activities for Which Form	1720 May Be R	equirea (conti	nuea)		- 1	
5a	During the year did the foundation pay or incur any amount to					- 1	
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 49)	945(e))?	Y	es 🛚 X No			
	(2) Influence the outcome of any specific public election (see section 4955), or to	carry on,				- 1	
	directly or indirectly, any voter registration drive?		<u></u>	es 🛚 X No			
	(3) Provide a grant to an individual for travel, study, or other similar purposes?		Y	es 🗓 No			
	(4) Provide a grant to an organization other than a charitable, etc., organization of	lescribed in					
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)		Y	es 🗓 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?			es 🗓 No			
b	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under	the exceptions des	scribed in	_		- 1	
	Regulations section 53 4945 or in a current notice regarding disaster assistance (			N/A	5b		
	Organizations relying on a current notice regarding disaster assistance check her			▶ 🗀			
С	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from						
	because it maintained expenditure responsibility for the grant?		N/A 🗌 Y	es No		1	
	If "Yes," attach the statement required by Regulations section 53 4945–5(d)		,				
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay	, premiums				1	
va	on a personal benefit contract?	promono		es X No			
<b>L</b>	Did the foundation, during the year, pay premiums, directly or indirectly, on a pers	onal benefit contra		cs <u></u>	6ь	Ì	x
b	If "Yes" to 6b, file Form 8870	onal benefit contra	ot.		-00		
<b>-</b>	•	ltor transaction?		es X No			
	At any time during the tax year, was the foundation a party to a prohibited tax she If "Yes," did the foundation receive any proceeds or have any net income attribute		h	N/A	7b		
7		undation mane	agers, riigiliy	aid Employ	,		
4 (	and Contractors  List all officers, directors, trustees, foundation managers and their compens	ation /son instruc	tions)				
-	List an officers, directors, trustees, foundation managers and their compens	ation (see mstruc	tions).	44) Contabulana ta	T		
	(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		oense ac r allowar	
_	THE BANK TRUST GETTYSBURG	TRUSTEE		eomponedae.	<del>                                     </del>		
		2.00	1,075	0			0
PC	D BOX 4566 PA 17325	2.00	2,0,0				<u>~</u>
		ļ			}		
		<del></del>			<b>—</b>		
		ľ					
2	Compensation of five highest-paid employees (other than those included of "NONE."	on line 1 - see ins	tructions). If non	e, enter	1		
		(b) Title, and average		(d) Contributions to	Ī		
	(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation		pense ad er allowa:	
N	ONE						
					1		
					<u> </u>		
			`				
					<u> </u>		
			1	1	1		
		1	L	L	<u> </u>		
Tot:	al number of other employees paid over \$50,000					•	0

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 $\blacktriangleright$ 

Total. Add lines 1 through 3

qualifies for the section 4940(e) reduction of tax in those years

Pa	Irt X Minimum Investment Return (All domestic foundations must complete this part. Foreign	n fou	ndations,
	, see instructions.)	··········	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		06 656
а	Average monthly fair market value of securities	1a	86,656
b	Average of monthly cash balances	1b	7,416
С	Fair market value of all other assets (see instructions)	_1c	0
d	Total (add lines 1a, b, and c)	1d	94,072
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	94,072
4	Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	1,411
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	92,661
6	Minimum investment return. Enter 5% of line 5	6	4,633
Pa	art 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 )	,	
1	Minimum investment return from Part X, line 6	1	4,633
2a	Tax on investment income for 2012 from Part VI, line 5		
b	income tax for 2012 (This does not include the tax from Part VI)		
С	Add lines 2a and 2b	2c	134 4,499
3	Distributable amount before adjustments Subtract line 2c from line 1	3	4,499
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	4,499
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	4,499
Pa	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	855
b	Program-related investments – total from Part IX-B	_1b_	
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	855
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)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	855
-	Note The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the foundal	ion	

Pa	rt XIII Undistributed Income (see instructions)		r		<del></del>
		(a)	(b) Years prior to 2011	(c) 2011	(d) 2012
	Distributable amount for 2012 from Part XI,	Corpus	rears prior to 2011	2011	
	line 7		-		4,499
	Undistributed income, if any, as of the end of 2012				
	Enter amount for 2011 only				
	Total for prior years 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2012				
	From 2007				
	From 2008				
С	From 2009				
d	From 2010				
е	From 2011				
f	Total of lines 3a through e				
4	Qualifying distributions for 2012 from Part XII,				
	line 4 ▶ \$855				
а	Applied to 2011, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required – see instructions)				
С	Treated as distributions out of corpus (Election				
	required – see instructions)				
d	Applied to 2012 distributable amount				855
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2012				
	(If an amount appears in column (d), the same				
	amount must be shown in column (a) )				
6	Enter the net total of each column as				
-	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
	Prior years' undistributed income Subtract				
_	line 4b from line 2b				
c	Enter the amount of prior years' undistributed				
·	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
А	Subtract line 6c from line 6b. Taxable				
u	amount – see instructions				
_	Undistributed income for 2011 Subtract line				
-	4a from line 2a Taxable amount – see				
	Instructions				
	Undistributed income for 2012 Subtract lines				
'					
	4d and 5 from line 1. This amount must be				3,644
_	distributed in 2013				- 7,000
7	Amounts treated as distributions out of corpus				}
	to satisfy requirements imposed by section				
_	170(b)(1)(F) or 4942(g)(3) (see instructions)				
8	Excess distributions carryover from 2007 not				
_	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2013.		1		
	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9				
а	Excess from 2008				
þ	Excess from 2009				
С	Excess from 2010				
d	Excess from 2011				
е	Excess from 2012		1		1

3 Grants and Contributions Paid During the		r F	uture Pavr	ment		·
	If recipient is an individual,	,, rl			<del>                                     </del>	
Recipient	show any relationship to		dation us of	Purpose of grant or	Amount	
Name and address (home or business)	any foundation manager or substantial contributor			pient	contribution	
a Paid during the year	a. captaing, on measur		<del></del>			
ADAMS COUNTY LIBRARY SYSTEM					]	
140 BALTIMORE STREET						
GETTYSBURG PA 17325	CHARITABLE	PU	RPOSE (	OF ORGA	NIZATION	214
	••					
EASTER SEALS SOCIETY CENTRA	L PA					
34 REALSIDE AVE						
WAYNESBORO PA 17268	CHARITABLE	PU	RPOSE (	OF ORGA	NIZATION	214
GETTYSBURG COLLEGE						
300 N WASHINGTON STREET						
GETTYSBURG PA 17325	CHARITABLE	PU	RPOSE (	OF ORGA	NIZATION	214
GETTYSBURG AREA HLTH CARE F	OUNDATIO					
147 GETTYS STREET						
GETTYSBURG PA 17325	CHARITABLE	PU	RPOSE (	OF ORGA	NIZATION	213
					1	
			i			
						İ
						ļ
Total	<u> </u>		1		▶ 3a	855
b Approved for future payment			T		, va	133
N/A						
<i>,</i>						
						1
					ļ	
			1			
			]			
Total					<b>▶</b> 3b	

-	art XVI-A	<b>Analysis of Income-Producing Acti</b>	vities	· ·		<del></del>	
Enter gross amounts unless otherwise indicated		T	ed business income	Exclude	d by section 512, 513, or 514	(e)	
			(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
1	Program service re		ļ		ļ		(Ode instructions )
		· · · · · · · · · · · · · · · · · · ·			<u> </u>		
					ļ		
	c				ļ		
		<del></del>			-		
				· · · · · · · · · · · · · · · · · · ·	<del> </del>		
	f						
_	•	tracts from government agencies			<u> </u>		<u> </u>
	Membership dues						<u> </u>
_	_	s and temporary cash investments			14	2,045	
4		erest from securities			1 4	2,045	
5		or (loss) from real estate			<del> </del>		
	<ul><li>a Debt-financed</li><li>b Not debt-finan</li></ul>			<u> </u>	1		5*
e		or (loss) from personal property	-				
	Other investment						
		n sales of assets other than inventory			14	5,835	
		ss) from special events			<del> </del>	2,000	
		ss) from sales of inventory	<del></del>				
					1		
• •							
					1		
	e						
12	Subtotal Add colu	umns (b), (d), and (e)		0		7,880	0
		2, columns (b), (d), and (e)		<del> </del>		13	7,880
		e 13 instructions to verify calculations )					
<u> </u>	Part XVI-B	Relationship of Activities to the Ac	complishm	nent of Exempt P	urpose	es	
		plain below how each activity for which income is					\
	V acc	complishment of the foundation's exempt purpos	ses (other than	by providing funds for	such pu	poses) (See instruction	ins )
_	N/A		•	<del></del>	-		
_							
_							
_							
_	<del></del>						
_				3.77			
_							<del></del>
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_				7		* ··	W. VI.
_							
_							
_							
_							

Part 2	XVII	Information Regardanization	_	insfers To and	I Transactio	ns and Relationships \	Nith Noncharitable		
1 Dic	the ora			a in any of the follow	wing with any of	ther organization described		Yes	No
		<del>-</del>		=	-	ction 527, relating to political		1.00	<del>  "</del>
	ganizatio		T triair scottor	1 00 1(0)(0) 01ga.mz	a, or oo.	storr ozr, rotating to political			
	•	rom the reporting found	ation to a nor	ncharitable exempt	organization of				
	Cash	om me reperang round					118	a(1)	x
	Othera	issets					<del>-</del>	1(2)	X
	her trans						-	1	
		of assets to a noncharita	ible exempt c	organization			11	o(1)	x
• •		ses of assets from a no	-	-	1		11	(2)	X
(3)	Rental	of facilities, equipment,	or other asse	ets			11	o(3)	X
(4)	Reimbi	ursement arrangements	ı				11	0(4)	X
(5)	Loans	or loan guarantees					11	o(5)	X
(6)	Perforr	nance of services or me	mbership or	fundraising solicita	tions		11	o(6)	X
c Sh	aring of	facilities, equipment, ma	ailing lists, oth	ner assets, or paid	employees		L1	lc	X
d Ift	he answ	er to any of the above is	"Yes," comp	lete the following s	chedule. Colum	nn (b) should always show the	fair market		
val	lue of the	e goods, other assets, o	r services gıv	en by the reporting	foundation If t	he foundation received less the	an fair market		
val	lue in an	y transaction or sharing	arrangement	t, show in column (	d) the value of	the goods, other assets, or ser	vices received		
	ne no	(b) Amount involved	(c) Name	of noncharitable exemp	t organization	(d) Description of transfer	s, transactions, and sharing arrang	jements	
N/A									
			<b> </b>						
			<b></b>						
			ļ						
			<del> </del>			_	<del></del>		
		<del></del>	<del> </del>			<u> </u>			
		<del>                                     </del>	<del> </del>	<del>_</del>					
		<del> </del>	<del> </del>						
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		<del> </del>	<del> </del>	=					
<del></del>			<del> </del>						
			<del>                                     </del>				7,7		
de	scribed	dation directly or indirectly or section 501(c) of the implete the following sci	Code (other t	han section 501(c)	(3)) or in section	n 527?	secretion of relationship	Yes 🔀	No
N/	Δ	(a) Name of organization		(b) Type of or	Aquisanou	(c) De	scription of relationship		
14/	<u> </u>								
		<del></del>			<del>. , ,</del>	٧-2			
						<u> </u>			
	Under p	enalties of perjury, I declare the	at I have examine	ed this return, including a	accompanying sched	dules and statements, and to the best o	f my knowledge and belief, it is to	16,	
Sign Here	correct,	and complete Declaration of p	reparer (other that  (USTING )	an taxpayer) is based or	n all information of w	thich preparer has any knowledge	May the IRS discuss with the preparer sho (see instructions)?		No
	Sig	nature of officer or trustee	100 1	1	Date	Title			
	Print/	Type preparer's name			Preparer's signati	. 1 0	Date		k X if
Paid	RICE	HARD A FINKENB	INER JR.	, CPA	KM	4 3-1-4 (	10/17/		
Prepare	Firm's	name > RAFF	ENSPERG	ER, MARTI	N & FIN	KENBINER, KLC		31091	
Use On	lv		MIDDLE	ST STE 1				8192	
			YSBURG,		.5		Phone no 717-	337-1	
	•						For	m 990-P	F (2012)

# Form 8868

(Rev January 2013)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

• If yo	u are	filing for an Automatic 3-Month Extension filing for an Additional (Not Automatic) splete Part II unless you have already been	3-Month E	xtension, complete only Part II (	on page 2 of	this f	orm).	
a corpo 8868 to Return instruct	ration requifor Ti ions)	iling (e-file). You can electronically file Form required to file Form 990-T), or an additional est an extension of time to file any of the fransfers Associated With Certain Personal For more details on the electronic filing of	onal (not a forms liste I Benefit C	automatic) 3-month extension of timed in Part I or Part II with the exception tracts, which must be sent to the	e. You can e ion of Form 8 e IRS in pape	lectro 870, r forn	onical Informat (s	ly file Form nation ee
Part I		Automatic 3-Month Extension of T	ime. Only	y submit original (no copies nee	ded).			
A corpo	ratio	n required to file Form 990-T and requesti	ng an auto	matic 6-month extension—check to	his box and c	ompl	ete	
								▶ 🔙
All othe	r cor	porations (including 1120-C filers), partnei	rships, RE	MICs, and trusts must use Form 70	004 to reques	t an e	exten	sion of
time to	file ir	ncome tax returns.						
				Enter filer	s identifying r	numb	er, se	e instructions
Type o	r	Employer iden	tificatio	ก กนท	ber (EIN) or			
print		LEIGHTON C TAYLOR TRUST ESTATE			23-6805513			
File by the		Number, street, and room or suite no. If a P.O	box, see ir	nstructions	Social secur	ity nui	nber (	SSN)
due date		ACNB BANK TRUSTEE - PO BOX 4566						_
filing your return Se		City, town or post office, state, and ZIP code. I	For a foreigi	n address, see instructions				
ınstructio	ns	GETTYSBURG			PA	173	325	
Enter ti	ne Re	eturn code for the return that this application	on is for (fil	le a separate application for each re	eturn)		•	. 04
Applic	atior	1	Return	Application				Return
Is For			Code	Is For				Code
Form 9	990 o	r Form 990-EZ	01	Form 990-T (corporation)				07
Form 9			02	Form 1041-A				08
Form 4	1720	(indıvidual)	03	Form 4720				09
Form 9	990-F	PF	04	Form 5227				10
Form 9	990-T	(sec. 401(a) or 408(a) trust)	05	Form 6069				11
Form 9	990-T	(trust other than above)	06	Form 8870				12
Tele If the If the for the list with	ephore orgus is is for the orgustil	the organization's return for:	s four digit If it is for p sion is for. corporatio	t Group Exemption Number (GEN) part of the group, check this box .	nsion of time			▶ ☐ f this is and attach a  xtension
2 ! 	► f the Cl	tax year beginning  tax year entered in line 1 is for less than 1 hange in accounting period	2 months,	check reason: Initial return		retur	n	
3a 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.  3a \$								
		Ja	Ψ	134				
		application is for Form 990-PF, 990-T, 47 ated tax payments made Include any prio			•	3Ь	\$	0
		nce due. Subtract line 3b from line 3a. Incl			by usina		· -	
		S (Electronic Federal Tax Payment System			,	3с	\$	134
		ou are going to make an electronic fund withdra			orm 8870 EO			

Fo <b>s</b> m 886	58 (Åev. 1-2013)					Page 2
	are filing for an Additional (Not Automatic) 3-Mo					▶ 🗸
	Only complete Part II if you have already been grant are filing for an Automatic 3-Month Extension, c				filed Form 8	868.
	Additional (Not Automatic) 3-Month Ex	tension	of Time. Only file	the original (no copie	es needed).	
				Enter filer's identifying	number, see	instructions
Type o	Name of exempt organization or other filer, see in	structions.	· · · · · · · · · · · · · · · · · · ·	Employer identification i	number (EIN)	or
print	LEIGHTON C TAYLOR TRUST ESTATE			23-6	760874	
File by th	Number, street, and room or suite no. If a P.O. bo	x, see instr	uctions.	Social security number (	(SSN)	
due date	for ACNB BANK TRUSTEE - PO BOX 4566					
filing you return Se		a foreign a	ddress, see instruction	is.		
instruction						
Enter ti	he Return code for the return that this application is	s for (file a	separate applicatio	n for each return) .		. 0 4
Applie	cation	Return	Application			Return
Is For		Code	Is For			Code
Form	990 or Form 990-EZ	01			<b>建心,非常用</b> 这位	<b>亚洲东西</b> 斯山
Form	990-BL	02	Form 1041-A	A Contraction Security States I Leader	CIT TIS THE COUNTY	08
Form	4720 (individual)	03	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
	Do not complete Part II if you were not already grabooks are in the care of ▶ ACNB BANK TRUST DEPA		utomatic 3-month e	xtension on a previous	ly filed Form	8868.
Telep	phone No. ► 717-339-5060	FAX	No. ►			
• If the	e organization does not have an office or place of b	usiness in	the United States, o	check this box		▶ 🗆
• If this	s is for a Group Return, enter the organization's fou	ır dıgıt Gro	up Exemption Num	ber (GEN)	If t	his is
for the	whole group, check this box $\blacktriangleright$ 🔲 . If	ıt is for par	t of the group, chec	k this box	▶ ☐ and a	ittach a
list wit	h the names and EINs of all members the extension	n is for.	<u> </u>	***		
4	I request an additional 3-month extension of time	untıl	NOVEMBER	15 , 20 <u>13</u>	<u> </u>	
5	For calendar year 2012 , or other tax year beginning	ng	, 20	, and ending		, 20
6	If the tax year entered in line 5 is for less than 12 r	months, ch	ieck reason: ∐Ir	iitial return 🔲 Final	l return	
	Change in accounting period		•			
7	State in detail why you need the extension ADDI	TIONAL TI	ME IS NEEDED IN OR	DER TO GATHER INFO	RMATION TO	COMPLETE
	AN ACCURATE AND COMPLETE RETURN.					
	If this application is for Form 990-BL, 990-PF, 99	O-T 4720	or 6069, enter the	tentative tax less any	r (	
va	nonrefundable credits. See instructions.	0 1, 7720,	or coos, enter the	tomative tax, 1655 ally	8a \$	
h	If this application is for Form 990-PF, 990-T,	4720 or 4	6060 enter any re	fundable credite and		
ū	estimated tax payments made. Include any price					

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

c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS

8b \$

8c \$

amount paid previously with Form 8868.

(Electronic Federal Tax Payment System) See instructions.

Under penalties of p	erjury, i declare t	hat I have exan	nined this form	n, including	accompanying	schedules	and statements,	and to	the best of	of my
knowledge and belief	, it is true, correct,	and complete, a	and that I am au	thorized to	prepare this for	m.				

Signature ►	By C May	CPA	Title ► CPA	Date ► 8/15/13
				Form 8868 (Rev 1-201

Form <b>990-PF</b>		for Tax on Investment Inc	,ome	2012
For calenda	ar year 2012, or tax year beginning	, and ending	Employer Ider	ntification Number
LEIGHTON C TAYLOR	23-6805513			
(a) List and describe 2-story brick ware	(C) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )		
) 384.09 SH AMERIC	CAN GROWTH FUND	D-Donation P	11/29/07	08/31/12
) 69.20 SH SEI LA	12/30/02	10/26/12		
) 138.35 SH SEI L	01/03/02	10/26/12		
) 393.19 SH SEI L	12/21/98	10/26/12		
) 630.78 SH SEI L	11/21/08	05/24/12		
	DEPARTMENT		<del> </del>	
)				
)			<del> </del>	
0)			<u> </u>	
1)				
2)				
3)				
4)			ļ	
5)				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	( <b>h)</b> Gain (e) plus (f)	or (loss) minus (g)
12,597		14,000		-1,403
1,236	* ***	1,029	_	207
2,471		2,565		-94
7,023		7,313		-290
15,000		7,746		7,254
) 161				161
)			<u> </u>	
)				
)				
0) 1)				
2)				
3)				
4)				
5)				······································
Complete only for assets showing	gain in column (h) and owned by the f		(i) Gains (Co	of (h) gain minus
(i) F M V as of 12/31/69 (j) Adjusted basis as of 12/31/69		(k) Excess of col (i) over col (j), if any	(I) Gains (Cot (h) gain minus col (k), but not less than -0-) Or Losses (from cot (h))	
)				-1,403
2)				207
3)				-94
<u>)</u>				- <u>290</u> 7,254
5)		<del>                                     </del>		161
5)		<del></del>		101
3)				· · · · · · · · · · · · · · · · · · ·
3)				
10)				
11)				
12)				
3)				
14)				· · · · · · · · · · · · · · · · · · ·
15)		1		

# Federal Statements

23-6805513

# Statement 2 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Fair Market Value	\$ 84,819	\$ 84,819
Basis of Valuation	COST	
End of Year	74,580	74,580
	ဟ	ۍ ا
Beginning of Year	80,380	80,380
Ш	ၯ	w
Description	ACNB TRUST ACCOUNT	TOTAL

23-6805513

# **Federal Statements**

# Statement 3 - Form 990-PF, Part VII-A, Line 8b - Not Filing with Attorney General Explanation

# Description

PER PENNSLVANIA LAW, ONLY PRIVATE FOUNDATIONS MUST FURNISH THE STATE'S ATTORNEY GENERALS OFFICE. THIS IS A NONEXEMPT CHARITABLE TRUST UNDER SECTION 4947(A)(1).