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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 separate instructions is at www.irs.gov/form990pf

OMB No 1545-0052
2015
<u> </u>
Open to Public Inspection

FOR	care	endar year 2015 or tax year beginning OCT	13, 2015	<u>, and endin</u>	19	DEC 31, 2015	<u> </u>
C	'AF	of foundation RL L AND GLENDA T CRAMER				A Employer identification	
		ARITABLE FOUNDATION		47-5335629	 		
		and street (or PO box number if mail is not delivered to street a B WEST KING STREET	address)	Rod	om/suite	B Telephone number 717-530-86	0.0
		town, state or province, country, and ZIP or foreign p	nostal code			_	► TV
		IPPENSBURG, PA 17257	ostal code			C If exemption application is p	ending, check here
G	Chec	k all that apply: X Initial return	Initial return of a fo	ormer public char	ity	D 1. Foreign organizations	s, check here
		Final return	Amended return	•	•		
		Address change	Name change			2 Foreign organizations me check here and attach co	eeting the 85% test, proputation
н	Chec	ck type of organization: X Section 501(c)(3) ex	xempt private foundation			E If private foundation sta	itus was terminated
] s	ection 4947(a)(1) nonexempt charitable trust	Other taxable private founda	tion		under section 507(b)(1)	. —
I F	air n	narket value of all assets at end of year J Account	ing method: X Cash	Accrual		F If the foundation is in a	60-month termination
(fi	rom		ther (specify)			under section 507(b)(1)	
	<u> \$ </u>	82,066. (Part I, colu	ımn (d) must be on cash b	asıs.)			·
Pi	a <u>rt</u>	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net invest		(c) Adjusted net	(d) Disbursements for charitable purposes
	_	necessarily equal the amounts in column (a))	expenses per books	income		income	(cash basis only)
	1		82,139.			N/A	_
	2	· —	ļ			 	
	3	Interest on savings and temporary cash investments					
	4						
	1	a Gross rents	 				
Í		Net rental income or (loss)	<u> </u>				<u> </u>
<u>a</u>		Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	<u> </u>				 -
2	_	D assets on line 6a		·			
Revenie	7				0.		
_	١	' •					
	10	Gross sales less returns				 	-
	Ι΄.	a and allowances Less Cost of goods sold				 	
		c Gross profit or (loss)					
		Other income					
	12		82,139.		0.		
	13	Compensation of officers, directors, trustees, etc	0.		0.		0
	14	Other employee salaries and wages					
	15	Pension plans, employee benefits					
ď		a Legal fees				7-57	
Administrative Expense		b Accounting fees		<u>i</u> Ri		<u>V - 10. 1</u>	
Ž	,	c Other professional fees					
9	17	Interest		1881 A	PR 25	2 2016	ļ
<u> </u>	18			&			
<u>.</u>	19	Depreciation and depletion		150	GDE	ALLET !	ļ
Ē	20	• •	<u> </u>				 -
		· · · · · · · · · · · · · · · · · · ·	<u> </u>				
ב	22	• ,	<u> </u>				
2	23	•					
Ţ	24	• •	_		^		,
Onerating		expenses. Add lines 13 through 23	0.		0.		
_	29				· · ·	 	
	26	•	0.		0.		,
-	07	Add lines 24 and 25	Ų.		<u> </u>		
	1	Subtract line 26 from line 12:	82,139.			 	
	i	Excess of revenue over expenses and disbursements Net investment income (if penative enter-0-)	02,139.		0.	 	
		b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-)			<u> </u>	N/A	
5235	01 4-15		instructions	L		11/12	Form 990-PF (20

5 Decreases not included in line 2 (itemize) ► <u>UNREALIZED LOSS ON INVESTMENTS</u>

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

For	m 99	0-PF (2015) CHARITABLE FOUNDATION		47-!	5335629 Page 2
P	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
느	<u> </u>	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments		57,200.	57,200.
	3	Accounts receivable			
		Less; allowance for doubtful accounts			
	4	Pledges receivable -			
	١.	Less: allowance for doubtful accounts			
	5	Grants receivable			
	١٥	Receivables due from officers, directors, trustees, and other			
	,	disqualified persons			
	\	Other notes and loans receivable			
	١.	Less: allowance for doubtful accounts			
Assets	8	Inventories for sale or use			
Ass	9	Prepaid expenses and deferred charges Investments - U.S. and state government obligations			
		Investments - corporate stock STMT 1	0.	24,866.	24,866.
	1	Investments - corporate bonds		24,000.	24,0001
		Investments - land, buildings, and equipment basis			
	''	Less accumulated depreciation			·
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment: basis			<u></u> .
	ļ · ·	Less accumulated depreciation			
	15	Other assets (describe ►			
		Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	0.	82,066.	82,066.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
S	19	Deferred revenue			
ij	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable			
_	22	Other liabilities (describe			
	,,	Tatal liabilities (add lines 17 through 22)	0.	0.	
_	23	Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
S	24	Unrestricted			
ğ	25	Temporarily restricted			
Bali	26	Permanently restricted			
Net Assets or Fund Balances		Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31.			
SO	27	Capital stock, trust principal, or current funds	0.		
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
t As	29	Retained earnings, accumulated income, endowment, or other funds	0.	82,139.	
Š	30	Total net assets or fund balances	0.	82,066.	
	31	Total liabilities and net assets/fund balances	0.	82,066.	
匝	art		lances		
<u> </u>	Total	net assets or fund balances at beginning of year - Part II, column (a), line 3			
•		at agree with end-of-year figure reported on prior year's return)		1	0.
2	-	amount from Part I, line 27a		2	82,139.
3	Othe	r increases not included in line 2 (itemize)		3	0.

Add lines 1, 2, and 3

Form 990-PF (2015) CHARITABLE FOUNDATION Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase (c) Date acquired (a) List and describe the kind(s) of property sold (e.g., real estate, (d) Date sold (mo., day, yr.) (mo., day, yr.) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) D - Donation 1a NONE b d е (g) Cost or other basis (f) Depreciation allowed (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) Ь đ (I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) Adjusted basis (k) Excess of col. (i) (i) F.M.V. as of 12/31/69 Losses (from col. (h)) as of 12/31/69 over col. (j), if any þ C ď е If gain, also enter in Part I, line 7 Capital gain net income or (net capital loss) If (loss), enter -0- in Part I, line 7 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8 Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income Part V N/A (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) If section 4940(d)(2) applies, leave this part blank. Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? _ Yes [If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part Enter the appropriate amount in each column for each year; see the instructions before making any entries, (a) Base period years (c) Distribution ratio (col. (b) divided by col. (c)) Adjusted qualifying distributions Net value of noncharitable-use assets Calendar year (or tax year beginning in) 2014 2013 2012 2011 2010 2 Total of line 1, column (d) Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years 3 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5 Multiply line 4 by line 3 5 Enter 1% of net investment income (1% of Part I, line 27b) 6 7 Add lines 5 and 6 7 8 Enter qualifying distributions from Part XII, line 4 8 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

CARL L AND GLENDA T CRAMER CHARITABLE FOUNDATION 47-5335629 Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions Part VI 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) 0. **b** Domestic foundations that meet the section 4940(e) requirements in Part V, check here 1 and enter 1% of Part I, line 27b c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). U 2 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Add lines 1 and 2 3 0. Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4 0. Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-5 Credits/Payments: a 2015 estimated tax payments and 2014 overpayment credited to 2015 6a b Exempt foreign organizations - tax withheld at source 6b c Tax paid with application for extension of time to file (Form 8868) 6c d Backup withholding erroneously withheld 6d 0. 7 Total credits and payments. Add lines 6a through 6d 7 Enter any penalty for underpayment of estimated tax. Check here _____ if Form 2220 is attached 0. 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 2016 estimated tax Refunded > 11 Part VII-A | Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in X any political campaign? 1a X b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 1b 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 X c Did the foundation file Form 1120-POL for this year? 1c d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: 0. 0 • (2) On foundation managers. ▶ \$ (1) On the foundation. ▶ \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation 0. managers. > \$ 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 2 $\bar{\mathbf{x}}$ If "Yes," attach a detailed description of the activities Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes." attach a conformed copy of the changes X 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a N/A b If "Yes," has it filed a tax return on Form 990-T for this year? 4b X 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 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 X remain in the governing instrument? 6 Х 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 XV NONE 8a Enter the states to which the foundation reports or with which it is registered (see instructions) b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) X of each state as required by General Instruction G? If "No," attach explanation 8b 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 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV

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

Form 990-PF (2015)

10

Pa	rt VII-A Sta	tements Regarding Activities (continued)				
					Yes	No
11	At any time during	g the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of				
	-	3)? If "Yes," attach schedule (see instructions)		11		X
12		n make a distribution to a donor advised fund over which the foundation or a disqualified person had adv	isory privileges?	<u> </u>		
		itement (see instructions)	oory privileges	12		X
13		n comply with the public inspection requirements for its annual returns and exemption application?		13	Х	
	Website address					
14			ne no. ▶ (717)	530	-860	00
•		33 WEST KING STREET, SHIPPENSBURG, PA	ZIP+4 ▶17			
15	_	1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here				T
		ount of tax-exempt interest received or accrued during the year	▶ 15	N	/A	
16		g calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,	<u> </u>		Yes	No
		er financial account in a foreign country?		16	1	Х
		ns for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the		<u> </u>		
	foreign country					
Pa		tements Regarding Activities for Which Form 4720 May Be Required		•		
	File Form 4720	if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a		d the foundation (either directly or indirectly);				
		e sale or exchange, or leasing of property with a disqualified person?	Yes X No			
	• •	ey from, lend money to, or otherwise extend credit to (or accept it from)	_			
	a disqualified	person?	Yes X No			
	(3) Furnish good	s, services, or facilities to (or accept them from) a disqualified person?	Yes X No			
	• •	sation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No			
	(5) Transfer any	income or assets to a disqualified person (or make any of either available		1		
	for the benefi	it or use of a disqualified person)?	Yes X No			
	(6) Agree to pay	money or property to a government official? (Exception. Check "No"				
	if the foundat	tion agreed to make a grant to or to employ the official for a period after				
	termination o	of government service, if terminating within 90 days.)	Yes X No	ŀ		
b	If any answer is "	es' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations				
	section 53.4941(c	1)-3 or in a current notice regarding disaster assistance (see instructions)?	N/A	1b		
	Organizations rely	ring on a current notice regarding disaster assistance check here	ightharpoons			
C	Did the foundation	n engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not correct	ed			
	before the first da	y of the tax year beginning in 2015?		1c		X
2	Taxes on failure to	o distribute income (section 4942) (does not apply for years the foundation was a private operating found	lation			
	defined in section	4942(j)(3) or 4942(j)(5)):		1		
а	At the end of tax y	ear 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) be				
	before 2015?		Yes X No			
	If "Yes," list the ye		_			
b		rs listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to in		ŀ		
	valuation of assets	s) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and				
	statement - see in	•	N/A	2b		
C	If the provisions of	of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
		· · · · · · · · · · · · · · · · · · ·		İ		
3a		n hold more than a 2% direct or indirect interest in any business enterprise at any time				
	during the year?	l	Yes X No			
b		e excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified pers				
) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7	• •	1		
		red by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Sche		<u> </u>		
	•	letermine if the foundation had excess business holdings in 2015.)	N/A	3b		
		n invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		X
b		n make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable p	urpose that	<u> </u>		47
	riag riot been rem	oved from jeopardy before the first day of the tax year beginning in 2015?		4b	لـــــا	X

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

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

(b) Title, and average hours per week devoted to position

(c) Compensation

(d) Contributions to employee entell plans account, other allowances

(e) Expense employee paid more than \$50,000

NONE

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

		
ITABLE	FOUNDATION	47-533562

Part VIII Information About Officers, Directors, Trustees, Founda Paid Employees, and Contractors (continued)	tion Managers, Highly	Tage 7
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	<u> </u>	
	 	
		
	- 	
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statis number of organizations and other beneficiaries served, conferences convened, research papers produced to the conference of the conferenc		Expenses
1 N/A	,	
·		
2		
3		
4		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on	lines 1 and 2.	Amount
1 <u>N/A</u>		
·		
•		
2		
All other program-related investments. See instructions.		
3		
Table Add lines 4 through 0		

Form 990-PP (2015)

CHARITABLE FOUNDATION

Ľ	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	idations, see inst	tructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	<u>4,144.</u> 9,533.
b	Average of monthly cash balances	1b	9,533.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	13,677.
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	13,677.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	205.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	13,472.
6	Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	148.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	148.
2a	Tax on investment income for 2015 from Part VI, line 5		
Ь	Income tax for 2015. (This does not include the tax from Part VI.)	1	
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	148.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	148.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	148.
P	Qualifying Distributions (see instructions)		<u>-</u>
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	0.
Ь	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		-
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	0.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q	ualifies for the sec	tion

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI,	·	· · · · · · · · · · · · · · · · · · ·		
line 7				148.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			0.	
b Total for prior years:		0		
Crease distributions correspond to 2015.		0.		
3 Excess distributions carryover, if any, to 2015:				
a From 2010				
b From 2011				
c From 2012				
d From 2013				
e From 2014				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2015 from				
Part XII, line 4: ► \$0.				
a Applied to 2014, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.	_	
c Treated as distributions out of corpus				
(Election required - see instructions)	0.	····		
d Applied to 2015 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
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		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2014. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2015. Subtract				
lines 4d and 5 from line 1. This amount must	İ			
be distributed in 2016				148.
7 Amounts 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 applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2016.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2011				
b Excess from 2012				
c Excess from 2013				
d Excess from 2014				
e Excess from 2015				

	Subtract line 2d from line 2c			 _
a :	Complete 3a, b, or c for the alternative test relied upon: "Assets" alternative test - enter: (1) Value of all assets			
((2) Value of assets qualifying under section 4942(j)(3)(B)(i)			
- 2	Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed			
c "	'Support" alternative test - enter:			
((1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)			
((2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)			_
((3) Largest amount of support from			
	an exempt organization	1		

Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets

1 Information Regarding Foundation Managers:

(4) Gross investment income

 Qualifying distributions made directly for active conduct of exempt activities.

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

NONE

3

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

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

at any time during the year-see instructions.)

Check here If the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:

MATTHEW C CRAMER, (717) 530-8600

833 WEST KING STREET, SHIPPENSBURG, PA 17257

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Page 10

CARL L AND GLENDA T CRAMER

CHARITABLE FOUNDATION Form 990-PF (2015) 47-5335629 Page 11 Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation status of recipient Purpose of grant or contribution show any relationship to Amount any foundation manager or substantial contributor Name and address (home or business) a Paid during the year NONE ► 3a ٥. Total **b** Approved for future payment NONE

▶ 3b

Total

Form 990-PF (2015)

Part XVI-A A

Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated to (a) Business	ousiness income (b)	(c) Exclu-	d by section 512, 513, or 514 (d)	(e) Related or exempt
1 Program service revenue:	code	Amount	sion code	Amount	function income
a	_		4-4-		
b	_		+-+		
C	-				
d	-	·	+		
e					
f	-		-		
g Fees and contracts from government agencies			+		
2 Membership dues and assessments					
3 Interest on savings and temporary cash			1 1		Ì
investments					-
4 Dividends and interest from securities			+		
5 Net rental income or (loss) from real estate:			╬.		
a Debt-financed property	\ 		+		
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property	<u> </u>		+		
7 Other investment income	ļ	 _	+		-
8 Gain or (loss) from sales of assets other					
than inventory	 		++		<u> </u>
9 Net income or (loss) from special events			+		-
Offices of the Gross of the Gr			+-+	<u></u> .	
_					1
a	-		╅┈┼		
b			+		
c	1 1		+		
d			++		-
2 Subtotal. Add columns (b), (d), and (e)	-	0		0.	0
3 Total. Add line 12, columns (b), (d), and (e)			<u> </u>	13	*
See worksheet in line_13 instructions to verify calculations.)					<u></u>
	to the Assem	mliahanant of C	F	\	
Part XVI-B Relationship of Activities	to the Accom	plishment of Ex	kempt P	urposes	
Line No. Explain below how each activity for which inc	come is reported in c	olumn (e) of Part XVI-	A contribut	ted importantly to the accor	nplishment of
▼ the foundation's exempt purposes (other tha					·
	<u>-</u>				
			_		
		<u> </u>			
					

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

1	Did the or	ganization directly or indir	rectly engage in any of the followin	ng with any other organization	described in section 501(c) of		Yes	No
	the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?							
а	Transfers	from the reporting founda	ation to a noncharitable exempt org	ganization of:				
	(1) Cash					1 <u>a(1)</u>		X
	(2) Other	assets				1a(2)		<u>X</u>
b	Other tran	sactions:						
	(1) Sales	of assets to a noncharital	ble exempt organization			1b(1)		<u>X</u>
	(2) Purch	ases of assets from a nor	ncharitable exempt organization			1b(2)		X
	(3) Renta	l of facilities, equipment,	or other assets			1b(3)		<u>X</u>
	` '	oursement arrangements				1b(4)		X
		or loan guarantees				1b(5)		X
			mbership or fundraising solicitatio			1b(6)		X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other					1c		<u> </u>	
đ							ets,	
				ed less than fair market value	in any transaction or sharing arrangement, sho	JW III		
2),		(b) Amount involved	other assets, or services received. (c) Name of noncharitable	e evernt organization	(d) Description of transfers, transactions, and sh			<u></u>
<u> </u>	116 110	(b) Amount myored	N/A	compt organization	(u) Description of dansiers, transactions, and sh	aring arra	ingenier	
			N/A					
								
					 			
					 			
								
								
2a	Is the four	idation directly or indirect	ly affiliated with, or related to, one	or more tax-exempt organiza	itions described			
			than section 501(c)(3)) or in sect	ion 527?		Yes	X	No
<u>b</u>	If "Yes," co	mplete the following sche						
		(a) Name of org	anization	(b) Type of organization	(c) Description of relationsh	IP		
		N/A						
								
	Under	penalties of periory I declare t	hat I have examined this return, including	accompanying schedules and state	ements, and to the best of my knowledge		_	
Si	1		plete Declaration of preparer (other than	· · · ·	May	the TRS d	liscuss t	his ar
He	re	m- H . (. Cramu. Trusti	EE 4/18/16	show	wn below		r)?
		nature of officer or trustee		Date	Title	Yes		J No
	loigi	Print/Type preparer's na			Date Check If PTIN			
		13po propuror 3 na	, ropulor 3 3	.9	self- employed			
Pa	id	EDWARD STR	ALEY SILLS	ult Strales		235	296	
	eparer		ER & RITTER	- Juvening	Firm's EIN ► 23-13			
	e Only			V //	1111132111 23 13			
	-	Firm's address ▶ 11	37 KENNEBEC DRI	VE VE				
			AMBERSBURG, PA		Phone no. 717-26	4-7	456	
	_				11 110110 1101 7.2.7 20	- 007		100151

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www irs gov/form990 .

OMB No 1545-0047

2015

Name of the organization

CARL L AND GLENDA T CRAMER CHARITABLE FOUNDATION

Employer identification number

47-5335629

Organization type (Check one).						
Filers of:		Section:				
Form 99	90 or 990-EZ	501(c)() (enter number) organization				
		4947(a)(1) nonexempt charitable trust not treated as a private foundation				
		527 political organization				
Form 99	00-PF	X 501(c)(3) exempt private foundation				
		4947(a)(1) nonexempt charitable trust treated as a private foundation				
		501(c)(3) taxable private foundation				
Note. O	nly a section 501(c)(7	covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions				
General	Rule					
X		filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II See instructions for determining a contributor's total contributions				
Special	Rules					
	sections 509(a)(1) a any one contributor	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, line 1 Complete Parts I and II.				
	year, total contribut	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the ions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for uelty to children or animals. Complete Parts I, II, and III				
	year, contributions is checked, enter he purpose Do not co	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box are the total contributions that were received during the year for an exclusively religious, charitable, etc., implete any of the parts unless the General Rule applies to this organization because it received nonexclusively etc., contributions totaling \$5,000 or more during the year				
but it mi	ust answer "No" on I	at is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to he filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).				

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization
CARL L AND GLENDA T CRAMER
CHARITABLE FOUNDATION

Employer identification number

47-5335629

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	GLENDA T CRAMER 2 EAST MAIN STREET NEWBURG, PA 17240	\$47,200.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	MATTHEW C CRAMER 1165 MEANS HOLLOW ROAD SHIPPENSBURG, PA 17257	\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	GLENDA T CRAMER 2 EAST MAIN STREET NEWBURG, PA 17240	\$ 24,939.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Payroll Noncash Complete Part II for noncash contributions)

Name of organization

Employer identification number

CARL L AND GLENDA T CRAMER CHARITABLE FOUNDATION

47-5335629

Part II	Noncash Property (see instructions) Use duplicate copies of Part II	if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3	260 SHARES ERIE INDEMNITY CO CLASS A	_	
			12/31/15
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	

Schedule B (Form 990, 990 EZ, or 990 PF) (2015)	
Name of organization	Employer ident
CARL L AND GLENDA T CRAMER	
CVI DEMINE TO TOUR TOUR TOUR	1 48 50

Name of org	ganization		Employer identification number			
	L AND GLENDA T CRAMER					
CHARI	TABLE FOUNDATION		47-5335629			
Part III	I the year from any one contributor. Complete c	olumns (a) through (e) and the following	tion 501(c)(7), (8), or (10) that total more than \$1,000 for line entry. For organizations			
	completing Part III, enter the total of exclusively religious.	charitable, etc., contributions of \$1,000 or less for	or the year (Enler this info once)			
(a) No.	Use duplicate copies of Part III if additiona	il space is needed				
from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
Part I						
		-	-			
Ì						
ĺ		(e) Transfer of gift				
]						
].	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					
Ì						
(a) No. from						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
						
ļ						
		(e) Transfer of gift				
	T	1710 4				
	Transferee's name, address, ar	1d ZIP + 4	Relationship of transferor to transferee			
						
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
Part I	(2). 4. pood of g		(d) Description of now gire to note			
ì			_			
			-			
			-			
		(e) Transfer of gift				
Ì	(e) trailed or gift					
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee			
Ì						
	·	 				
(a) No.						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
_						
	(e) Transfer of gift					
	Tanadani da masa add	- J 7ID . 4	Deletterable of transferred to			
	Transferee's name, address, ar	10 LIP + 4	Relationship of transferor to transferee			
						

FORM 990-PF	CORPORATE STOCK		STATEMENT 1
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
	-	24,866.	24,866.
TOTAL TO FORM 990-PF, PART II,	LINE 10B	24,866.	24,866.