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## Form 990-PF

### Return of Private Foundation

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

OMB No 1545-0052

Open to Public Inspection

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.

For calendar year 2016 or tax year beginning and ending Employer identification number Name of foundation CNB FOUNDATION INC 27-2417365 Number and street (or P O box number if mail is not delivered to street address) Room/suite Telephone number (see instructions) 814-765-9621 1 SOUTH SECOND STREET, P.O. BOX 42 City or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here CLEARFIELD 16830 G Check all that apply Initial return Initial return of a former public charity Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the 85% test, check here and attach computation Address change Name change **H** Check type of organization X Section 501(c)(3) exempt private foundation If private foundation status was terminated under Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation section 507(b)(1)(A), check here Fair market value of all assets at J Accounting method X Cash Accrual If the foundation is in a 60-month termination under section 507(b)(1)(B), check here Other (specify) end of year (from Part II, col (c), 1,249,057 line 16) ▶ \$ (Part I, column (d) must be on cash basis ) (d) Disbursements Part I Analysis of Revenue and Expenses (The total of (a) Revenue and (b) Net investment (c) Adjusted net for chantable expenses per books amounts in columns (b), (c), and (d) may not necessarily equal income purposes income the amounts in column (a) (see instructions)) (cash basis only) 304,934 Contributions, gifts, grants, etc., received (attach schedule) 2 If the foundation is not required to attach Sch B 3 Interest on savings and temporary cash investments 27,761 27,761 27,761 Dividends and interest from securities Gross rents Net rental income or (loss) Operating and Administrative ExpensesSCANNED MAR 0.9 201. Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10a Gross sales less returns and allowances Less Cost of goods sold Gross profit or (loss) (attach schedule) Other income (attach schedule) 27,761 27,761 12 Total. Add lines 1 through 11 332,695 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits Legal fees (attach schedule) 750 750 Accounting fees (attach schedule) STMT 1 Other professional fees (attach schedule) c Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion Occupancy 21 Travel, conferences, and meetings Printing and publications 23 Other expenses (att sch) Total operating and administrative expenses. Add lines 13 through 23 750 25 200,950 200,950 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 201,700 201,700 27 Subtract line 26 from line 12 Excess of revenue over expenses and disbursements 130,995 27,761 Net investment income (if negative, enter -0-)

For Paperwork Reduction Act Notice, see instructions.

Adjusted net income (if negative, enter -0-)

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27,761

		Balance Sheets Attached schedules and amounts in the description column		Beginning of year	End o	f year
~~		should be for end-of-year amounts only (See instructions )		(a) Book Value	(b) Book Value	(c) Fair Market Value
l	1	Cash – non-interest-bearing		9,747	6,150	6,150
Į	2	Savings and temporary cash investments		22,862	7,519	7,519
	3	Accounts receivable ▶				
ŀ		Less allowance for doubtful accounts ▶				
1	4	Pledges receivable ▶				
		Less allowance for doubtful accounts ▶				
İ	5	Grants receivable	Ì			
ŀ	6	Receivables due from officers, directors, trustees, and other				
- {	_	disqualified persons (attach schedule) (see			ļ l	
		instructions)				
l	7	Other notes and loans receivable (att schedule)				
ĺ	'	•	<u>م</u>			
			)	<del></del>		<del></del>
Assets	8	Inventories for sale or use				<del></del>
SS	9	Prepaid expenses and deferred charges				<u>-</u>
٧	10a	Investments – U S and state government obligations (attach schedule)				
	b	Investments – corporate stock (attach schedule) SEE STMT 2		624,596	774,531	1,235,388
- 1	C	Investments – corporate bonds (attach schedule)				
	11	Investments – land, buildings, and equipment basis				
ı		Less accumulated depreciation (attach sch.)				
ŀ	12	Investments – mortgage loans				
ı	13	Investments – other (attach schedule)				
	14	Land, buildings, and equipment basis				
		Less accumulated depreciation (attach sch.)				_
١	15	Other assets (describe ▶	)			
ı	16	Total assets (to be completed by all filers – see the	•			
}		instructions Also, see page 1, item I)		657,205	788,200	1,249,057
П	17	Accounts payable and accrued expenses				
	18	Grants payable				
es	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
ap	21	Mortgages and other notes payable (attach schedule)			<del></del>	
$\Box$	22	Other liabilities (describe	١			
	23	Total liabilities (add lines 17 through 22)	,	0	0	
$\dashv$			X		<u> </u>	
S		and complete lines 24 through 26 and lines 30 and 31.	<u> </u>			
nces	24	Unrestricted		657,205	788,200	
ā	25	Temporarily restricted		057,205	700,200	
Ba	26	Permanently restricted		<del></del>		
Net Assets or Fund Bala	20	<u>_</u>	_			
괴		and complete lines 27 through 31.	J			
6	27				,	
13		Capital stock, trust principal, or current funds				
SS	28	Paid-in or capital surplus, or land, bldg., and equipment fund		<del></del>		
خ	29	Retained earnings, accumulated income, endowment, or other funds		557.005	300 000	
희	30	Total net assets or fund balances (see instructions)		657,205	788,200	
	31	Total liabilities and net assets/fund balances (see				
*		instructions)		657,205	788,200	
						<del></del>
1		net assets or fund balances at beginning of year – Part II, column (a), line 30 (	(mu	st agree with		
_		f-year figure reported on prior year's return)			1	657,205
		amount from Part I, line 27a			2	130,995
		ıncreases not included in line 2 (itemize) ▶			3	
		nes 1, 2, and 3			4	788,200
		ases not included in line 2 (itemize) ▶			5	
_6	Total	net assets or fund balances at end of year (line 4 minus line 5) – Part II, colum	<u>nn (</u>	b), line 30	6	788,200
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Part IV Capital Gains a	nd Losses for Tax on Investm	ent Income			
	ribe the kind(s) of property sold (e.g., real estate, arehouse, or common stock, 200 shs. MLC Co.)		(b) How acquired P – Purchase D – Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a N/A					
b					
_с_					
d					
_ e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	1	other basis nse of sale		in ar (loss) (f) minus (g)
_ a					
b c					
d		†· <del></del>			
e		<del> </del>	· ·	,	
	g gain in column (h) and owned by the f	foundation on 12/31/6		(I) Cours (Co	) /h) gois minis
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exces	ss of col (I) (j), if any	col (k), but no	ol (h) gain minus ot less than -0-) <b>or</b> from col (h))
а				<del> </del>	
b				<u> </u>	
c	<del></del>	<del>                                     </del>		<del> </del>	
d		<del>                                     </del>		<del> </del>	- <del></del>
е		<del> </del>		<del> </del>	
	If (loss), enter -U- if (ss), enter -U- if (ss), enter -U- if (ss) as defined in sections 1222(5) and (	n Part I, line 7		2	
Part I, line 8	, column (c) (see instructions) If (loss),	<u></u>		3	
Part V Qualification U	nder Section 4940(e) for Redu	ced Tax on Net	Investment Inc	ome	
(For optional use by domestic private	foundations subject to the section 494	0(a) tax on net invest	tment income)		
If section 4940(d)(2) applies, leave the	nis part blank				N/A
	tion 4942 tax on the distributable amou		base period?		Yes No
If "Yes," the foundation does not qua	lify under section 4940(e) Do not comp	olete this part	<u> </u>		
	each column for each year, see the inst	tructions before maki	ng any entries		
(a) Base period years Calendar year (or tax year beginning in	(b) Adjusted qualifying distribution	ns Net valu	(c) e of noncharitable-use asso		(d) istribution ratio ) divided by col (c))
2015					·
2014			- <del></del>		
2013			- <del></del>		
2012					
2011					
2 Total of line 1, column (d)				2	
3 Average distribution ratio for the	5-year base period - divide the total on	line 2 by 5, or by the	9	1 1	
number of years the foundation I	nas been in existence if less than 5 yea	rs		3	
4 Enter the net value of noncharita	ble-use assets for 2016 from Part X, lin	ne 5		4	
5 Multiply line 4 by line 3				5	
6 Enter 1% of net investment inco	me (1% of Part I, line 27b)			6	
7 Add lines 5 and 6				7	
8 Enter qualifying distributions from	n Part XII, line 4			8	
If line 8 is equal to or greater that Part VI instructions	in line 7, check the box in Part VI, line 1	b, and complete that	t part using a 1% tax	rate See the	

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

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10

STMT 3

complete Part XIV

names and addresses

Pa	irt VII-A Statements Regarding Activities (continued)					
					Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the				ļ	
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)			11	]	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified					
	person had advisory privileges? If "Yes," attach statement (see instructions)			12	Ì	Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption applical	tion2		13	X	
	Website address ► N/A	uon.		13 ]		
14	·	none no	814-7	65-	192	1
•	1 S SECOND ST	ione no	014 /	0.5	1 / 2	_
		ZIP+4 ▶	16830	1		
15	Located at ► CLEARFIELD PA  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – Check here	ZIP+4 P	10000			
		<b>~1</b> .	15		1	
16	and enter the amount of tax-exempt interest received or accrued during the year		15		V	
10	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority			46	Yes	No V
	over a bank, securities, or other financial account in a foreign country?			16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of					
D	the foreign country ►  Int VII-B Statements Regarding Activities for Which Form 4720 May Be Required			<u> </u>		
		<del></del> -			Yes	Na
1a	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.  During the year did the foundation (either directly or indirectly)				res	No
ıa		□ vaa	X No			
	<ul><li>(1) Engage in the sale or exchange, or leasing of property with a disqualified person?</li><li>(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a</li></ul>	Yes	NO NO			
	disqualified person?	Yes	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	163	Δ) NO			
	the benefit or use of a disqualified person)?	Yes	X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		Z) <b>(40</b>			
	foundation agreed to make a grant to or to employ the official for a period after					
	termination of government service, if terminating within 90 days )	Yes	X No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulati		23 140			
-	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	10113	N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here		<b>▶</b> [ ]	<u>"</u>		
С	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 2016?		N/A	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		11/ 11	l i		
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5))					
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and					
	6e, Part XIII) for tax year(s) beginning before 2016?	Yes	X No			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20					
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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 )		N/A	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					
	<b>▶</b> 20 , 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?	Yes	X No			
b	If "Yes," did it have excess business holdings in 2016 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) the lapse of					•
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the					1
	foundation had excess business holdings in 2016)		N/A	3b		<u></u>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes	5?		4a		X
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 20	016?		4b		X
			F	orm 99	0-PF	(2016)

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	Statements Regarding Activities for Which Form 4	720 May Be R	equired (conti	nued)	
5a	During the year did the foundation pay or incur any amount to				
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4	945(e))?	Y	es 🛚 No	
	(2) Influence the outcome of any specific public election (see section 4955), or to	carry on,	_		
	directly or indirectly, any voter registration drive?		Y	es 🛚 No	
	(3) Provide a grant to an individual for travel, study, or other similar purposes?		Y	es 🛚 No	
	(4) Provide a grant to an organization other than a charitable, etc., organization of	described in			
	section 4945(d)(4)(A)? (see instructions)		Y	es 🛚 No	
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or	educational			
	purposes, or for the prevention of cruelty to children or animals?		Y	es X No	
þ	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under	er the exceptions de	escribed in		
	Regulations section 53 4945 or in a current notice regarding disaster assistance	•		N/A	5b
	Organizations relying on a current notice regarding disaster assistance check he			▶ ∐ ▮	
С	If the answer is "Yes" to question 5a(4), does the foundation claim exemption fro	m the tax	/-		
	because it maintained expenditure responsibility for the grant?		N/A 🗌 Y	es 💹 No	
	If "Yes," attach the statement required by Regulations section 53 4945–5(d)				
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pa	y premiums	·	( <del></del>	
	on a personal benefit contract?			es 🏻 No	
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a per	sonal benefit contr	act?	ļ	6b X
	If "Yes" to 6b, file Form 8870		_	(F)	
7a	At any time during the tax year, was the foundation a party to a prohibited tax she		L	es X No	
b	If "Yes," did the foundation receive any proceeds or have any net income attribut			N/A	7b
	Information About Officers, Directors, Trustees, Fo	undation Mana	agers, Highly	Paid Employe	ees,
_	and Contractors	<del></del>	<del></del>		
	ist all officers, directors, trustees, foundation managers and their compens	ation (see instruc	tions).		Γ
	(AN)	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit	(e) Expense account,
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	plans and deferred compensation	other allowances
	E CMATEMENT A			compensation	<del> </del>
3E	E STATEMENT 4				
	<del></del>			····	
	<del></del>	<del> </del>			
2	Compensation of five highest-paid employees (other than those included o	n line 1 – see inst	tructions) If non-	e enter	
-	"NONE."	366 11131	addiona <sub>j</sub> . II nom	o, oo.	
				(d) Contributions to	
	(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit	(e) Expense account,
		devoted to position		plans and deferred compensation	other allowances
NO	NE			<del></del>	
			!		
Tota	number of other employees paid over \$50,000				0
				F	om <b>990-PF</b> (2016)

Total. Add lines 1 through 3

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

<b>///</b>	Minimum Investment Return (All domestic foundations must complete this part. Foreig see instructions)	n foundation	S,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	14,993
b	Average of monthly cash balances	1b	14,993 23,139
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	38,132
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	38,132
4	Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	572
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	37,560
6	Minimum investment return. Enter 5% of line 5	6	1,878
	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating and certain foreign organizations check here ►X and do not complete this part.)	foundations	
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2016 from Part VI, line 5		
b	Income tax for 2016 (This does not include the tax from Part VI )		
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
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	
	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	<u>201,700</u>
b	Program-related investments – total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	201,700
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	201,700
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the found	dation	

_P	art XIII Undistributed Income (see instructions	)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2016 from Part XI,	Corpus	Years prior to 2015	2015	2016
	line 7				
2	Undistributed income, if any, as of the end of 2016				
а	_				
b			<u></u>		
3	Excess distributions carryover, if any, to 2016				
a	From 2011				
b	From 2012				
С	From 2013				
d	From 2014				
е					
f	Total of lines 3a through e				
4	Qualifying distributions for 2016 from Part XII,			<u></u>	
•	line 4 ▶ \$ 201,700				
а	Applied to 2015, but not more than line 2a				
	Applied to undistributed income of prior years		<u> </u>		
	(Election required – see instructions)	<del></del>			
·	Treated as distributions out of corpus (Election				
d	required see instructions)				
	Applied to 2016 distributable amount	001	***************************************		
5	Remaining amount distributed out of corpus	201,700			
5	Excess distributions carryover applied to 2016				
	(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:				
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	201,700	<del></del>		
D	Prior years' undistributed income Subtract				
	line 4b from line 2b				
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				
d	Subtract line 6c from line 6b Taxable				
	amount – see instructions				
е	Undistributed income for 2015 Subtract line				
	4a from line 2a Taxable amount – see				
	Instructions				
t	Undistributed income for 2016 Subtract lines				
	4d and 5 from line 1. This amount must be				
_	distributed in 2017				
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)				
8	Excess distributions carryover from 2011 not				
_	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2017.				
_	Subtract lines 7 and 8 from line 6a				
	Analysis of line 9				
	Excess from 2012				
	Excess from 2013				
	Excess from 2014				
	Excess from 2015				
е	Excess from 2016				

P;	art XIV Private Operating Fou	ndations (see ins	structions and Par	t VII-A, question 9)		
1a						
	foundation, and the ruling is effective for 2			<b>▶</b>	04	/10/10
b	Check box to indicate whether the founda			bed in section $\widehat{X}$ 49	42(J)(3) or 4942(J	
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum	(a) 2016	<b>(b)</b> 2015	(c) 2014	(d) 2013	(e) Total
	investment return from Part X for					
	each year listed	1,878	1,990	1,524	1,740	7,132
b	85% of line 2a	1,596		1,295	1,479	6,062
С	Qualifying distributions from Part XII,					
	line 4 for each year listed	201,700	191,450	205,433	221,190	819,773
d	Amounts 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	201,700	191,450	205,433	221,190	819,773
3	Complete 3a, b, or c for the	201,700	191,430	200,400	221,130	010,110
3	alternative test relied upon					
а	"Assets" alternative test – enter					
a	(1) Value of all assets	1,249,057	723,392	607,854	482,585	3,062,888
	`'	1,243,037	123,392	007,034	402,303	3,002,000
	(2) Value of assets qualifying under	1 240 057	722 202	607 054	482,585	2 062 000
	section 4942(j)(3)(B)(i)	1,249,057	723,392	607,854	402,303	3,062,888
b	"Endowment" alternative test – enter 2/3				i	
	of minimum investment return shown in					
_	Part X, line 6 for each year listed					
С	"Support" alternative test – enter				İ	
	(1) Total support other than gross investment income (interest,					
	dividends, rents, payments on				i	
	securities loans (section				}	
	512(a)(5)), or royalties) N/A					
	(2) Support from general public	· · · · · · · · · · · · · · · · · · ·				
	and 5 or more exempt					
	organizations as provided in				į	
	section 4942(j)(3)(B)(iii) N/A					
	(3) Largest amount of support from					
	an exempt organization N/A					
_	(4) Gross investment income N/A		41.1		105.000	<del></del>
P	art XV Supplementary Inform			the foundation ha	ad \$5,000 or more	in assets at
	any time during the ye		tions.)			
1	Information Regarding Foundation Ma	-				
а	List any managers of the foundation who					
	before the close of any tax year (but only	if they have contribut	ed more than \$5,000)	(See section 507(d)(2)	)	
	N/A		<del></del>			
b	List any managers of the foundation who		•		portion of the	
	ownership of a partnership or other entity	) of which the foundal	tion has a 10% or grea	iter interest		
_	N/A					
2	Information Regarding Contribution, G					
	Check here ► X if the foundation only					
	unsolicited requests for funds If the found		ants, etc. (see instruct	tions) to individuals or o	organizations under	
	other conditions, complete items 2a, b, c,			<del></del>		
а	The name, address, and telephone numb	er or e-mail address	of the person to whom	applications should be	addressed	
	N/A					
b	The form in which applications should be	submitted and inform	nation and materials th	ey should include		
	N/A					<del></del>
С	Any submission deadlines.					
	N/A					
ď	Any restrictions or limitations on awards,	such as by geograph	ical areas, charitable f	elds, kinds of institutio	ns, or other	
	factors					
	N/A					000 PF

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of Amount contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year SEE STATEMENT 5 200,950 **▶** 3a 200,950 Total **b** Approved for future payment N/A Total ▶ 3b

	Analysis of Income-Producing Ac	tivities				
Enter gross a	mounts unless otherwise indicated	Unrelate	ed business income	Excluded	by section 512, 513, or 514	(e)
		(a)	(b)	(c)	(d)	Related or exempt
		Business code	Amount	Exclusion code	Amount	function income (See instructions)
-	service revenue	<del></del>		+ +		
		- <del> </del>		<del> </del>		<del></del>
	<del></del>	- <del> </del>		+		
°		-				
		·				
	<del></del>	-	· · · · · · · · · · · · · · · · · · ·	<del>  </del>		<del></del>
f		- \	<u></u>	<del>}</del> }		
	and contracts from government agencies			+		
	hip dues and assessments			+		
	n savings and temporary cash investments			1		27 761
	s and interest from securities					27,761
	I income or (loss) from real estate					
	financed property			+		
	lebt-financed property			+		<del></del> -
	l income or (loss) from personal property		+			
	estment income oss) from sales of assets other than inventory		<del>                                     </del>			
•	oss) from sales of assets other than inventory ne or (loss) from special events		<del>                                     </del>	+ +		<u></u> -
	ofit or (loss) from sales of inventory	<del></del>	<del> </del>	+		<del></del>
	the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s			+		
	renue a					
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e		-		<b></b>		
	Add columns (b), (d), and (e)	_			0	27,761
	d line 12, columns (b), (d), and (e)		š`	· possessesses	13	27,761
	eet in line 13 instructions to verify calculations )					277701
Part XVI	·········	Accomplish	nent of Exempt P	urpose	s	<del></del>
Line No.	Explain below how each activity for which incom					<u> </u>
▼	accomplishment of the foundation's exempt pur	•				
4	USED BY FOUNDATION TO M					
	LOCAL ORGANIZATIONS LOC	ATED IN	CENTRAL & N	ORTH	CENTRAL PA	
					<u> </u>	
		<u></u>		_,		
		. <u>.</u>				
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Part X	(A)II	Information Exempt Org	_	_	insfers To an	d Transa	ctions	and Relati	onships Wit	h Nonch	aritable		
1 Did	the orga				e in any of the fol	lowing with a	any othe	er organization	described	<del></del>		Yes	No
	_				on 501(c)(3) organ			-					
	anızatıor		o (=:	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	( . ) ( . )		000	on 021, 10tating	, to point on				
			foundati	ion to a no	ncharitable exem	nt organizati	ion of:						ĺ
	Cash	om me reporting	loundati	1011 (0 & 110	nonantable exem	pt organizat	1011 01.				1a(1)		x
	Other a	ncote									<del></del>		X
	ner trans										1a(2)		
		-		la							45.43	·	v
		f assets to a nor		-	_						1b(1)		X
					exempt organizati	ion					1b(2)		X
		of facilities, equip		r other ass	ets						1b(3)		X
		irsement arrange									1b(4)		X
		or loan guarantee									1b(5)	<u> </u>	X
				•	fundraising solici						1b(6)	<u> </u>	<u>X</u>
	_			•	ther assets, or pa						1c	L	<u>X</u> _
		•			plete the following	-		• •	•				
				_	ven by the reporti	_							
					nt, show in column		ue of the						
(a) Lin	ne no	(b) Amount invo	Ived	(c) Name	of noncharitable exem	npt organization		(d) Descr	iption of transfers, tra	insactions, and	sharing arrangeme	ents	
N/A													
		<del> </del>											
		l											
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										· · · · · · · · · · · · · · · · · · ·			
2a Is ti	he found	lation directly or	ındırectly	affiliated	with, or related to	one or mo	re tax-ex	xempt organiza	itions				
			-		than section 501(						Пү	es X	No
		nplete the follow		•		/(-//							
		a) Name of organizati			(b) Type of	organization	T		(c) Descrip	tion of relations	hip		
N/A	<u> </u>								<del></del>		<u></u>		
											<del></del>		
		·											
	<del></del> -												
· T	Under pe	nalties of perjury, I de	eclare that I	have examin	ned this return, includir	ng accompanyii	ng schedu	les and statements	a, and to the best of	my knowledge	and belief, it is tru	е,	
Ì					han taxpayer) is based						he IRS discuss this i		$\neg$
Sign											ne preparer shown b		
Here		2		-						(see n	nstructions)?	Yes	No
iere	<b>N</b>		っこ	-	Tresser	1	1.1	, , ,		CHDED			
}	Sign	ature of officer or trus			1 resona		2-21	-11)		SURER	<del></del>		
	<del>,                                    </del>		Z			<del></del>			Title	<del></del>	Υ	1	
	Print/Ty	pe preparer's name				Preparer's	signature				Date		ı X
Paid		03	- <del>-</del> -									1	nployed
reparer		CATALANO,		170				ANO, CPA			02/16/17		<del></del>
Jse Only	Firm's r		ATALA		CASE, CATA	LANO 8	<u>CL</u>	ARK-RADZ	ZIETA	PTIN	P0015		
<b>y</b>	Firm's a	address ► 9		RONT S					ļ	Firm's EIN			
	<u> </u>	CI	LEARE	TIELD,	PA 168	30-245	55			Phone no	814-76	55 <u>-</u> 1	<u> 624</u>

### 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

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

2016

ame of the organization						
_CNB FOUNDATIO	27-2417365					
Organization type (check o	ne)					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)( ) (er	nter number) organization				
	4947(a)(1) nonexer	mpt charitable trust not treated as a private foundation	1			
	527 political organiz	zation				
Form 990-PF	X 501(c)(3) exempt p	private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable p	private foundation				
Check if your organization is <b>Note</b> : Only a section 501(c) instructions	-	ule or a <b>Special Rule.</b> I can check boxes for both the General Rule and a Sp	ecial Rule See			
General Rule						
<del>-</del>	property) from any one co	990-PF that received, during the year, contributions to ontributor. Complete Parts I and II. See instructions for				
Special Rules						
regulations under se 13, 16a, or 16b, and	ctions 509(a)(1) and 170(b) that received from any one	o(3) filing Form 990 or 990-EZ that met the 33 <sup>1</sup> / <sub>3</sub> % su <sub>p</sub> o(1)(A)(vi), that checked Schedule A (Form 990 or 990 e contributor, during the year, total contributions of the D, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Comple	O-EZ), Part II, line greater of <b>(1)</b>			
contributor, during the	e year, total contributions of	)(7), (8), or (10) filing Form 990 or 990-EZ that receive of more than \$1,000 exclusively for religious, charitab vention of cruelty to children or animals. Complete Pai	le, scientific,			
contributor, during the contributions totaled during the year for a	e year, contributions <i>exclu</i> ; more than \$1,000 If this b n <i>exclusively</i> religious, cha s to this organization becat	p(7), (8), or (10) filing Form 990 or 990-EZ that receive usively for religious, charitable, etc., purposes, but no spox is checked, enter here the total contributions that varitable, etc., purpose Don't complete any of the parts buse it received nonexclusively religious, charitable, etc.	such were received unless the			
990-EZ, or 990-PF), but it m	ust answer "No" on Part IV	eral Rule and/or the Special Rules doesn't file Schedu /, line 2, of its Form 990, or check the box on line H of et the filing requirements of Schedule B (Form 990, 99	ts Form 990-EZ or on its			

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Name of organization

Employer identification number

<u>CNB</u>	FOUNDATION INC			-2417365
Part I	Contributors (See instruction	ns) Use duplicate copies o	f Part I if additional space is ne	eded.
(a) No.	(b) Name, address, a	nd ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CNB BANK 1 SOUTH SECOND ST CLEARFIELD	PA 16830	\$ 155,000	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, a	and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	CNB FINANCIAL CORPO 1 SOUTH SECOND ST CLEARFIELD		\$ 149,934	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, a	and ZIP + 4	(c) Total contributions	(d) Type of contribution
			\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, a	and ZIP + 4	(c) Total contributions	(d) Type of contribution
			\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, a	and ZIP + 4	(c) Total contributions	(d) Type of contribution
			\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, a	and ZIP + 4	(c) Total contributions	(d) Type of contribution
			\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Page 3

Name of organization
CNB FOUNDATION INC

Employer identification number 27-2417365

Part II	Noncash Property (See instructions). Use duplic		ice is needed.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
2	7887 SHS CNB FINANCIAL CORP		
		\$ 149,934	12/01/16
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
-		\$	

27-2417365	Federal 8	Federal Statements		•
	Statement 1 - Form 990-PF, P.	990-PF, Part I, Line 16b - Accounting Fees	counting Fees	,
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
ACCOUNTING FEES	\$ 750	\$ \$	w w	\$ 750
	Statement 2 - Form 990-PF, Part II, L	ine 10b - Corpora	Part II, Line 10b - Corporate Stock Investments	
Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
CNB	CORPO \$ 624,	774,		1,235,
TOTAL	\$ 624,596	\$ //4,531	.31 	\$ 1,235,388
	Statement 3 - Form 990-PF, Part VII-A, Line 10		- Substantial Contributors	
Name				
	Address		City, State, Zip	, Zip
	1 SOUTH SECOND ST	CLEARFIELD	LD PA 16830-2048	
CNB FINANCIAL CORF	1 SOUTH SECOND ST	CLEARFIELD	LD PA 16830-2048	
State	Statement 4 - Form 990-PF, Part VIII, Line 1		- List of Officers, Directors, Trustees,	Etc.
Name and Address	Title	Average Hours Con	Compensation Ben	Benefits Expenses
BRIAN W WINGARD 106 MICHLIN AVE CURWENSVILLE PA 16833	TREASURER	1.00	0	
MARY ANN CONAWAY 418 DEER HAVEN ROAD FRENCHVILLE PA 16836	CHAIRPERSON	1.00	0	0 0
KIMBERLY A WOMER	SECRETARY	1.00	0	0 0
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Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
415 MAIN ST WOODLAND PA 16881					
JOSEPH B BOWER, JR 68 COUNTRY CLUB CIRCLE CLEARFIELD PA 16830	DIRECTOR	1.00	0	0	0
RICHARD L GRESLICK, JR 755 PIFER ROAD CLEARFIELD PA 16830	DIRECTOR	1.00	0	0	0
MARK D BREAKEY 1517 WARREN DRIVE CLEARFIELD PA 16830	DIRECTOR	1.00	0	0	0
JESSICA SHAFFNER 9400 GILLINGHAM ROAD LE CONTES MILLS PA 16850	ASSIST SECRE	1.00	0	0	0

# Statement 5 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

Name	Address	sse		
Address	Relationship	Status	Purpose	Amount
CLEARFIELD AREA UNITED WAY	18 N SECOND ST	L		
CLEARFIELD PA 16830	NONE	PAID	ANNUAL CAMPAIGN CONTRIBUTION	21,000
BOY SCOUTS OF AMERICA	209 FIRST ST			
DUBOIS PA 15801	NONE	PAID	SUPPORT SCOUTING IN AREA	4,600
OLEAN-BRADFORD AREA YMCA	59 BOYLSTON ST	T		
BRADFORD PA 16701	NONE	PAID	STRONG KIDS CAMPAIGN	1,200
YMCA OF CENTRE COUNTY	P.O. BOX 426			
PHILIPSBURG PA 16866	NONE	PAID	ANNUAL CAMPAIGN	3,250
INDIANA REGIONAL MEDICAL CENTER	835 HOSPITAL RD	RD		
INDIANA PA 15701	NONE	PAID	SUPPORT CAPITAL CAMPAIGN	10,000

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Statements
Federal

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Name	Address	SSe		
Address	Relationship	Status	Purpose	Amount
CLEARFIELD COUNTY HISTORICAL SOC CLEARFIELD PA 16830	SOCIET104 E PINE ST	PATD	PRESERVE COUNTY'S HISTORY	2.500
CARE FOR CHILDREN	P.O. BOX 616			
BRADFORD PA 16701	NONE BOX	PAID	SUPPORT PEDI HEALTH/THERAPY	15,000
BRADFORD CREALIVE/FERFORMING ARI RRADFORD DA 16701	IS F.U. BUX 133	DATD	STIPPORT THE ARMS	7
UNITED WAY OF LAURAL HIGHLANDS	422 MAIN ST	7141		1
JOHNSTOWN PA 15901		PAID	ANNUAL CAMPAIGN	850
AMERICAN CANCER SOCIETY	26 S SECOND S	ST	UDGRESER , SHNETHKE GENKE HOOGEIIS	7
NORTHERN CAMBRIA AYSO	820 3RD AVE	FAID		
HASTINGS PA 16646		PAID	SUPPORT YOUTH SOCCER	1,000
RIDGWAY YMCA	34 BROAD ST			
RIDGWAY PA 15853	NONE	PAID	CAPITAL CAMPAIGN	8,000
DUBOIS EDUCATIONAL FOUNDATION	COLLEGE PLACE			
		PAID	SUPPORT HIGHER EDUCATION	1,000
BEACON OF LIGHT HEALTH SYSTEMS	800 MAIN ST			
		PAID	EXPANSION PROJECT OF FACILITY	25,000
DUBOIS AREA UNITED WAY	223 S JARED ST	₽		
DUBOIS PA 15801	NONE	PAID	ANNUAL CAMPAIGN	1,800
UNITED WAY BRADFORD AREA	161 MAIN ST			
BRADFORD PA 16701	NONE	PAID	ANNUAL CAMPAIGN	4,000
DUBOIS AREA YMCA	25 PARKWAY DRIVE	IVE		
DUBOIS PA 15801		PAID	SUPPORT ANNUAL CAMPAIGN /STRONG KIDS	11,000
CLEARFIELD REVITALIZATION CORP	P.O. BOX 75			
CLEARFIELD PA 16830		PAID	SUPPORT RESTORATION PROJECTS	000'6
PENN HIGHLANDS DUBOIS	P.O. BOX 447			•
DUBOIS PA 15801		PAID	SUPPORT AREA HOSPITAL	1,500
	P.O. BOX 510			
CLEARFIELD PA 16830			SUPPORT HIGHER EDUCATION	12,500
ELK COUNTY COMMUNITY FOUN	32 S ST MARYS			
ST MARYS PA 15857		PAID	ANNUAL CAMPAIGN SUPPORT	200
CLEARFIELD EMS	713 W FRONT ST			, ,
CLEARFIELD PA 16830	NONE OF	PAID	CHEST COMPRESSION SYSTEM	06//9
Cheant lead SOCCER ASSOC, INC		UT AT	CAPTHAL CAMPATCH YOUTH SOCCER	10.000
		7		) )

ributions Paid During the	
ne 3a - Grants and Con	r (continued)
- Form 990-PF, Part XV, Lii	No
Statement 5	

	Amount	3,000		1,000	,	2,000	7	7,000 T	-	T, 000	1	2,500	6	2,000	6	8,000	( ( )	1,500	,	7,000	6	T,000	1	2,500	7000	000,01	200,950	
	Purpose	NINITAT STIDDOPT		ASSIST ABUSED/NEGLECTED CHILDREN		PROMOTE BUSINESS GROWTH		CAMP SPONSOR FOR CHILDREN		SUPPORT LITTLE LEAGUE		SPONSOR YOUTH ALL STAR GAME		PRESERVE HISTORY OF OIL WELLS IN PA		FIGHT CHILDREN'S CANCERS		SUPPORT BOAT DOCK PROJECT		SUPPORT SOCIAL HALL PROJECT		SUPPORT PAVILION PROJECT		SUPPORT HIGHER EDUCATION	( ( ( (	ATHLETIC FIELD SUPPORT		
Address	Relationship Status	60 N. BEN FRANKLIN RD	O W. MAIN S	NONE	3900 INDUSTRIAL DRIVE	NONE PAID	5 LINK ROAD		o. Box 55		1228 MAIN ST	NONE	P.O. BOX 163		P.O. BOX 681		P.O. BOX 181		P.O. BOX 33		5 FAIRVIEW B		200 N 3RD ST, 8TH FLOOR	NONE	34 GREEN ACE	NONE		
Name	Address	YMCA OF INDIANA COUNTY	CASA OF MCKEAN COUNTY	SMETHPORT PA 16749	ABCD CORPORATION	ALTOONA PA 16602	CENTRAL INTERMEDIATE UNIT #10	WEST DECATUR PA 16878	RIDGWAY AREA LITTLE LEAGUE	RIDGWAY PA 15853	BROCKWAY GRIDIRON ASSOC	BROCKWAY PA 15824	PENN BRAD OIL MUSEUM	BRADFORD PA 16701	EMILY WHITEHEAD FOUNDATION	PHILIPSBURG PA 16866	FRIENDS OF CURWENSVILLE LAKE	CURWENSVILLE PA 16833	VFW POST 2076	PUNXSUTAWNEY PA 15767	PLEASANT HILL COMMUNITY CENTER	OSCEOLA MILLS PA 16666	FDN FOR ENHANCING COMMUNITIES	HARRISBURG PA 17101	MOSHANNON VALLEY SCHOOL DIST	HOUTZDALE PA 16651	TOTAL	