# **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. ► Go to www.irs.gov/Form990PF for instructions and the latest information.

Ford	alen	dar year 2017 or tax year beginning		, and ending		
		foundation			A Employer identification	number
		derick H. Bedford Jr. 8				
		ford Charitable Foundat			13-3544702	
		nd street (or P O box number if mail is not delivered to street	t address)	Room/sulte	B Telephone number	
		l Kesslersville Road			610-559-33	00
-		wn, state or province, country, and ZIP or foreign	postal code		C if exemption application is pe	ending, check here
_	_	con, PA 18040	<del></del>	<del></del>	<b>-</b>	. —
G C	heck	all that apply: initial return		ormer public charity	D 1. Foreign organizations	, check here
		Final return	Amended return		Foreign organizations me check here and attach co	eting the 85% test,
<del></del>		Address change	Name change		<del>-</del> 1	
HU	-	· · · · · · · · · · · · · · · · · · ·	xempt private foundation	ne4	E If private foundation state	
<u> </u>		ction 4947(a)(1) nonexempt charitable trust rket value of all assets at end of year J Accoun	Other taxable private foundating method: Cash	X Accruai	under section 507(b)(1)	
		· · · · · · · · · · · · · · · · · · ·	Other (specify)	LAL Accidar	F If the foundation is in a 6	_
(II		11,897,248. (Part I, colu	mn (d) must be on cash basi	s.)	under section 507(b)(1)	(b), check here
	rt I	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)	expenses per books	income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	1,000,000.	<del></del>		
		Check I if the foundation is not required to attach Sch B		<del></del>	1	<del></del>
	3	Interest on savings and temporary cash investments				<del></del>
	4	Dividends and interest from securities	218,833.	218,833	. 218,833.	
	5a	Gross rents			1	
	b	Net rental income or (loss)				
0	6a	Net gain or (loss) from sale of assets not on line 10				
Revenue	b	Gross sales price for all assets on line 6a				
9	7	Capital gain net income (from Part IV, line 2)		0	•	
Œ	8	Net short-term capital gain		: 		
	9	Income modifications				
	10a	and all accommands				
	₽ P	Less: Cost of goods sold	<u> </u>		<del> </del>	
		-diago-brournetingologi	ļ	<u> </u>	<del> </del>	<u> </u>
018		Other income	1,218,833.	110 022	210 022	<u> </u>
		Atotal. Addines 1 through 11	1,218,833.	218,833		
1		Compensation of officers, directors, trustees, etc.	ļ		• 0 •	0.
i		Other employee salaries and wages	<u> </u>		<del></del>	<del></del>
8	40.	Pension plans, employee benefits	<del></del>			<del></del>
38	108	Legal fees Accounting fees Stmt 1	62.	0	. 0.	62.
<del>Š</del>	0	Accounting fees Stmt 1 Other professional fees Stmt 2	663.	0		663.
Ш́ Ф	17				<del></del>	003.
Ę	10	Interest Stmt 3	4,377.	0	. 0.	0.
ظہ	18 19	Depreciation and depletion	=,3//-	<u> </u>	-	<u> </u>
<b>E</b>	20					
~€	21	Occupancy	<del></del>		<del></del>	
0.3	22	Printing and publications	<del></del>	<del></del>	<del> </del>	<del></del>
€ <u>/</u> #	23	Other european	<del></del>	<del></del>	<del></del>	<del></del>
⋽	24	Total operating and administrative			<del></del>	<del></del>
	-7	expenses. Add lines 13 through 23	5,102.	0	. 0.	725.
္ပ္ဟာဗီ	25	Contributions, gifts, grants paid	673,460.		<del> </del>	725. 673,460.
Z	26	Total expenses and disbursements.				0.07.200
Z	٦	Add lines 24 and 25	678,562.	0	. 0.	674,185.
SCANNED JUL 3.3. 2018 Strative Expense	27	Subtract line 26 from line 12:				
$\widetilde{\mathbf{v}}$	a	Excess of revenue over expenses and disbursements	540,271.		1	
		Net investment income (if negative, enter -0-)		218,833	•	
	1	Adjusted net income (if negative, enter -0-)			218,833.	

723501 01-03-18 LHA For Paperwork Reduction Act Notice, see Instructions.

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3	_	3	5	4	4	7	0	2	Ρ
24	١.	<b>4</b> .		-				_	

		Balance Sheets Attached schedules and amounts in the description	Definiting of Acat	Elia vi	yeai
<u> </u>	art	Balance Silects column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
$\neg$	1	Cash - non-interest-bearing	257,950.	329,603.	329,603.
ļ		Savings and temporary cash investments	6,241,566.	6,710,399.	11,567,645.
		Accounts receivable ▶			
		Less; allowance for doubtful accounts ▶		1	
	4	Pledges receivable ▶			
	•	Less: allowance for doubtful accounts ▶			
	5	Grants receivable		<del></del>	
	_	Receivables due from officers, directors, trustees, and other			
		disqualified persons .			
	,	Other notes and loans receivable			<del> </del>
	′	Less: allowance for doubtful accounts			,
		Inventories for sale or use	<del></del>		<del></del>
Assets		•			
Ass		Prepaid expenses and deferred charges			
'		Investments - U.S. and state government obligations			
		Investments - corporate stock			
		Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis		l	
		Less. accumulated depreciation			
		Investments - mortgage loans			<del></del>
	1	Investments - other			<del> </del>
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation			
		Other assets (describe			
	16	Total assets (to be completed by all filers - see the			
_		instructions. Also, see page 1, item I)	6,499,516.	7,040,002.	11,897,248.
	17	Accounts payable and accrued expenses	512.	727.	
	18	Grants payable			
S	19	Deferred revenue [			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
api	21	Mortgages and other notes payable			•
	22	Other liabilities (describe )			
	23	Total liabilities (add lines 17 through 22)	512.	727.	
_		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26, and lines 30 and 31.			
Ses	24	Unrestricted		Į	
	25	Temporarily restricted			
gal		Permanently restricted	<del></del>		
or Fund Balan		Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31.		1	
5	27	Capital stock, trust principal, or current funds	6,499,004.	7,039,275.	
Net Assets		Paid-in or capital surplus, or land, bidg., and equipment fund	0,433,004.	7,035,275.	
ŞŞ		Retained earnings, accumulated income, endowment, or other funds	0.	0.	
at A	l		6,499,004.	7,039,275.	
ž	30	Total net assets or fund balances	0,233,004.	1,033,4131	
		Total Habilities and not accodefficed befores	6,499,516.	7,040,002.	
	31	Total liabilities and net assets/fund balances		7,040,002	<del></del>
P	art	III Analysis of Changes in Net Assets or Fund Ba	alances		
=		<del></del>	20	<del></del>	
1		I net assets or fund balances at beginning of year - Part II, column (a), line		j . j	6 400 004
_	•		· ··· · · · · · · · · · · · · · · · ·	<u>  1  </u>	6,499,004.
		r amount from Part I, line 27a	· ···· ·· · · · · · · · · · · · · · ·	2	540,271.
-		er increases not included in line 2 (itemize)	<del></del>	3	0.
		lines 1, 2, and 3	·		7,039,275.
		eases not included in line 2 (itemize)		5	0.
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	<u></u> 6	7,039,275.

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13-3544702

Bedford Charitable Foundation

(a) List and describe	the kind(s)	ses for Tax on In of property sold (for exam common stock, 200 shs.	ple, real esta		(Б) Н Р - D -	ow acquired Purchase Donation		ite acquired ., day, yr.)	(d) Date sold (mo., day, yr.)
1a `					†				
	NE	<del></del>					1	-	
С									
d									
е									
(e) Gross sales price		preciation allowed or allowable)		st or other basis expense of sale				) Gain or (loss plus (f) minus	
<u>a</u> b				<u>.                                    </u>					
c d					_				
e			<del></del>						
Complete only for assets shown	ng gain in co	lumn (h) and owned by t	he foundation	on 12/31/69.			(I) Gains	(Col. (h) gair	ı mınus
(I) FMV as of 12/31/69		Adjusted basis s of 12/31/69		cess of col. (I) col. (J), if any		C	ol. (k), b	ut not less tha es (from col.	ın -0-) <b>or</b>
a									
b					$\Box$				
<u>C</u>									
<u>d</u>				···				<del>-</del>	
<u>e</u>					<del>_</del>				
2 Capital gain net income or (net c	apıtal loss)	$\begin{cases} \text{If gain, also enter} \\ \text{If (loss), enter -0-} \end{cases}$	in Part I, line in Part I, line	7 7	}	2			
3 Net short-term capital gain or (lo If gain, also enter in Part I, line 8.	, column (c).		d (6):		3				
If (loss), enter -0- in Part I, line 8  Part V   Qualification U	lador Co	ction 4940(e) for	Doduces	Yawaa Na	<u> </u>	3			
If section 4940(d)(2) applies, leave the section 4940(d)(2) applies, leave to foundation doesn't qualing the section of the se	ction 4942 ta fy under sec	x on the distributable amition 4940(e). Do not com	plete this par	t					Yes X No
(a)		(b)			(c)				(d) bution ratio
Base periód years Calendar year (or tax year beginn	ing in)	Adjusted qualifying dist	ributions	Net value of ne		table-use asse	ts	Distri (col. (b) di	bution ratio vided by col. (c))
2016		57	3,080.		9,	376,67	4.	<del>``-</del> -	.06111
2015			3,357.		8,	446,77	1.		.06432
2014			1,294.			967,16			.06041
2013			1,658.			644,42			.05292
2012		37	9,671.		5,	482,29	2.	<del></del>	.06925
2 Total of line 1, column (d)							2		.30803
3 Average distribution ratio for the the foundation has been in existe	-	•	-	•	-		3		.06160
4 Enter the net value of noncharita	ble-use asse	ts for 2017 from Part X, I	ine 5				. 4	. 1	1,133,544
5 Multiply line 4 by line 3							5		685,904
6 Enter 1% of net investment inco	me (1% of P	art I, line 27b)					8		2,188
7 Add lines 5 and 6									688,092
8 Enter qualifying distributions fro									674,185
If line 8 is equal to or greater tha									
See the Part VI instructions.		·		·					

Frederick H. Bedioid Or. & Mo Form 990-PF (2017) Bedford Charitable Foundation		<b>.</b>	13-354	4702	)	Page 4
Part VI   Excise Tax Based on Investment Income (Section 49)		o), 4940(e), or 4				
1a Exempt operating foundations described in section 4940(d)(2), check here		***				
Date of ruling or determination letter: (attach copy of letter if r		1				
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here		, ,	1		4,3	377.
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).				
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only;			2			0.
3 Add lines 1 and 2	, , ,	••• ••• • •	3		4.3	377.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only	others, enter -0-1		4	-		0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			5		4,3	377.
6 Credits/Payments:	•	•				,
a 2017 estimated tax payments and 2016 overpayment credited to 2017	6a	3,650.				
<b>b</b> Exempt foreign organizations - tax withheld at source	6b	0.	1			
c Tax paid with application for extension of time to file (Form 8868)	6c	0.	1			
d Backup withholding erroneously withheld	6d	0.	1			
7 Total credits and payments. Add lines 6a through 6d	<del></del>		7		3.6	50.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is a	ttached		8		- , -	0.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			9		7	127.
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 2018 estimated tax		Refunded	11			
Part VII-A Statements Regarding Activities			<u> </u>			
1a During the tax year, did the foundation attempt to influence any national, state, or local le	gislation or did it p	articipate or intervene	ın	T	Yes	No
any political campaign?				18		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political pur	poses? See the ins	tructions for the defin	ition	1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copie	s of any materials	published or				
distributed by the foundation in connection with the activities.						
c Did the foundation file Form 1120-POL for this year?				1c		x
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during	the year:					
(1) On the foundation. ▶ \$ (2) On foundation manage	ers. 🕨 💲	0.				ŀ
e Enter the reimbursement (if any) paid by the foundation during the year for political expe	nditure tax impose	d on foundation	•			'
managers. ► \$ 0.						l -'
2 Has the foundation engaged in any activities that have not previously been reported to the	e IRS?			2		X
If "Yes," attach a detailed description of the activities.						
3 Has the foundation made any changes, not previously reported to the IRS, in its governin	g instrument, artic	les of incorporation, o	r		ļ	
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		•	. <b>.</b> .	3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the y	rear?			4a		X
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?			N/A	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year	ar?			5		X
If "Yes," attach the statement required by General Instruction T.						
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied	l either:					
<ul> <li>By language in the governing instrument, or</li> </ul>						
<ul> <li>By state legislation that effectively amends the governing instrument so that no mandal</li> </ul>	tory directions that	conflict with the state	law			
remain in the governing instrument?				8	Х	<u></u>
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," cor	mplete Part II, col.	(c), and Part XV		7	X	
8a Enter the states to which the foundation reports or with which it is registered. See instruc	tions. 🕨					
DE	<del> </del>					
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)				İ
of each state as required by General Instruction G? If "No," attach explanation				8b_	X	<u> </u>
9 Is the foundation claiming status as a private operating foundation within the meaning of		or 4942(j)(5) for cale	ndar			/
year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," or	omplete Part XIV			19		ΙX

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

Pa	art 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 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		X.
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ▶ John F. Malloy Telephone no. ▶ 610-5	<u>59-3</u>	<u> 300</u>	
	Located at ▶P.O. Box 31, Easton, PA ZIP+4 ▶1	<u>8044</u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			·Ш
	and enter the amount of tax-exempt interest received or accrued during the year .		/A_	
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	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 the			
ГБ:	foreign country	4		
P	art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required	<del></del>	V	
4.	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		res	No
18	a During the year, did the foundation (either directly or indirectly):  (1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes X No	1 1		1
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?  (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	1 1		
	a disqualified person?	1 1		
	(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?	1 1		
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?	1 1	ĺ	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after	1 1		
	termination of government service, if terminating within 90 days.)	] ]		'
t	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			
C	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	1 1	İ	
	before the first day of the tax year beginning in 2017?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			
ε	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2017?			
	If "Yes," list the years			
t	have there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect		1	
	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	26		<del></del>
	c if the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.	}		
9.	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	1 1	1	
31				
,	b If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after	1 1		
•	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	1 1		
	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,	ll		
	Form 4720, to determine if the foundation had excess business holdings in 2017.)	3ь	1	
4:	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	48		X
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that		一	
	had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		Х
		orm <b>99</b> 0	LPF	$\overline{}$

Part VII-B   Statements Regarding Activities for Which F	orm 4720 May Be F	Required (continu	ued)		
5a During the year, did the foundation pay or incur any amount to:				Ye	s No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Ye	s 🛣 No 「		
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire	ectly,			1
any voter registration drive?		🔲 Ye	s 🛣 No		
any voter registration drive?  (3) Provide a grant to an individual for travel, study, or other similar purposes.	?	🗀 Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization					
4945(d)(4)(A)? See instructions		Ye	s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,		or			
			s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		n Regulations			ļ
section 53.4945 or in a current notice regarding disaster assistance? See instru	•	_	N/A	5b	1
Organizations relying on a current notice regarding disaster assistance, check h		• •• •	▶□		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	•	ned			
expenditure responsibility for the grant?			s 🖂 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 p	nav premiums on				
a personal benefit contract?	= -		s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p			"	6b	x
If "Yes" to 6b, file Form 8870.		• ••	•	-	+
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?		s X No		
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b	+-
Part VIII Information About Officers, Directors, Trusto		nagere Highly		70	
Paid Employees, and Contractors	ses, i dulluation Ma	mayers, mym	•		
1 List all officers, directors, trustees, and foundation managers and t	heir compensation.				
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to	(e) F	xpense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred	accou	xpense int, other wances
Statement 4	to position	Citer-0-7	compensation	4.10	Tailous .
5 0 0 0 0 1 0 1 0 1					,
	0.00	0.	0.		0.
	0.00	0.		$\vdash \!$	<u> </u>
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				<del>                                     </del>	
				ł	
				ĺ	
****	<del></del>	<u> </u>		<del> </del>	
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none	ontor "NONE "			
2 Compensation of two highest paid employees (outer than those inc	(b) Title, and average	enter NONE.	(d) Contributions to	(a) F	ynense
(a) Name and address of each employee paid more than \$50,000	hours der week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	accou	xpense nt, other wances
NONE	devoted to position		compensation	allo	wances
NONE				ļ	
				<b></b>	
				<b></b>	<del></del>
				<u> </u>	
					·
				<u> </u>	
Total number of other employees paid over \$50,000		· · · · · · · · · · · · · · · · · · ·	▶		0
			Form	990-P	<b>F</b> (2017)

Five highest-paid independent contractors for professional services. If none, enter "N	ONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		- 1
	<del></del>	
tal number of others receiving over \$50,000 for professional services		<b>D</b>
Part IX-A Summary of Direct Charitable Activities		<del></del>
ust the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers produce	information such as the d, etc.	Expenses
N/A		
	<del></del>	
	<del></del>	
		•
Part IX-B Summary of Program-Related Investments	<del></del>	
Describe the two largest program-related investments made by the foundation during the tax year on lines	s 1 and 2.	Amount
None		
<del></del>	<del></del>	0
<del></del>	<del></del>	<del></del>
	<del></del>	
All other program-related investments. See instructions.	<del></del>	<del></del>
None		
*14***		
		Λ
otal. Add lines 1 through 3	<b>—</b>	0

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	see instructions.)
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	10,853,739.
b	Average of monthly cash balances	1b	449,351.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	11,303,090.
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	11,303,090.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	169,546.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	11,133,544.
6	Minimum investment return. Enter 5% of line 5	6	556,677.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations, check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	556,677.
2a	Tax on investment income for 2017 from Part VI, line 5	5 %	
b	Income tax for 2017. (This does not include the tax from Part VI.) 2b		
C	Add lines 2a and 2b	2c	4,377.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	552,300.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	552,300.
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	552,300.
P	art XII Qualifying Distributions (see instructions)		-
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	674,185.
b	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:		
a	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	674,185.
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	674,185.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	jualifies fo	r the section

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Part XIII Undistributed Income (see instructions)

······································			···	
•	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI,	Обграз	rears prior to 2010	2010	
line 7				552,300.
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only			0.	
b Total for prior years:				
,,	w	0.		
3 Excess distributions carryover, if any, to 2017:				
aFrom 2012 75,083.				
bFrom 2013 481,294.				
cFrom 2014 481,294.				
dFrom 2015 544,989.				
eFrom 2016 573,080.	2 155 740			
f Total of lines 3a through e	2,155,740.			
4 Qualifying distributions for 2017 from				
Part XII, line 4: ►\$ 674,185.			0.	
a Applied to 2016, but not more than line 2a			<b>U</b> •	
b Applied to undistributed income of prior		o.		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	674 105	See Statement	. 6	
(Election required - see instructions)	0/4,103.	see statement	. 0	0.
d Applied to 2017 distributable amount  e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2017	552,300.			552,300.
(If an amount appears in column (d), the same amount	332,3001		· · · · · · · · · · · · · · · · · · ·	33273331
must be shown in column (a).)  6 Enter the net total of each column as indicated below;				
2 Corpus. Add lines 3f, 4c, and 4e Subtract line 5	2,277,625.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'	<del></del>			
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 2016. Subtract line			_	
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2017. Subtract				
lines 4d and 5 from line 1. This amount must				1
be distributed in 2018				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				ļ
may be required - see instructions)	0.			-
8 Excess distributions carryover from 2012	^			[. ]
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2018.	2 277 625			
Subtract lines 7 and 8 from line 6a	2,277,625.			11
10 Analysis of line 9;			Q	1 N H
a Excess from 2013 4,077. b Excess from 2014 481,294.		•	l e	
<del></del>		i,	İ	
c Excess from 2015 544,989. dExcess from 2016. 573,080.			<b>1</b>	
e Excess from 2017 674,185.		 		
0 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	<u> </u>	<u> </u>	·	<u> </u>

an exempt organization (4) Gross investment income Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets

## Information Regarding Foundation Managers:

(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

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).)

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each year listed b 85% of line 2a

exempt activities

listed

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.

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

at any time during the year-see instructions.)

Check here  $\triangleright$  X 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., to individuals or organizations under other conditions, complete items 2a, b, c, and d.

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

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Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to any foundation manager or substantial contributor Purpose of grant or contribution Foundation **Amount** status of Name and address (home or business) recipient a Paid during the year Statement 5 673,460. Total ➤ 3a 673,460. **b** Approved for future payment None **▶** 3b 0. Total Form **990-PF** (2017)

Part XVI-A	Analysis	of Income	-Producing	Activities
------------	----------	-----------	------------	------------

inter gross amounts unless otherwise indicated.	Unrelated	business income		ded by section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	Amount	code	Amount	iunction income
b	<del> </del>			<del></del>	
c	<del> </del>		_	<del></del>	
d					<del></del>
e					
1					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	218,833.	
5 Net rental income or (loss) from real estate: a Debt-financed property					
b Not debt-financed property					
8 Net rental income or (loss) from personal property					
7 Other investment income		<del></del>			
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue:					
b		<del></del> _			
С		· · · · · · · · · · · · · · · · · · ·	1		
d					
e					
2 Subtotal. Add columns (b), (d), and (e)		(	) .	218,833.	
13 Total. Add line 12, columns (b), (d), and (e)					218,83
See worksheet in line 13 instructions to verify calculations.)					

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).

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723621 01-03-18

1 bit the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (cit) organizations or in section 527, relating to political organizations?  1 Transfers from the reporting foundation to a noncharitable exempt organization of.  (1) Cash (2) Other assets  5 bit ther transactions:  (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets to an oncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Rembusement arrangements (5) Loans or loan guarantes (6) Performance of services or membership or fundraising solicitations (6) Performance of services or membership or fundraising solicitations (7) 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 assets, or services received.  (a) It has 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 assets, or services received.  (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements.  N / A  10 If Yes, complete the following schedule.  (a) Name of organization (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements.  N / A  10 If Yes, complete the following schedule.  (a) Name of organization (b) Type of organization of the propose of relationships of the propose of th	Lai	· AVII	Exempt Organ		neis lu a	ile II gilggytiviis d	iid Heiduviisi	nps with Nonchari	Cabio		
Control than section 501 (c)(3) organizations or in section 527, relating to political organizations?	1	Did the ord			of the followin	g with any other organization	on described in sect	on 501(c)	I	Yes	No
a Transfers from the regording foundation to a noncharitable exempt organization of:  (1) Cash (2) Other assets  Dither tensections:  (1) Sales of assets from a noncharitable exempt organization  (2) Purchases of assets from a noncharitable exempt organization  (3) Renation of factives, equipment, or other assets  (4) Remoturement arrangements  (5) Loans or float guarantees  (5) Loans or float guarantees  (6) Performance of servores or membership or fundrasing solicitations  (7) Sales of loan guarantees  (8) Performance of servores or membership or fundrasing solicitations  (9) The answer to any of the above is Yes, complete the following schedule. Column (9) should always show the fair market value of the goods, other assets, or savices promote by the reporting foundation received est than fair market value in any transaction or sharing arrangement, show in column (9) the value of the goods, other assets, or services received.  (A) Interes (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of relationship  (A) First organization (d) Interes organization (d) Description of relationship  (a) Name of organization (b) Type of organization (d) Description of relationship  (a) Name of organization (b) Type of organization (d) Description of relationship  N/A    If Yes, 'complete the following schedule.											<del>                                     </del>
(3) Other sacets  (3) Other sacets  (4) Other bransactions:  (1) Sales of assets to a noncharitable exempt organization  (2) Purchase of assets from a noncharitable exempt organization  (3) Rental of facilities, equipment, or other assets  (4) Rental or facilities, equipment paragraments  (5) Loans or loag quarantees  (6) Performance of services or membership or fundrasing adicitations  (7) Extractional organizations  (8) Performance of services or membership or fundrasing adicitations  (8) Performance of services or membership or fundrasing adicitations  (9) Performance of services or membership or fundrasing adicitations  (8) Performance of services or membership or fundrasing adicitations  (9) Performance of services or membership or fundrasing adicitations  (1) It follows to services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (1) the value of the goods, other assets, or services received.  (9) Amount involved  (9) Amount involved  (9) Amount involved  (9) Amount involved  (9) Amount involved  (9) Amount involved  (9) Amount involved  (9) Amount involved  (1) Amount involved  (1) Amount involved  (1) Amount involved  (1) Amount involved  (2) Amount involved  (3) Amount involved  (4) Amount organization  (5) Loans or more tax-exempt organization of varieties, because the state of the properties of the prop		•		•							
(2) Other assets to an oncharitable exempt organization (1) Sales of assets to an oncharitable exempt organization (2) Purchases of assets to an oncharitable exempt organization (3) Rental of bettee, equipment, or other assets (4) Remotursement arrangements (5) Loans or foat guarantees (6) Loans or foat guarantees (7) Sales of assets to man oncharitable exempt organization (8) Performance of services or membership or fundrasing solicitations (8) Performance of services or membership or fundrasing solicitations (8) Performance of services or membership or fundrasing solicitations (8) In 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 assets, or services promote the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services received. (6) Line no (b) Amount smolved (c) Name of noncharitable exempt organization (d) Description of wooders, transactions, and alwing emergenments  (6) Line no (b) Amount smolved (c) Name of noncharitable exempt organization (d) Description of wooders, transactions, and alwing emergenments  (6) In Yes, complete the following schedule.  (a) In Yes, complete the following schedule.  (a) In Yes, complete the following schedule.  (b) Amount smolved (c) Parcellad of organization (c) Description of residents, transactions, and alwing emergenments.  N/A  If Yes X No  If Yes						•			18(1)		lх
b Other transactions:  (1) Sales of assets to a noncharitable exempt organization  (2) Purchases of assets from a noncharitable exempt organization  (3) Rental of facilities, equipment, or other assets  (4) Rembursament arrangements  (5) Loans or loan guarantees  (6) Performance of services or membership or fundrasing solicitations  (7) It the answer to any of the above 5'ves, Complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.  (a) Line no. (b) Amount involved  (c) Name of noncharitable exempt organization  (d) Description of treatment, and sharing arrangement, show in section 501(c) (other than section 501(c) (other			assets	••		•	•				
(1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Rembursement arrangements (5) Leave or long aguarantes (6) Performance of services or membership or fundraising solicitations (7) Early organization in the answer to any of the above is "Yes," complete the following schedule. Column (6) should always show the fair market value of the goods, other assets, or exervices given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (6) the value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (6) the value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (6) the value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (7) the value of the goods, other assets, or services given by the reporting foundation. If the foundation description of the sharing arrangement, show in section 501(c) (3) in in section 501(c) (3) in in section 501(c) (3) in in section 501(c) (3) in in section 501(c) (3) in section 501(c) (3) in section 501(c) (3) in section 501(c) (3) in section 501(c) (3) in section 501(c) (3) in section 501(c) (3) in section 501(c) (3) in section 501(c) (3) in section 501(c) (3) in section 501(c) (3) in section 501(c) (3) in section 501(c) in section 501(c) in section 501(c) in section 501(c) in section 501(c) in section 501(c) in section 501(c) in section 501(c) in section 501(c) in section 501(c) in section 501(c) in section 501(c) in section 501(c) in section 501(c) in section 501(c) in se		• •		• • •					<b>,</b> '		$\top$
(2) Purchases of assets from a moncharitable exempt organization  (3) Rental of facilities, equipment, or other assets  (4) Remousement arrangements  (5) Loans or loan guarantees  (6) Performance of services or membership or fundrasing solicitations  (7) Exemption of the provided in the second of the second	_	-		ble exempt organizati	ion				16(1)		x
(3) Rental of facilities, equipment, or other assets (4) Remoturement arrangements (5) Loans or front any purantees (6) Performance of services or membership or fundrating solicitations (7) Endows the same of the above is "res," complete the following schedulic. Column (8) should always show the fair market value of the goods, other assets, or services greeneed. (6) Loans or like answer to any of the above is "res," complete the following schedulic. Column (8) should always show the fair market value of the goods, other assets, or services received. (6) Loans of the sales of the goods, other assets, or services received. (6) Loans of the sales of the goods, other assets, or services received. (6) Loans of noncharrhable exempt organization (6) Description of benefits, the received than section 501(c)(3) or in section 527?  If "Yes," complete the following schedulic. (6) Name of organization (9) Type of organization (9) Type of organization (9) Type of organization (9) Type of organization (10) Type of organization (1							•				
(4) Reimbursement arrangements (5) Loans or loan quarantees (6) Performance of services or membership or fundrassing solicitations (7) Example of facilities, equipment, mailing lists, other assets, or paid employees (8) Total of the answer to any of the above is "Yes," complete the following schedule. Column (6) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (6) the value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (7) the value of the goods, other assets, or services received.  (9) Amount involved (1) Name of nonchartable exempt organization (1) Amount involved (2) Name of nonchartable exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527?  (1) Yes  No  b if Yes, complete the following schedule.  (1) Name of organization (2) Type of organization (3) Description of relationship  (4) Description of relationship  (5) Type of organization (6) Description of relationship  (6) Description of relationship  (7) Amount involved (8) Name of organization (9) Type of organization (9) Type of organizations described in the best of my knowledge  (9) Name of organization (9) Type of organization (9) Type of organization (9) Description of relationship  (1) And (1) Amount involved (1) Amount involved (1) Amount involved (1) Name of nonchartable exemptions are all informations of which prepare as each white the prepare is a service of the prepare in a service of the prepare is a service of the prepare in a service of the prepare is a service in the prepare in a service in the prepare is a service in the prepare in a service in the prepare is a service in the prepare in a service in the prepare is a service in the prepare in a service in a service in a service in a				•	•	• •		• •			
(6) Leans or loan guarantees (8) Performance of services or membership or fundraising solicitations (9) Performance of services or membership or fundraising solicitations 4 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 assets, or services received.  (a) Live an object of 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 assets, or services received.  (a) Live an object of the answer to any of the above is Yes, complete the following schedule.  (a) Namount involved  (b) Amount involved  (c) Namount involved  (c) Namount involved  (d) Description of transfers, transactions, and sharing arrangements  N / A  2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organization  (d) Description of transfers, transactions, and sharing arrangements  N / A  2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (d) or i		` '			•	•	• •				
(a) Performance of services or membership or fundrissings solicitations  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. Collumn (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in collumn (c) he value of the goods, other assets, or services received.  (a) Line no (b) Amount involved (c) Name of nonchartable exempt organization (d) Description of brankfers, transactions, and sharing arrangements.  N/A  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527?  b If "Yes," complete the following schedule.  (a) Name of organization (b) Type of organizations (c) Description of relationship  N/A  Under paralles of perby, I declare that I have examined this return, including accompanying schedules and electrometric, and to this best of my knowledge should be accomplished to be complete the following between the prepared as my knowledge of the short of the property of the property of the property of the property of the property in any knowledge of the property of the property of the property of the property of the property of the property is any knowledge of the property of the property is any knowledge.  Primary is name  Primary in the property of the property is name  Preparer's signature  Date  Primary in the first school in the property of the property is name.  Primary in the property of the property is name.  Primary in the property of the property is name.  Primary in the property of the property is name.  Primary in the property of the property is name.  Primary in the property of the property is name.  Primary in the property of the property of the property is name.  Primary in the property of t					•			•			
c Sharing of facilities, equipment, making lists, other assetts, or paid employees  d if the answer to any of the above is "es", complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.  (d) I me no (e) Amount movived (e) Name of monchartable exempt organization (d) Description of transfers, transactions, and sharing arrangements  N/A  2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527?		• •	=	embership or fundrais	ing solicitatio	ns	•	•	-		
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 assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.  (d) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements  N / A  2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c) (other than section 501(c)(d)) or in section 527?  b if "Yes," complete the following schedule.  (a) Name of organization (b) Type of organization (c) Description of relationship  N / A  (b) Type of organization (c) Description of relationship  N / A  Under penalties of perpy, I declare that I have exemined this return, including accompanying schedules and attenuation of which prepare has any knowledge and belief, it is true, correct, and complete. Declaration of prepare (other than tappayer) is based on all information of which prepare has any knowledge allowed by the second of the second		• •					•		-		
or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.  (a) Line no (b) Amount involved (c) Name of nonchartable exempt organization (d) Description of branders, transactions, and alwaying arrangements  N/A  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than sect		_					wavs show the fair r	narket value of the goods, o	ther ass	ets.	<del></del>
column (d) the value of the goods, other assets, or services received.  (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements  N/A  2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c) (other than section 501(c)(3)) or in section 527?  b If Yes, complete the following schedule.  (a) Name of noncharitable exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 501(c) (other than section 501(c)(3)) or in section 501(c) (other than section 501(c)(3)) or in section 501(c) (other than section 501(c)(3)) or in section 501(c) (other than section 501(c)(3)) or in section 501(c) (other than section 501(c)(3)) or in section 501(c) (other than section 501(c)(3)) or in section 501(c) (other than section 501(c)(3)) or in section 501(c) (other than section 501(c)(3)) or in section 501(c)(3) or i			•		-			_		,	
(a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of handers, transactions, and sharing arrangements    N/A  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 52??  b If Yes, complete the following schedule.  (a) Name of organization (b) Type of organization (c) Description of relationship    N/A  Signal Under penalties of perbyr, if declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge.  Signal Under penalties of perbyr, if declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge.  Signal Under penalties of perbyr, if declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge.  Preparer Signal Type of organization of which prepare has any knowledge.  Preparer Signal Type of organization of which prepare has any knowledge.  Preparer Signal Type of organization of which prepare has any knowledge.  Preparer Signal Type of organization of which prepare has any knowledge.  Preparer Signal Type of organization of which prepare has any knowledge.  Preparer Signal Type of organization of which prepare has any knowledge.  Preparer Signal Type of organization of which prepare has any knowledge.  Preparer Signal Type of organization of which prepare has any knowledge.  Preparer Signal Type of organization of which prepare has			• • •				•	5 5 ,			
2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527?  b If "Yes," complete the following schedule.  (a) Name of organization  (b) Type of organization  (c) Description of relationship    Ves			·				(d) Description	of transfers, transactions, and s	haring an	rangem	ents
2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527?  b If "Yes," complete the following schedule.  (a) Name of organization  (b) Type of organization  (c) Description of relationship    Ves	<u> </u>		· · · · · · · · · · · · · · · · · · ·		N/A		<del>-  </del>	<del></del>			
In section 501(c) (other than section 501(c)(3)) or in section 527?    b   If Yes, complete the following schedule.    (a) Name of organization   (b) Type of organization   (c) Description of relationship							<del>                                     </del>				
In section 501(c) (other than section 501(c)(3)) or in section 527?    b   If Yes, complete the following schedule.    (a) Name of organization   (b) Type of organization   (c) Description of relationship		<del></del>	<del></del>		*						
In section 501(c) (other than section 501(c)(3)) or in section 527?    b   If Yes, complete the following schedule.    (a) Name of organization   (b) Type of organization   (c) Description of relationship						<del>21</del>					
In section 501(c) (other than section 501(c)(3)) or in section 527?    b   If Yes, complete the following schedule.    (a) Name of organization   (b) Type of organization   (c) Description of relationship					·	<del></del>					
In section 501(c) (other than section 501(c)(3)) or in section 527?    b   If Yes, complete the following schedule.    (a) Name of organization   (b) Type of organization   (c) Description of relationship		<del> </del>						<del> </del>			<del></del>
In section 501(c) (other than section 501(c)(3)) or in section 527?    b   If "Yes," complete the following schedule.    (a) Name of organization   (b) Type of organization   (c) Description of relationship		-									
In section 501(c) (other than section 501(c)(3)) or in section 527?    b   If "Yes," complete the following schedule.    (a) Name of organization   (b) Type of organization   (c) Description of relationship											
In section 501(c) (other than section 501(c)(3)) or in section 527?    b   If "Yes," complete the following schedule.    (a) Name of organization   (b) Type of organization   (c) Description of relationship											
In section 501(c) (other than section 501(c)(3)) or in section 527?    b   If "Yes," complete the following schedule.    (a) Name of organization   (b) Type of organization   (c) Description of relationship											
In section 501(c) (other than section 501(c)(3)) or in section 527?    b   If Yes, complete the following schedule.    (a) Name of organization   (b) Type of organization   (c) Description of relationship				<u> </u>					•		
In section 501(c) (other than section 501(c)(3)) or in section 527?    b   If "Yes," complete the following schedule.    (a) Name of organization   (b) Type of organization   (c) Description of relationship											
In section 501(c) (other than section 501(c)(3)) or in section 527?    b   If Yes, complete the following schedule.    (a) Name of organization   (b) Type of organization   (c) Description of relationship							<del> </del>				
In section 501(c) (other than section 501(c)(3)) or in section 527?    b   If Yes, complete the following schedule.    (a) Name of organization   (b) Type of organization   (c) Description of relationship				<del></del>		<del></del>	<del>-  </del>			-	
In section 501(c) (other than section 501(c)(3)) or in section 527?    b   If Yes, complete the following schedule.    (a) Name of organization   (b) Type of organization   (c) Description of relationship						-		<del>.</del>			
In section 501(c) (other than section 501(c)(3)) or in section 527?    b   If Yes, complete the following schedule.    (a) Name of organization   (b) Type of organization   (c) Description of relationship		<del></del>	<del></del>			<del></del>	<del></del>	····			
N/A  Sign Here    Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.   May the IRB discuss this return with the preparer shown below? See linst.		ın section	501(c) (other than section mplete the following sch	on 501(c)(3)) or in se edule.	-		zations described			[2	No
Sign Here    Under penalties of perfury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.    May The IHS discuss this return with the preparer shown below? See instr.				janization		(b) Type of organization		(c) Description of relationsh	ip		
Sign Here    May 9 w/s   President   Print/Type preparer's name   Preparer's signature   Print/Type preparer's name   Print/Type preparer's name   Print/Type preparer's name   Print/Type preparer's name   Preparer's signature   Print/Type preparer's name   Preparer's signature   Print/Type preparer's name   Preparer's signature   Print/Type preparer's name   Preparer's signature   Print/Type preparer's name   Print/Type preparer's		-	N/A		<del></del>					_	
Sign Here    May 9 w/s   President   Print/Type preparer's name   Preparer's signature   Print/Type preparer's name   Print/Type preparer's name   Print/Type preparer's name   Print/Type preparer's name   Preparer's signature   Print/Type preparer's name   Preparer's signature   Print/Type preparer's name   Preparer's signature   Print/Type preparer's name   Preparer's signature   Print/Type preparer's name   Print/Type preparer's				<del> </del>							
Sign Here    May 9 w/s   President   Print/Type preparer's name   Preparer's signature   Print/Type preparer's name   Print/Type preparer's name   Print/Type preparer's name   Print/Type preparer's name   Preparer's signature   Print/Type preparer's name   Preparer's signature   Print/Type preparer's name   Preparer's signature   Print/Type preparer's name   Preparer's signature   Print/Type preparer's name   Print/Type preparer's					<del></del>						
Sign Here    May 9 w/s   President   Print/Type preparer's name   Preparer's signature   Print/Type preparer's name   Print/Type preparer's name   Print/Type preparer's name   Print/Type preparer's name   Preparer's signature   Print/Type preparer's name   Preparer's signature   Print/Type preparer's name   Preparer's signature   Print/Type preparer's name   Preparer's signature   Print/Type preparer's name   Print/Type preparer's							ļ				
Sign Here    May 9 w/s   President   Print/Type preparer's name   Preparer's signature   Print/Type preparer's name   Print/Type preparer's name   Print/Type preparer's name   Print/Type preparer's name   Preparer's signature   Print/Type preparer's name   Preparer's signature   Print/Type preparer's name   Preparer's signature   Print/Type preparer's name   Preparer's signature   Print/Type preparer's name   Print/Type preparer's		Under	nensities of nerken Lideoless	that I have everyland this	return locked	to accompanying schedules and	statements and to the	heat of my knowledge		_	
Paid Preparer's name Preparer's signature Date Check if self- employed Preparer Use Only Firm's name  Firm's eln  Phone no.	Sig He	n and be	oller, it is true, correct, and con	mplete. Declaration of pre		in taxpayer) is based on all inform	President	r has any knowledge. May retur show	n with th	e prepa ? See !!	ver
Paid Preparer Use Only Firm's address ▶  Self- employed  Firm's EIN ▶  Phone no.					Preparer's s		Date	Check if PTIN			
Preparer Use Only Firm's name ► Firm's EIN ► Phone no.					,	•		self- employed			
Preparer Use Only Firm's name ► Firm's EIN ► Phone no.	Pai	id					1	, ,			
Use Only  Firm's address ▶  Phone no.			Firm's name				<u> </u>	Firm's FIN			
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# 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.
➤ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Name of the organization

Frederick H. Bedford Jr. & Margaret S. Bedford Charitable Foundation

**Employer identification number** 

13-3544702

Organization type (check	cone):
Filers of:	Section:
Form 990 or 990-EZ	501(c)( ) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-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
• •	n is covered by the <b>General Rule</b> or a <b>Special Rule.</b> (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.
	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or my one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special Rules	
sections 509(a)( any one contribu	tion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 1) 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 utor, 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; EZ, line 1. Complete Parts I and II.
year, total contr	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the abutions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for of cruelty to children or animals. Complete Parts I, II, and III.
year, contributio is checked, ente purpose. Don't o	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the ons 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., complete any of the parts unless the General Rule applies to this organization because it received nonexclusively able, etc., contributions totaling \$5,000 or more during the year
but it must answer "No"	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), on 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 et the 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) (2017)

Name of organization

Frederick H. Bedford Jr. & Margaret S.

Bedford Charitable Foundation

13-3544702

Employer identification number

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1	Victaulic Company 4901 Kesslersville Road Easton, PA 18040	<u> </u>	Person  Payroll  Noncash  (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
723452 11-		\$Schedule B (Form	Person Payroll Noncash (Complete Part II for noncash contributions.) 990, 990-EZ, or 990-PF) (2017

Name of organization

Employer Identification number

Frederick H. Bedford Jr. & Margaret S. Bedford Charitable Foundation

13-3544702

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
		\$	
(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
<del></del>		\$	
(a) No. from Part i	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$Sahadula B /Farm	990 990.F7 or 990.PF\/2017\

Schedule B (Form 990, 990-EZ, or 990-PF) (2017) Page 4 **Employer Identification number** Name of organization Frederick H. Bedford Jr. & Margaret S. 13-3544702 Bedford Charitable Foundation Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4

Form 990-PF	Accounti	ng Fees	St.	atement 1
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Accounting Fee	62.	0.	0.	62.
To Form 990-PF, Pg 1, ln 16b	62.	0.	0.	62.
Form 990-PF C	ther Profes	sional Fees	St	catement 2
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Other Professional Fee	663.	0.	0.	663.
To Form 990-PF, Pg 1, ln 16c	663.	0.	0.	663.
Form 990-PF	Tax	es	St	catement 3
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Federal Tax	4,377.	0.	0.	0.
To Form 990-PF, Pg 1, ln 18	4,377.	0.	0.	0.

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ERICK H. I

13-3544702

# FORM 990PE, PART VIII – LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

			CONTRIBUTIONS	<b>EXPENSE ACCOUNT</b>
	TITLE AND AVERAGE HOURS PER		TO EMPLOYEE	AND OTHER
NAME & ADDRESS	WEEK DEVOTED TO POSITION	COMPENSATION	BENEFIT PLANS	<u>ALLOWANCES</u>
John F. Malloy	President	None	None	None
PO Box 31				
Easton, PA 18044-0031				
Pierre D'Arenberg	Vice President	None	None	None
PO Box 31				
Easton, PA 18044-0031				
Muffie B. Murray	Treasurer	None	None	None
PO Box 31				
Easton, PA 18044-0031				
Mark Van De Voorde	Secretary	None	None	None
PO Box 31				
Easton, PA 18044-0031				
	GRAND TOTALS	None	None	None