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

2016

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

► 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.

Open to Public Inspection

7	For cal	enda	r year 2016 or t	ax year beginnir	ng		, 201	6, and 6	ending			<del></del>
ريد	Name of f									Α	Employer identification nu	ımber
			LE GLOBALL	Y er if mail is not delivere	d to street a	address)		Room/s	uite	B	23-2777751 Telephone number (see inst	ructions)
77			•	HORNE ROAD	2 10 517 551	aud, 000,		1	SAPT J11		(215) 579-27	
				, and ZIP or foreign po	stal code			12 01.11	<u> </u>			
	NEWT(	NWC		<del></del>			PA	1894	<u> 10-2401 </u>	∣c	If exemption application is	pending, check here.
Z(	G Che	ck all	l that apply	Initial return	[	Initial r	eturn of a for	mer publ	ic charity	D	1 Foreign organizations, che	eck here ►
B				Final return	[		led return			1	3 0	L,
9				Address chan	<del></del>		change			_	2 Foreign organizations med here and attach computations	eting the 85% test, check
	H Che		pe of organization	1 1			empt private f			1	•	
$\mathbb{Z}$	<del>}</del>			nonexempt char			Other taxable	<del></del>		JE	If private foundation status under section 507(b)(1)(A)	
•	Fair	market	t value of all assets	at end of year	J Acc	ounting n		Cash	X Accrual	1	unuer Section 307(b)(1)(A	), crieck fiele
		IFAIL	II, column (c), line 1		0-11	Other (spe				. <b>.</b>   F	If the foundation is in a 60	-month termination
г	<b>&gt;</b> \$	TA		, 341.	(Part I,	column (	d) must be or	casn ba	asis )	<u> </u>	under section 507(b)(1)(B	), check here
Ě	ranı		nalysis of Re			(a) Re	venue and	(в) Г	Net investme	ent	(c) Adjusted net	(d) Disbursements
		CO	iumns (b), (c), a	total of amounts nd (d) may not ne	eces-		es per books	``'	income		income	for charitable purposes
		sa	nly equal the an	nounts ın column		{		1				(cash basis only)
-		1	Contributions gifts gran	nts, etc received (attach scl	redute)					: 33		
		2	F-1	undation is <b>not</b> required to a		8 8 3	38 78 78 78			<del></del>		
		_	i die ioi	undation is not required to a	Mach Sch B	<u> </u>	38	*   - * - ` '	<u> </u>	3.4		
		3	•	temporary cash investments			2,199	·			<u></u>	
		4		rom securities			22,168				<del> </del>	
		_	Net rental income			5 93 88	\$ 3 3 4 E			**:		
	D	_	or (loss)	ale of assets not on line 10		1 13 13	<u> </u>		***			
	R E		Gross sales price fo	or all		X 82 38		3 3				
	Ň	7	assets on line 6a .	ome (from Part IV, line	2)			1		3 30		
	E	8		algain					W W. W	(%- 37	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	U	9	Income modification	ns		100		: X. W.	31 N. 12	W. 4		3 R & C. C. C. C. C.
	E	10 a	returns and							43.		
		ь	allowances Less Cost of	<del></del>		1 1 X				***		
		_	goods sold	<u> </u>		1 1	7, 3, 3,					
		-		ach schedule) · · · · th schedule) · · · ·		<u> </u>		** '	<u> </u>	<u> </u>	<del>\</del>	
		• • •		Investment		1	37,230	1				
		12		through 11		<del> </del>	61,597				<del> </del>	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
_		13		ficers, directors, trustee		<del>                                     </del>		+			<del>                                     </del>	
		14	Other employee sa	alaries and wages .							I	
		15		loyee benefits							1	
	A	16 a	Legal fees (attach se	chedule). L-16a	Stmt.		1,129				1	
	D M			lach sch). L-16b		<u> </u>	850	· <b>-</b>			1	
	, ×			(attach sch)		L		+			+	
	PS	17	Interest			ļ	135	+			+	
	E T R R A A	18 19	Taxes (attach schedule): Depreciation (attach	(see Instrs)							<del> </del>	
	<b>A A</b>	13		etion								
	N A	20										
	G E	21		ivadelindCorre								<u> </u>
	A E N X D P	22	Printing and pullification of their expenses (at)	Mons OSC 06 ·		<u></u>		+			ļ	<del> </del>
	D P	23		_ '		Į.		-				
	E S E S	24	ال, Total operating and	N 1 5 2017		<del></del>		+				<del> </del>
	E S		expenses. Add lines	s 13 through 23			2,114					<u> </u>
	Į	25	Contributions, gifts gran	jœen.: Utah··			47,500	• 6	4 4, \$ -}	, *	18 Man 1 ( 1 ) M	§
	[	26	Total expenses and	d disbursements.			10 61:					
_	{	27	Add lines 24 and 25 Subtract line 26 fron		• • • •	b	49,614	•	3 8			4 4.5
			Excess of revenue			2	<u> </u>	(	· ×	,		
	[	_	and disbursements				11,983				× ,	
		b	Net investment inc	ome (if negative, enter	-0-)	<u> </u>	4				a composition of a	A property of the state of the
		C	Adjusted net incon	ne (if negative, enter -0	)-)	Į, ,, ·		1	"、""," <sub>~</sub> (		1	1

Par	till:	Balance Sheets  Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	<del></del>
	<u> </u>	(See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	<b>5</b>		6,679.	6,679.
	2	Savings and temporary cash investments			
	3	Accounts receivable			
	}	Less allowance for doubtful accounts			
	4	Pledges receivable			
		Less allowance for doubtful accounts	)	3,2,3	
	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 sch)			
A	1	Less allowance for doubtful accounts	AND AND AND AND AND SOUTH SAME SAME SAME	o ali la co La Cina della Calaira Marita I della ca Paulaa S	e tut the eximine the star a tillion much
S	8	Inventories for sale or use	·		
A S S E T	9	Prepaid expenses and deferred charges			<del></del>
S	i	a Investments – U S and state government obligations (attach schedule)			
	١.	b Investments — corporate stock (attach schedule)		874,525.	874,525.
		c Investments — corporate bonds (attach schedule)			33,137.
	1	•			
	''	Investments – land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			
	13	,,,,,,			
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	15 16	Other assets (describe Total assets (to be completed by all filers — see the instructions. Also, see page 1, item I)	902,358.	914,341.	914,341.
L	17	<del></del>	<del> </del>		8 7 8 8 F B
ļ	18	Grants payable			
A B	19	Deferred revenue			
ļ	20	Loans from officers, directors, trustees, & other disqualified persons	<del></del>		
ī	21	Mortgages and other notes payable (attach schedule)	<del></del>	<del> </del>	
Ť	22	· · · ·			
E	22		l .		
S S	23	Total liabilities (add lines 17 through 22)			
		and complete lines 24 through 26 and lines 30 and 31.			
NF	24	Unrestricted		914,341.	
E U T N	25	Temporarily restricted			
D	26	Permanently restricted			
A S B S A		Foundations that do not follow SFAS 117, check here . Fand complete lines 27 through 31.			
S A E L T A	27	Capital stock, trust principal, or current funds	ł	,	
T A S N	28	Paid-in or capital surplus, or land, bldg, and equipment fund	<del></del>	<del></del>	
C.	29	Retained earnings, accumulated income, endowment, or other funds	ļ		
OE RS	30	Total net assets or fund balances (see instructions)	902,358.	914,341.	
	31	Total liabilities and net assets/fund balances (see instructions).		914,341.	
Pari		Analysis of Changes in Net Assets or Fund Balanc			nom no notice sea o site no include
1	Total	net assets or fund balances at beginning of year – Part II, column of year figure reported on prior year's return)	(a) line 30 (must agree v	vith	002 250
		amount from Part I, line 27a			902,358.
					11,983.
		increases not included in line 2 (itemize)			014 04
_	n	ines 1, 2, and 3		} <del></del>	914,341.
5	necrea	ases not included in line 2 (itemize)			
_6	ı otal	net assets or fund balances at end of year (line 4 minus line 5) — F	′aπ II, column (b), line 30	6	914,341.

(a) List and describ	e the kind(s) of property sold (e.g., real nouse, or common stock, 200 shares M	estate, (b)	How acquired  Purchase  Donation	(C) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1 a		<del></del>	Bonation	<del> </del>	
b		<del></del>		†	
C					
d					
e				<u> </u>	l L
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (e) plus (f) mi	
а					
b					
<u> </u>	<del>                                     </del>				_ <del></del>
		<del></del>			<del></del>
Complete only for accets show	I long gain in column (h) and owned by the	o foundation on 13/31/60			
<del></del>	(j) Adjusted basis	(k) Excess of col (i)		<b>(I)</b> Gains (Col gain minus col. (k), bi	
(i) F M V as of 12/31/69	as of 12/31/69	over col (j), if any	l ti	nan -0-) or Losses (fr	om col (h))
a				<del></del>	
b					
C					
d					
е					<del></del>
2 Capital gain net income or (net		enter in Part I, line 7 er -0- in Part I, line 7	2		
3 Net short-term capital gain or (	loss) as defined in sections 1222(5) an	d (6)		<del> </del>	<del></del>
If gain, also enter in Part I, line	e 8, column (c) (see instructions) If (loss	s), enter -0-	3		
	er Section 4940(e) for Reduce			<u> </u>	<del></del>
	foundations subject to the section 494			<del></del>	
•	•		,		
f section 4940(d)(2) applies, leave the	iis part blank				_
	tion 4942 tax on the distributable amou	• • • • • • • • • • • • • • • • • • • •	?	Yes	∐No
<del></del>	ify under section 4940(e) Do not comp				
	n each column for each year, see the ii	nstructions before making any en	tries		
(a) Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		(d) Distribution (col (b) divided	
2015	0.		0.		0.000000
2014	0.		0.		0.000000
2013	0.		0.		0.000000
2012	0.		0.		0.000000
2011	0.		0.		0.000000
2 Total of line 1, column (d)			2		0.000000
	e 5-year base period — divide the total in has been in existence if less than 5 years.		3		0.000000
4 Enter the net value of nonchar	stable-use assets for 2016 from Part X,	line 5	4		0.
5 Multiply line 4 by line 3			5		0.
6 Enter 1% of net investment inc	ome (1% of Part I, line 27b)		6		
7 Add lines 5 and 6			7		0.
8 Enter qualifying distributions fro	om Part XII, line 4		8		
If line 8 is equal to or greater the Part VI instructions	nan line 7, check the box in Part VI, line	1b, and complete that part using	g a 1% tax	rate See the	

Pa	<b>1 VI ⊱ 1 Excise Tax Based on Investment Income</b> (Section 4940(a), 4940(b), 4940(e), or 4948 – see					
1	Exempt operating foundations described in section 4940(d)(2), check here I and enter 'N/A' on line 1	Ú.S	<u> </u>	<u> Li</u>		
	Date of ruling or determination letter (attach copy of letter if necessary — see instructions)	ĺ	l			
-	Domestic foundations that meet the section 4940(e) requirements in Part V,	1				
	check here . ▶ and enter 1% of Part I, line 27b	1.3		. \$-3		
(	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)	<i>X</i>	W		2·X _	CS WAR
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2				
3	Add lines 1 and 2	3				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)					
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0	5				0.
6	Credits/Payments			l X		W. N
	2016 estimated tax pmts and 2015 overpayment credited to 2016				3	V (1)
	Exempt foreign organizations — tax withheld at source 6 b	4 X			* 1	: 🐧
	Tax paid with application for extension of time to file (Form 8868) 6 c					<b>*</b> 3
(	Backup withholding erroneously withheld	: .		Ò., X	l'	
7	Total credits and payments Add lines 6a through 6d	7				
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here	8				
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9				0.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				0.
11	Enter the amount of line 10 to be Credited to 2017 estimated tax Refunded	11				
Pa	t VII-A Statements Regarding Activities			· · · · · · · · · · · · · · · · · · ·		
1 8	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it				Yes	No
	participate or intervene in any political campaign?		• • •	1 a		X
1	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?			1 b		X
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published	,			, \Q	¥\ \}
	or distributed by the foundation in connection with the activities					N. J
(	Did the foundation file Form 1120-POL for this year?			1 c		Х
(	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			W.	X- 200	, J
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$					1, 13
•	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		l. V
_	If 'Yes,' attach a detailed description of the activities			1	1, 1, 1	
	· · · · · · · · · · · · · · · · · · ·					
3	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			3	- X 1-1	
4 -	Did the foundation have unrelated business gross income of \$1,000 or more during the year?					X
	If 'Yes,' has it filed a tax return on Form 990-T for this year?			4 b		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		7,
3				3	. W	X
	If 'Yes,' attach the statement required by General Instruction T					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				\$3.	3 7
	By language in the governing instrument, or			N.W		8 . W
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict					
_	with the state law remain in the governing instrument?			6	<u> </u>	_X_
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col (c), and Part XV			7	X	26 m2-82-3
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)		_			
	PENNSYLVANIA		_			
t	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation			8 b	X	(A. /ac
9	is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If 'Yes,' complete Part X	)(5) <td></td> <td>9</td> <td>13.5</td> <td>X</td>		9	13.5	X
				<u> </u>	-	\ \
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses	<i>.</i>		10		x
BAA		<del></del>			O DE (	

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Ranty II. B. Statements Regarding Activit		4720 May Re Ren	wired (continued)	77751 Page 6
5 a During the year did the foundation pay or incur a		14/20 May De Neq	dired (continued)	
(1) Carry on propaganda, or otherwise attempt t	-	ection 4945(e))?	· · · · Yes X	No S
(2) Influence the outcome of any specific public on, directly or indirectly, any voter registratio	election (see section 495	55) or to carry		No
(3) Provide a grant to an individual for travel, stu	idy, or other similar purp	oses?		No
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? (see instructions).	n a charitable, etc , organ	ization described		No
(5) Provide for any purpose other than religious educational purposes, or for the prevention of	, charitable, scientific, lite of cruelty to children or a	erary, or nımals?	· · · · · · · · Yes X	No
b If any answer is 'Yes' to 5a(1)—(5), did any of the described in Regulations section 53 4945 or in a (see instructions)?	e transactions fail to qual current notice regarding	lify under the exceptions disaster assistance		5b X
Organizations relying on a current notice regardi				
c if the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsibulif 'Yes,' attach the statement required by Regula	ility for the grant?		· · · · · [] Yes [	No
6 a Did the foundation, during the year, receive any on a personal benefit contract?	funds, directly or indirect	ly to pay premiums	· · · · · · · Yes X	No No
<b>b</b> Did the foundation, during the year, pay premiun	ns, directly or indirectly, o	on a personal benefit con	tract?	6b X
If 'Yes' to 6b, file Form 8870  7 a At any time during the tax year, was the foundation				1 ( "" ( '
b If 'Yes,' did the foundation receive any proceeds				
Part VIII Information About Officers, D and Contractors	irectors, Trustees,	Foundation Manag	gers, Highly Paid I	mployees,
1 List all officers, directors, trustees, foundation				<del></del>
(a) Name and address	(b) Title, and average hours per week devoted to position	(c)Compensation (If not paid, enter -0-)	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
MARJORIE EWBANK				
1382 NEWTOWN LANGHORNE RD NEWTOWN PA 18940	PRESIDENT 2.00	0.	0.	0.
WALTER SINGER	TREASURER			
338 GERARD AVE Elkins Park PA 19027	2.00	0.	0.	0.
	2.00	J.		
2 Compensation of five highest-paid employee	s (other than those inc	luded on line 1 – see ir	nstructions). If none, e	nter 'NONE.'
(a) Name and address of each employee paid more than \$50,000	(b)Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
				<del> </del>
				<del> </del>
		:		
		<del> </del>	<del></del>	<del> </del>
				1
				ļ
<del></del>		<u> </u>		
Total number of other employees paid over \$50,000 .				None

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	mployees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
Total number of others receiving over \$50,000 for professional services	None
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
<del></del>	
1	
2	<del></del>
3	
	<del>_</del> _
4	
Part X-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments See instructions	
3	
·	
Total. Add lines 1 through 3	
BAA	Form <b>990-PF</b> (2016)

<u>.r.a</u>	see instructions )	gri loulida	dons,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes  Average monthly fair market value of securities	1 a	
	P Average of monthly cash balances		
	Fair market value of all other assets (see instructions)		<del></del>
	Total (add lines 1a, b, and c)		
	Reduction claimed for blockage or other factors reported on lines 1a and	1 3	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets		
3	Subtract line 2 from line 1d		0.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	0.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4		0.
6	Minimum investment return. Enter 5% of line 5		0.
Pai	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating and certain foreign organizations check here   ☐ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	0.
2 a	Tax on investment income for 2016 from Part VI, line 5		
t	Income tax for 2016 (This does not include the tax from Part VI )	13.4	
	Add lines 2a and 2b · · · · · · · · · · · · · · · · · ·		0.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	0.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	0.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	0.
Par	t XII Qualifying Distributions (see instructions)		
а	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26		
t	Program-related investments — total from Part IX-B		
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes		
3 a	Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required)	3 a	
t	Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the for qualifies for the section 4940(e) reduction of tax in those years	oundation	<del>_</del>
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## Part XIII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2015	( <b>c)</b> 2015	<b>(d)</b> 2016
1	Distributable amount for 2016 from Part XI, line 7				0
	Undistributed income, if any, as of the end of 2016				
	Enter amount for 2015 only		_, 3	0.	
3	Total for prior years 20, 20, 20				
	From 2011				
	From 2012 0 .				
	From 2013 0 .				
(	d From 2014 0 .				
•	From 2015 0 .				
1	Total of lines 3a through e	0.			
4	Qualifying distributions for 2016 from Part				
	XII, line 4 S				
8	Applied to 2015, but not more than line 2a · · ·				
t	Applied to undistributed income of prior years (Election required — see instructions)				
C	: Treated as distributions out of corpus (Election required — see instructions)				
c	Applied to 2016 distributable amount				
	Remaining amount distributed out of corpus	0.			4 <b>11 11 11 11 11 11 11 11 11 11</b>
5	Excess distributions carryover applied to 2016				<u> </u>
	(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				
9	indicated below: Corpus Add lines 3f, 4c, and 4e Subtract line 5				
		0.			
	Prior years' undistributed income Subtract line 4b from line 2b		0.		
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				
a	Subtract line 6c from line 6b Taxable amount — see instructions		0.		
_	Undistributed income for 2015 Subtract line 4a from			3	
Ū	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 2017				0.
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(a)(3) (Election	{			
	may be required – see instructions)				
8	Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions)	0.			
9	Excess distributions carryover to 2017.				
	Subtract lines 7 and 8 from line 6a	0.	* * * * 1		
	Analysis of line 9	, , , ,	** ;*		
	Excess from 2012 O.		, , , ,		
		\$ · ·	,	* .	
	Excess from 2014		, , , ,		. *
	Excess from 2016 0.				}
_	<del></del>				

Pan XIV Private Operating Foundation		ictions and Part	VII-A, auestion 9	23-277775] ))	N/A
1 a If the foundation has received a ruling or deter	mination letter tha	it it is a private opera	ating foundation, and		14/17
is effective for 2016, enter the date of the rulin	•				
b Check box to indicate whether the foundation		ing foundation descri	<del></del>	4942(j)(3) or	4942(J)(5)
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year (a) 2016	<b>(b)</b> 2015	(c) 2014	(d) 2013	(e) Total
<b>b</b> 85% of line 2a				1	<del> </del>
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter		1		}	
(1) Value of all assets		<del> </del>	<del> </del>	<del> </del>	
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)		-			
minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test — enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income		<u> </u>		<u> </u>	
Supplementary Information ( assets at any time during the	Complete this	part only if the	e foundation had	d \$5,000 or more	in
Information Regarding Foundation Manage     a List any managers of the foundation who have     close of any tax year (but only if they have cor	ers: e contributed more	than 2% of the total	I contributions receive	ed by the foundation b	efore the
cool of any tax year (out only it bio) have our	imbated meters me	., \$0,000, (000 000)			
b List any managers of the foundation who own a partnership or other entity) of which the foun	10% or more of thi dation has a 10%	ne stock of a corpora or greater interest	ition (or an equally la	rge portion of the own	ership of
2 Information Regarding Contribution, Grant Check here ☐ if the foundation only mak requests for funds If the foundation makes gif complete items 2a, b, c, and d	es contributions to ts, grants, etc. (se	p preselected charita e instructions) to ind	able organizations and dividuals or organizati	ions under other cond	
a The name, address, and telephone number or MARJORIE EWBANKS	e-mail address of	the person to whom	applications should	be addressed	
1382 NEWTOWN LANGHORNE RD					
NEWTOWN	PA 1894	0 (2:	15) 579-2752		
b The form in which applications should be subn	nitted and informa	<del></del>			
APPLICATIONS SHOULD EXPLAIN	HOW USE OF	F FUNDS WILL	INCREASE LOC	CAL EMPOWERMEN	1T
c Any submission deadlines NONE					
d Any restrictions or limitations on awards, such	as by geographic	al areas, charitable f	fields, kinds of institut	tions, or other factors	
AA					orm <b>990-DE</b> (201

Form 990-PF (2016) HOME RULE GLOBALLY

Part XV Supplementary Information (continued)

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

Recipient	If recipient is an individual, show any relationship to		Purpose of grant or	Amazount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	Gr Substantial Continuous	<del> </del>		<del></del>
Right sharing of world resources		1	]	
101 Quaker Hill Dr.,		1	)	
RICHMOND IN 47374		INDEP	UNRESTRICTED	5,000.
World Federalist movement				•, • • • •
708 THIRD AVE STE 715			1	
NEW YORK NY 10017		INDEP	UNRESTRICTED	0.
Spears Center for servant leadership		1211222		
329 GardenGrace Dr.			1	
INDIANAPOLIS IN 46239		INDEP	UNRESTRICTED	1,000.
Abington monthly meeting		111122		2,000.
529 Meetinghouse Rd.			}	
JENKINTOWN PA 19046		INDEP	UNRESTRICTED	4,000.
Quaker UN office		*************************************		1,000.
777 United Nations Plaza, fifth floor			ĺ	
NEW YORK NY 10017		INDEP	UNRESTRICTED	1,000.
Friends committee on national legislation	1	TINDEL		1,000.
245 2nd St. NE.			}	
WASHINGTON DC 20002		INDEP	UNRESTRICTED	2,000.
Friends world committee for consultation	1	INDEF	ONRESTRICTED	2,000.
Section of the Americas 1506 Race St.			l i	
PHILADELPHIA PA 19102		INDEP	UNRESTRICTED	0.
JOHN ROBERT EWBANK JR		TNDEE	ONRESTRICTED	٠.
6770 HAWAII KAI DRIVE #302			1	
HONOLULU HI 96825		INDEP	UNRESTRICTED	0.
LAURA VALENCIA		INDER	ONRESTRICTED	0.
			į	
42048 crestview circle NORTHVILLE MI 48168		INDEP	UNRESTRICTED	16,000.
See Line 3a statement		INDEF	UNRESTRICTED	10,000.
See Line 3a statement			]	
			1	18,500.
			1	10,300.
Total	<del> </del>	<del></del>		47,500.
b Approved for future payment	T	Γ -	T	
,,				
			]	
			[	
		1	1	
		ļ	ļ	
		1		
			1	
			]	
			]	
	1	1		

Enter gross amounts unless otherwise indicated	Unrelate	d business income	Exclude	d by section 512, 513, or 514	
	(a) Business code	(b) Amount	(c) Exclu-	(d) Amount	(e) Related or exempt function income (See instructions)
Program service revenue		 	code		(000 1/10(100(10113 )
a	]	<u> </u>	<u> </u>	<u> </u>	
b	<u> </u>		<u> </u>		
C			}		
d					
е					
f			T		
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments	522100	2,199.	14		
4 Dividends and interest from securities	522100	22,168.	14		
5 Net rental income or (loss) from real estate	332233 34 W W		5 (4) 1		
a Debt-financed property	<u> </u>	<u> </u>	*****	****	* * * * * * * * * * * * * * * * * * * *
b Not debt-financed property	ļ		<del>                                     </del>		
6 Net rental income or (loss) from personal property	<del></del>	<del></del>	<del> </del>	<del></del>	<del> </del>
	ļ	<del></del>	<del> </del>	<del></del>	<del></del>
7 Other investment income			<b></b>		
8 Gain or (loss) from sales of assets other than inventory	<b></b>		<del>                                     </del>		
9 Net income or (loss) from special events	<u> </u>		<b></b>		
<b>10</b> Gross profit or (loss) from sales of inventory					
11 Other revenue	N. N. W. A.		N N.		
a			l		
b					
C					
d					
e					
Subtotal Add columns (b), (d), and (e)	1	24,367.	M. K		<del></del>
13 <b>Total.</b> Add line 12, columns (b), (d), and (e)				13	24,367.
See worksheet in line 13 instructions to verify calculations					24,507.
Part XVI-B Relationship of Activities to the		ishment of Exemp	ot Purr	oses	
Line No. Explain below how each activity for which inc					
accomplishment of the foundation's exempt p	orne is report ourposes (other	er than by providing fund	ds for suc	ch purposes) (See instru	ictions)
<del></del>		<del></del>		<del></del>	<del></del>
<del></del>		<del></del>			
		<del></del>			

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

		<u>-</u>	<del></del>						T 20 0 1 20 30 30	
r	lescribe elating t	organization directl d in section 501(c) to political organiza	of the Code (oth	er than section 5	501(c)(3) organiza	tions) or in se	inization ection 527,			Yes No
		s from the reporting	•		. •				a Salada	aki (M.)
_	-	h							. 1 a (1)	X
(	2) Othe	er assets		· · · · · · · · · · · · · · · · · · ·						X
bС	Other tra	ansactions							. A 3	
(	1) Sale	es of assets to a no	ncharitable exem	pt organization.					. 1 b (1)	X
(	<b>2)</b> Purd	chases of assets fro	om a noncharitab	le exempt organ	ıızatıon				. 1 b (2)	X
(3	<ol> <li>Ren</li> </ol>	tal of facilities, equ	ipment, or other a	assets					. 1 b (3)	Х
(-	4) Rein	nbursement arrang	jements						. 1 b (4)	Х
(	5) Loar	ns or loan guarante	es						. 1 b (5)	X
(	6) Perf	ormance of service	s or membership	or fundraising s	olicitations		<i>.</i>		. 1 b (6)	Х
c s	Sharing	of facilities, equipm	nent, mailing lists	, other assets, o	r paid employees.				1 c	X
tl a	he good ny trans	swer to any of the a is, other assets, or saction or sharing a	services given by arrangement, sho	y the reporting for ow in column (d)	oundation If the fo the value of the g	undation reco	erved less that assets, or sen	an fair market value	e in 	
(a) Line	e no	(b) Amount involved	(c) Name	of noncharitable ex-	empt organization	( <b>d</b> ) De	scription of trans	fers, transactions, and	sharing arrang	gements
						<u> </u>			. <u></u> .	
							- <u>-</u>			
						<u> </u>				
	1_					<u> </u>				
	[.									
		<del></del>	1				······································			
		··				1	<del></del>			
		<del></del>	<del>-  </del>		<del></del>	<del>                                     </del>		<del></del>		
						<del> </del>				
			+			<del>                                     </del>		·		
			<del></del>		<del></del>	<del> </del>				
ď	escribe	undation directly or d in section 501(c) complete the follow	of the Code (oth	ed with, or relate er than section 5	d to, one or more 501(c)(3)) or in sec	tax-exempt of tion 527?	organizations		Yes	⊠No
	(a)	Name of organiza	tion	(b) Typ	e of organization		(c)	Description of rela	ationship	
								<del>_</del> _		
								·		
	Under po	enalties of perjury, I decla	are that I have examin	ed this return, includir	ng accompanying sched	ules and stateme	ents, and to the be	est of my knowledge and	belief, it is true,	
Sign	correct,	and complète Déclaration	n of preparer (other th	an taxpayer) is based	on all information of wh	non preparer has	any knowledge		May the IF	RS discuss
Here	1				05/18/17	<b>▶</b> ™₽₽	EASURER		this return preparer s	shown below
	Signat	ture of officer or trustee	<del></del>		Date	Title	ASUKEK		(see instru	
	l Jigina.	Print/Type preparer's n	ame	Prenarer	s signature		ate	<del></del>	[PTIN	Yes No
				Fiepalers	o organization o			Checkif		
Paid		Walter Sind				10	<u>5/18/17</u>	self-employed	P02041	070
Prepa		Firm's name	Greenleaf		Advisors			Firm's EIN		
Use C	nly	Firm's address	338 Gerard	d_Ave						
		1	Elkins Par	rk		PA 1902	7	Phone no (21	<u>) 407-1</u>	236
BAA								_	Form 990	)-PF (2016)

'Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

Recipient	If recipient is an individual,	Foun- dation	Purpose of grant or contribution	Person or Business
Name and address	show any	status		Checkbox
(home or business)	relationship to any foundation manager or substantial contributor	of re- cipient		Amount
a. David dumas the year				
a Paid dunng the year				Person or X
CLAUDIA LEWIS 826 PINEWOOD DRIVE			[	Person or X Business
ELKINS PARK PA 19027		INDEP	UNRESTRICTED	O.
FREINDS OF RAMALLAH FREINDS MEETING		INDEE	ONKESTRICIED_	Person or
1515 CHERRY ST				Business X
Philadelphia PA 19102		INDEP	UNRESTRICED	1,000.
EARTH QUAKER ACTION TEAM		111,551	011112011111000	Person or
4510 KINGSESSING AVE				Business X
Philadelphia PA 19143		INDEP	UNRESTRICTED	1,000.
UNITED WORLD COALITION FOR DEMOCRATIC WORLD GOVERNMENT				Person or
708 THIRD AVE SUITE 1715				Business X
New York NY 10017		INDEP	UNRESTRICTED	1,000.
WALTER SINGER				Person or
338 GERARD AVE				Business X
Elkins Park PA 19027		MEMBER	TRAVEL TO INDIA ON MISSION TRIP	1,000.
KAY LASANTE MISSION IN HAITI				Person or
1826 E LEHIGH AVE				Business X
Philadelphia PA 19125		INDEP	UNRESTRICTED	3,000.
CIVIDEP YOUTH PROGRAM BANGALORE				Person or
12, 1ST CROSS RD, VENKATARAMIAH LAYOUT				Business X
Elkins Park PA 19027		INDEP	UNRESTRICTED	6,000.
NATIVE PEOPLES EDUCATION SOUTH INDIA-SOBHA				Person or
12, 1ST CROSS RD, VENKATARAMIAH LAYOUT				Business X
Elkins Park PA 19027		INDEP	UNRESTRICTED	4,000.
THIRST PROJECT LOWER MORELAND HS				Person or
555 RED LION RD Huntingdon Valley PA 19006		INDEP	וואוסבפייסדכייבי	Business X 500.
MORLO FEDERALIST MOVEMENT INSTITUTE FOR GLOSAL POLICY GARY F SH	פחדותי חפינעסי	TNDEL	UNRESTRICTED	Person or
401 S DIXON ST	COLOR TOLOR			Business X
Carbondale IL 62901		INDEP	UNRESTRICTED	1,000.
<u> </u>		_ + 1, 0, 1, 1	0111110111101110	1,000.

Total

18,500.

Form 990-PF, Page 1, Part I Line 16a - Legal Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Semanoff, Ormsby and Torchia LLC	LEGA	1,129.			

` Form 990-PF, Page 1, Part I Line 16a - Legal Fees Continued

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

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ROBERT SMALL AND ASSOC	ACCOUNTING	750.			
WALTER SINGER CPA	ACCOUNTING	100.			

Total

850.

### Supporting Statement of:

Form 990-PF, p1/Line 17(a)

Description	Amount
FEE TO SEND MONEY TO INDIA	100.
UNLIM CHECK FEE - ED JONES	35.
Total	135.

### Supporting Statement of:

Form 990-PF, p2/Line 1(a)

Description	Amount
Cash	18,708.
Total	18,708.

### Supporting Statement of:

Form 990-PF, p2/Line 1(b)

	Description	Amount
CASH		6,679.
Total		6,679.