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2017

OMB No. 1545-0052

Form 990-PF

Department of the Treasury

Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation ▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

Open to Public Inspection

For	caler	ndar year 2017, or tax year beginning 01-01-20)17 , ar	nd en	ding 12-31-	2017		
		indation F AND MARGARET M BROBYN			A Employer identification number			
		BLE TRUST			25-6734083			
		l street (or P.O. box number if mail is not delivered to street address) ILLYN BLUE BELL PIKE	Room/suite		B Telephone number (see instructions)			
					(305) 743-5123			
		, state or province, country, and ZIP or foreign postal code PA 19422		C If exemption	application is pendin	g, check here		
G Ch	eck al	l that apply: $\ \square$ Initial return $\ \square$ Initial return of a	former public charity		D 1. Foreign org	ganizations, check he	ere	
		Final return				ganizations meeting k here and attach co		
		Address change Name change			,	indation status was t	· -	
_	,	pe of organization: Section 501(c)(3) exempt private to				1 507(b)(1)(A), chec		
			e private foundation Cash	ıal	E If the founds	tion is in a 60-month	a termination -	
of y		rom Part II, col. (c),		iai		n 507(b)(1)(B), chec		
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and	T			(d) Disbursements	
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	expenses per books	(b) N	let investment income	(c) Adjusted net income	for charitable purposes (cash basis only)	
	1	Contributions, gifts, grants, etc., received (attach schedule)						
	2	Check ► ✓ if the foundation is not required to attach						
	_	Sch. B			-			
	3 4	Interest on savings and temporary cash investments Dividends and interest from securities	50,336	:	50,336			
	т 5а	Gross rents	30,000	1	30,000			
	b	Net rental income or (loss)						
<u>e</u>	6a	Net gain or (loss) from sale of assets not on line 10	108,778	3				
Revenue	b	Gross sales price for all assets on line 6a						
Rev	7	Capital gain net income (from Part IV, line 2)			108,778			
	8	Net short-term capital gain			,			
	9	Income modifications						
	10a	Gross sales less returns and allowances						
	b	Less: Cost of goods sold						
	C	Gross profit or (loss) (attach schedule)						
	11	Other income (attach schedule)						
	12	Total. Add lines 1 through 11	159,115		159,115			
	13 14	Compensation of officers, directors, trustees, etc. Other employee salaries and wages	48,000	1			48,000	
S	15	Pension plans, employee benefits	40,000	1			45,000	
ıse	16a	Legal fees (attach schedule)						
ber	b	Accounting fees (attach schedule)						
EX	С	Other professional fees (attach schedule)	15,041		9,378		5,663	
tive	17	Interest						
stra	18	Taxes (attach schedule) (see instructions)						
ini	19	Depreciation (attach schedule) and depletion						
a	20	Occupancy						
dА	21	Travel, conferences, and meetings	8,104	·			8,104	
an	22	Printing and publications	an 1					
ing	23	Other expenses (attach schedule)	4,912	2			4,912	
perating and Administrative Expenses	24	Total operating and administrative expenses.	76.057	,	0.370		66.630	
Оре	25	Add lines 13 through 23	76,057 60,500	-	9,378		66,679 60,500	
	26	Total expenses and disbursements. Add lines 24 and	50,300	1			00,300	
		25	136,557	,	9,378		127,179	
	27	Subtract line 26 from line 12:	22 550					
	а	Excess of revenue over expenses and disbursements	22,558	<u>'</u>				
	b	Net investment income (if negative, enter -0-)		<u> </u>	149,737			
-	C	Adjusted net income(if negative, enter -0-)				,	000 == :	
or I	-aper	work Reduction Act Notice, see instructions.		C	at. No. 11289X	. For	m 990-PF (2017)	

For	n 990-	-PF (2017)				Page 2
Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	Beginning of year (a) Book Value	(b) Bo	End o	f year (c) Fair Market Value
	1	Cash—non-interest-bearing				
	2	Savings and temporary cash investments				
	3	Accounts receivable ►				
		Less: allowance for doubtful accounts ▶				
	4	Pledges receivable ▶				
		Less: allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule)				-
		Less: allowance for doubtful accounts ▶				
2	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
As	10a	Investments—U.S. and state government obligations (attach schedule)	2,177,475		2,501,949	
	b	Investments—corporate stock (attach schedule)				
	С	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment: basis ▶	_			
		Less: accumulated depreciation (attach schedule)	_			
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)				
	14	Land, buildings, and equipment: basis ▶				
		Less: accumulated depreciation (attach schedule) ▶				
	15	Other assets (describe)				
	16	Total assets (to be completed by all filers—see the				
		instructions. Also, see page 1, item I)	2,177,475		2,501,949	0
	17	Accounts payable and accrued expenses				
	18	Grants payable				
tie	19	Deferred revenue				
Ē	20	Loans from officers, directors, trustees, and other disqualified persons				
Liabilities	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe ►)				
	23	Total liabilities(add lines 17 through 22)			0	
		Foundations that follow SFAS 117, check here 🕨 🗹				
ces		and complete lines 24 through 26 and lines 30 and 31.				
<u>a</u>	24	Unrestricted	2,177,475		2,501,949	
Ba	25	Temporarily restricted				
됟	26	Permanently restricted				
or Fund Balances		Foundations that do not follow SFAS 117, check here				
		and complete lines 27 through 31.				
Assets	27	Capital stock, trust principal, or current funds				
155	28	Paid-in or capital surplus, or land, bldg., and equipment fund				
	29	Retained earnings, accumulated income, endowment, or other funds				
Net	30	Total net assets or fund balances (see instructions)	2,177,475		2,501,949	
	31	Total liabilities and net assets/fund balances (see instructions) .	2,177,475		2,501,949	
Pa	rt III					
1		al net assets or fund balances at beginning of year—Part II, column (a), l year figure reported on prior year's return)	ine 30 (must agree with	end- • 1		2,177,475
2	Ente	er amount from Part I, line 27a		. 2		22,558
3	Othe	er increases not included in line 2 (itemize) -	% _	3		301,916
4		l lines 1, 2, and 3				2,501,949
5		reases not included in line 2 (itemize)		5		2 504 040
6	rota	al net assets or fund balances at end of year (line 4 minus line 5)—Part Γ	ı, column (b), ii ne 30	. 6		2,501,949

Page **3**

	(a) e kind(s) of property sold (e.g., re ouse; or common stock, 200 shs.	(b) How acquire P—Purchas D—Donatio	se	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)		
1 a WELLS FARGO CLEARING			Р		2007-11-02	2017-01-05	
b HAVERFORD TRUST			Р		2007-10-19	2017-05-03	
c HAVERFORD TRUST			Р		2014-10-28	2017-10-19	
d HAVERFORD TRUST			Р		2007-11-02	2017-10-03	
e							
(e) Gross sales price			(g) Cost or other basis plus expense of sale		(h) Gain or (loss) (e) plus (f) minus (g)		
a 25	,970			,157	(-) (-)	12,813	
	46,495			,733		-4,238	
c 237	,767		185	,819		51,948	
	,579		107	,324		48,255	
e						<u> </u>	
	showing gain in column (h) and ow	ned by the foundation	on 12/31/69		(I)	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	(k) of col. (i) . (j), if any		Gains (Col. (col. (k), but not	h) gain minus less than -0-) or om col.(h))	
a			(3),			12,813	
b						-4,238	
С						51,948	
d						48,255	
e							
	in or (loss) as defined in sections : I, line 8, column (c) (see instructi		-	}	3	108,778	
Part V Qualification Un	nder Section 4940(e) for Re	educed Tax on Net	Investment	t Inc	ome		
(For optional use by domestic pri	vate foundations subject to the sec	ction 4940(a) tax on ne	t investment ir	ncome	e.)		
If "Yes," the foundation does not	ve this part blank. section 4942 tax on the distributa qualify under section 4940(e). Do unt in each column for each year;	not complete this part.	'			es 🔽 No	
(a)	•				(d)		
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab			Distribution rati (col. (b) divided by c	ol. (c))	
2016	116,410		2,180,203			0.05339	
2015	104,032		2,124,799			0.04896	
2014	136,729		2,369,444			0.05771	
2013	81,741		2,167,043			0.03772	
2012	108,325		1,735,820			0.06241	
2 Total of line 1, column (d)			—	2		0.260186	
number of years the found	or the 5-year base period—divide ation has been in existence if less charitable-use assets for 2017 fron	than 5 years . ´. ´	· . ·	3 4		0.052037 2,509,800	
			<u> </u>	5		130,602	
	t income (1% of Part I, line 27b)			6		1,497	
			—	7		132,099	
	ns from Part XII, line 4 ,			8		127,682	
	ter than line 7, check the box in Pa			_	•		

Yes V 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?.

If any answer is "Yes" to 5a(1)-(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? 5b No Organizations relying on a current notice regarding disaster assistance check here. If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?. Yes V 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 pay premiums on

🗌 Yes 🗹 No Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . 6b No If "Yes" to 6b, file Form 8870.

At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes 🗸 No If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? . 7b No

Form 990-PF					Page 7
Part VIII	Information About C and Contractors	Officers, Directors, Trust	tees, Foundation Ma	anagers, Highly Paid Er	nployees,
1 List all		es, foundation managers ar	nd their compensation	(see instructions).	
	Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
See Addition	al Data Table		-	compensation	
2 Compe	nsation of five highest-pai	d employees (other than ti	hose included on line :	 1—see instructions). If no	ne, enter "NONE."
	(a)	Title, and average		Contributions to	
Name and	address of each employee pa more than \$50,000		(c) Compensation	employee benefit plans and deferred	Expense account, (e) other allowances
NONE	· · ·			(d) compensation	
		<u> </u>			
		er \$50,000			
		entractors for professional			
(a) Nam NONE	ne and address of each persor	paid more than \$50,000	(b) Typ	pe of service	(c) Compensation
NONE.			1		
			-		
Fotal numbe	r of others receiving over \$50	,000 for professional services			
Part IX-A	Summary of Direct C	Charitable Activities			
		activities during the tax year. Incl erences convened, research paper		nation such as the number of	Expenses
1					
2					_
-					
3					_
4					
Part IX-B	Summary of Program	n-Related Investments	(see instructions)		
	e two largest program-related inve	stments made by the foundation d	uring the tax year on lines 1	and 2.	Amount
1					
All other n	rogram-related investments.	See instructions.			
3					
Г otal. Add lir	nes 1 through 3 .				

1a

1b

2

За 3h

4

5

127,179

503

127,682

127,682

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

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

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

Adjusted qualifying distributions. Subtract line 5 from line 4.

Amounts set aside for specific charitable projects that satisfy the:

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

b

2

3

4

5

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

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

c Excess from 2015. d Excess from 2016.

e Excess from 2017. .

Forn	n 990-PF (2017)				Page 9
P	undistributed Income (see instruc	ctions)			
		(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1	Distributable amount for 2017 from Part XI, line 7				122,495
2	Undistributed income, if any, as of the end of 2017:				
а	Enter amount for 2016 only				
b	Total for prior years: 20, 20, 20				
3	Excess distributions carryover, if any, to 2017:				
а	From 2012				
b	From 2013				
С	From 2014				
	From 2015				
	From 2016				
	Total of lines 3a through e	157,754			
4	Qualifying distributions for 2017 from Part XII, line 4: ► \$				
а	Applied to 2016, but not more than line 2a				
b	Applied to undistributed income of prior years (Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions).	0			
d	Applied to 2017 distributable amount.				122,495
е	Remaining amount distributed out of corpus	5,187			
	Excess distributions carryover applied to 2017.				
	(If an amount appears in column (d), the				
	same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	162,941			
b	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 2016. Subtract line 4a from line 2a. Taxable amount—see instructions				
f	Undistributed income for 2017. Subtract lines 4d and 5 from line 1. This amount must 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 may be required - see instructions)				
8	Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions)	23,998			
9	Excess distributions carryover to 2018.				
	Subtract lines 7 and 8 from line 6a	138,943			
	Analysis of line 9:				
	Excess from 2013				
b	Excess from 2014				1

104,553

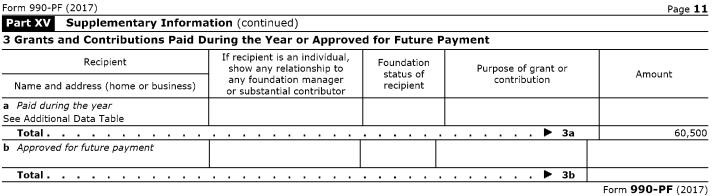
5,187

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed: BROBYN FAMILY FOUNDATION 57151 MORTON STREET

MARATHON, FL 33050

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

- BROBYN FAMILY TRUST GRANT APPLICATION
- **c** Any submission deadlines:
- **d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:



iter gross	amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded by section	512, 513, or 514	(e) Related or exempl
. Program	service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions.
Member	nd contracts from government agencies ship dues and assessments					
	t on savings and temporary cash nents					
	ds and interest from securities			1	50,336	
	al income or (loss) from real estate:					
	inanced property					
Net rer	ntal income or (loss) from personal property					
	vestment income					
invento	pry					108,77
	me or (loss) from special events:					
	rofit or (loss) from sales of inventory evenue: a					
b	evenue. u					
с						
d						
е						
e Subtota	l. Add columns (b), (d), and (e).			12	50,336	,
e Subtota Total. A				13	50,336	,
Subtota Total. A	I. Add columns (b), (d), and (e)	lations.) e Accomplisi	nment of Exem	pt Purposes	B	,
eSubtota Total. A (See wo art XVI	I. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). rksheet in line 13 instructions to verify calcul	lations.) e Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribut	ed importantly to	108,77 159,115
Subtota Total. A (See wo art XVI	I. Add columns (b), (d), and (e)	lations.) e Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribut	ed importantly to	,
Subtota Total. A (See wo art XVI	I. Add columns (b), (d), and (e)	lations.) e Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribut	ed importantly to	,
Subtota Total. A (See wo Irt XVII	I. Add columns (b), (d), and (e)	lations.) e Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribut	ed importantly to	,
Subtota Total. A (See wo Irt XVII	I. Add columns (b), (d), and (e)	lations.) e Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribut	ed importantly to	,
Subtota Total. A (See wo Int XVI	I. Add columns (b), (d), and (e)	lations.) e Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribut	ed importantly to	,
Subtota Total. A (See wo Irt XVII	I. Add columns (b), (d), and (e)	lations.) e Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribut	ed importantly to	,
Subtota Total. A (See wo Int XVI	I. Add columns (b), (d), and (e)	lations.) e Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribut	ed importantly to	,
Subtota Total. A (See wo Irt XVII	I. Add columns (b), (d), and (e)	lations.) e Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribut	ed importantly to	,
Subtota Total. A (See wo Int XVI	I. Add columns (b), (d), and (e)	lations.) e Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribut	ed importantly to	,
Subtota Total. A (See wo Irt XVI	I. Add columns (b), (d), and (e)	lations.) e Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribut	ed importantly to	,
Subtota Total. A (See wo nrt XVI	I. Add columns (b), (d), and (e)	lations.) e Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribut	ed importantly to	,
Subtota Total. A (See wo art XVI	I. Add columns (b), (d), and (e)	lations.) e Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribut	ed importantly to	,
Subtota Total. A (See wo art XVI	I. Add columns (b), (d), and (e)	lations.) e Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribut	ed importantly to	,
Subtota Total. A (See wo nrt XVI	I. Add columns (b), (d), and (e)	lations.) e Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribut	ed importantly to	,
Subtota Total. A (See wo nrt XVI	I. Add columns (b), (d), and (e)	lations.) e Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribut	ed importantly to	,
Subtota Total. A (See wo nrt XVI	I. Add columns (b), (d), and (e)	lations.) e Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribut	ed importantly to	,
Subtota Total. A (See wo Irt XVII	I. Add columns (b), (d), and (e)	lations.) e Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribut	ed importantly to	,
Subtota Total. A (See wo Irt XVII	I. Add columns (b), (d), and (e)	lations.) e Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribut	ed importantly to	,
Subtota Total. A (See wo Int XVI	I. Add columns (b), (d), and (e)	lations.) e Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribut	ed importantly to	,
Subtota Total. A (See wo art XVI	I. Add columns (b), (d), and (e)	lations.) e Accomplisi income is report	nment of Exem ed in column (e) o	pt Purposes f Part XVI-A contribut	ed importantly to	,

orm 9	90-PF (<u> </u>									Pa	ge 13
	t XVII	Exempt Organi	zations						nships With Non			
		ganization directly or in Code (other than sectio								on 501	Yes	No
a Tra	ansfers f	rom the reporting foun	dation to a n	oncha	ıritable exe	empt organizatio	n of:					
(1) Cash.									. 1a(1)		No
•	•	assets								. 1a(2)		No
		sactions:								41-41		N
-	-	of assets to a nonchari ases of assets from a n	•	-						. 1b(1) 1b(2)		No No
•	•	al of facilities, equipmer								1b(2)		No
-	-	oursement arrangemen	•							. 1b(3)		No
-	-	or loan guarantees.								. 1b(5)		No
(6) Perfori	mance of services or m	embership or	fund	raising soli	icitations				. 1b(6)		No
c Sh	aring of	facilities, equipment, n	nailing lists, d	other	assets, or	paid employees.				. 1c		No
of in	the good any tran	ver to any of the above ds, other assets, or ser asaction or sharing arra	vices given b ngement, sho	y the ow in	reporting f column (d	foundation. If the i) the value of the .	e foundati ne goods,	on receive other asse	d less than fair mark ts, or services receiv	ket value ved.		
(a) Lin	e No.	(b) Amount involved	(c) Name of	noncha	aritable exer	mpt organization	(d) De	escription of	transfers, transactions,	and sharing arra	ngemen	nts
	_											
	-+											
de	scribed i	ndation directly or indire in section 501(c) of the omplete the following so (a) Name of organization	Code (other		section 50	•	ection 527			□ Yes	✓	No
	1											
Sign	of m whic	er penalties of perjury, y knowledge and belief h preparer has any kno	, it is true, co								rmatio	n of
Here		*****				2020-11-11	1	return				
	7 -	Signature of officer or t	rustee			Date	,	Title		below (see instr.)?	_	
		Print/Type preparer's	name	Prep	arer's Sign	nature	Date		Check if self-	PTIN		
Paid		BRUCE A BOYLSTO	N CPA						employed ▶ □	P00020	0551	
	oarer Only	Firm's name ► Roth	man Boylstor	n LLC					F	Firm's EIN ▶23	-30068	332
	J,	Firm's address ► 15	08 McDaniel	Drive								
		West Chester, PA 19380					Phone no. (610) 701-	0500			

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation JAMES A BROBYN BOARD MEMBER 5.00 1802 WAWASET STREET WILMINGTON, DE 19806 ROBERT C BROBYN Executive Dir. 5.00 57151 MORTON STREET MARATHON, FL 33050 JOHN M BROBYN **BOARD MEMBER** 5.00 499 MARGATE DRIVE MARATHON, FL 33050 ROBERT JF BROBYN ESQ Trustee 5.00 57151 MORTON STREET MARATHON, FL 33050 MONICA F OSS BOARD MEMBER 5.00

OPEN MINDS INC GETTYSBURG, PA 17325

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

recipient

60,500

any foundation manager

or substantial contributor

Name and address (home or business)

GETTYSBURG, PA 17325

Total . 3a

a Paid during the year			
THE TURTLE HOSPITAL 2396 PVERSEAS HWY MARATHON, FL 33050	EOF	SUPPORT FOR ORGANIZATION'S MISSION	500
CIVIL WAR TRUST1331 H STREET NW WASHINGTON, DC 20005	EOF	SUPPORT FOR ORGANIZATION'S MISSION	5,000
GETTYSBURG FOUNDATION	EOF	SUPPORT FOR ORGANIZATION'S	2,000

CIVIL WAR TRUST1331 H STREET NW WASHINGTON, DC 20005	EOF	SUPPORT FOR ORGANIZATION'S MISSION	5,
GETTYSBURG FOUNDATION 1195 BALTIMORE PIKE	EOF	SUPPORT FOR ORGANIZATION'S MISSION	2,

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year			
HAVERFORD COLLEGE BROBYN 370 LANCASTER AVE HAVERFORD, PA 19041	EOF	SUPPORT FOR ORGANIZATION'S MISSION	10,000

HAVERFORD, PA 19041			
GRACE JONES COMMUNITY CENTER 230 41ST ST MARATHON, FL 33050		SUPPORT FOR ORGANIZATION'S MISSION	10,000
DOCTORS WITHOUT BORDERS		SUPPORT FOR ORGANIZATION'S	10,000

MARATHON, FL 33050		THIS STON	
DOCTORS WITHOUT BORDERS 333 7TH AVENUE NEW YORK, NY 10001	EOF	SUPPORT FOR ORGANIZATION'S MISSION	10,000

Tatal			60 500
DOCTORS WITHOUT BORDERS 333 7TH AVENUE NEW YORK, NY 10001	EOF	SUPPORT FOR ORGANIZATION'S MISSION	10,000
•			

DOCTORS WITHOUT BORDERS 333 7TH AVENUE NEW YORK, NY 10001	EOF	SUPPORT FOR ORGANIZATION'S MISSION	10,000
Total	 		60,500

NEW YORK, NY 10001		
Total	 	60,500

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year			
SOUTHERN POVERTY LAW CENTER 400 WASHINGTON AVENUE MONTGOMERY, AL 36104	EOF	SUPPORT FOR ORGANIZATION'S MISSION	10,000

EUKEMIA LYMPHOMA INTERNATIONAL DRIVE 20 YE BROOK, NY 10573	EOF	SUPPORT FOR ORGANIZATION'S MISSION	

LEUKEMIA LYMPHOMA 3 INTERNATIONAL DRIVE 20 RYE BROOK, NY 10573	EOF	SUPPORT FOR ORGANIZATION'S MISSION	300
SEMPER FI FUND	EOF	SUPPORT FOR ORGANIZATION'S	5,000

CEMPER EL FUND		
SEMPER FI FUND WEST COAST BOX 555193 CAMP PENDELTON, CA 92055	SUPPORT FOR ORGANIZATION'S MISSION	5,000

SEMPER FI FUND WEST COAST BOX 555193 CAMP PENDELTON, CA 92055	EOF	SUPPORT FOR ORGANIZATION'S MISSION	5,000
Total	 		60,500

CAMP PENDELTON, CA 92055	MISSION	
Total	 	

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

a Paid during the year

SALVATION ARMY615 SLATERS LANE ALEXANDRIA, VA 22313	EOF	SUPPORT FOR ORGANIZATION'S MISSION	500
ST JUDES262 DANNY THOMAS PLACE MEMPHIS. TN 38105	EOF	SUPPORT FOR ORGANIZATION'S MISSION	300

ST JUDES262 DANNY THOMAS PLACE MEMPHIS, TN 38105	EOF	SUPPORT FOR ORGANIZATION'S MISSION	300
TOYS FOR TOTS FOUNDATION 3034 W FOSTER AVENUE CHICAGO, IL 60625	EOF	SUPPORT FOR ORGANIZATION'S MISSION	1,000

Total . 3a 60,500

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

a raid during the year			
CAMPAIGN 1776 1156 15TH STREET NW SUITE 900 WASHINGTON, DC 20005	EOF	SUPPORT FOR ORGANIZATION'S MISSION	1,000
ALZHEIMERS ASSOC	EOF	SUPPORT FOR ORGANIZATION'S	1,000

177 (511211 61 611) 5 6 2 6 6 6 5			
ALZHEIMERS ASSOC 225 N MICHIGAN AVENUE CHICAGO, IL 60601	EOF	SUPPORT FOR ORGANIZATION'S MISSION	1,000
DELMARVA CHRISTIAN HIGH SCHOOL 21777 SUSSEX PINES RD	EOF	SUPPORT FOR ORGANIZATION'S MISSION	3,900

-		_	60 500
DELMARVA CHRISTIAN HIGH SCHOOL 21777 SUSSEX PINES RD GEORGETOWN, DE 19947	EOF	SUPPORT FOR ORGANIZATION'S MISSION	3,900
CHICAGO, IL 60601		MISSION	

CHICAGO, IL 00001			
DELMARVA CHRISTIAN HIGH SCHOOL 21777 SUSSEX PINES RD GEORGETOWN, DE 19947	EOF	SUPPORT FOR ORGANIZATION'S MISSION	3,900
Total	 		60,500

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	N: 93491316017510	
TY 2017 Other Expenses Schedule					
				1	
Name:	ROBERT JF AND	O MARGARET M BI	ROBYN	1	
I	CHARITABLE TRUST				
EIN:	: 25-6734083				
Software ID:	: 17005038				
Software Version:	2017v2.2				
Other Expenses Schedule					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
AUTO	1,555			1,555	
MEALS	311			311	
OFFICE SPACE AND EXPENSES	1,604			1,604	

1,113

329

1,113

329

OFFICE SUPPLIES

POSTAGE

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491316017510		
TY 2017 Other Increases Schedule					
Name:	ROBERT JF AN	D MARGARET M BROBYN			
	CHARITABLE T	RUST			
EIN:	25-6734083				
Software ID:	17005038				
Software Version:	2017v2.2				
De	escription		Amount		
MARKET VALUATION			301,916		

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	<u>-</u>	DLN	N: 93491316017510	
TY 2017 Other Professional Fees Schedule					
Name: ROBERT JF AND MARGARET M BROBYN					
	CHARITABLE TRUST				
F	EIN: 25-6734083				
Software ID: 17005038					
Software Version: 2017v2.2					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
ACCOUNTING FEE	2,050	0	0	2,050	
HAVERFORD TRUST ADVISORY FEE	9,378	9,378	0	0	
LEGAL	2,769	0	0	2,769	
TRANSACTIONS FEE	844	0	0	844	