Form **990-PF** 

**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.

		nent of the Treasury Revenue Service				rity numbers o 1990PF for inst		-	-			Public Ins	
			or tax year begi		OV/I OIIII	330FF IOI IIIST		, and end		ion.	Орен с		20
		of foundation	or tax year beg	ming			, 2010	, and end		A Employer ide	ntification		20
	BER	KSHIRE CHARI	TABLE FOUND	ATION					- 1	20-1812			
	_=	umber and street (or P O box number if mail is not delivered to street address)  Room/suite					e l	B Telephone no		instructions)	)		
									ľ		·		
	FOU	NDATION SOUR	RCE 501 SILVE	ERSIDE	RD					(800)	839-1	754	
	City or 1	town, state or province	e, country, and ZIP or fo	reign posta	code					<del></del>			
									(	If exemption appending, check			ightharpoonup
	WIL	MINGTON, DE	19809-1377							pending, check			_
	G Che	eck all that apply	Initial retu	rn		Initial return	of a former p	oublic cha	rity	D 1 Foreign orga	anizations, ch	seck here	ightharpoons
			Final retur	'n		Amended re	turn			2 Foreign orga			
			Address c		]	Name chang			_	85% test, che computation			▶ 📙
\			zation X Sect		<del></del>			N	₁  <i>إ</i>	If private found	dation status	was terminate	d —
			nonexempt charitabl			her taxable p				under section 5			<b>\</b>
			of all assets at		-		ash Acc	rual	F				
		of year (from Pa	art II, col (c), line 897,421.		her (sp					under section 5	07(b)(1)(B).	check here .	▶□
			•		column (	d) must be on ca	asn basis )				- (4	) Disburser	ments
	rart	total of amounts	venue and Expens in columns (b), (c), a	nd (d)		evenue and enses per	(b) Net inve		(c)	Adjusted net		for charita	ble
			rily equal the amoun			books	incom	ne		income	1	purposes cash basis	
	1		its, etc., received (attach so	hedule)							+		,
	2	Check X If th	e foundation is not req	uired to									
	3		ch Sch B			763.		763.					
	4	_	erest from securities	Г		254,678.	25	4,678.					
	5a			ŗ								-	
	ь	Net rental income or											
		Net gain or (loss) fro	m sale of assets not on	line 10		135,602.							
		Gross sales price for a assets on line 6a	all 571	,327.									
	6a b 7	Capital gain net in	come (from Part IV/	ine 2) .			13	5,953.			- 15	ח	
	8	Net short-term cap	oital gain.						_ [	FEC	FIA	ايروك	<b>\</b>
	10a	Income modification	ons								- 0 21	013 <b> </b>	
	1.00	and allowances								SEP SEP	234		<b>}</b>
		Less Cost of goods so								<del> 8                                    </del>			<del>-   -</del>
	11		s) (attach schedule) ach schedule) ATCF			3,059.		2,998.		1-00	DEN	<del>. UI</del>	<del>」</del> —
	12		through 11			394,102.		4,392.		1 00			
<u> </u>	13		cers, directors, trustees			0.					$\neg$		
3	ומי	•	alaries and wages .										
2	15	Pension plans, em	ployee benefits	Г									
2	16a	Legal fees (attach :	schedule)										
٦-۲	D P	Accounting fees (a	attach schedule)			0.4	_					_	
Ō,	<b>≧</b> c	Other professional	fees (attach schedu	le).[2]	_	21,011.	2	1,011.					
ָּן נְ	14 15 a b c 17 18 19 20 21	Interest				E 7/0							
֓֞֝֞֜֜֜֝֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֓֓֓֓֓֡֓֜֡֓֡֓֡֓֡֓֡֓֡֓֡֓֡֡֡֡֡֓֡֓֡֡֡֡֡֡	2 18	Taxes (attach sche-	dule) (see instruction			5,768.							
	E 19	Depreciation (attac	ch schedule) and de	·	<del></del> "								
5 3	20	Occupancy											
5 }	21	•	s, and meetings							<del></del>	-		
	D 22		ations			35,654.		2,559.			<del></del>	3	3,028
	23 24 24 25		itach schedule)A1C nd administrative ex	Г		<u> </u>							
		•	gh 23	•		62,433.	2	3,570.				3	3,028
Č	25		s, grants paid			485,500.					_		5,500
•	26		ursements Add lines 2	Г		547,933.	2	3 <u>,5</u> 70.				51	8,528
•	27	Subtract line 26 fro											
	а	Excess of revenue over	er expenses and disbu	rsements		-153,831.							_
			come (if negative, er	· -			37	0,822.					
		<del></del>	me (if negative, enter									- 600 5	<b>-</b> :
SA I	or Pag	perwork Reduction	Act Notice, see inst	tructions.							Fo	m 990-P	$\Gamma$ (2018)

JSA For Paperwork Reduction Act Notice, see instructions. 8E1410 1 000

Fo	rm 99	0-PF (2018) BERKSHIRE CHARITABLE	FOUNDATION			20-1812559 Page <b>2</b>		
_	and i	Attached schedules and amounts in the	Beginning of year		End o	of year		
<u> </u>	art l	Balance Sheets description column should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value		(c) Fair Market Value		
	1	Cash - non-interest-bearing						
	2	Savings and temporary cash investments	211,552.	272,5	512.	272,512		
	3	Accounts receivable ▶						
		Less allowance for doubtful accounts ▶	6,743.					
	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 ▶						
ets	8	Inventories for sale or use						
ssets	9	Prepaid expenses and deferred charges						
ď	10a	Investments - U S and state government obligations (attach schedule)						
	ь	Investments - corporate stock (attach schedule) ATCH 5	9,194,635.	9,004,2	211.	9,557,774		
	c	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) ATCH 6	85,803.	68,1	L79.	67,135		
	14	Land, buildings, and equipment basis			- 1			
		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)	9,498,733.	9,344,9	902.	9,897,421		
	17	Accounts payable and accrued expenses						
	18	Grants payable						
es	19	Deferred revenue						
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons						
ā	21	Mortgages and other notes payable (attach schedule)						
	22	Other liabilities (describe ►)						
_	23	Total liabilities (add lines 17 through 22)	0.		0.			
'n		Foundations that follow SFAS 117, check here ▶ ☐						
ces		and complete lines 24 through 26, and lines 30 and 31.						
_	24	Unrestricted						
3al	25	Temporarily restricted						
ᅙ	26	Permanently restricted						
Ë		Foundations that do not follow SFAS 117, check here ► X						
Net Assets or Fund Bala		and complete lines 27 through 31			1			
SC	27	Capital stock, trust principal, or current funds						
set	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0 400 733	0 214 0				
As	29	Retained earnings, accumulated income, endowment, or other funds	9,498,733.	9,344,9				
et /	30	Total net assets or fund balances (see instructions)	9,498,733.	9,344,9	102.	<del></del>		
Ž	31	Total liabilities and net assets/fund balances (see	0 400 733					
		Instructions)	9,498,733.	9,344,9	102.			
_		Analysis of Changes in Net Assets or Fund Balar		<del> </del>	1			
1		al net assets or fund balances at beginning of year - Part I		7		0 400 733		
_		-of-year figure reported on prior year's return)			1	9,498,733		
		er amount from Part I, line 27a		T I	2	-153,831		
					3	0 244 000		
		lines 1, 2, and 3	• • • • • • • • • • • • • • • • • • • •		4	9,344,902		
		reases not included in line 2 (itemize)	L 5\ D + " · · · · · · · ·	<del></del>	5	0 244 002		
_6	<u> 10</u> ta	al net assets or fund balances at end of year (line 4 minus	<u>iine 5) - Part II, column (b)</u>	, line 30	6	9,344,902		

ÌΡ		and Losses for Tax on Inv		T /6\		
	, ,	scribe the kind(s) of property sold (for	· · ·	(b) How acquired P - Purchase	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
_	CHE DADE THE COURT	rick warehouse, or common stock, 200	sns MLC Co)	D - Donation	(IIIO, day, yi )	(IIIO , day, yi )
1:		DOLE	<del>-</del>	<del>  -</del>		
	o		<del>.</del>	1		
	<u>,                                     </u>					
_	<u> </u>			<u> </u>		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo ((e) plus (f) minu	
	1					
	)					
	1					
		howing gain in column (h) and owned	by the foundation on 12/21/60	<del> </del>		
	Complete only for assets s		1		Gains (Col (h) ga (k), but not less t	
	(ı) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	COI	Losses (from co	
t					<del></del> -	· · · · · · · · · · · · · · · · · · ·
	i					
2	Capital gain net income	or (net capital loss)	ain, also enter in Part I, line 7			135,953.
3	Net short-term capital a	ا) السلط المناطقة (loss) as defined in sections	oss), enter -0- in Part I, line 7	2		133,933.
J		art I, line 8, column (c) See ins				
				3		0.
Pa			duced Tax on Net Investment I	ncome		- "
Wa			outable amount of any year in the ba	ase perio	d?	Yes X No
1			ar, see the instructions before making	na anv er	ntries	
_	(a)	(b)	(c)	ing arry cr	(d)	
Cal	Base period years endar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		Distribution ra (col (b) divided by	
	2017	492,814.	10,461,694.			0.047107
	2016	505,973.	9,820,344.			0.051523
	2015	517,188.	10,348,508.			0.049977
	2014	517,446.	10,675,829.			0.048469
	2013	488,140.	10,523,313.			0.046387
_	Tatal of loss 4 and one /	1)				0.243463
2	lotal of line 1, column (c	d)		2		0.243463
3	_	o for the 5-year base period - divid		3		0.048693
	the number of years the	foundation has been in existence	of less than 5 years	-		
4	Enter the net value of no	oncharitable-use assets for 2018 f	rom Part X, line 5	4	10,	689,317.
5	Multiply line 4 by line 3.			5		520,495.
•	F	40/ 45		_		3,708.
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		3,700.
7	Add lines 5 and 6			7		524,203.
_				E10 E20		
8	Enter qualifying distribution of grant VI instructions	ons from Part XII, line 4 reater than line 7, check the box	ın Part VI, line 1b, and complete t	8   that part		rate See the

Рa	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	ıction	s)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1 )				
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		7,	416.	
	here and enter 1% of Part I, line 27b				
С	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, others, enter -0-)				
3	Add lines 1 and 2		7,	416.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			0.	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		7,	416.	
6	Credits/Payments	<u> </u>			
а	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 5, 323.				
b	Exempt foreign organizations - tax withheld at source 6b				
С	Tax paid with application for extension of time to file (Form 8868) 6c 2,279.				
d	Backup withholding erroneously withheld				
7	Total credits and payments Add lines 6a through 6d		7,	502.	
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached				
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed				
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			186.	
11	Enter the amount of line 10 to be Credited to 2019 estimated tax ▶ 186. Refunded ▶ 11				
Par	t VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No	
	participate or intervene in any political campaign?	1a		Х	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the				
	instructions for the definition	1b		Х	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				
	published or distributed by the foundation in connection with the activities				
c	Did the foundation file Form 1120-POL for this year?	1c		Х	
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
	on foundation managers   \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х	
	If "Yes," attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles				
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х	
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b			
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	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 either				
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that				
	conflict with the state law remain in the governing instrument?	6	Х	Ĺ	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Х		
	Enter the states to which the foundation reports or with which it is registered. See instructions.				
	DE, PA,				
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				
	(or designate) of each state as required by General Instruction G <sup>2</sup> If "No," attach explanation	8b	Х		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or				
	4942(j)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV If "Yes,"			ĺ	
	complete Part XIV	9	•	Х	
	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				
	names and addresses	10		Х	

Ŗа	T VI-A Statements Regarding Activities (continued)	Tarm and		
		18.00	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		l	
	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	Х	<u> </u>
	Website address ► N/A			
14	The books are in care of ▶ FOUNDATION SOURCE Telephone no ▶ 800-839	-1754	4	
	Located at ▶501 SILVERSIDE ROAD, SUITE 123 WILMINGTON, DE ZIP+4 ▶ 19809-1	377		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		▶	· []
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16	www.oreads	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of			
	the foreign country	<b>35.50</b>	Man.	李松
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	Table 48362	<b>V</b>	l
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	なる	Yes	No
1a	During the year, did the foundation (either directly or indirectly)		<b>256</b>	
-	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No		門歌	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(b) Furnish goods, services, or racinites to (or accept them norm) a disquantica person's			
	(1) tay companies to, or pay or remisers the expenses of a disquestion percent.			
	(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)?			
			<b>100</b>	
	(6) Agree to pay money or property to a government official? (Exception Check "No" if the		1	
	foundation agreed to make a grant to or to employ the official for a period after		4	344
	terrimation of government service, in terrimating within 50 days)			
D	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	1b	.DKARAK	8883
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	Market Co	****	3
_	Organizations relying on a current notice regarding disaster assistance, check here		<b>100</b>	37
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 before the first day of the tax year beginning in 2018?	1 c	ENGLER	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	Washing.	ALC:	70
-	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			70
	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and			
a	6e, Part XIII) for tax year(s) beginning before 2018?			
	If "Yes," list the years			1
h	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			4
•	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions )	2b	244622240	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	遊遊	<b>10.34</b>	4
•	b	388	1	100
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			1
•••	at any time during the year? Yes X No		<b>100</b>	
b	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or			
_	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the		<b>334</b>	
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of	<b>多</b> 認		<b>AR</b>
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	<b>多</b>		
	foundation had excess business holdings in 2018)	3b		
<b>4</b> a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	***	***	198
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b		X

<u>,</u> Par	t VII-B	Statements Regarding Activities	<u>for Which Form</u>	4720 May Be Red	juired (cont	tinued)			
5a	During the	e year, did the foundation pay or incur any amo	ount to					Yes	No
	(1) Carry	on propaganda, or otherwise attempt to influ	ence legislation (section	on 4945(e))?	. Yes	X No			
	(2) Influe	nce the outcome of any specific public ele	ection (see section	4955), or to carry or	٦,				
	direct	y or indirectly, any voter registration drive?			Yes	X No			
		le a grant to an individual for travel, study, or o				X No			
		e a grant to an organization other than a		· · · · · · · · · · · · · · · · · · ·	_	·			
		n 4945(d)(4)(A)? See instructions				X No			
		e for any purpose other than religious, ch					ľ		
	• •	ses, or for the prevention of cruelty to children	•			X No			
b	<u> </u>								
		s section 53 4945 or in a current notice regar					5b		
		ons relying on a current notice regarding disa					ר די		
С	-	swer is "Yes" to question 5a(4), does the					71		
	because it maintained expenditure responsibility for the grant? Yes No								
		ttach the statement required by Regulations si	-						
6a		oundation, during the year, receive any fur		ectly to pay premiur	ns				
		nal benefit contract?	·=			X No			
ь	Did the for	undation, during the year, pay premiums, dire	ectly or indirectly, on a	personal benefit contra	ict?		6ь		Х
		6b, file Form 8870	<b>,</b>	F					
7a	At any tim	e during the tax year, was the foundation a page	arty to a prohibited tax	x shelter transaction?	Yes	X No			
b	•	d the foundation receive any proceeds or have	•	•	_	_	7b		
8	Is the four	idation subject to the section 4960 tax on pay	ment(s) of more that	n \$1,000,000 in					
	remunerat	ion or excess parachute payment(s) during the	year <sup>?</sup>		. Yes	X No			
Pari	VIII	Information About Officers, Director	rs, Trustees, Fou	ndation Managers	s, Highly Pa	aid Emplo	yees,		
1 1		and Contractors licers, directors, trustees, and foundati	on managers and	their compensation	See instruc	tions			
		<del></del>	(b) Title, and average		(d) Contribut	ions to	(e) Expens	е ассоц	ınt,
		(a) Name and address		(c) Compensation (If not paid, enter -0-)		ions to efit plans	(e) Expens		
		<del></del>	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contribut employee bene	ions to efit plans inpensation			s
		<del></del>	(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contribut employee bene	ions to efit plans			
		<del></del>	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contribut employee bene	ions to efit plans inpensation			s
		<del></del>	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contribut employee bene	ions to efit plans inpensation			s
		<del></del>	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contribut employee bene	ions to efit plans inpensation			s
		<del></del>	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contribut employee bene	ions to efit plans inpensation			s
		<del></del>	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contribut employee bene	ions to efit plans inpensation			s
ATCH	7	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter-0-)	(d) Contribut employee bene and deferred con	ions to affi plans appensation	other all	owance	0.
ATCH	7	<del></del>	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter-0-)	(d) Contribut employee bene and deferred con	ions to affi plans appensation	other all	owance	0.
ATCH	7 Compens:	(a) Name and address  ation of five highest-paid employees	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter-0-)	(d) Contributemployee beneared deferred con	nstruction	s). If no	one, o	0.
ATCH	7 Compens:	(a) Name and address	(b) Title, and average hours per week devoted to position  (other than thos	(c) Compensation (if not paid, enter-0-)	(d) Contribut employee bene and deferred con  e 1 - see i  (d) Contribut employee plans and de	nost to enefit plans no not ruction:  nstruction: enefit eferred	other all	one, e	0.
ATCH	7 Compens:	(a) Name and address  ation of five highest-paid employees	(b) Title, and average hours per week devoted to position  (other than thos	(c) Compensation (if not paid, enter-0-)  0.	(d) Contribute mployee beneated conditions and deferred conditions and deferred conditions are the conditions and deferred conditions are the cond	nost to enefit plans no not ruction:  nstruction: enefit eferred	s). If no	one, e	0.
2 (a) N	7 Compensa NONE."	(a) Name and address  ation of five highest-paid employees	(b) Title, and average hours per week devoted to position  (other than thos	(c) Compensation (if not paid, enter-0-)  0.	(d) Contribut employee bene and deferred con  e 1 - see i  (d) Contribut employee plans and de	nost to enefit plans no not ruction:  nstruction: enefit eferred	s). If no	one, e	0.
2 (a) N	7 Compens:	(a) Name and address  ation of five highest-paid employees	(b) Title, and average hours per week devoted to position  (other than thos	(c) Compensation (if not paid, enter-0-)  0.	(d) Contribut employee bene and deferred con  e 1 - see i  (d) Contribut employee plans and de	nost to enefit plans no not ruction:  nstruction: enefit eferred	s). If no	one, e	0.
2 (a) N	7 Compensa NONE."	(a) Name and address  ation of five highest-paid employees	(b) Title, and average hours per week devoted to position  (other than thos	(c) Compensation (if not paid, enter-0-)  0.	(d) Contribut employee bene and deferred con  e 1 - see i  (d) Contribut employee plans and de	nost to enefit plans no not ruction:  nstruction: enefit eferred	s). If no	one, e	0.
2 (a) N	7 Compensa NONE."	(a) Name and address  ation of five highest-paid employees	(b) Title, and average hours per week devoted to position  (other than thos	(c) Compensation (if not paid, enter-0-)  0.	(d) Contribut employee bene and deferred con  e 1 - see i  (d) Contribut employee plans and de	nost to enefit plans no not ruction:  nstruction: enefit eferred	s). If no	one, e	0.
2 (a) N	7 Compensa NONE."	(a) Name and address  ation of five highest-paid employees	(b) Title, and average hours per week devoted to position  (other than thos	(c) Compensation (if not paid, enter-0-)  0.	(d) Contribut employee bene and deferred con  e 1 - see i  (d) Contribut employee plans and de	nost to enefit plans no not ruction:  nstruction: enefit eferred	s). If no	one, e	0.
2 (a) N	7 Compensa NONE."	(a) Name and address  ation of five highest-paid employees	(b) Title, and average hours per week devoted to position  (other than thos	(c) Compensation (if not paid, enter-0-)  0.	(d) Contribut employee bene and deferred con  e 1 - see i  (d) Contribut employee plans and de	nost to enefit plans no not ruction:  nstruction: enefit eferred	s). If no	one, e	0.
2 (a) N	7 Compensa NONE."	(a) Name and address  ation of five highest-paid employees	(b) Title, and average hours per week devoted to position  (other than thos	(c) Compensation (if not paid, enter-0-)  0.	(d) Contribut employee bene and deferred con  e 1 - see i  (d) Contribut employee plans and de	nost to enefit plans no not ruction:  nstruction: enefit eferred	s). If no	one, e	0.
2 (a) N	7 Compensa NONE."	(a) Name and address  ation of five highest-paid employees	(b) Title, and average hours per week devoted to position  (other than thos	(c) Compensation (if not paid, enter-0-)  0.	(d) Contribut employee bene and deferred con  e 1 - see i  (d) Contribut employee plans and de	nost to enefit plans no not ruction:  nstruction: enefit eferred	s). If no	one, e	0.
2 (a) N	7 Compensa NONE."	(a) Name and address  ation of five highest-paid employees	(b) Title, and average hours per week devoted to position  (other than thos	(c) Compensation (if not paid, enter-0-)  0.	(d) Contribut employee bene and deferred con  e 1 - see i  (d) Contribut employee plans and de	nost to enefit plans no not ruction:  nstruction: enefit eferred	s). If no	one, e	0.
2 (a) N	7 Compensa NONE."	(a) Name and address  ation of five highest-paid employees	(b) Title, and average hours per week devoted to position  (other than thos  (b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter-0-)  0.	(d) Contribut employee bene and deferred con  e 1 - see i  (d) Contribut employee plans and de	nost to enefit plans no not ruction:  nstruction: enefit eferred	s). If no	one, e	0.

Form	rm 990-PF (2018)		Page <b>7</b>
Pa	art VIII Information About Office and Contractors (continu	ers, Directors, Trustees, Foundation Managers, Highly Paid Emplo ed)	yees,
3	Five highest-paid independent cor	ntractors for professional services. See instructions. If none, enter "NONI	E."
	(a) Name and address of eac	h person paid more than \$50,000 (b) Type of service	(c) Compensation
NOI	ONE		_
			0.
		<del></del>	
_			
		0,000 for professional services	
	art IX-A Summary of Direct Cha		
	organizations and other beneficiaries served, confe	activities during the tax year. Include relevant statistical information such as the number of rences convened, research papers produced, etc.	Expenses
1	N/A		
2			
		- <u></u>	
3			
•	·		
•			
4			
	AND Comment December 1	Deleted Investments (see metrostone)	
		Related Investments (see instructions) ents made by the foundation during the tax year on lines 1 and 2	Amount
1	NONE	ents made by the localization during the tax year on lines 1 and 2	
2			
	All other program-related investments See instruct	ings	
3			
•	NONE		
_ •			
Tota	tal. Add lines 1 through 3		

Form **990-PF** (2018)

Form 990-PF (2018)

Pai	Int X Minimum Investment Return (All domestic foundations must complete this part. For see instructions.)	eign found	ations,
ì	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
а	Average monthly fair market value of securities	1a	10,535,758.
	Average of monthly cash balances		245,917.
	Fair market value of all other assets (see instructions).		70,423.
ď			10,852,098.
-	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	<b> </b> 2	
3	Subtract line 2 from line 1d		10,852,098.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
•	instructions)		162,781.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4.		10,689,317
6	Minimum investment return. Enter 5% of line 5	-	534,466.
	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for and certain foreign organizations, check here ▶ and do not complete this part )		· ·
1	Minimum investment return from Part X, line 6	1	534,466.
2 a	Tax on investment income for 2018 from Part VI, line 5 2a 7,416		
- b	Income tax for 2018 (This does not include the tax from Part VI).	1	
	Add lines 2a and 2b	7 2c	7,416.
3	Distributable amount before adjustments Subtract line 2c from line 1	1 1	527,050.
4	Recoveries of amounts treated as qualifying distributions.		
5	Add lines 3 and 4		527,050.
6	Deduction from distributable amount (see instructions)		
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
-	line 1		527,050.
Par	rt XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	T	
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1 <sub>a</sub>	518,528.
	Program-related investments - total from Part IX-B		<del></del>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	1 1	
3	Amounts set aside for specific charitable projects that satisfy the		
	Suitability test (prior IRS approval required)	3a	
	Cash distribution test (attach the required schedule)		
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4		518,528.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
•	Enter 1% of Part I, line 27b See instructions.		0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		518,528.
•	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when of		<u>.</u>
	qualifies for the section 4940(e) reduction of tax in those years	alculating v	mether the foundation

Form **990-PF** (2018)

Form 990-PF (2018)

Page 9

Ρā	Undistributed income (see insti	ructions)			
1	Distributable amount for 2018 from Part XI,	(a) Corpus	(b) Years prior to 2017	(c) 2017	( <b>d)</b> 2018
	line 7				527,050.
	Undistributed income, if any, as of the end of 2018			509,056.	
a	Enter amount for 2017 only			303,030.	
	7 Total for pnor years 20 16 ,20 15 ,20 14	<del>-</del>			<del></del>
3	Excess distributions carryover, if any, to 2018				
a	From 2013	•			
t	From 2014				
C	: From 2015				
c	I From 2016				
е	From 2017				
f	Total of lines 3a through e				
4	Qualifying distributions for 2018 from Part XII,				
	line 4 ▶ \$ 518,528.			500 056	
	Applied to 2017, but not more than line 2a			509,056.	····································
t	Applied to undistributed income of prior years (Election required - see instructions)				
C	Treated as distributions out of corpus (Election required - see instructions)				
d	Applied to 2018 distributable amount				9,472.
	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2018				
	(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				
ь	Prior years' undistributed income Subtract				
	line 4b from line 2b				
¢	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 2017 Subtract line 4a from line 2a Taxable amount - see instructions				
f	Undistributed income for 2018 Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2019				517,578.
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 2013 not				
	applied on line 5 or line 7 (see instructions)				<del>.</del>
9	Excess distributions carryover to 2019.  Subtract lines 7 and 8 from line 6a	0.			
0	Analysis of line 9				
	Excess from 2014		ii		
	Excess from 2015				
	Excess from 2016		'		
	Excess from 2017		İ		
	Excess from 2018				
<u>~~</u>				<u> </u>	

Рa	rt XIV Private Op	erating Foundations	(see instructions a	nd Part VII-A, questi	on 9)	N	OT APPI	LICABLE
	a If the foundation has received a ruling or determination letter that it is a private operating							
	foundation, and the ruling			•				
h	Check box to indicate v				section	4942(r)(	3) or	4942(j)(5)
			is a private operating		Section	1 4342(f)(	3) 01	4942())(3)
2 a	Enter the lesser of the ad- justed net income from Part	Tax year		Prior 3 years	r		(e)	Total
	I or the minimum investment	(a) 2018	(b) 2017	(c) 2016	(d) 20	V15		
	return from Part X for each							
	year listed							_
b	85% of line 2a							
С	Qualifying distributions from Part				1			
_	XII, line 4 for each year listed .							
d	Amounts included in line 2c not							
	used directly for active conduct							
	of exempt activities							-
-	Qualifying distributions made directly for active conduct of							
	exempt activities. Subtract line		/					
3	2d from line 2c				ļ	-		
•	alternative test relied upon				[			
а	"Assets" alternative test - enter							
	(1) Value of all assets							
	(2) Value of assets qualifying							
	under section 4942(j)(3)(B)(i)							
b	"Endowment" alternative test-			-				
	enter 2/3 of minimum invest-							
	ment return shown in Part X. line 6 for each year listed							
	"Support" alternative test - enter							
	(1) Total support other than		,					
	gross investment income		İ					
	(interest, dividends, rents, payments on securities							
	loans (section 512(a)(5)),	/				Ì		
	or royalties)							
	(2) Support from general public and 5 or more							
	exempt organizations as provided in section 4942							
	()((3)(B)(⊞)							
	(3) Largest amount of sup-							
	port from an exempt organization							
	(4) Grass investment income.							
Par	t XV Supplemen	ntary Information (C	complete this part	only if the founda	tion had \$	5,000 or	more in	assets at
	any time d	uring the year - see	instructions.)	•				
1	Information Regarding	g Foundation Manager	s:					
а	List any managers of	the foundation who h	ave contributed more	e than 2% of the total	I contributio	ns receive	d by the	foundation
	before the close of any	tax year (but only if th	ey have contributed m	nore than \$5,000) (Se	ee section 50	)7(d)(2) )		
	NONE							
h	List any managers of	the foundation who o	own 10% or more of	the stock of a corn	oration (or a	an equally	large no	rtion of the
	ownership of a partner			•	•	an oquany	id.go po	
		,,		<b>3</b>				
	N/A							
_	Information Regarding	- Contribution Count	Cift Loan Scholorob	in ata Brassama				
	<u> </u>	•		• • •				
	Check here ▶ 🔀 if the	he foundation only r	nakes contributions	to preselected chari	table organ	ızatıons ar	nd does	not accept
	unsolicited requests for			nts, etc., to individua	ls or organiz	zations und	ler other	conditions,
	complete items 2a, b, c	·						
а	The name, address, ar	nd telephone number o	or email address of th	e person to whom app	lications sho	uld be addr	essed	
b	The form in which appl	ications should be sub	mitted and informatio	n and materials they	should includ	le		
c	Any submission deadlir	nes						
- '	,							

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

Part XV Supplementary Information (continued)

Page **11** 

3 Grants and Contributions Paid During the Year or Approved for Future Payment  Recipient Name and address (home or business)  Recipient Show any relationship to any foundation manager or substantial contributor Substantial contributor			Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount			
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Amount			
a Paid during the year							
• •							
ATCH 8							
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Total			▶ 3a	485,500.			
b Approved for future payment							
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Total			<b>▶</b> 3h				

Form 990-PF		ucina Act	ivities			Page 12
			y section 512, 513, or 514	(e)		
_	amounts unless otherwise indicated	(a) Business code	(b) Amount	(c)	(d) Amount	Related or exempt function income
-	n service revenue					(See instructions )
						ü
	<del></del>					
-				<del>  -  </del>		<del> </del>
				-		. <del></del>
						· · · · ·
f g Fees	and contracts from government agencies			-		
2 Member	rship dues and assessments					
3 Interest	on savings and temporary cash investments -			14	763.	
4 Dividen	ds and interest from securities			14	254,678.	
5 Net rent	tal income or (loss) from real estate					
a Debi	t-financed property					<del></del>
<b>b</b> Not	debt-financed property					
6 Net renta	al income or (loss) from personal property					
7 Other in	ivestment income					
8 Gain or (	loss) from sales of assets other than inventory	525990	-351.	18	135,953.	
9 Net inco	ome or (loss) from special events			ļ		
	rofit or (loss) from sales of inventory					
11 Other re	evenue a K-1 INC/LOSS	525990	54.	14	3,005.	
b						
c						· · · · · · · · · · · · · · · · · · ·
d						
е	·					
	I Add columns (b), (d), and (e)		-297.		394,399.	<del></del>
	dd line 12, columns (b), (d), and (e)				13	394,102.
	heet in line 13 instructions to verify calcu				_	w = .
Part XVI	B Relationship of Activities	s to the A	ccomplishment of Ex	tempt Purp	poses	
Line No.	Explain below how each activity	y for which	n income is reported in	n column (e	e) of Part XVI-A contribu	ited importantly to the
lacktriangledown	accomplishment of the foundation	n's exemp	t purposes (other than b	y providing	funds for such purposes	(See instructions )
					<del></del>	·
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			. <u> </u>			
	1					

Form 990-P	PF (2018)	BERKSHIRE	CHARITABLE FOUNDAT	ION		20-1812	2559	Pa	ge 13
Part XV	/II Information F Exempt Orga		nsfers to and Transact	ons and	d Relationship	os With Nonc	harit	able	<b>;</b>
1 Did	the organization direc	tly or indirectly e	ngage in any of the followin	g with ar	ny other organiza	tion described		Yes	No
ın s			501(c)(3) organizations) or						
-		na foundation to a	a noncharitable exempt orgai	nization of					
		_					1a(1)		Х
									Х
	er transactions						15(-)		
		oncharitable exem	pt organization				16(1)		Х
			le exempt organization						Х
			ssets						Х
		•							Х
									Х
			o or fundraising solicitations.						Х
			, other assets, or paid employ						Х
		•	" complete the following s					fair m	narke
			es given by the reporting fo						
			ement, show in column (d) t						
(a) Line no	(b) Amount involved	(c) Name of no	ncharitable exempt organization	(d) Des	cription of transfers, t	ransactions, and shar	ing arra	ngeme	nts
	N/A			N/A					
						-			
- "									
		-	iated with, or related to, on ion 501(c)(3)) or in section 5			·		s X	l No
	es," complete the follo		(0)(0), 0: 000						J
	(a) Name of organization		(b) Type of organization		(c) De	escription of relations	hip		
			·						
			d this return, including accompanying s			best of my knowledg	e and b	elief, it	is true
Sign   Sign	orrect, and complete Declaration	of preparer (other than tax	payer) is based on all information of which	preparer has a	any knowledge				
	Marchan 4	Abuna	E 8/27/19	Trea	surer Isea	May the IRS with the pre			
Here   '	Signature of officer or trustee	Al rate	Date	Title		See instruction	`	-	No
	Print/Type preparer's na	ame	Preparer's signature	_	Date	Charli	MIT		
Paid	JEFFREY D HAS		JEFFREY D HASKELL		08/06/201		P013	4577	0
Prepare	. 7	OUNDATION SO	I .		<del></del>	<del></del>			<del>-</del>
	Firm's name		01.00		Firm	n's EIN ► 51039	,054	•	

11042

Form **990-PF** (2018)

800-839-1754

Phone no

Use Only Firm's address ▶ ONE HOLLOW LN, STE 212

LAKE SUCCESS, NY

Part I, Line 6a (990-PF) - Net Gain/(Loss) from Sales of Assets Not Included in Part IV

Name	Date Acquired	Acquisition Method	Date Sold	Gross Sales Price	Book Basis	Net Gain/(Loss)
Publicly-traded Securities Passthrough K-1 Capital Gain/(Loss) - non UBI				\$ 571,327	\$ 445,418	\$ 125,909 \$ 10,044
Total included in Part IV				\$ 571,327	\$ 445,418	\$ 135,953
Passthrough K-1 Capital Gain/(Loss) - UBI						\$ (351)
Part I, Line 6a Total						\$ 135,602

ATTACHMENT

- OTHER INCOME FORM 990PF, PART I DESCRIPTION K-1 INC/LOSS NB CROSSROADS FUND XVIII

TOTALS

NET INVESTMENT INCOME 2,998. 2,998. REVEL AND EXPENSES PER BOOKS 3,059. 3,059.

REVENUE

20-1812559

ATTACHMENT 2

- OTHER PROFESSIONAL FEES PART I FORM 990PF,

NET INVESTMENT INCOME	21,011.	21,011.
REVENUE AND EXPENSES PER BOOKS	21,011.	21,011.
DESCRIPTION	INVESTMENT MANAGEMENT SERVICES	TOTALS

## ATTACHMENT 3

## FORM 990PF, PART I - TAXES

REVENUE AND EXPENSES PER BOOKS

DESCRIPTION

990-PF ESTIMATED TAX FOR 2018 990-PF EXTENSION FOR 2017

4,600. 1,168.

TOTALS

5,768.

20-1812559

ATTACHMENT 4

- OTHER EXPENSES PART I FORM 990PF,

REVENUE AND EXPENSES	PER BOOKS 33,003 2,626 25
	FUND XVI FEES
	DESCRIPTION ADMINISTRATIVE FEES K-1 EXP NB CROSSROADS FUND XVI STATE OR LOCAL FILING FEES

NET	INVESTMENT			2,559		
AND	EXPENSES	PER BOOKS	33,003.	2,626.	25.	

2,559.

BLE ES	003.	25.	
CHARITABLE PURPOSES	33,		

2,559.

35,654.

TOTALS

ATTACHMENT 5

## FORM 990PF, PART II - CORPORATE STOCK

ENDING	3,727,010. 811,399. 501,613. 690,525. 1,342,296. 2,484,931.
ENDING BOOK VALUE	3,130,446. 844,673. 511,355. 677,229. 1,382,162. 2,458,346.
DESCRIPTION	VANGUARD INDEX TR VANGUARD TOT VANGUARD INTERMEDIATE TERM INV VANGUARD SHORT-TERM CORPORATE VANGUARD TOT INTL BOND IX ADMI VANGUARD TOTAL BOND MARKET IND VANGUARD TOTAL INT ST IDX-AD

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ATTACHMENT 6

2018 FORM 990-PF

BERKSHIRE CHARITABLE FOUNDATION

FORM 990PF, PART II - OTHER INVESTMENTS

DESCRIPTION

ENDING BOOK VALUE

ENDING

NB CROSSROADS FUND XVIII-ASSET

68,179.

67,135.

67,135.

TOTALS

68,179.

## 2018 FORM 990-PF BERKSHIRE CHARITABLE FOUNDATION 20-1812559 FORM 990-PF - PART IV CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

L CA	APITAL GA	NS AND LO	SSES FUI	K IAX UN I	NAF211	VII	ENT INCOM	<u></u>
Kind of P				ription		οr	Date acquired	Date sold
Gross sale	Depreciation	Cost or	FMV	Adj basis	Excess of	쒸	Gain	
price less	allowed/	other	as of 12/31/69	as of 12/31/69	FMV over		or (loss)	
expenses of sale	allowable	basis	12/31/69	12/31/69	adı basıs	Ц	(loss)	
		PUBLICLY-TRA	ADED SECURIT	PIES		Н		
571,327.		445,418.					125,909.	
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		PASSTHROUGH	<b>ይ</b> 1 ሮአርተሞአ፣	CATM//IOCC)				
		FASSTIIKOUGII	MI CAPITAL	GAIN/ (LOSS)		$  \  $		
						Ш	10,044.	
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TOTAL GAIN(LO	SS)	 				Н	135,953.	
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EXPENSE ACCT AND OTHER ALLOWANCES ATTACHMENT 0 0 CONTRIBUTIONS BENEFIT PLANS TO EMPLOYEE . 0 COMPENSATION TITLE AND AVERAGE HOURS PER - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES WEEK DEVOTED TO POSITION TRUSTEE, VP, MEMBER TRUSTEE, MEMBER 1.00 FOUNDATION SOURCE 501 SILVERSIDE RD \*REMOVED FROM FOUNDATION IN 2018 WILMINGTON, DE 19809-1377 PART VIII JEFFREY W BOWMAN\* NAME AND ADDRESS LAURA E BOWMAN FORM 990PF,

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FOUNDATION SOURCE 501 SILVERSIDE RD

WILMINGTON, DE 19809-1377

ANDREW ROTHERMEL FOUNDATION SOURCE 501 SILVERSIDE RD WILMINGTON, DE 19809-1377	TRUSTEE, ASSISTANT TREAS 1.00	. 0	.0	
ELIZABETH B ROTHERMEL FOUNDATION SOURCE 501 SILVERSIDE RD WILMINGTON, DE 19809-1377	PRES, TRUSTEE, MEMBER 1.00	. 0	.0	

.0	MEMBER 0	TRUSTEE, VP, MEM 1.00	HELENE B SHUMATE FOUNDATION SOURCE 501 SILVERSIDE RD WILMINGTON, DE 19809-1377
			NGTON, DE 19809-1377
		1.00	DATION SOURCE 501 SILVERSIDE RD
.0 0.	MBER 0	, VP, I	IE B SHUMATE

ATTACHMENT 7

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	ERS, DIRECTORS, AND TRUSTEES		ATTACH	ATTACHMENT 7 (CONT'D)
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
JONATHAN SHUMATE FOUNDATION SOURCE 501 SILVERSIDE RD WILMINGTON, DE 19809-1377	TRUSTEE, SEC, TREAS 1.00	Ċ	. 0	·
	GRAND TOTALS	0	0	.0

20-1812559

2018 FORM 990-PF

BERKSHIRE CHARITABLE FOUNDATION

ATTACHMENT 8

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION AN	AMOUNT
AGAINST ALL ODDS EMPOWERMENT CENTER INC	N/A	GENERAL & UNRESTRICTED	10,000
PO BOX 39201	PC		
CHARLOTTE, NC 28278			
ALEXANDER GRAHAM MIDDLE SCHOOL PARENT TEACHER ORGA	N/A	GENERAL & UNRESTRICTED	5,000
1800 RUNNYMEDE LN	20		
CHARLOTTE, NC 28211			
ALEXANDER GRAHAM MIDDLE SCHOOL PARENT TEACHER ORGA	N/A	BULLDOG CLUB	5,000
1800 RUNNYMEDE LN	22		
CHARLOTTE, NC 28211			
AMHERST COLLEGE TRUSTEES	N/A	GENERAL & UNRESTRICTED	5.000
PO BOX 5000	P.		
AMHERST, MA 01002			
APPLE RIDGE FARM INCORPORATED	N/A	GEWERAL & UNRESTRICTED	15,000
541 LUCK AVE SW STE 304	22.		
ROANOKE, VA 24016			
BAPTIST CHILDRENS HOMES OF NORTH CAROLINA INC	N/A	GENERAL & UNRESTRICTED	5,000
PO BOX 338	PC		
THOMASVILLE, NC 27361			

20-1812559

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
BOYS & GIRLS CLUBS OF SOUTHWEST VIRGINIA INC	4. 2.	GENERAL & INREGRATOTED	000
1714 9TH ST SE	PC PC		
ROANOKE, VA 24013			
BRADLEY FREE CLINIC OF ROANOKE VALLEY	N/A	GENERAL 6 UNRESTRICTED	20,000
1240 3RD ST SW	PC		
ROANOKE, VA 24016			
CHARLOTTE CENTER FOR URBAN MINISTRY INC	N/A	GENERAL & UNRESTRICTED	10,000
PO BOX 31335	PC		
CHARLOTTE, NC 28231			
CHARLOTTE RESCUE MISSION	N/P	GENERAL & UNRESTRICTED	15,000
907 W 1ST ST	PC		
CHARLOTTE, NC 28202			
DILMORTH CENTER FOR CHEMICAL DEPENDENCY INC	N/A	GENERAL & UNRESTRICTED	10,000
2240 PARK RD	PC		
CHARLOITE, NC 28203			
EASY DOES IT INC	N/P	GENERAL & UNRESTRICTED	10,000
1300 HILLTOP RD	PC		
LEESPORT, PA 19533			

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
FOUNDATION FOR THE READING PUBLIC MUSEUM 500 MUSEUM RD READING, PA 19611	N/A PC	GENERAL & UNRESTRICTED	20,000
GOGGLE WORKS 201 WASHINGTON ST READING, PA 19601	N/A PC	GENERAL & UNRESTRICTED	10,000
GREATER BERKS FOOD BANK 117 MORGAN DR READING, PA 19608	N/A PC	GENERAL & UNRESTRICTED	10,000
HABITAT FOR HUMANITY INTERNATIONAL INC 531 CANAL ST STE 404 READING, PA 19602	N/A PC	GENERAL & UNRESTRICTED	12,500
HANLEY CENTER FOUNDATION INC 700 S DIXIE HWY STE 103 WEST PALM BCH, FL 33401	N/A PC	GENERAL & UNRESTRICTED	20,000
HISTORIC PRESERVATION TRUST OF BERKS COUNTY PENNSY PO BOX 245 DOUGLASSVILLE, PA 19518	N/A PC	GENERAL & UNRESTRICTED	10,000

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
RECIPIENT NAME AND ADDRESS	AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
HISTORICAL SOCIETY OF BERKS COUNTY 940 CENTRE AVE	N/A PC	BERKS HISTORY CENTER	3,000
NEADING, FA 19001 HOSPITALITY HOUSE OF CHARLOTTE 1400 SCOTT AVE CHARLOTTE, NC 28203	N/A PC	GENERAL & UNRESTRICTED	5, 000
JEFFERSON CENTER FOUNDATION LTD 541 LUCK AVE SW ROANOKE, VA 24016	N/A PC	GENERAL & UNRESTRICTED	5, 000
LOAVES & FISHES INC 648 GRIFFITH RD STE B CHARLOTTE, NC 28217	N/A PC	GENERAL & UNRESTRICTED	5, 000
MISS HALLS SCHOOL INC 492 HOLMES RD PITTSFIELD, MA 01201	N/A PC	GENERAL & UNRESTRICTED	5, 000
OLIVET BOYS AND GIRLS CLUB OF READING AND BERKS CO 1161 PERSHING BLVD READING, PA 19611	N/A PC	GENERAL & UNRESTRICTED	10,000

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	AMOUNT	5,000			20,000			10,000			2,000			10,000			10,000		
	PURPOSE OF GRANT OR CONTRIBUTION	GENERAL & UNRESTRICTED			GENERAL & UNRESTRICTED			GENERAL & UNRESTRICTED			SHARON SCHOOL PTA ANNUAL FUND			GENERAL & UNRESTRICTED			GENERAL & UNRESTRICTED		
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND	FOUNDATION STATUS OF RECIPIENT	N/A	PC		N/A	PC		N/A	OOV		N/A	PC		N/A	PC		N/A	000	
	RECIPIENT NAME AND ADDRESS	ONAWAY CAMP TRUST	27 CAMP ONAWAY DR	HEBRON, NH 03241	OPPORTUNITY HOUSE	430 N 2ND ST	READING, PA 19601	PENNSYLVANIA STATE UNIVERSITY - PENN STATE BERKS	TULPEHOCKEN RD PO BOX 7009	READING, PA 19610	PTA NORTH CAROLINA CONGRESS	4330 FOXCROFT RD	CHARLOTTE, NC 28211	READING HOSPITAL	6TH AVE AT SPRUCE ST	WEST READING, PA 19611	READING PUBLIC LIBRARY	100 S 5TH ST	READING, PA 19602

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
SAFE BERKS 255 CHESTNUT ST READING, PA 19602	N/A PC	GENERAL & UNRESTRICTED	25, 000
SALEM MINISTERS CONFERENCE COMMUNITY FOOD PANTRY PO BOX 288 SALEM, VA 24153	N/A PC	GENERAL & UNRESTRICTED	5, 000
SECOND HARVEST FOOD BANK OF METROLINA INC 500 SPRAIT ST CHARLOTTE, NC 28206	N/A PC	GENERAL & UNRESTRICTED	5, 000
ST STEPHEN UNITED METHODIST PRESCHOOL 6800 SARDIS RD CHARLOTTE, NC 28270	N/A PC	GENERAL & UNRESTRICTED	5, 000
THE FRIENDS OF READING HOSPITAL PO BOX 16052 READING, PA 19612	N/A PC	GENERAL & UNRESTRICTED	5, 000
THE HARVEST CENTER OF CHARLOTTE INC PO BOX 668208 CHARLOTTE, NC 28266	N/A PC	GENERAL & UNRESTRICTED	5,000

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10,000 10,000 25,000 10,000 25,000 AMOUNT ATTACHMENT 8 (CONT'D) PURPOSE OF GRANT OR CONTRIBUTION GENERAL & UNRESTRICTED GENERAL & UNRESTRICTED GENERAL & UNRESTRICTED CAPITAL CAMPAIGN SPLASH PROGRAM RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR FOUNDATION STATUS OF RECIPIENT N/A N/A PC N/A PC N/A PC N/A PC PC C YOUNG MENS CHRISTIAN ASSOCIATION OF VIRGINIAS BLUE YOCUM INSTITUTE FOR ARTS EDUCATION INC RECIPIENT NAME AND ADDRESS UNITED WAY OF BERKS COUNTY WYOMISSING PUBLIC LIBRARY WYOMISSING, PA 19610 THE SALVATION ARMY READING, PA 19603 READING, PA 19609 READING, PA 19603 9 READING BLVD 3000 PENN AVE 301 S 5TH ST PO BOX 702

TOTAL CONTRIBUTIONS PAID

ROANOKE, VA 24009

PO BOX 2130

485,500

ATTACHMENT 8