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OMB No 1545-0052

Department of the Treasury Internal Revenue Service

Form 990-PF

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

▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its instructions is at <u>www.irs.gov/form990pf</u>.

							•
For	caler	ndar year 2015, or tax year beginning 01-0	1-2015	, a	nd ending 1	2-31-2015	
	e of four	ndation MLY FOUNDATION			A Employer ide	entification numbe	er
		FAMILY CHARITABLE TRUST			13-7483658		
		street (or P O box number if mail is not delivered to street address)	Room/suite		B Telephone num	ber (see instruction	s)
29	5 CENTE	R POINTE BLVD			(570) 825-7781		
City	or town,	state or province, country, and ZIP or foreign postal code			C If exemption a	application is pendin	g, check here 🕨
РПТ	STON, PA	A 18640					Γ
G C F	neck all	that apply Initial return Initial return of a f	ormer public charity		D 1 Foreign or	ganizations, check he	ere •
		Final return Amended return			D 11 Toleigh on	garnzacions, eneck no	
		Address change Name change				ganizations meeting	
- C F	eck tyr	pe of organization	e foundation		E If private fou	t here and attach co ndation status was t	erminated
_		4947(a)(1) nonexempt charitable trust Other taxab		า	under section	507(b)(1)(A), chec	k here 🕨
		· · · · · · · · · · · · · · · · · · ·	✓ Cash		F If the founda	tion is in a 60-month	n termination
		om Part II, col (c),	 		under section	507(b)(1)(B), chec	k here 🕨 🔽
		\$ 4,469,560 (Part I, column (d) must	be on cash basis)		<u> </u>		
Pa	rt 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	Revenue and expenses per	(b)	Net investment income	Adjusted net	Disbursements for charitable purposes
		instructions))	(a) books	(-,		(2)	(d) (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach					
		schedule)	727,096				
	2	Check ► ☐ If the foundation is not required to					
		attach					
	,	Sch B Interest on savings and temporary cash investments	21		21		
	3	Dividends and interest from securities	34,958		34,958		
	5a	Gross rents	,				
	ь	Net rental income or (loss)					
Reverue	6a	Net gain or (loss) from sale of assets not on line 10	270,712				
	ь	Gross sales price for all assets on line 6a 359,153					
	7	Capital gain net income (from Part IV, line 2)			310,369		
	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	ь	Less Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total.Add lines 1 through 11	1,032,787		345,348		
	13	Compensation of officers, directors, trustees, etc	0		0		О
	14	Other employee salaries and wages					
6S	15	Pension plans, employee benefits	1				
and Administrative Expenses	16a	Legal fees (attach schedule)	749		0		749
Δ×	ь	Accounting fees (attach schedule)	6,000		0		6,000
ē.	С	Other professional fees (attach schedule)					
ativ	17	Interest					
z:	18	Taxes (attach schedule) (see instructions)	6,049		1,034		15
Ē	19	Depreciation (attach schedule) and depletion					
C	20	Occupancy					
7 pc	21	Travel, conferences, and meetings					
<u>a</u>	22	Printing and publications	05-1 010				010
5 E	23	Other expenses (attach schedule)	9 812		0		812
Operating	24	Total operating and administrative expenses.	43.640		4 024		7 570
<u>X</u>		Add lines 13 through 23	13,610		1,034		7,576
_	25	Contributions, gifts, grants paid	270,349				270,349
	26	Total expenses and disbursements. Add lines 24 and 25	283,959		1,034		277,925
	27	Subtract line 26 from line 12			-,		
	a	Excess of revenue over expenses and disbursements	748,828	L			
	b	Net investment income (If negative, enter -0-)			344,314		
	С	Adjusted net income(If negative, enter -0-)					

Dэ	rt 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 o	f year
			(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	306,265	914,366	914,366
	2	Savings and temporary cash investments			
	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 (attach schedule) ▶			
		Less allowance for doubtful accounts ▶			
S	8	Inventories for sale or use			
4ssets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	3,630,123	3,348,113	3,348,113
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	227,292	207,081	207,081
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe ▶)			
	16	Total assets (to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	4,163,680	4,469,560	4,469,560
	17	Accounts payable and accrued expenses			
٠.	18	Grants payable			
abilities	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
าอ	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe ▶)			
	23	Total liabilities(add lines 17 through 22)	0	0	
S		Foundations that follow SFAS 117, check here ▶			
		and complete lines 24 through 26 and lines 30 and 31.			
an	24	Unrestricted			
Balance	25	Temporarily restricted			
	26	Permanently restricted			
Fund		Foundations that do not follow SFAS 117, check here 🕨 🔽			
٥		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds	0	0	
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29	Retained earnings, accumulated income, endowment, or other funds	4,163,680	4,469,560	
Net	30	Total net assets or fund balances(see instructions)	4,163,680	4,469,560	
	31	Total liabilities and net assets/fund balances(see instructions)	4,163,680	4,469,560	
Pa	rt 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 a	gree	
		with end-of-year figure reported on prior year's return)		1	4,163,680
2		Enter amount from Part I, line 27a		2	748,828
3		Other increases not included in line 2 (itemize)		3	0
4		Add lines 1, 2, and 3		4	4,912,508
5		Decreases not included in line 2 (itemize) ▶		_ % _j 5	442,948
6		Total net assets or fund balances at end of year (line 4 minus line 5)—Pa	art II, column (b), li	ine 30 . 6	4,469,560

		e kınd(s) of property sold (e g , re use, or common stock, 200 shs	,	How acquired P—Purchase (b) D—Donation	Date acquired	Date sold (d) (mo , day, yr)	
1 a	2805 049 SHS FAIRHC	LME FDS COMP		P	2006-02-13	2015-08-31	
b	4000 SHS CUSTOMER	S BANCORP COM		D	2010-02-17	2015-08-18	
с	CAPITAL GAINS DIVII			P			
d							
		Depreciation allowe	ed Cost	t or other basis	Gair	or (loss)	
(e	e) Gross sales price	(f) (or allowable)		expense of sale	(h) (e) plus (f) minus (g)		
а	99,	950		10,60	1	89,349	
b	99,	988		38,18	3	61,805	
С	159,	215				159,215	
d							
е							
Со	mplete only for assets sho	wing gain in column (h) and owne	ed by the foundation	n on 12/31/69	Gains (Col	(h) gain minus	
(i)	FM V as of 12/31/69	A djusted basis (j) as of 12/31/69		cess of col (ı) r col (ʒ), ıf any	` ''	t less than -0-) or from col (h))	
а						89,349	
b						61,805	
С						159,215	
d							
е							
2	Capital gain net income	or (net capital loss)	If gain, also enter If (loss), enter -0-		2	310,369	
3	Net short-term capital g	ain or (loss) as defined in sectio	ns 1222(5) and (6))			
	If gain, also enter in Par in Part I, line 8	t I, line 8, column (c) (see instru	uctions) If(loss), e	nter - 0 -	3		
Part	V Qualification Un	der Section 4940(e) for R	Reduced Tax on	Net Investme	nt Income		
Ífsectio	on 4940(d)(2) applies, lea	ate foundations subject to the so we this part blank ection 4942 tax on the distribut			·	Γ Yes √ No	
		qualify under section 4940(e) D In each column for each year, s			riac		
- L11	(a)	m each column for each year, s	T	Te making any end	(d)		
	period years Calendar or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchar		Distributio (col (b) divided	n ratio	
	2014	336,212		3,842,531		0 087498	
	2013	203,386		3,081,076		0 066011	
	2012	136,798		2,420,011		0 056528	
	2011	103,095		2,047,934 1,877,662		0 050341	
2)			2	0 308483	
3	A verage distribution rat the number of years the	io for the 5-year base period—difoundation has been in existence on charitable-use assets for 201	vide the total on line e if less than 5 year	e 2 by 5, or by	3 4	0 061697	
5	Multiply line 4 by line 3.			🕇	5	247,564	
6	Enter 1% of net investm	nent income (1% of Part I, line 2	7b)		6	3,443	
7			•	<u> </u>	7	251,007	
8		tions from Part XII, line 4		-	8	277,925	
-		eater than line 7, check the box					
	the Part VI instructions						

or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)?

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

If "Yes," complete Part XIV

and addresses

No

No

9

10

Par	t VII-A Statements Regarding Activities (continued)			age -
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		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
4.2	advisory privileges? If "Yes," attach statement (see instructions)	12	V	No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ►N/A	13	Yes	
		\ 0.2.5	7701	
14	The books are in care of ►RICHARD COHEN TRUSTEE Located at ►295 CENTER POINTE BLVD PITTSTON PA ZIP+4 ►18640) 823-	//81	
4-				
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		>	
16	At any time during calendar year 2015, 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?	16	Yes	No No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial	10		NO
	Accounts (FBAR) If "Yes", enter the name of the foreign country			
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	1		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	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 Vo			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?	 		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes Vo	 		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes Vo			
	(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)?	 		
	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 Vo			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations	İ		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
_	Did the foundation engage in a prior year in any of the case described in 1a other than excepted acts	I		I
·	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 2015?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	<u> </u>		-110
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2015? \blacksquare Yes \blacksquare No			
	If "Yes," list the years > 20, 20, 20			
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)	2b		
с	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			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
b	If "Yes," did it have excess business holdings in 2015 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)			
	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 2015)	3b		
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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 2015?	4b	L	No

	990-PF (2		ardii	na Activities for	Wh	nich Form 4720	May	y Be Required <i>(Cont</i>	inue	d)	Page
5a		e year did the foundation				1101111 4720	114	be required (cont	mac		
	=	on propaganda, or othe		·		ıslatıon (section 49	45(e	e)))?	No		
	(2) Influe	nce the outcome of any	spec	cific public election (see	section 4955), or to	car		,	i i	j
	on, dır	rectly or indirectly, any	vote	r registration drive?.				· · · · · TYes	/ No		
	(3) Provid	de a grant to an individ	ual foi	r travel, study, or oth	ners	ımılar purposes?		☐ Yes ☐	/ No		
	(4) Provid	de a grant to an organız	ation	other than a charita	ble,	etc , organization de	scril			İİ	j
	ın sec	tion 4945(d)(4)(A)? (s	ee in	structions)				· · · · T Yes	/ No		
	` '	de for any purpose othe tional purposes, or for		- '		. , , ,		· · · · · · · · Yes · ·	No		
b	If any ans	werıs "Yes" to 5a(1)-	(5), d	lid any of the transac	tions	fail to qualify under	the	exceptions described in		İİ	ĺ
	Regulatio	ns section 53 4945 or	ın a c	urrent notice regard	ing c	lisaster assistance	(see	instructions)?		5b	
	O rganızat	ions relying on a curre	nt not	ice regarding disast	eras	ssistance check here	e				
								Γ	_	1 1	1
С		wer is "Yes" to question		• •		•			_		
							•	· · · · · Tyes	No		
_	•	ttach the statement req		, ,		. ,					
6 a		undation, during the ye					prei		_		
		l benefit contract?					•	· · · Yes			
b			ar, pa	y premiums, directly	yorı	ndirectly, on a perso	onal	benefit contract?	•	6b	No
		6b, file Form 8870		L - £					_		
7a	•	ne during the tax year,				•		1 .05 14		 	
ь				•				the transaction?		7b	
Pai		and Contractors	it Or	ficers, Directors	S, II	rustees, rounda	ιτιο	n Managers, Highly	Paid	Empio	oyees,
1		icers, directors, truste	es, fo	undation managers a	nd t	heir compensation (see i	instructions).			
				Title, and average	(c	Compensation(If		(d)	_		
	(a) Nar	ne and address	1	hours per week		not paid, enter	l e	Contributions to employee benefit plans		Expense account (e) other allowances	
			(p)	devoted to position	n -0-)			d deferred compensation	1		
LAWR	ENCE E COHE	EN		JSTEE		0		0			(
	CENTER P SON, PA	OINTE BLVD	2 00	0							
	COHEN	18040	TDI	JSTEE	0			0			
		OINTE BLVD	2 00			0					,
	SON,PA										
CHAR	LES F COHEN		_	ISTEE		0		0			(
	CENTER P SON, PA	OINTE BLVD	2 00	0							
	ARD S COHEN		TDI	JSTEE		0		0			
		OINTE BLVD	2 00			0					`
	SON,PA										
2	Compensat	ion of five highest-pai	d emp	oloyees (other than t	thos	e included on line 1-	-see	instructions). If none, en	iter "I	IONE."	
		(a)		Title, and aver				Contributions to employee benefit	F	: xnense	account,
Nar		ress of each employee re than \$50,000	paid	hours per wee (b) devoted to pos		(c) Compensation	n	plans and deferred			owances
				(b) devoted to pos				(d) compensation			
NON	lE			-							
				-							
				-							
				1							
				1							
				1							
Tota	I number of	other employees paid	over	\$50,000 				▶			

Form **990-PF** (2015)

2

3

5

1

2a

3

4

5

6

7

1

2

5

Part XII

Part XI

3,820,610

4,073,678

4,073,678

4,012,573

200,629

200,629

3,443

197,186

197.186

197,186

277,925

277,925

274,482

Form **990-PF** (2015)

3,443

61,105

1c 1d

> 2 3

> 4

5

1

2c

3

4

5

6

7

1a

1b

2

За

3b

4

5

3,443

253,068

Minimum Investment Return

1c (attach detailed explanation).

Subtract line 2 from line 1d.

Distributable Amount

Add lines 2a and 2b.

 	21	. v Cotilicit i	
/ A II . A	a mactic	foundations	muc

(All domestic foundations must complete	this part.	Foreign	foundations, see	instruction

- 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,

 - purposes
- 1a

- 1b

1e

2a

2b

(see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and certain foreign organizations

Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4

Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . .

Expenses, contributions, qifts, etc —total from Part I, column (d), line 26.

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Distributable amount before adjustments Subtract line 2c from line 1.

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see

Fair market value of all other assets (see instructions).

Reduction claimed for blockage or other factors reported on lines 1a and

check here ► and do not complete this part.)

Tax on investment income for 2015 from Part VI, line 5.

Income tax for 2015 (This does not include the tax from Part VI). . .

Recoveries of amounts treated as qualifying distributions.

Deduction from distributable amount (see instructions).

Program-related investments—total from Part IX-B.

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the

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

	m 990-PF (2015)				Page 9
P	art XIII Undistributed Income (see instr	ructions)			
		(a)	(b)	(c)	(d)
		Corpus	Years prior to 2014	2014	2015
	Distributable amount for 2015 from Part XI, line 7				197,186
	Undistributed income, if any, as of the end of 2015				
	Enter amount for 2014 only		0		<u> </u>
	Total for prior years 20, 20, 20 Excess distributions carryover, if any, to 2015		Ů		
	From 2010				
	From 2011 1,032				
	From 2012 6,401				
	From 2013				
	From 2014				
f	Total of lines 3a through e	207,580			
	Qualifying distributions for 2015 from Part				
	XII, line 4 \$ 277,925				
а	Applied to 2014, but not more than line 2a				0
b	Applied to undistributed income of prior years		0		
	(Election required—see instructions)	_			
C	Treated as distributions out of corpus (Election	0			
٨	required—see instructions)				197,186
	Remaining amount distributed out of corpus	80,739			157,100
	Excess distributions carryover applied to 2015	00,733			
3	(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	288,319			
b	Prior years' undistributed income Subtract		0		
	line 4b from line 2b		o o		
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed		0		
d	Subtract line 6c from line 6b Taxable amount		0		
	-see instructions		· ·		
е	Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see				
	Instructions				0
f	Undistributed income for 2016 Subtract				
	lines 4d and 5 from line 1 This amount must				
_	be distributed in 2015				0
7	A mounts treated as distributions out of corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (Election may				
	be required - see instructions)	0			
8	Excess distributions carryover from 2010 not	0			
_	applied on line 5 or line 7 (see instructions)	-			
9	Excess distributions carryover to 2016.	288,319			
10	Subtract lines 7 and 8 from line 6a	,			
	Excess from 2011 1,032				
	Excess from 2012 6,401				
_	Excess from 2013 50,498				
d	Excess from 2014 149,649				
e	Excess from 2015 80,739	4			
	•				Form 990-PF (2015)

or	m 990-PF (2015)					Page 10
	Part XIV Private Operating Foundate	t ions (see instru	ictions and Part	VII-A, question	1 9)	
	If the foundation has received a ruling or determined foundation, and the ruling is effective for 2015,	enter the date of t	he ruling	▶ ∟		
	Check box to indicate whether the organization	is a private operat	ting foundation de	scribed in section	4942(j)(3) or	4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for each	(a) 2015	(b) 2014	(c) 2013	(d) 2012	
	year listed					
b	85% of line 2a					
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	A mounts included in line 2c not used directly for active conduct of exempt activities					
е	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					
а	"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					
С	"Support" alternative test—enter					
	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					
P)=	(4) Gross investment income Int XV Supplementary Information (4)	Complete this	nart only if th	e organizatio		more in
- 0	assets at any time during the			e organizatio	ii iiaa 45,000 oi	more m
L a	Information Regarding Foundation Managers: List any managers of the foundation who have o	ontributed more th	an 2% of the tota			tion
	before the close of any tax year (but only if the	•				
b	List any managers of the foundation who own 10 ownership of a partnership or other entity) of whether the state of the foundation who own 10 ownership or other entity) of whether the state of the foundation who own 10 ownership or other entity) of whether the foundation who own 10 ownership or other entity) of whether the foundation who own 10 ownership or other entity) of whether the foundation who own 10 ownership or other entity) of whether the foundation who own 10 ownership or other entity) of which is the foundation who own 10 ownership or other entity) of whether entity of the foundation who own 10 ownership or other entity) of which is the foundation who ownership or other entity) of which is the foundation of the foundation whether entity is the foundation of the foundation whether entity is the foundation of the foundation of the foundation whether the foundation of the f		•		vlarge portion of the	
2	Information Regarding Contribution, Grant, Gif	t, Loan, Scholarshi	p, etc., Programs:			
	Check here $\blacktriangleright \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $	n makes gifts, gran		-	•	under
а	The name, address, and telephone number or e	mail address of the	e person to whom	applications shou	ld be addressed	
Ь	The form in which applications should be subm	itted and informati	on and materials t	they should includ	e	
c	Any submission deadlines					
d	Any restrictions or limitations on awards, such factors	as by geographica	al areas, charitabl	e fields, kinds of i	nstitutions, or other	

Form 990-PF (2015)

Part XV Supplementary Information(continued)

3 Grants and Contributions Paid	l During the Year or App	roved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year See Additional Data Table	or substantial contributor	recipient	Contribution	
Total			▶ 3a	270,349
b Approved for future payment				
Total			▶ 3b	0

Enter gross amounts unless otherwise indicated	Unrelated bu	isiness income	Excluded by section	n 512, 513, or 514	(e) Related or exempt
1 Program service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	function income (See instructions)
a					mstructions)
b					
c					
d					
e f					
g Fees and contracts from government agencies 2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	21	
4 Dividends and interest from securities5 Net rental income or (loss) from real estate			14	34,958	
a Debt-financed property					
b Not debt-financed property6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	270,712	
9 Net income or (loss) from special events 10 Gross profit or (loss) from sales of inventory					
11 Other revenue a					
b					
c					
e					
		0		305,691	0
12 Subtotal Add columns (b), (d), and (e). 13 Total.Add line 12, columns (b), (d), and (e).		_		305,691 13	305,691
12 Subtotal Add columns (b), (d), and (e). 13 Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify	calculations)		:	13	
12 Subtotal Add columns (b), (d), and (e). 13 Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify	calculations) o the Accom ich income is re	plishment of E	 Exempt Purpos e) of Part XVI-A c	es ontributed importa	305,691 ntly to
12 Subtotal Add columns (b), (d), and (e). 13 Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify Part XVI-B Relationship of Activities to the accomplishment of the foundation?	calculations) o the Accom ich income is re	plishment of E	 Exempt Purpos e) of Part XVI-A c	es ontributed importa	305,691 ntly to
12 Subtotal Add columns (b), (d), and (e). 13 Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify Part XVI-B Relationship of Activities to Explain below how each activity for whith the accomplishment of the foundation?	calculations) o the Accom ich income is re	plishment of E	 Exempt Purpos e) of Part XVI-A c	es ontributed importa	305,691 ntly to
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12 Subtotal Add columns (b), (d), and (e). 13 Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify Part XVI-B Relationship of Activities to Explain below how each activity for whith the accomplishment of the foundation?	calculations) o the Accom ich income is re	plishment of E	 Exempt Purpos e) of Part XVI-A c	es ontributed importa	305,691 ntly to
12 Subtotal Add columns (b), (d), and (e). 13 Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify Part XVI-B Relationship of Activities to the accomplishment of the foundation?	calculations) o the Accom ich income is re	plishment of E	 Exempt Purpos e) of Part XVI-A c	es ontributed importa	305,691 ntly to
12 Subtotal Add columns (b), (d), and (e). 13 Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify Part XVI-B Relationship of Activities to the accomplishment of the foundation?	calculations) o the Accom ich income is re	plishment of E	 Exempt Purpos e) of Part XVI-A c	es ontributed importa	305,691 ntly to
12 Subtotal Add columns (b), (d), and (e). 13 Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify Part XVI-B Relationship of Activities to the accomplishment of the foundation?	calculations) o the Accom ich income is re	plishment of E	 Exempt Purpos e) of Part XVI-A c	es ontributed importa	305,691 ntly to
12 Subtotal Add columns (b), (d), and (e). 13 Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify Part XVI-B Relationship of Activities to the accomplishment of the foundation?	calculations) o the Accom ich income is re	plishment of E	 Exempt Purpos e) of Part XVI-A c	es ontributed importa	305,691 ntly to
12 Subtotal Add columns (b), (d), and (e). 13 Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify Part XVI-B Relationship of Activities to Explain below how each activity for whith the accomplishment of the foundation?	calculations) o the Accom ich income is re	plishment of E	 Exempt Purpos e) of Part XVI-A c	es ontributed importa	305,691 ntly to
12 Subtotal Add columns (b), (d), and (e). 13 Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify Part XVI-B Relationship of Activities to Explain below how each activity for whith the accomplishment of the foundation?	calculations) o the Accom ich income is re	plishment of E	 Exempt Purpos e) of Part XVI-A c	es ontributed importa	305,691 ntly to
12 Subtotal Add columns (b), (d), and (e). 13 Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify Part XVI-B Relationship of Activities to Explain below how each activity for whith the accomplishment of the foundation?	calculations) o the Accom ich income is re	plishment of E	 Exempt Purpos e) of Part XVI-A c	es ontributed importa	305,691 ntly to
12 Subtotal Add columns (b), (d), and (e). 13 Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify Part XVI-B Relationship of Activities to Explain below how each activity for whith the accomplishment of the foundation?	calculations) o the Accom ich income is re	plishment of E	 Exempt Purpos e) of Part XVI-A c	es ontributed importa	305,691 ntly to
12 Subtotal Add columns (b), (d), and (e). 13 Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify Part XVI-B Relationship of Activities to Explain below how each activity for whith the accomplishment of the foundation?	calculations) o the Accom ich income is re	plishment of E	 Exempt Purpos e) of Part XVI-A c	es ontributed importa	305,691 ntly to
12 Subtotal Add columns (b), (d), and (e). 13 Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify Part XVI-B Relationship of Activities to Explain below how each activity for whith the accomplishment of the foundation?	calculations) o the Accom ich income is re	plishment of E	 Exempt Purpos e) of Part XVI-A c	es ontributed importa	305,691 ntly to
12 Subtotal Add columns (b), (d), and (e). 13 Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify Part XVI-B Relationship of Activities to Explain below how each activity for whith the accomplishment of the foundation?	calculations) o the Accom ich income is re	plishment of E	 Exempt Purpos e) of Part XVI-A c	es ontributed importa	305,691 ntly to
12 Subtotal Add columns (b), (d), and (e). 13 Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify Part XVI-B Relationship of Activities to Explain below how each activity for whith the accomplishment of the foundation?	calculations) o the Accom ich income is re	plishment of E	 Exempt Purpos e) of Part XVI-A c	es ontributed importa	305,691 ntly to
12 Subtotal Add columns (b), (d), and (e). 13 Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify Part XVI-B Relationship of Activities to Explain below how each activity for whith the accomplishment of the foundation?	calculations) o the Accom ich income is re	plishment of E	 Exempt Purpos e) of Part XVI-A c	es ontributed importa	305,691 ntly to
12 Subtotal Add columns (b), (d), and (e). 13 Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify Part XVI-B Relationship of Activities to the accomplishment of the foundation?	calculations) o the Accom ich income is re	plishment of E	 Exempt Purpos e) of Part XVI-A c	es ontributed importa	305,691 ntly to
12 Subtotal Add columns (b), (d), and (e). 13 Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify Part XVI-B Relationship of Activities to Explain below how each activity for whith the accomplishment of the foundation?	calculations) o the Accom ich income is re	plishment of E	 Exempt Purpos e) of Part XVI-A c	es ontributed importa	305,691 ntly to

Pa	rt XVI	Noncharitable					sactions a	and R	elationsnips	With			
1 D	ıd the o	rganization directly or i					ith any other	organı	zatıon described	l ın			
		01(c) of the Code (other	er than se	ction 50	01(c)(3) c	organizations)	or in section !	527, r	elating to politic	al		Yes	No
	rganızat												
		s from the reporting four											
	-	h								•	1a(1)		No
-	-	erassets									1a(2)		No
		insactions									41.44		
-	-	s of assets to a noncha			-						1b(1)		No
-	-	hases of assets from a								•	1b(2)		No
•	•	al of facilities, equipme	•								1b(3)		No No
		nbursement arrangemer ns or loan guarantees.									1b(4) 1b(5)		No
	-	mance of services or m									1b(6)		No
-	-	of facilities, equipment,		•	_						1c		No
	_	swer to any of the above	_	-	·		•					L lue	140
01	f the god	ods, other assets, or se	rvices giv	en by tl	he reporti	ng foundation	If the foundat	tion re	ceived less than	fair mark	et value		
(a) ⊔	ne No	(b) Amount involved	(c) Name	of nonch	antable exe	empt organization	(d) Descr	ription o	f transfers, transacti	ons, and sha	arıng arra	ngemei	nts
de F	escrībe∈ √ No	undation directly or indid in section 501(c) of the complete the following (a) Name of organization	ne Code (d schedule		an sectioi	·	r in section 5			· · ·	·	es	
cia.	the Info	der penalties of perjury, best of my knowledge a irmation of which prepai	and belief,	it is tru	ie, correct					n taxpaye	r) is bas	sed on	all
Sigi Her		*****				2016-10-31	<u> </u>	****		return	he prepa		
	'	Signature of officer or t	rustee			Date	, Titl	le		(see ı	nstr)?	Yes [No
	•	Print/Type preparer's ANDREW WHITEHA		Prepa	rer's Sıgn	ature	Date 2016-10		Check if self- employed ▶ ☐	PTIN P	008536	593	
Paid Pre Use	parer	Firm's name ► COHEN & COMPANY	LTD	1					Firm's EIN ▶ 34	4-191296	i 1		
Onl		Firm's address ► OFFICES LISTED AT 44115	WWWCO	HENCP	ACOM,O	Н		-	Phone no (800) 229-109	99		

Form 990PF Part XV Line 3 - Gra	ants and Contributions	Paid During	the Year or Approved for	Future Payment
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	,		
a Paid during the year				
ADOPT-A-PET INC 13575 N FENTON RD FENTON,MI 48430	NONE	PC	CHARITABLE	500
ALZHEIMER'S ASSOCIATION PO BOX 96011 WASHINGTON, DC 200906011	NONE	PC	CHARITABLE	201
AMERICAN CANCER SOCIETY PO BOX 22718 OKLAHOMA CITY,OK 43123	NONE	PC	CHARITABLE	700
AMERICAN DIABETES ASSOCIATION PO BOX 7023 MERRIFIELD,VA 211167023	NONE	PC	CHARITABLE	263
AMERICAN HEART ASSOCIATION 7272 GREENVILLE AVE DALLAS,TX 75231	NONE	PC	CHARITABLE	287
AMERICAN RED CROSS 205 E BEAVER AVE STE 203 STATE COLLEGE,PA 16801	NONE	PC	CHARITABLE	160
ANTI-DEFAMATION LEAGUE 605 THIRD AVE NEW YORK,NY 10158	NONE	PC	CHARITABLE	750
ASSOCIATION OF FUNDING PROFESSIONALS 1151 OAK STREET PITTSTON,PA 18640	NONE	PC	CHARITABLE	1,720
AUTISM SPEAKS 150 SOUTH FRANKLIN ST WILKESBARRE,PA 18701	NONE	PC	CHARITABLE	711
AVON FOUNDATION FOR WOMEN ONE AVON PLAZA RYE,NY 10580	NONE	PC	CHARITABLE	79
BIG BROTHERSBIG SISTERS OF AMERICA 450 E JOHN CARPENTER FWY IRVING,TX 75234	NONE	PC	CHARITABLE	1,319
CANDY'S PLACE 190 WELLES ST FORTY FORT, PA 18704	NONE	PC	CHARITABLE	165
CARBONFUNDORG FOUNDATION 3 BETHESDA METRO CENTER BETHESDA,MD 20814	NONE	PC	CHARITABLE	5,000
CARIBBEAN LIFETIME MISSIONS 225 MAIN STREET 710 HIRAM,GA 30141	NONE	PC	CHARITABLE	285
CEOWEINBERG FOOD BANK 165 AMBER LANE WILKESBARRE,PA 18702	NONE	PC	CHARITABLE	3,314
Total		<u> </u>	▶ 3a	270,349

Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	тестріспі		
a Paid during the year				
COLON CANCER ALLIANCE 1025 VERMONT AVE NW SUITE 1066 WASHINGTON, DC 20005	NONE	PC	CHARITABLE	250
CONCORDIA LUTHERAN CHURCH 225 SCHOOLHOUSE LANE COLUMBUS,OH 43228	NONE	PC	CHARITABLE	100
CRUTCHES4KIDS 459 COLUMBUS AVE SUITE 381 NEW YORK NY,NY 10024	NONE	PC	CHARITABLE	500
CYSTIC FIBROSIS FOUNDATION 6931 ARLINGTON ROAD BETHESDA,MD 20814	NONE	PC	CHARITABLE	201
DENTAL LIFELINE NETWORK 1800 15TH ST DENVER,CO 80202	NONE	PC	CHARITABLE	1,350
DENTAL TRADE ALLIANCE 4350 FAIRFAX DR STE 220 ARLINGTON,VA 22203	NONE	PC	CHARITABLE	11,000
DENTISTS ORGANIZED FOR VETERANS 3 ALTARINDA ROAD NO 305 ORINDA CA,CA 94563	NONE	PC	CHARITABLE	112
DESMOID TUMOR RESEARCH FOUNDATION INC PO BOX 273 SUFFERN,NY 10901	NONE	PC	CHARITABLE	30
DIRECT RELIEF 27 SOUTH LA PATERA LANE SANTA BARBARA,CA 93117	NONE	PC	CHARITABLE	659
DRESS FOR SUCCESS 32 EAST 31ST ST NEW YORK,NY 10016	NONE	PC	CHARITABLE	351
ELLIE REYNOLDS FOUNDATION C/O SHANNON PSENSKY LAKE HOPATCONG,NJ 07849	NONE	PC	CHARITABLE	250
FM KIRBY CENTER 71 PUBLIC SQUARE WILKESBARRE,PA 18701	NONE	PC	CHARITABLE	10,000
FAMILY SERVICE ASSOCIATION OF NEPA 31 WEST MARKET ST WILKESBARRE,PA 18701	NONE	PC	CHARITABLE	144
FINE ARTS FIESTA PUBLIC SQUARE WILKESBARRE,PA 18701	NONE	PC	CHARITABLE	400
GLOBAL SMILES FOUNDATION 101 ACCESS ROAD SUITE 205 NORWOOD,MA 02062	NONE	PC	CHARITABLE	8,000

Form 990PF Part XV Line 3 - Gra	ants 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	A mount
a Paid during the year				
GREATER NY DENTAL EDUCATION FOUNDATION 6 EAST 43RD STREET NEW YORK,NY 10017	NONE	PC	CHARITABLE	10,000
GREATER WB ASSOCIATION FOR THE BLIND 1825 WYOMING AVE EXETER,PA 18702	NONE	PC	CHARITABLE	1,250
GREATER WYOMING VALLEY CHAMBER 2 PUBLIC SQUARE WILKESBARRE,PA 18702	NONE	PC	CHARITABLE	600
GREENWICH VILLAGE SOCIETY 232 EAST 11 STREET NEW YORK,NY 10003	NONE	PC	CHARITABLE	500
INTERNATIONAL LIFE FOUNDATION INC 707 TENNESSEE AVE SAINT CLOUD, FL 34769	NONE	PC	CHARITABLE	6,926
IRISH PUB CHILDREN'S FUND 2007 WALNUT STREET PHILADELPHIA,PA 19103	NONE	PC	CHARITABLE	250
JEWISH COMMUNITY ALLIANCE 60 SOUTH RIVER ST WILKESBARRE,PA 18702	NONE	PC	CHARITABLE	41,000
JUNIOR ACHEIVEMENT OF NEPA 1122 OAK STREET PITTSTON,PA 18640	NONE	PC	CHARITABLE	400
KEEP A BREAST FOUNDATION 811 TRACTION AVE LOS ANGELES, CA 90013	NONE	PC	CHARITABLE	35,572
LCCC FOUNDATION 1333 SOUTH PROSPECT ST NANTICOKE,PA 186343899	NONE	PC	CHARITABLE	15,000
LEADERSHIP LACKAWANNA 222 MULBERRY ST SCRANTON,PA 18501	NONE	PC	CHARITABLE	465
LEADERSHIP WILKES-BARRE 2 PUBLIC SQUARE WILKESBARRE,PA 18701	NONE	PC	CHARITABLE	7,227
LUNGEVITY FOUNDATION 218 S WABASH AVE CHICAGO,IL 60604	NONE	PC	CHARITABLE	414
LUZERNE COUNTY COMMUNITY COLLEGE 1333 S PROSPECT ST NANTICOKE,PA 18634	NONE	PC	CHARITABLE	100
LUZERNE COUNTY HEAD START 23 BEEKMAN ST WILKESBARRE,PA 18702	NONE	PC	CHARITABLE	3,250
Total			▶ 3a	270,349

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business) any foundation manager or substantial contributor	recipient		
Paid during the year				
MAKE-A-WISH AMERICA 1742 NORTH 24TH ST PHOENIX,AZ 85016	NONE	PC	CHARITABLE	186
MANOR COLLEGE 700 FOX CHASE RD ENKINTOWN,PA 19046	NONE	PC	CHARITABLE	250
MARCH OF DIMES 1275 MAMARONECK AVE WHITE PLAINS,NY 10605	NONE	PC	CHARITABLE	387
MATERNAL & FAMILY HEALTH SERVICES 15 PUBLIC SQUARE WILKESBARRE,PA 18701	NONE	PC	CHARITABLE	2,700
MS SOCIETY 12121 SCRIPPS SUMMIT DR 5AN DIEGO,CA 92131	NONE	PC	CHARITABLE	515
NEPA PHILHARMONIC PO BOX 4525 GCRANTON,PA 18505	NONE	PC	CHARITABLE	1,500
NORTH BRANCH LAND TRUST L1 CARVERTON RD FRUCKSVILLE,PA 18708	NONE	PC	CHARITABLE	1,250
NORTH POCONO PUBLIC LIBRARY 1315 CHURCH STREET MOSCOW,PA 18444	NONE	PC	CHARITABLE	250
NORTHEAST REGIONAL CANCER NSTITUTE 334 JEFFERSON AVE GCRANTON,PA 18510	NONE	PC	CHARITABLE	189
OPERATION GRATITUDE PO BOX 260257 ENCINO,CA 914260257	NONE	PC	CHARITABLE	25
ORAL CANCER FOUNDATION ATTN EILEEN CISZAK EFFORT,PA 18330	NONE	PC	CHARITABLE	250
PAP CORPS 3848 FAU BLVD SUITE 305 30CA RATON,FL 33431	NONE	PC	CHARITABLE	250
PENN STATE FUTURE FUND LOS OLD MAIN JNIVERSITY PARK,PA 16802	NONE	PC	CHARITABLE	500
PI FOUNDATION 167 PENNSYLVANIA AVE SUITE 201 FORT WASHINGTON,PA 19034	NONE	PC	CHARITABLE	5,000
ROBIN HOOD FOUNDATION 326 BROADWAY NEW YORK,NY 10003	NONE	PC	CHARITABLE	500

Recipient	If recipient is an individual,	Foundation	Purpose of grant or	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	
a Paid during the year				
RONALD MCDONALD HOUSE OF SCRANTON 332 WHEELER AVE SCRANTON,PA 18510	NONE	PC	CHARITABLE	171
RUTGERS UNIVERSITY FOUNDATION 120 ALBANY ST NEW BRUNSWICK,NJ 08901	NONE	PC	CHARITABLE	12,000
SALVATION ARMY 17 SOUTH PENNSYLVANIA AVENUE WILKESBARRE,PA 18702	NONE	PC	CHARITABLE	267
SPCA OF LUZERNE COUNTY 524 EAST MAIN ST WILKESBARRE,PA 18702	NONE	PC	CHARITABLE	439
SPECIAL OLYMPICS 1133 19TH ST NW WASHINGTON,DC 20036	NONE	PC	CHARITABLE	194
ST JOSEPH'S CENTER 2010 ADAMS AVE SCRANTON,PA 18509	NONE	PC	CHARITABLE	192
ST JUDE'S CHILDREN'S HOSPITAL 262 DANNY THOMAS PLACE MEMPHIS,TN 38105	NONE	PC	CHARITABLE	300
ST PAUL EV LUTHERAN CHURCH 530 BRIDGE ST NEW CUMBERLAND,PA 17070	NONE	PC	CHARITABLE	100
ST THOMAS MORE SCHOLARSHIP FUND 1040 FLEXER AVE ALLENTOWN,PA 18103	NONE	PC	CHARITABLE	50
STEP BY STEP FOUNDATION CROSS VALLEY COMMONS WILKESBARRE,PA 18702	NONE	PC	CHARITABLE	1,000
SUSAN G KOMEN 125 NORTH WASHINGTON AVE SUITE 260 SCRANTON,PA 18503	NONE	PC	CHARITABLE	156
SWAIN SCHOOL 1100 SOUTH 24TH STREET ALLENTOWN,PA 18103	NONE	PC	CHARITABLE	25,000
TEMPLE ISRAEL 236 SOUTH RIVER STREET WILKESBARRE,PA 18702	NONE	PC	CHARITABLE	250
THE CHILDREN'S ORAL HEALTH INSTITUTE 9199 REISTERSTOWN RD OWINGS MILLS,MD 21117	NONE	PC	CHARITABLE	5,000
THE PENN STATE UNIVERSITY ONE OLD MAIN UNIVERSITY PARK,PA 16802	NONE	PC	CHARITABLE	50
Total			▶ 3a	270,349

Form 990PF Part XV Line 3 - Gr	ants 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	A mount
a Paid during the year				
THE RIDE TO CONQUER CANCER 366 AMSTERDAM AVE BOX 131 NEW YORK, NY 10024	NONE	PC	CHARITABLE	500
TOYS FOR TOTS 1118 WYOMING AVE WYOMING,PA 18644	NONE	PC	CHARITABLE	367
TRUSTEES OF THE UNIVERSITY OF PENNA ATTN MAREN GAUGHAN PHILADELPHIA,PA 19104	NONE	PC	CHARITABLE	10,000
UNITED WAY OF HAYS COUNTY PO BOX 1728 SAN MARCOS,TX 78667	NONE	PC	CHARITABLE	176
UNITED WAY OF SOUTHERN WV PO BOX 5456 BECKLEY,WV 25801	NONE	PC	CHARITABLE	500
UNITED WAY OF WYOMING VALLEY 100 N PENNSYLVANIA AVE 2ND FLOOR WILKESBARRE,PA 18701	NONE	PC	CHARITABLE	5,250
UNIVERSITY OF DAYTON 300 COLLEGE PARK DAYTON,OH 454697056	NONE	PC	CHARITABLE	50
VISITING NURSES FOUNDATION 2180 EMPIRE BLVD WEBSTER,NY 14580	NONE	PC	CHARITABLE	100
WAYNE MEMORIAL HEALTH FOUNDATION 601 PARK ST HONESDALE,PA 18431	NONE	PC	CHARITABLE	200
WIGS FOR KIDS - HAIR DONATION 24231 CENTER RIDGE RD WESTLAKE,OH 44145	NONE	PC	CHARITABLE	35
WIKIMEDIA FOUNDATION INC PO BOX 98204 WASHINGTON, DC 200908204	NONE	PC	CHARITABLE	100
WILKES-BARRE YMCA CAPITAL CAMPAIGN CAMPAIGN OFFICE WILKESBARRE,PA 18701	NONE	PC	CHARITABLE	5,000
WOUNDED WARRIOR PROJECT PO BOX 758517 TOPEKA,KS 66675	NONE	PC	CHARITABLE	639
WVIA 100 WVIA WAY PITTSOTN,PA 18640	NONE	PC	CHARITABLE	15,000
WYOMING VALLEY CHILDREN'S ASSOCIATION 1133 WYOMING AVE FORTY FORT, PA 18704	NONE	PC	CHARITABLE	1,334
Total			▶ 3a	270,349

Recipient If recipient is an individual, Foundation Purpose of grant or Amount

show any relationship to status of contribution

Name and address (home or any foundation manager recipient

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

business) or substantial contributor

a Paid during the year

YESHIVA AT THE JERSEY SHORE NONE PC CHARITABLE

NONE

1515 LOGAN RD OCEAN.NJ 07712

Total.

RUTH'S PLACE WOMEN'S SHELTER

C/O 25 NORTH RIVER ST WILKESBARRE, PA 18702

PC CHARITABLE

PC CHARITABLE

250

172

270,349

TY 2015 Accounting Fees School	edule
Name:	BENCO FAMILY FOUNDATION FKA COHEN FAMILY CHARITABLE TRUST

6,000

ACCOUNTING & AUDIT

EXPENSE

	EIN: 13-7	7483658		
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

6,000

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491315010716				
TY 2015 Investments Corporate Stock Schedule						
Name:	BENCO FAMILY FOUNDATION					
	FKA COHEN FAMILY CHARITABL	E TRUST				
EIN:	13-7483658					

Name of Stock	End of Year Book Value	End of Year Fair Market Value
SCOTTRADE INVESTMENT ACCOUNT	474	474

314,566

3,033,073

314,566

3,033,073

SEQUOIA FUND

TD AMERITRADE INVESTMENT ACCOUNT

TY 2015 Investments - Other	Schedule		
Name:	BENCO FAMILY FOU	NDATION	
	FKA COHEN FAMILY	CHARITABLE TRUST	
ETAL-	12 7402650		

207,081

207,081

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AMBIT BRIDGE LOAN FUND INTERNATIONAL

INVESTMENT

EIN: 13-7483658					
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value		

FMV

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491315010716
TY 2015 Legal Fees Schedule			
Name:	BENCO FAMILY FO	DUNDATION LY CHARITABLE TRUST	

749

	EIN: 13-7483	8658		
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

749

LEGAL FEES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491315010716
TY 2015 Other Decreases Scho	edule	
Name:	BENCO FAMILY FOUNDATION	
	FKA COHEN FAMILY CHARITABLE TRUST	
FTAI	12 7402650	

Doscription	Amount
EIN: 13-7483658	

Description

Amount UNREALIZED GAIN/LOSS ON INVESTMENT

TY 2015 Other Expenses Schedule		
Name:	BENCO FAMILY FOUNDATION	
	FKA COHEN FAMILY CHARITABLE TRUST	

812

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MISCELLANEOUS EXPENSES

	EIN: 13-7483658				
I	Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

0

812

eme dixernic print - Do Not Process	A3 i ilea bata -	DEN. 33431313010710
TY 2015 Taxes Schedule		
Name:	BENCO FAMILY FOUNDATION	
	FKA COHEN FAMILY CHARITABLE	TRUST

DIN: 93491315010716

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PA REGISTRATION

FEDERAL TAXES

EIN: 13-7483658				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES	1,034	1,034		0

5,000

efile GRAPHIC print -	DO NOT PROCESS	As Filed Data -			DLN: 93491315010716
Schedule B		Schedu	lle of Contributors		OMB No 1545-0047
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	▶ Information abo	out Schedule B (Fo	Form 990, 990-EZ, or 990-PF orm 990, 990-EZ, or 990-PF) and its o <u>w irs gov/form990</u>	instructions is at	2015
Name of the organization				Employer id	entification number
FKA COHEN FAMILY C				13-748365	8
Organization type (ch	eck one)				
Filers of:	Section:				
Form 990 or 990-EZ	form 990 or 990-EZ				
	T 4947(a)(1)	nonexempt charita	able trust not treated as a private f	oundation	
	☐ 527 politica	l organization			
Form 990-PF	√ 501(c)(3) €	exempt private fou	ndation		
	T 4947(a)(1)	nonexempt charita	able trust treated as a private found	ation	
	501(c)(3) t	axable private fou	ndation		
other property) from any one contribi	utor Complete Part	hat received, during the year, contributed in See instructions for deters of the second of the secon	mining a contributor's t	total contributions
under sections 5 received from ai	509(a)(1) and 170(b)(1)(A)(vı), that chec ing the year, total o	ked Schedule A (Form 990 or 990-Econtributions of the greater of (1) \$:	Z), Part II, line 13, 16a	, or 16b, and that
during the year,		ore than \$1,000 <i>e</i> .	r (10) filing Form 990 or 990-EZ tha x <i>clusively</i> for religious, charitable, s lete Parts I, II, and III		
during the year, this box is check purpose Do not	contributions exclusive ked, enter here the total complete any of the pa	ely for religious, ch il contributions that arts unless the Ge	r (10) filing Form 990 or 990-EZ tha naritable, etc , purposes, but no suc t w ere received during the year for neral Rule applies to this organiza more during the year	th contributions totaled an exclusively religiou tion because it receive	I more than \$1,000 If us, charitable, etc , ed <i>nonexclusively</i>
990-EZ, or 990-PF), but	ıt m ust answ er "No" d	on Part IV, line 2, o	e and/or the Special Rules does not fits Form 990, or check the box on oes not meet the filing requirements	line H of its	

Name of organization

Employer identification number

BENCO FAMILY FOUNDATION 13-7483658 FKA COHEN FAMILY CHARITABLE TRUST Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed (d) (a) (b) (c) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person V RICHARD S COHEN **Payroll** 39 BRIANS PLACE \$6,696 Noncas h PLAINS TOWNSHIP, PA 18640 (Complete Part II for noncash contributions) (c) (d) (a) (b) No. Name, address, and ZIP + 4 Total contributions Type of contribution Person V DORRANCE FINANCIAL COMPANY Payroll 295 CENTERPOINT BLVD \$ 70,500 Noncash PITTSTON, PA 18640 (Complete Part II for noncash contributions) (a) (b) (d) (c) No. Name, address, and ZIP + $\mathbf{4}$ **Total contributions** Type of contribution Person ✓ 3 BENCO DENTAL SUPPLY CO **Payroll** 295 CENTERPOINT BLVD \$ 649,800 Noncas h PITTSTON, PA 18640 (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Pavroll** Noncas h (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution Person **Payroll** \$ **Noncash** (Complete Part II for noncash

Employer identification number

	Employer identification in	umbei
	13-7483658	
•		
(see instructions) Use duplicate copies of Part II if additional space is needed	(-)	
(b) Description of noncash property given	FMV (or estimate) (see instructions)	(d) Date received
	s	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	s	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	s	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	s	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	s	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	s	
	Schedule B (Form 9	90, 990-EZ, or 990-PF)
	(b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given	DUNDATION VC CHARITABLE TRUST Noncash Property (see instructions) (b) Description of noncash property given (c) FMV (or estimate) (see instructions) (b) Description of noncash property given (c) FMV (or estimate) (see instructions) (d) FMV (or estimate) (see instructions) (e) FMV (or estimate) (see instructions) (f) FMV (or estimate) (see instructions) (h) Description of noncash property given (c) FMV (or estimate) (see instructions) (d) FMV (or estimate) (see instructions) (e) FMV (or estimate) (see instructions) (f) FMV (or estimate) (see instructions) (h) Description of noncash property given (c) FMV (or estimate) (see instructions) (d) FMV (or estimate) (see instructions) (e) FMV (or estimate) (see instructions)

chedule B (Form 990,	990-EZ, or 990-PF) (2015)		Page 4
ame of organization		E	mployer identification number
ENCO FAMILY FOUN KA COHEN FAMILY (IDATION CHARITABLE TRUST	1	3-7483658
Part III Exclusively total more line entry. of \$1,000 o	religious, charitable, etc., contribution \$1,000 for the year from any c	utions to organizations describe one contributor. Complete colui III, enter the total of exclusively mation once. See instructions.	ed in section 501(c)(7), (8), or (10) that mns (a) through (e) and the following religious, charitable, etc., contributions
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
- -			
-	Transferee's name, address, an	(e) Transfer of gift	Relationship of transferor to transferee
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
o.irom Part i			
		(e) Transfer of gift	
-	Transferee's name, address, an	. ,	Relationship of transferor to transferee
(a) lo.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, an	(e) Transfer of gift d ZIP 4	Relationship of transferor to transferee
(a) lo.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
. _			
	Transferee's name, address, an	(e) Transfer of gift d ZIP4	Relationship of transferor to transferee
I =		1	

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)