DLN: 93491135021859

OMB No 1545-0052

2018

# **Return of Private Foundation**

Department of the Treasury Internal Revenue Service

Form 990-PF

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 <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

For	caler	ndar year 2018, or tax year beginning 01-01-20	)18 , aı	nd ending 12-31	-2018			
		indation KHORSE FOUNDATION		A Employer io	lentification numbe	r		
111	IL BLAC	MIONSE FOUNDATION		23-2725907				
		street (or P O box number if mail is not delivered to street address)	Room/suite	B Telephone nu	ımber (see instructio	ns)		
4:	54 SOU	TH MAIN STREET		(570) 822-115	B Telephone number (see instructions)			
		, state or province, country, and ZIP or foreign postal code		, ,				
WIL	KESBAR	RE, PA 18701		C If exemption	application is pendin	g, check here		
G Ch	neck al	l that apply 🔲 Initial return 🔲 Initial return of a	former public charity	<b>D 1.</b> Foreign or	ganızatıons, check h	ere .		
		☐ Final return ☐ Amended return			rganizations meeting			
		Address change Name change		test, chec	ck here and attach co	mputation 🕨 🔼		
H Ch	neck ty	pe of organization $\Box$ Section 501(c)(3) exempt private	foundation		undation status was on 507(b)(1)(A), chec			
	Section	4947(a)(1) nonexempt charitable trust  Other taxable	e private foundation					
			☑ Cash ☐ Accru		ation is in a 60-mont			
		rom Part II, col (c), ▶\$ 6,434,773		under section	on 507(b)(1)(B), chec	ck nere		
		(Part I, column (d) must	be on cash basis )					
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and	(h) Not investment	(a) Advisted not	(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) Net investment income	(c) Adjusted net income	for charitable purposes		
			I Books			(cash basis only)		
	1	Contributions, gifts, grants, etc , received (attach schedule)	868,278					
	2	Check ▶ ☐ If the foundation is <b>not</b> required to attach						
		Sch B						
	3	Interest on savings and temporary cash investments	3,169	, , , , , , , , , , , , , , , , , , ,				
	4	Dividends and interest from securities	105,007	, , , , , , , , , , , , , , , , , , ,				
	5a	Gross rents	4,500	4,500	,			
e	6a	Net rental income or (loss) -1,913  Net gain or (loss) from sale of assets not on line 10	29,866					
Ĭ	١.		,					
Revenue	b   7	Gross sales price for all assets on line 6a 60,039  Capital gain net income (from Part IV, line 2)		29,866				
~	8	Net short-term capital gain		25,000	1			
	9	Income modifications						
	10a	Gross sales less returns and allowances						
	ь	Less Cost of goods sold						
	c	Gross profit or (loss) (attach schedule)						
	11	Other income (attach schedule)						
	12	Total. Add lines 1 through 11	1,010,820	142,542	2			
	13	Compensation of officers, directors, trustees, etc	0	С	)	(		
	14	Other employee salaries and wages						
6S	15	Pension plans, employee benefits						
SII	16a	Legal fees (attach schedule)						
ğ.	ь	Accounting fees (attach schedule)						
Operating and Administrative Expenses	С	Other professional fees (attach schedule)						
⋛	17	Interest						
<del>2</del>	18	Taxes (attach schedule) (see instructions)	3,932	3,932	2	(		
≣	19	Depreciation (attach schedule) and depletion	310	310				
Ð	20	Occupancy						
ַ	21	Travel, conferences, and meetings						
<u>=</u>	22	Printing and publications	<b>85.1</b>					
5un	23	Other expenses (attach schedule)	3,003	2,171		30		
ar at	24	Total operating and administrative expenses.						
<u>ಹ</u>	]	Add lines 13 through 23	7,245		5	30		
_	25	Contributions, gifts, grants paid	328,701		ļ	328,701		
	26	<b>Total expenses and disbursements.</b> Add lines 24 and 25	335,946	6,413	,	328,731		
	27	Subtract line 26 from line 12	333,310	5,115		525,75		
	a	Excess of revenue over expenses and						
	ь	disbursements Net investment income (if negative, enter -0-)	674,874					
	C	Adjusted net income (if negative, enter -0-)		136,129	<u>'</u>			
		Adjusted Het Income (II negative, enter -0-)		C-1 N 41222	<u></u>	000 PE (2212		

	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 ▶		
<u>ν</u>	8	Inventories for sale or use		
sets	9	Prepaid expenses and deferred charges		
As	10a	Investments—U S and state government obligations (attach schedule)		
	ь	Investments—corporate stock (attach schedule)	861,133	1,190,998
	С	Investments—corporate bonds (attach schedule)		
	11	Investments—land, buildings, and equipment basis ►		
		Less accumulated depreciation (attach schedule) ▶	25,837	<b>9</b> 25,527
	12	Investments—mortgage loans		
	13	Investments—other (attach schedule)		
	14	Land, buildings, and equipment basis >		
		Less accumulated depreciation (attach schedule)		
	15	Other assets (describe >)		

Total assets (to be completed by all filers—see the

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here ▶

Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds

Capital stock, trust principal, or current funds . . . . . . . . . .

Total net assets or fund balances (see instructions) . . . . .

Total liabilities and net assets/fund balances (see instructions) .

Analysis of Changes in Net Assets or Fund Balances

Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule). . . . . .

Total liabilities(add lines 17 through 22) . . . . . . . . . . . .

instructions Also, see page 1, item I)

Other liabilities (describe -\_

Grants payable

Unrestricted

Temporarily restricted

Permanently restricted

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Add lines 1, 2, and 3 . . . . . .

Decreases not included in line 2 (itemize) ▶

Accounts payable and accrued expenses .

16

17

18

19

20 21

22

23

24

25

26

27

28

29

30

31

Part III

2

3

4

5

Liabilities

or Fund Balances

Net Assets

963,527

674,874

126,733

1,765,134

6,287,380

27,077

6,434,773

963,527

963,527

963,527

963,527

1,336,841

1,336,841

1,336,841

1,336,841

1

2

3

4

5

(a) List and describ 2-story brick wa	<b>(c)</b> Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )			
1 a 1000 SYSCO CORP			D—Donation P	2004-09-30	2018-12-24
b			·		
c					
d					
<u>е</u>					
	(f)		(g)	- (	h)
(e) Gross sales price	Depreciation allowed		other basis		r (loss)
Gross sales price	(or allowable)	plus expe	ense of sale	(e) plus (f	) mınus (g)
<b>a</b> 6	0,039		30,173		29,866
b					
c					
d					
e					
Complete only for assets	showing gain in column (h) and ow	ned by the foundation	on 12/31/69	(	I)
	(i)	<u> </u>	(k)		h) gain minus
(i) F M V as of 12/31/69	Adjusted basis		of col (ı)		less than -0-) <b>or</b>
1 M V 43 01 12/31/09	as of 12/31/69	over col	(j), if any	Losses (fr	om col (h))
a					29,866
b					
c					
d					
e					
2 Capital gain net income	or (net capital loss)	If gain, also enter in P If (loss), enter -0- in F		2	29,866
·	gain or (loss) as defined in sections : rt I, line 8, column (c) (see instructi		· }	3	
Part V Qualification U	Jnder Section 4940(e) for Re	educed Tax on Net	Investment Inc	come	
	rivate foundations subject to the sec				
troi optional use by domestic p	Trace roundations subject to the set	201011 13 10(a) tax 011 11c	e invesement meem	<b>C</b> /	
(f section 4940(d)(2) applies, le	eave this part blank				
	e section 4942 tax on the distributant qualify under section 4940(e) Do	• •	in the base period?		es 🗹 No
1 Enter the appropriate an	nount in each column for each year,	see instructions before	making any entries	<b>;</b>	
(a) Base period years Calendar	(b) Adjusted qualifying distributions	(c) Net value of noncharitab	le-use assets	(d) Distribution rat	
year (or tax year beginning in) 2017	282,600		6,227,000	(col (b) divided by c	0 045383
2017	257,660		4,878,966		0 052810
2015	280,200		6,605,266		0 042421
2013	381,370		6,302,943		0 060507
2014	210,750		4,658,427		0 045241
2 Total of line 1, column (	,		· · · · · ·		0 246362
<b>3</b> Average distribution ratio	d) b for the 5-year base period—divide bidation has been in existence if less	the total on line 2 by 5	<b>—</b>		0 049272
4 Enter the net value of no	ncharitable-use assets for 2018 fron	n Part X, line 5	4		6,533,455
<b>5</b> Multiply line 4 by line 3			5		321,916
. , ,	ent income (1% of Part I, line 27b)		6		1,361
	income (170 of Farc 1, line 270)				323,277
	ons from Part XII, line 4		8		323,277
. , ,	eater than line 7, check the box in Pa			ı g a 1% tax rate Se	
record on marker (1987)				Fo	orm <b>990-PF</b> (2018)

Page **6** 

5a	During the year did the foundation p	oay o	r incur any amount to						Yes	No
(1) Carry on propaganda, or otherwise a			attempt to influence legislation (section 4945(e))?			Yes	✓ N			
			fic public election (see section 4955), or to carry							
	on, directly or indirectly, any vo		~			☐ Yes	✓ N	o		
	(3) Provide a grant to an individual					☐ Yes	✓ N	0		
	(4) Provide a grant to an organizati		•	, -						
	in section 4945(d)(4)(A)? See ii					☐ Yes	✓ N	o		
	(5) Provide for any purpose other t		- ·							
	educational purposes, or for the		•			∐ Yes	✓ N	o		
Ь	If any answer is "Yes" to $5a(1)-(5)$ ,		•		•	ibea in				
	Regulations section 53 4945 or in a Organizations relying on a current n						. —	5b		
С	If the answer is "Yes" to question 58		-				Ш			
	tax because it maintained expenditu			•						
	If "Yes," attach the statement requi		· · · · · · · · · · · · · · · · · · ·			∐ Yes	L N₁	0		
6a	Did the foundation, during the year,		· -		ıms on					
0a	a personal benefit contract?		· · · · · · · · · · · · · · · · · · ·							
ь	Did the foundation, during the year,					∐ Yes	✓ N	o   6b		No
	If "Yes" to 6b, file Form 8870	Pay	premiums, directly or ma	inectly, on a personal bei	Terre contract.		•	UB		110
7a	At any time during the tax year, wa	s the	foundation a party to a m	rohibited tax shelter tran	saction?		<b>-</b>			
	If yes, did the foundation receive ar					⊔ Yes	_ <b>∠</b> N₁	0   7b		
8	Is the foundation subject to the sec		•			on or		1,5		
•	excess parachute payment during th									
	Information About (						V N			
Pa	and Contractors	)IIIC	ers, Directors, Trust	ees, roundation Ma	mayers, mi	Jilly Pai	u Emp	ioyees,		
_	List all officers, directors, truste	f	undation managers ar	d their compensation	Eas instruct	ione				
	List all officers, directors, truster		<b>b)</b> Title, and average	(c) Compensation (If	(d) Contr		·o .			
	(a) Name and address	L '	hours per week devoted to position	not paid, enter -0-)	employee bei	nefit plan:	s and   (	e) Exper other a		
RONA	LD W SIMMS		IDENT	0			0			0
	OUTH MAIN STREET	5 00								
	ESBARRE, PA 18701 P SIMMS	SECE	ETARY	0			0			
	OUTH MAIN STREET	5 00	ZE I / III I				។			U
	ESBARRE, PA 18701									
	ARD A ROSE	TREA	SURER	0			0			0
	OUTH MAIN STREET ESBARRE, PA 18701	3 00								
2		id en	nplovees (other than th	l hose included on line 1	_see instru	tions).	[f none.	enter "	NONE.	<del>,,,</del>
	,		i . i .		(d) Contr					
(a)	Name and address of each employee	paid	(b) Title, and average hours per week	(c) Compensation		e benefit		e) Expen		
	more than \$50,000		devoted to position	( , , , , , , , , , , , , , , , , , , ,		d deferred Insation	<b>-</b>	other all	owanc	es
NON	<u> </u>				1 23pc					
	_									
Tota	I number of other employees paid ov	er \$5	0,000, , , ,			. ▶				
		. +-	<u>,                                    </u>					Form <b>99</b>	0-PF (	
									(	·/

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

Form 990-PF (2018)		Page <b>7</b>
Part VIII Information About Officers, Directors, Truster and Contractors (continued)	es, Foundation Managers, Highly Paid	Employees,
3 Five highest-paid independent contractors for professional se	rvices (see instructions). If none, enter "N	IONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services.  Part IX-A Summary of Direct Charitable Activities	· · · · · · · · · · · · · · · · · · ·	0
List the foundation's four largest direct charitable activities during the tax year. Include	e relevant statistical information such as the number of	T _
organizations and other beneficiaries served, conferences convened, research papers p	produced, etc	Expenses
1		_
		-
2		
		1
3		
		_
4		_
		_
Part IX-B Summary of Program-Related Investments (s	ee instructions)	
Describe the two largest program-related investments made by the foundation duri	<u>-</u>	Amount
<b>1</b> N/A		0
2		
All obligations are related as a state of Construction of		
All other program-related investments See instructions  3		
<u> </u>		
Total. Add lines 1 through 3		0
		Form <b>990-PF</b> (2018)

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

Amounts set aside for specific charitable projects that satisfy the

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

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. . . . . . . . . . . . . . . .

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

3

4

5

2

3a 3h

4

5

328.731

1.361

327.370

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324,858

324.858

Form **990-PF** (2018)

0

Form	990-PF (2	018)
Pa	rt XIII	Und

90-PF (2	018)	
XIII	Undistributed Income	(see instructions)

- 1 Distributable amount for 2018 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2018
- a Enter amount for 2017 only. . . . . . Excess distributions carryover, if any, to 2018
- **b** Total for prior years a From 2013. . . . .
- **b** From 2014. . . .
- c From 2015. . . d From 2016. . . . .

- e From 2017. . . . .

c Treated as distributions out of corpus (Election 

5 Excess distributions carryover applied to 2018

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 **b** Prior years' undistributed income Subtract line 4b from line 2b . . . . . . . . . . c 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 e 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 . . . . . . 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) . . .

(If an amount appears in column (d), the

6 Enter the net total of each column as

9 Excess distributions carryover to 2019.

10 Analysis of line 9

a Excess from 2014. . .

c Excess from 2016. . . . d Excess from 2017. . . e Excess from 2018. . .

**b** Excess from 2015. .

Subtract lines 7 and 8 from line 6a . . . . . .

indicated below:

**d** Applied to 2018 distributable amount. . . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a) )

- 20.484 f Total of lines 3a through e. . . . . . . . 4 Qualifying distributions for 2018 from Part

  - XII, line 4 🕨 \$
- a Applied to 2017, but not more than line 2a
- **b** Applied to undistributed income of prior years (Election required—see instructions). . . . .

6.853

20.484

3.873

6,853

(a)

Corpus

27,337

3.873

31,210

31,210

0

(b)

Years prior to 2017

(c)

2017



Enter gross amou	unts unless otherwise indicated	Unrelated b	usiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
1 Program serv	ice revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	(d) Amount	function income (See instructions )
a						
f						
<b>g</b> Fees and co	ontracts from government agencies					
•	dues and assessments					
3 Interest on s	avings and temporary cash			1.4	2.160	
	d interest from securities			14 14	3,169 105,007	
	come or (loss) from real estate				222,222	
	ced property					
	nanced property	531120	-1,913			
	come or (loss) from personal property					
	nent income ) from sales of assets other than					
inventory				14	29,866	
9 Net income o	or (loss) from special events				•	
	or (loss) from sales of inventory					
	ue <b>a</b>					
d						
d e	d columns (b), (d), and (e).		-1,913		138,042	(
d e 12 Subtotal Add 13 Total Add II	d columns (b), (d), and (e) ne 12, columns (b), (d), and (e)		-1,913		138,042 <b>3</b>	
de  12 Subtotal Add II  (See workshe	d columns (b), (d), and (e) ne 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcu	lations )		1:	<u>.</u>	
de  12 Subtotal Add II (See workshe Part XVI-B  Line No. Extended In the Inc.   Extended	d columns (b), (d), and (e) ne 12, columns (b), (d), and (e)	lations )  ne Accomplish  ncome is report		pt Purposes  Part XVI-A contribu	3	
de  12 Subtotal Add II (See workshe Part XVI-B  Line No. Extended In the Inc.   Extended	d columns (b), (d), and (e) ne 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcu  Relationship of Activities to the plain below how each activity for which accomplishment of the foundation's ex	lations )  ne Accomplish  ncome is report		pt Purposes  Part XVI-A contribu	3	
de  12 Subtotal Add II (See workshe Part XVI-B  Line No. Extended In the Inc.   Extended	d columns (b), (d), and (e) ne 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcu  Relationship of Activities to the plain below how each activity for which accomplishment of the foundation's ex	lations )  ne Accomplish  ncome is report		pt Purposes  Part XVI-A contribu	3	
de  12 Subtotal Add II (See workshe Part XVI-B  Line No. Extended In the Inc.   Extended	d columns (b), (d), and (e) ne 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcu  Relationship of Activities to the plain below how each activity for which accomplishment of the foundation's ex	lations )  ne Accomplish  ncome is report		pt Purposes  Part XVI-A contribu	3	
de  12 Subtotal Add II (See workshe Part XVI-B  Line No. Extended In the Inc.   Extended	d columns (b), (d), and (e) ne 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcu  Relationship of Activities to the plain below how each activity for which accomplishment of the foundation's ex	lations )  ne Accomplish  ncome is report		pt Purposes  Part XVI-A contribu	3	
de  12 Subtotal Add II (See workshe Part XVI-B  Line No. Extended In the Inc.   Extended	d columns (b), (d), and (e) ne 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcu  Relationship of Activities to the plain below how each activity for which accomplishment of the foundation's ex	lations )  ne Accomplish  ncome is report		pt Purposes  Part XVI-A contribu	3	
d e  12 Subtotal Add II (See workshe Part XVI-B  Line No. Extended III	d columns (b), (d), and (e) ne 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcu  Relationship of Activities to the plain below how each activity for which accomplishment of the foundation's ex	lations )  ne Accomplish  ncome is report		pt Purposes  Part XVI-A contribu	3	136,129
de  12 Subtotal Add II (See workshe Part XVI-B  Line No. Extended In the Inc.   Extended	d columns (b), (d), and (e) ne 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcu  Relationship of Activities to the plain below how each activity for which accomplishment of the foundation's ex	lations )  ne Accomplish  ncome is report		pt Purposes  Part XVI-A contribu	3	
de  12 Subtotal Add II (See workshe Part XVI-B  Line No. Extended In the Inc.   Extended	d columns (b), (d), and (e) ne 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcu  Relationship of Activities to the plain below how each activity for which accomplishment of the foundation's ex	lations )  ne Accomplish  ncome is report		pt Purposes  Part XVI-A contribu	3	
de  12 Subtotal Add II (See workshe Part XVI-B  Line No. Extended In the Inc.   Extended	d columns (b), (d), and (e) ne 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcu  Relationship of Activities to the plain below how each activity for which accomplishment of the foundation's ex	lations )  ne Accomplish  ncome is report		pt Purposes  Part XVI-A contribu	3	
de  12 Subtotal Add II (See workshe Part XVI-B  Line No. Extended In the Inc.   Extended	d columns (b), (d), and (e) ne 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcu  Relationship of Activities to the plain below how each activity for which accomplishment of the foundation's ex	lations )  ne Accomplish  ncome is report		pt Purposes  Part XVI-A contribu	3	
d e  12 Subtotal Add II (See workshe Part XVI-B  Line No. Extended III	d columns (b), (d), and (e) ne 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcu  Relationship of Activities to the plain below how each activity for which accomplishment of the foundation's ex	lations )  ne Accomplish  ncome is report		pt Purposes  Part XVI-A contribu	3	
de  12 Subtotal Add II (See workshe Part XVI-B  Line No. Extended In the Inc.   Extended	d columns (b), (d), and (e) ne 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcu  Relationship of Activities to the plain below how each activity for which accomplishment of the foundation's ex	lations )  ne Accomplish  ncome is report		pt Purposes  Part XVI-A contribu	3	
de  12 Subtotal Add II (See workshe Part XVI-B  Line No. Extended the Extended II (Extended II (Extende	d columns (b), (d), and (e) ne 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcu  Relationship of Activities to the plain below how each activity for which accomplishment of the foundation's ex	lations )  ne Accomplish  ncome is report		pt Purposes  Part XVI-A contribu	3	
de  12 Subtotal Add II (See workshe Part XVI-B  Line No. Extended the Extended II (Extended II (Extende	d columns (b), (d), and (e) ne 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcu  Relationship of Activities to the plain below how each activity for which accomplishment of the foundation's ex	lations )  ne Accomplish  ncome is report		pt Purposes  Part XVI-A contribu	3	
de  12 Subtotal Add II (See workshe Part XVI-B  Line No. Extended the Extended II (Extended II (Extende	d columns (b), (d), and (e) ne 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcu  Relationship of Activities to the plain below how each activity for which accomplishment of the foundation's ex	lations )  ne Accomplish  ncome is report		pt Purposes  Part XVI-A contribu	3	
de  12 Subtotal Add II (See workshe Part XVI-B  Line No. Extended the Extended II (Extended II (Extende	d columns (b), (d), and (e) ne 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcu  Relationship of Activities to the plain below how each activity for which accomplishment of the foundation's ex	lations )  ne Accomplish  ncome is report		pt Purposes  Part XVI-A contribu	3	
de  12 Subtotal Add II (See workshe Part XVI-B  Line No. Extended the Extended II (Extended II (Extende	d columns (b), (d), and (e) ne 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcu  Relationship of Activities to the plain below how each activity for which accomplishment of the foundation's ex	lations )  ne Accomplish  ncome is report		pt Purposes  Part XVI-A contribu	3	
d e  12 Subtotal Add II (See workshe Part XVI-B  Line No. Extended III	d columns (b), (d), and (e) ne 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcu  Relationship of Activities to the plain below how each activity for which accomplishment of the foundation's ex	lations )  ne Accomplish  ncome is report		pt Purposes  Part XVI-A contribu	3	
d e  12 Subtotal Add II (See workshe Part XVI-B  Line No. Extended III	d columns (b), (d), and (e) ne 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcu  Relationship of Activities to the plain below how each activity for which accomplishment of the foundation's ex	lations )  ne Accomplish  ncome is report		pt Purposes  Part XVI-A contribu	3	
de  12 Subtotal Add II (See workshe Part XVI-B  Line No. Extended the Extended II (Extended II (Extende	d columns (b), (d), and (e) ne 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcu  Relationship of Activities to the plain below how each activity for which accomplishment of the foundation's ex	lations )  ne Accomplish  ncome is report		pt Purposes  Part XVI-A contribu	3	

(=0	, 20 /
+4	Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

Part	XVII	Information Re Exempt Organize		ransters To a	and Transactio	ons and	Relatio	nships With Nonci	haritable		
		ganization directly or in than section 501(c)(3)	directly enga						501	Yes	No
` '	`	from the reporting foun	-	,	, , ,	-	garnzacioni	·			
									1a(1)		No
(1) Cash							1a(1)		No		
b Other transactions								13(2)		-110	
		of assets to a nonchari	itable exemp	t organization.					.  1b(1)		No
		ases of assets from a n	•	-					. 1b(2)		No
		al of facilities, equipmen							. 1b(3)		No
		bursement arrangemen	·						1b(4)		No
(5)	Loans	or loan guarantees.							1b(5)		No
		mance of services or m							1b(6)		No
<b>c</b> Sha	ring of	facilities, equipment, n	nailing lists,	other assets, or	paid employees.				1c		No
		ver to any of the above									
		ds, other assets, or ser nsaction or sharing arra									
III a	ily trai	isaction or snaring arra	ngement, sn	ow iii columii (c	i) the value of the	goods, c	Julier asse	is, or services received	J		
(a) Line	No	(b) Amount involved	(c) Name of	noncharitable exe	mpt organization	<b>(d)</b> Des	scription of	transfers, transactions, ar	nd sharing arra	ngemen	its
	_										
-											
			(61 )	1 11 1 1	1.						
		ndation directly or indire	•	,	•				<b>✓</b> No		
		in section 501(c) (other		1 501(c)(3)) or i	in section 52/7.			∐Yes	<b>▼</b> 1N0		
b If "	res," c	omplete the following so (a) Name of organization		1 4	<b>b)</b> Type of organizati	on.	1	(c) Description of	rolationship		
		(a) Name of organization	on	(1	b) Type of organizati	on		(c) Description of	relationship		
							1				
-											
	of m	er penalties of perjury, y knowledge and belief h preparer has any kno	, it is true, c								
Sign			meage					Ī	May the IRS d	scuss th	าเร
Here		*****			2019-05-15	k <sup>'</sup>	*****		return		
	<b>                                     </b>					<b> )</b> -			with the prepa below	rer shov	vn
	<b>'</b> '	Signature of officer or t	rustee		Date	, -	Tıtle		(see instr )? [	✓ Yes	□No
		Print/Type preparer's	name	Preparer's Sigr	nature	Date		PTI Check if self-	IN		
								employed ▶ □	P00018	3917	
Paid		JAMES J GATTUSO	JR					employed P			
_	2505	СРА									
Prep Use (			GATTUSO GI	ROUP INC				Firi	m's EIN ▶20	-39075	69
U3E (	Jilly		00 WYOMIN	G AVENUE							
								l Dh	one no (570	718-4	4120
		FC	RTY FORT, P	'A 18704					2.10 110 (370	, , 10 -	
		1									

	Form 990PF Part XV Line 1a - 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						
1	than \$5,000).						
	DONALD W. CIMMC						

RONALD W SIMMS

RHEA P SIMMS RICHARD A ROSE

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

or substantial contributor.

Name and address (home or business)

a Paid during the year				
ALLIED SERVICE FOUNDATION 100 ABINGTON IND PARK CLARKS SUMMIT, PA 18411	NONE	PUBLIC	CHARITABLE	100

AMERICAN CANCER SOCIETY 71 N FRANKLIN ST STE 110 WILKESBARRE, PA 18701	NONE	PUBLIC	CHARITABLE	1,
BAPS SWAMINARAYAN SANSTHA	NONE	PUBLIC	CHARITABLE	10,

AMERICAN CANCER SOCIETY 71 N FRANKLIN ST STE 110 WILKESBARRE, PA 18701	NONE	PUBLIC	CHARITABLE	1,000
BAPS SWAMINARAYAN SANSTHA 81 SUTTONS LN	NONE	PUBLIC	CHARITABLE	10,001

Total			▶ 3a	328,701
BAPS SWAMINARAYAN SANSTHA 81 SUTTONS LN PISCATAWAY, NJ 08854	NONE	PUBLIC	CHARITABLE	10,001
WILKESBARRE, PA 18701				

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

any foundation manager

or substantial contributor

Name and address (home or business)

PITTSTON, PA 18640

Total .

	or substantial contributor			
a Paid during the year				
BACK MOUNTAIN MEMORIAL LIBRARY 96 HUNTSVILLE RD DALLAS, PA 18612	NONE	PUBLIC	CHARITABLE	100
BRANDON'S FOREVER HOME	NONE	PUBLIC	CHARITABLE	500

recipient

DALLAS, PA 18612				
BRANDON'S FOREVER HOME 187 N CHURCH ST HAZLETON, PA 18201	NONE	PUBLIC	CHARITABLE	500
CARE & CONCERN MINISTRIES	NONE	PUBLIC	CHARITABLE	1,000

BRANDON'S FOREVER HOME 187 N CHURCH ST HAZLETON, PA 18201	NONE	PUBLIC	CHARITABLE	50
CARE & CONCERN MINISTRIES	NONE	PUBLIC	CHARITABLE	1,00

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

any foundation manager

or substantial contributor

Name and address (home or business)

36 WASHINGTON ST WILKESBARRE, PA 18701

Total .

	or substantial contributor			
a Paid during the year				
CASA OF LUZERNE COUNTY 667 N RIVER ST PLAINS, PA 18705	NONE	PUBLIC	CHARITABLE	5,000
CATHERINE MCAULEY CENTER 430 PITTSTON AVE	NONE	PUBLIC	CHARITABLE	1,000

recipient

500

PLAINS, PA 18705				
CATHERINE MCAULEY CENTER 430 PITTSTON AVE SCRANTON, PA 18505	NONE	PUBLIC	CHARITABLE	1,
CATHOLIC VOLITH CENTER	NONE	DUBLIC	CHADITABLE	

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CENTER FOR EXCELLENCE IN NONE PUBLIC CHARITABLE 10,000 **EDUCATION** 

8201 GREENBORO DRSTE 215 MCLEAN, VA 22102				
CHILDRENS SERVICE CENTER 335 S FRANKLIN ST WILKESBARRE, PA 18702	NONE	PUBLIC	CHARITABLE	6,000
CITY OF WILKES-BARRE	NONE	PUBLIC	CHARITABLE	2 000

CITY OF WILKES-BARRE NONE PUBLIC CHARITABLE 2,0 40 E MARKET ST WILKESBARRE, PA 18711	CHILDRENS SERVICE CENTER 335 S FRANKLIN ST WILKESBARRE, PA 18702	NONE	PUBLIC	CHARITABLE	6,000
	40 E MARKET ST	NONE	PUBLIC	CHARITABLE	2,000

Total .

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year COLONIAL WILLIAMSBURG NONE **PUBLIC** CHARITABLE 5,000

NONE

CORPUS CHRISTI PARISH

605 LUZERNE AVE WEST PITTSTON, PA 18643

Total . .

PO BOX 1776 WILLIAMSBURG, VA 23187				
CONNECTIONS HIGH SCHOOL 1310 OLD CONGRESS AVE STE 100 WEST PALM BEACH, FL 33409	NONE	PUBLIC	CHARITABLE	1,000

PUBLIC

CHARITABLE

100

Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year DONALD 1 DREMO SP SCHOOL FLIND NONE DUBLIC CHADITABLE 250

(PREMO MEMORIAL) 2094 GLENWOOD SHOPPING CENTER ONEIDA, NY 13421	NONE	FOBLIC	CHARITABLE	230
DREXEL UNIVERSITY 3141 CHESTNUT ST STE 301 PHILADELPHIA PA 19104	NONE	PUBLIC	CHARITABLE	75,000

<u>'</u>		l		
DREXEL UNIVERSITY 3141 CHESTNUT ST STE 301 PHILADELPHIA, PA 19104	NONE	PUBLIC	CHARITABLE	75,000
EQUINES FOR FREEDOM (MEDICO- MESHOPPEN) PO BOX 53 FACTORYVILLE, PA 18419	NONE	PUBLIC	CHARITABLE	1,000

Total				328,701
EQUINES FOR FREEDOM (MEDICO- MESHOPPEN) PO BOX 53 FACTORYVILLE, PA 18419	NONE	PUBLIC	CHARITABLE	1,000
PHILADELPHIA, PA 19104				

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

any foundation manager

Name and address (home or husiness)

SCRANTON, PA 18509

Total .

Name and address (nome or business)	or substantial contributor	·		
a Paid during the year				
FAMILY SERVICE OF NEPA 100 N WILKES-BARRE BLVD WILKESBARRE, PA 18702	NONE	PUBLIC	CHARITABLE	100
FINE ARTS FIESTAPO BOX 2053 WILKESBARRE, PA 18701	NONE	PUBLIC	CHARITABLE	1,000
GEISINGER COMMONWEALTH SCHOOL	NONE	PUBLIC	CHARITABLE	3,000

recipient

WILKESBARRE, PA 18702				
FINE ARTS FIESTAPO BOX 2053 WILKESBARRE, PA 18701	NONE	PUBLIC	CHARITABLE	1,
GEISINGER COMMONWEALTH SCHOOL OF MEDICINE 525 PINE ST	NONE	PUBLIC	CHARITABLE	3,

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				
GREEK ORTHODOX CHURCH 32 E ROSS ST WILKESBARRE, PA 18701	NONE	PUBLIC	CHARITABLE	1,000

WILKESBARRE, PA 18701				
HABITAT FOR HUMANITY 303 MARKET ST KINGSTON, PA 18704	NONE	PUBLIC	CHARITABLE	250

303 MARKET ST KINGSTON, PA 18704	NONE	OBLIC	CHARTABLE	230
HOLY CROSS CHURCH420 MAIN RD	NONE	PUBLIC	CHARITABLE	500

KINGSTON, PA 18704				
HOLY CROSS CHURCH420 MAIN RD HANOVER, PA 18706	NONE	PUBLIC	CHARITABLE	500

328,701

KINGSTON, PA 16704				
HOLY CROSS CHURCH420 MAIN RD HANOVER, PA 18706	NONE	PUBLIC	CHARITABLE	50

Total .

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

a Paid during the year				
HOSPITAL FOR SPECIAL SURGERY 535 E 70TH ST NEW YORK, NY 10021	NONE	PUBLIC	CHARITABLE	1,000

JOHNS HOPKINS INSTITUTIONS NONE PUBLIC CHARITABLE 1,000 600 N WOLFE ST BALTIMORE, MD 21287	NEW YORK, NY 10021				
	600 N WOLFE ST	NONE	PUBLIC	CHARITABLE	1,000

600 N WOLFE ST BALTIMORE, MD 21287				2,000
KING COLLEGE133 N RIVER ST WILKESBARRE, PA 18711	NONE	PUBLIC	CHARITABLE	5,000

BALTIMORE, MD 21287				
KING COLLEGE133 N RIVER ST WILKESBARRE, PA 18711	NONE	PUBLIC	CHARITABLE	5,000
				(

VILKESBARRE, PA 18711		,
Total	 ▶ 3a	328,701

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 contribution status of

Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
KINGSTON FIRE DEPARTMENT	NONE	DUBLIC	CHADITABLE	1 000

600 WYOMING AVE KINGSTON, PA 18704	NONE	POBLIC	CHARITABLE	1,000
KINGSTON POLICE DEPARTMENT 500 WYOMING AVE	NONE	PUBLIC	CHARITABLE	1,000

KINGSTON, PA 18704				
KINGSTON POLICE DEPARTMENT 500 WYOMING AVE KINGSTON, PA 18704	NONE	PUBLIC	CHARITABLE	1,000
LUZERNE COUNTY HISTORICAL 49 S FRANKLIN ST	NONE	PUBLIC	CHARITABLE	100

500 WYOMING AVE KINGSTON, PA 18704	NONE	FOBLIC	CHARTABLE	1,000
LUZERNE COUNTY HISTORICAL 49 S FRANKLIN ST WILKESBARRE, PA 18701	NONE	PUBLIC	CHARITABLE	100
Total			▶ 3a	328,701

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 contribution status of any foundation manager recipient

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
MISERICORDIA UNIVERSITY	NONE	PUBLIC	CHARITABLE	5,000

MISERICORDIA UNIVERSITY 301 LAKE ST DALLAS, PA 18612	NONE	PUBLIC	CHARITABLE	5,000
NATIONAL CENTRE FOR PADRE PIO INC PO BOX 206	NONE	PUBLIC	CHARITABLE	1,000

BALESTO, TACTE				
NATIONAL CENTRE FOR PADRE PIO INC PO BOX 206 BARTO, PA 19504	NONE	PUBLIC	CHARITABLE	1,000
NORTH BRANCH LAND TRUST 11 CARVERTON RD	NONE	PUBLIC	CHARITABLE	500

	PO BOX 206 BARTO, PA 19504	NONE	POBLIC	CHARITABLE	1,000
	NORTH BRANCH LAND TRUST 11 CARVERTON RD TRUCKSVILLE, PA 18708	NONE	PUBLIC	CHARITABLE	500
1					(

BARTO, PA 19504				
NORTH BRANCH LAND TRUST 11 CARVERTON RD TRUCKSVILLE, PA 18708	NONE	PUBLIC	CHARITABLE	500
Total			▶ 3a	328,701

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year NORTHEASTERN PA PHILHARMONIC NONE PUBLIC CHARITABLE 900 PO BOX 4525

SCRANTON, PA 18505				
OSTERHOUT LIBRARY71 S FRANKLIN ST WILKESBARRE, PA 18702	NONE	PUBLIC	CHARITABLE	500
OUR LADY OF GOOD COUNSEL 611 KNOWLES AVE	NONE	PUBLIC	CHARITABLE	1,000

WILKESBARRE, PA 18702				
OUR LADY OF GOOD COUNSEL 611 KNOWLES AVE SOUTHHAMPTON, PA 189664198	NONE	PUBLIC	CHARITABLE	1,000
Total			▶ 3a	328,701

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

,	or substantial contributor			
a Paid during the year				
RENAL RACE FOR CANCER104 GEBE ST	NONE	PUBLIC	CHARITABLE	100

WILKESBARRE, PA 18702	NONE	FOBLIC	CHARTABLE	100
ST JOHN NEWMANN SOCIETY 300 WYOMING AVE SCRANTON, PA 18503	NONE	PUBLIC	CHARITABLE	5,000
CT TOCERU MELIVITE CREEK CATHOLIC	NONE	DUDUTO	CHARTTARIE	100

ST JOHN NEWMANN SOCIETY 300 WYOMING AVE SCRANTON, PA 18503	NONE	PUBLIC	CHARITABLE	5,000
ST JOSEPH MELKITE GREEK-CATHOLIC CHURCH 130 N ST FRANCIS GABRINI AVE SCRANTON, PA 18504	NONE	PUBLIC	CHARITABLE	100

300 WYOMING AVE SCRANTON, PA 18503				5,555
ST JOSEPH MELKITE GREEK-CATHOLIC CHURCH 130 N ST FRANCIS GABRINI AVE SCRANTON, PA 18504	NONE	PUBLIC	CHARITABLE	100
Total			▶ 3a	328,701

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 contribution status of

	, a, . c.a			
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
ST JUDE CHILDRENS RESEARCH	NONE	PUBLIC	CHARITABLE	5,000

HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105				-,
SUSAN G KOMEN FOUNDATION	NONE	PUBLIC	CHARITABLE	1,000

112:11:1127:111				
SUSAN G KOMEN FOUNDATION 125 N WASHINGTON AVE STE 260 SCRANTON, PA 18503	NONE	PUBLIC	CHARITABLE	1

SUSAN G KOMEN FOUNDATION 125 N WASHINGTON AVE STE 260 SCRANTON, PA 18503	NONE	LORLIC	CHARITABLE	1,00
TEMPLE ISRAEL239 S RIVER ST	NONE	PUBLIC	CHARITABLE	1 25

SCRANTON, PA 18503				
TEMPLE ISRAEL239 S RIVER ST	NONE	PUBLIC	CHARITABLE	1,250

				İ
TEMPLE ISRAEL239 S RIVER ST WILKESBARRE, PA 18702	NONE	PUBLIC	CHARITABLE	1,250

328,701

TEMPLE ISRAEL239 S RIVER ST	NONE	PUBLIC	CHARITABLE	
WILKESBARRE, PA 18702				

Total .

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

_ ,				
THE LANDS AT HILLSIDE FARMS 65 HILLSIDE RD TRUCKSVILLE, PA 18708	NONE	PUBLIC	CHARITABLE	1,000
THE MCGLYNN CENTER	NONE	PUBLIC	CHARITABLE	500

THE MCGLYNN CENTER 72 MIDLAND COURT WILKESBARRE, PA 18702	NONE	PUBLIC	CHARITABLE	500
TRINITY COLLEGE DUBLIN GRAFTON ST COLLEGE GREEN	NONE	PUBLIC	CHARITABLE	55,000

WILKESBARRE, PA 18702				
TRINITY COLLEGE DUBLIN GRAFTON ST COLLEGE GREEN DUBLIN EI	NONE	PUBLIC	CHARITABLE	55,000

Total .

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

a Paid during the year				
WVIA100 WVIA WAY PITTSTON, PA 18640	NONE	PUBLIC	CHARITABLE	100

WILKES UNIVERSITY84 W SOUTH ST WILKESBARRE, PA 18766	NONE	PUBLIC	CHARITABLE	60,000
PITTSTON, PA 18640				

WILKES UNIVERSITY84 W SOUTH ST WILKESBARRE, PA 18766	NONE	PORLIC	CHARITABLE	60,000
WILKES-BARRE YMCA 40 W NORTHAMPTON STREET	NONE	PUBLIC	CHARITABLE	1,000

,,				
WILKES-BARRE YMCA 40 W NORTHAMPTON STREET WILKESBARRE, PA 18702	NONE	PUBLIC	CHARITABLE	1,000

WILKESBARRE, PA 18702			▶ 3a	328,701
WILKES-BARRE YMCA 40 W NORTHAMPTON STREET	NONE	PUBLIC	CHARITABLE	1,000

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

a Paid during the year				
WYOMING SEMINARY 201 N SPRAGUE STREET KINGSTON, PA 18704	NONE	PUBLIC	CHARITABLE	55,000

KINGSTON, PA 18704				
WYOMING VALLEY CHILDREN ASSOCIATION 1135 WYOMING AVE FORTY FORT, PA 18704	NONE	PUBLIC	CHARITABLE	250

Total			▶ 3a	328,701
ASSOCIATION 1135 WYOMING AVE FORTY FORT, PA 18704				
WYOMING VALLEY CHILDREN	NONE	POBLIC	CHARITABLE	250

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Note: To capture the full content of this	document, please	e select landscape mode (11" $ imes$ 8.5") when printing.
TY 2018 Depreciation Schedul	e	
·		
Name:	THE BLACKHORSE	E FOUNDATION
EIN:	23-2725907	

		ETIA: 7	.5-2/2590/						
	Depreci	ation Schedule							
Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
LAND	2014-01-01	15.000		L		0	0		

39 000000000000

310

310

1,240 SL

12,077

BUILDING

2014-01-01

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## DLN: 93491135021859

## **TY 2018 Investments Corporate Stock Schedule**

Name: THE BLACKHORSE FOUNDATION

**EIN:** 23-2725907

Investments Corporation Stock Schedule		
Name of Stock	End of Year Book Value	End of Year Fair Market Value
M&T BANK CORP	96,811	1,667,465
AMERICA MOVIL	99,989	1,081,632
INGERSOLL RAND	55,000	182,460
AIR PRODUCTS	307,324	800,250
CA WATER SERVICE GROUP	52,100	142,980
QUALCOMM	36,917	56,910
CCNFB	34,029	49,750
PROCTOR AND GAMBLE	54,630	91,920
ENERGY TRANS EQTY	170,825	1,479,520
AECOM	9,287	11,951
PHILLIPS 66	9,509	34,460
COMMUNITY BANK SYST	9,723	116,833
DELL TECHNOLOGIES	15,741	58,800
CONOCOPHILLIPS	2,235	3,117
VERSUM MATERIALS	15,450	41,580
CDK GLOBAL INC	2,573	7,948
FORD MOTOR COMPANY	53,410	38,250
LAS VEGAS SANDS CORP	354	4,424
BANK OF AMERICA	4,034	6,160
L3 TECHNOLOGIES	137,524	347,320
UGI CORP NEW	9,265	13,338
WP CAREY INC	14,268	50,312

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TY 2018 Investments - Land So	chedule

LAND

BUILDING

Name: THE BLACKHORSE FOUNDATION

15,000

12,077

	<b>EIN:</b> 23-2725907	,	
Category/ Item	Cost/Other Rasis	Accumulated Depreciation	

1,550

**Book Value** 

15,000

10,527

End of Year Fair

Market Value

15,000

12,077

DLN: 93491135021859

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TY 2018 Other Decreases Schedule							
Name:	THE BLACKHORSE FOUNDATION						
Name.	THE BEACKHORSE FOUNDATION						
EIN:	23-2725907						
De	escription	Amount					
CONTRIBUTIONS OF SECURITIES RECOF	RDED ON COST BASIS	428,293					

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491135021859			
TY 2018 Other Expenses Schedule							
Name:	THE BLACKHOR	SE FOUNDATION					
EIN:	23-2725907						
Other Expenses Schedule	Other Expenses Schedule						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			
OTHER EXPENSE - K-1 ENERGY TRANSFER PARTNERS	26	0		26			
OTHER EXPENSE - K-1 SUNOCO LP	4	0		4			
PROFESSIONAL FEES	800	0		0			
BANK FEES	2	0		0			

2,036

135

2,036

135

INSURANCE

UTILITIES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491135021859				
TY 2018 Other Increases Schedule							
Name:	THE BLACKHO	RSE FOUNDATION					
EIN:	23-2725907						
De	escription		Amount				

126,733 BOOK DIFFERENCE IN BASIS OF PARTNERSHIP INVESTMENTS

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DL	N: 93491135021859		
TY 2018 Taxes Schedule						
	e: THE BLACKH	HORSE FOUNDATIO	N			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
REAL ESTATE TAXES	3,932	3,932		0		

efile GRAPHIC print - DO	NOT PROCESS As Filed Da	ta -		DLN: 93491135021859	
Schedule B	Sche	edule of Contributors		OMB No 1545-0047	
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service		ach to Form 990, 990-EZ, or 990-PF virs gov/Form990 for the latest information			
Name of the organizatio			Employer i	dentification number	
Organization type (chec	(one)		23-2725907		
	,				
Filers of:	Section:				
Form 990 or 990-EZ	501(c)( ) (enter number	er) organization			
	4947(a)(1) nonexempt	charitable trust <b>not</b> treated as a p	private foundation		
	☐ 527 political organization	on			
Form 990-PF	√ 501(c)(3) exempt private	te foundation			
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	☐ 501(c)(3) taxable privat	te foundation			
		990-PF that received, during the y or Complete Parts I and II See แ			
Special Rules					
under sections 50 received from any	9(a)(1) and 170(b)(1)(A)(vi), that	filing Form 990 or 990-EZ that m checked Schedule A (Form 990 , total contributions of the greater Complete Parts I and II	or 990-EZ), Part II, line 13	, 16a, or 16b, and that	
during the year, to	tal contributions of more than \$1	, (8), or (10) filing Form 990 or 99 ,000 <i>exclusively</i> for religious, chan en or animals Complete Parts I, I	arıtable, scientific, literary,		
during the year, could be during the year, could be during the year, could be during the year.	ontributions exclusively for religion led, enter here the total contribut inplete any of the parts unless th	, (8), or (10) filing Form 990 or 99 ous, charitable, etc., purposes, but tions that were received during the General Rule applies to this of 000 or more during the year	ut no such contributions tot ne year for an <i>exclusively</i> re rganization because it rece	aled more than \$1,000 eligious, charitable, etc , eived <i>nonexclusively</i>	
990-EZ, or 990-PF), but i	must answer "No" on Part IV, lii	al Rule and/or the Special Rules on ne 2, of its Form 990, or check the y that it doesn't meet the filing rec	ne box on line H of its		
For Paperwork Reduction Action Form 990, 990-EZ, or 990-	t Notice, see the Instructions PF	Cat No 30613X	Schedule B (Form 990	0, 990-EZ, or 990-PF) (2018)	

Name of organi THE BLACKHORS		Employer identification 23-2725907	Employer identification number 23-2725907		
Part I	Contributors (See instructions) Use duplicate copies of Part I if ac	dditional space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1	RICHARD A AND VIRGINIA ROSE 225 OLDFIELD ROAD  SHAVERTOWN, PA 18708	\$ 106,266	Person Payroll Noncash (Complete Part II for noncash		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	contributions ) (d) Type of contribution		
2	MARGARET SIMMS 743 SUTTON ROAD  SHAVERTOWN, PA 18708	\$ 49,935	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
3	RONALD AND RHEA SIMMS 740 SUTTON ROAD  SHAVERTOWN, PA 18708	\$ 712,077	Person Payroll Noncash (Complete Part II for noncash		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	contributions ) (d) Type of contribution		
		s	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
			Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)		

number

Ochedule D (1 Offit 550, 550-LZ, 61 55	J-I
Name of organization	
THE BLACKHORSE FOUNDATION	
Part II Noncash Property (See	Instr

Noncash Property is to be to be controlled by the controlled by th	THE BLACKH	ORSE FOUNDATION		number
Column   Description of noncash property given   FMV (or estimate)   See Additional Data Table   See Instructions)   Description of noncash property given   FMV (or estimate) (See Instructions)   Data received   See Instructions   Description of noncash property given   FMV (or estimate) (See Instructions)   Data received   See Instructions   Data received   Data received   See Instructions   Data received   Data				23-2725907
No. from Part I  See Additional Data Table  See	Part II	Noncash Property (See Instructions) Use duplicate copies of Part II if additional space is need	ded	
S   C    C    C    C    C    C    C	No. from	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
No. from Part I    Description of noncash property given   FMV (or estimate) (see instructions)   Date received		See Additional Data Table	_ \$	
(a) No. from Part I Description of noncash property given S	No. from		FMV (or estimate)	(d) Date received
No. from Part I    Description of noncash property given   FMV (or estimate) (see instructions)   Date received			\$	
(a) No. from Part I Description of noncash property given	No. from	(b) Description of noncash property given	FMV (or estimate)	
No. from Part I  Description of noncash property given  S  (a) No. from Part I  Description of noncash property given  (b) Description of noncash property given  S  (d) Date received  (d) Date received  (see instructions)  S  (a) No. from Part I  Description of noncash property given  S  (b) Description of noncash property given  S  (c) FMV (or estimate) (see instructions)  (d) Date received  PMV (or estimate) (see instructions)  Date received  S  (d) Date received			\$	
(a) No. from Part I Description of noncash property given S (c) FMV (or estimate) (See instructions)	No. from	(b) Description of noncash property given	FMV (or estimate)	
No. from Part I  Description of noncash property given  S  (a)  No. from Part I  Description of noncash property given  (b)  Description of noncash property given  (b)  Description of noncash property given  S  (c)  FMV (or estimate) (See instructions)  (d)  Date received  Date received			_\$	
(a) No. from Part I  Description of noncash property given  (b) FMV (or estimate) (See instructions)  S  S	No. from	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
No. from Part I Description of noncash property given FMV (or estimate) (See instructions) Date received			_\$	
	No. from	(b) Description of noncash property given	FMV (or estimate)	
Schedule B (Form 990, 990-FZ, or 990-PF) (2018			_\$	
			Schedule B (Fo	 orm 990, 990-EZ, or 990-PF) (2018)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

### **Additional Data**

#### Software ID:

**Software Version:** 

**EIN:** 23-2725907

Name: THE BLACKHORSE FOUNDATION

Form 990 Schedule B, Part II - Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed

Form 990 Schedule B, Part II - 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		
1	250 UGI CORP	<u> </u>	2018-03-31		
<u>1</u>	100 M&T BANK CORP	\$ 19,193	2018-03-31		
1	25 PHILLIPS 66	\$ 2,993	2018-08-31		
1	250 PHILLIPS 66	\$ 29,929	2018-08-31		
1	2000 ENERGY TRANSFER LTD PARTNERSHIP	\$ 35,350	2018-08-31		
1	250 BANK OF AMERICA	\$ 7,762	2018-08-31		
<u>2</u>	770 WP CAREY INC	\$ 49,935	2018-12-24		
<u>3</u>	2000 L3 TECHNOLOGIES	\$ 329,200	2018-12-24		
<u>3</u>	2000 AIR PRODUCTS & CHEMICAL INC	\$ 304,600	2018-12-24		
<u>3</u>	VARIOUS SECURITIES - DONATED IRA	\$ 78,277	2018-12-28		