efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93491129006429 OMB No 1545-0052 **Return of Private Foundation** 2018 Department of the Treasury or Section 4947(a)(1) Trust Treated as Private Foundation Internal Revenue Service ▶ Do not enter social security numbers on this form as it may be made public. Open to Public Inspection ▶ Go to <u>www.irs.gov/Form990PF</u> for instructions and the latest information. For calendar year 2018, or tax year beginning 01-01-2018 , and ending 12-31-2018 Name of foundation A Employer identification number THE BRUNO & LENA DEGOL FAMILY FOUND C/O THE DEGOL ORGANIZATION 25-1753903 Number and street (or P O box number if mail is not delivered to street address) Room/suite **B** Telephone number (see instructions)

		d street (or P.O. box number if mail is not delivered to street address) EASANT VALLEY BLVD	Room/suite	B Telephone nu	mber (see instructio	ns)	
				(814) 941-7777	,		
		n, state or province, country, and ZIP or foreign postal code PA 16602		C If exemption	application is pendin	g, check here	
G Ch	neck al	Il that apply \Box Initial return \Box Initial return of a	D 1. Foreign or	D 1. Foreign organizations, check here			
		\square Final return \square Amended return		ganizations meeting			
		\square Address change \square Name change			k here and attach co	· -	
_		ablape of organization $ abla$ Section 501(c)(3) exempt private to 4947(a)(1) nonexempt charitable trust $ abla$ Other taxable			undation status was n 507(b)(1)(A), chec		
of '	year (f	ket value of all assets at end from Part II, col (c), ▶\$ 3,984,233 J Accounting method □ Other (specify) (Part I, column (d) must			ation is in a 60-mont n 507(b)(1)(B), ched		
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes	
	1	Contributions, gifts, grants, etc , received (attach schedule)	111,719			(cash basis only)	
	2	Check ▶ ☐ If the foundation is not required to attach	111,713				
	_	Sch B Interest on savings and temporary cash investments	10,414	4,516			
	3	Dividends and interest from securities	98,875	<i>'</i>			
	4 5a	Gross rents	98,875	98,875			
	b	Net rental income or (loss)					
<u>e</u>	6a	Net gain or (loss) from sale of assets not on line 10	20,352				
Revenue	ь	Gross sales price for all assets on line 6a 2,136,406					
ž	7	Capital gain net income (from Part IV, line 2)		20,352			
	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b	Less Cost of goods sold					
	C						
	11 12	Other income (attach schedule)	241,360	123,743			
	13	Compensation of officers, directors, trustees, etc					
	14	Other employee salaries and wages					
Sè	15	Pension plans, employee benefits					
Expenses	16a	Legal fees (attach schedule)					
9	ь	Accounting fees (attach schedule)	3,500	1,750		1,750	
	c c	Other professional fees (attach schedule)	13,650	13,650			
tive	17	Interest	58	58			
and Administrative	18	Taxes (attach schedule) (see instructions)	7,266				
S III	19	Depreciation (attach schedule) and depletion					
Ħ.	20	Occupancy					
Ā	21	Travel, conferences, and meetings					
anc	22	Printing and publications					
	23	Other expenses (attach schedule)	179	179			
atıı	24	Total operating and administrative expenses.					
Operating		Add lines 13 through 23	24,653	15,637		1,750	
0	25	Contributions, gifts, grants paid	241,778			241,778	
_	26	Total expenses and disbursements. Add lines 24 and 25	266,431	15,637		243,528	
	27	Subtract line 26 from line 12					
	a	Excess of revenue over expenses and disbursements	-25,071				
	ь	Net investment income (if negative, enter -0-)	23,371	108,106			
	c	Adjusted net income (If negative, enter -0-)					
For	L Paper	work Reduction Act Notice, see instructions.		Cat No 11289)	ı Foi	m 990-PF (2018)	
	-	<u> </u>				\/	

Form 990-PF (2018) Page 2 Attached schedules and amounts in the description column Beginning of year End of year Part II **Balance Sheets** should be for end-of-year amounts only (See instructions) (a) Book Value (b) Book Value (c) Fair Market Value Cash—non-interest-bearing 1 2 155.817 Savings and temporary cash investments 406,480 406,480

(چو

1,311,450

4,106,226

4,106,226

4,106,226

4,106,226

1,377,403

3,984,233

3,984,233

3.984,233

3,984,233

4,106,226

4,147,108

3,984,233 Form **990-PF** (2018)

162,875

-25,071

65,953

1

2

3

4

5

2,200,350

1,377,403

3,984,233

	_	Savings and temporary cash investments	155,017	1	100,100
	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 ▶			
S	8	Inventories for sale or use			
sets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	2,638,959	% J	2,200,350
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			

14

15

16

17 18

19 20

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22

23

24

25

26

27

28

29

30

31

Part III

2

3

5

Liabilities

or Fund Balances

Net Assets

Land, buildings, and equipment basis ▶

instructions Also, see page 1, item I)

Accounts payable and accrued expenses .

Other assets (describe > _

Other liabilities (describe ▶_

Unrestricted . . .

Temporarily restricted

Permanently restricted

and complete lines 27 through 31.

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

Add lines 1, 2, and 3

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Less accumulated depreciation (attach schedule)

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

Deferred revenue

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

Capital stock, trust principal, or current funds

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

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

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

Analysis of Changes in Net Assets or Fund Balances

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

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

	e the kınd(s) of property sold (e g , irehouse, or common stock, 200 shs	How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)	
1 a CHARLES SCHWAB			Р		
b RAYMOND JAMES			Р		
c CAPITAL GAIN DISTRIBU	TIONS	Р			
d					
е					
	(f)		(g)	(h)
(e)	Depreciation allowed		other basis		r (loss)
Gross sales price	(or allowable)	plus exp	ense of sale) minus (g)
a 1,85	9,196		1,845,877		13,319
b 26	2,416		270,177		-7,761
c 1	4,794				14,794
d					
e					
Complete only for assets	showing gain in column (h) and ow	ned by the foundation	on 12/31/69	(I)
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	(k) of col (ı)	Gains (Col (col (k), but not	h) gain minus less than -0-) or om col (h))
a			,		13,319
b					-7,761
c					14,794
d					,
e					
	gain or (loss) as defined in sections :		Part I, line 7	3	20,352
Part V Qualification U	Jnder Section 4940(e) for Re	educed Tax on Net	Investment Inc	come	
(For optional use by domestic p	rivate foundations subject to the sec	ction 4940(a) tax on ne	et investment incom		
	-			- ,	
If section 4940(d)(2) applies, le	eave this part blank				
If "Yes," the foundation does no	e section 4942 tax on the distributal of qualify under section 4940(e) Do	not complete this part	·		es 🔽 No
	nount in each column for each year,	see instructions before	making any entries		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab	le-use assets	(d) Distribution rati (col (b) divided by c	
2017	160,683		4,015,835		0 040012
2016	145,161		3,912,443		0 037102
2015	143,110		3,986,527		0 035898
2014	132,573		4,051,113		0 032725
2013	104,717		3,955,094		0 026476
2 Total of line 1, column (d)		2		0 172213
	for the 5-year base period—divide				
	ndation has been in existence if less		3		0 034443
	ncharitable-use assets for 2018 fron	•			4,031,355
5 Multiply line 4 by line 3					138,852
	ent income (1% of Part I, line 27b)				1,081
					139,933
	ons from Part XII, line 4 , Pater than line 7, check the box in Pa			g a 1% tax rate Se	243,528 e the Part VI
mad acdolla				Fc	orm 990-PF (2018)

Page **6**

1201	Statements Regard	uing	Activities for which	FORM 4720 May Be	Required (Continue	u)			
5a	During the year did the foundation	pay o	r incur any amount to					Yes	No
	(1) Carry on propaganda, or other	wise a	ttempt to influence legisl	ation (section 4945(e))?	☐ Yes	✓ 1	No		
	(2) Influence the outcome of any s	pecifi	c public election (see sect	tion 4955), or to carry					
							No		
	(3) Provide a grant to an individual	l for t	ravel, study, or other sım	ılar purposes?	☐ Yes	✓ 1	No		
	(4) Provide a grant to an organizat in section 4945(d)(4)(A)? See i			· -		✓ 1	.		
	(5) Provide for any purpose other t				· · L Yes		No		
	educational purposes, or for the	e prev	ention of cruelty to childi	ren or animals?		✓ ,	.		
b	If any answer is "Yes" to 5a(1)-(5)	, dıd a	any of the transactions fa	all to qualify under the ex	cceptions described in	Y	No		
	Regulations section 53 4945 or in a		=				5b		
	Organizations relying on a current i								
c	If the answer is "Yes" to question 5	a(4),	does the foundation clain	n exemption from the		ш			
	tax because it maintained expendit			•	· · □	П.	.		
	If "Yes," attach the statement requi		· · · · · ·		· · L Yes	ш	No		
6a	Did the foundation, during the year	, rece	ive any funds, directly or	indirectly, to pay premi	ums on				
	a personal benefit contract?				· 🗆 🗆 vas	✓ 1	Na		
b	Did the foundation, during the year	, pay	premiums, directly or inc	lirectly, on a personal be	nefit contract?		МО 6Ь		No
	If "Yes" to 6b, file Form 8870								
7a	At any time during the tax year, wa	s the	foundation a party to a p	prohibited tax shelter tra	nsaction?		.		
b	If yes, did the foundation receive a				∟ Yes	V	NO 7b		
8	Is the foundation subject to the sec		•						
	excess parachute payment during t								
	Information About				Yes		No —		
Pa	and Contractors	OIIIC	ers, Directors, Trust	ices, roundation ma	illagers, nighty Far	u EIII	рюусс	γ,	
1	List all officers, directors, truste	es fo	oundation managers ar	nd their compensation	See instructions				
	List all officers, all cetors, traste		b) Title, and average	(c) Compensation (If		. Т			
	(a) Name and address	`	hours per week	not paid, enter	employee benefit plans	and	(e) Expe	ense acc allowan	
			devoted to position	-0-)	deferred compensation	on			
See	Additional Data Table	_							
		-							
2	Compensation of five highest-pa	id en	nployees (other than t	hose included on line	1—see instructions). I	f non	e, enter	"NONE	. "
, ,	N		(b) Title, and average		(d) Contributions t				
(a)	Name and address of each employee more than \$50,000	paid	hours per week	(c) Compensation	employee benefit plans and deferred		(e) Expe	nse acci Ilowanc	
	more than \$50,000		devoted to position		compensation	•	Ochici e	o	.03
NON	 E								
	I mumahan af athan arradana a		0.000						
TOTA	I number of other employees paid ov	/er \$5	0,000		· · · · · •		F 01	10 55	/2012
							Form 99	7U-PF	(∠018

Form 990-PF (2018)		Page 7
Part VIII Information About Officers, Directors, Trust and Contractors (continued)	ees, Foundation Managers, Highly I	Paid Employees,
3 Five highest-paid independent contractors for professional s	services (see instructions). If none, ente	er "NONE".
(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.		<u> </u>
Part IX-A Summary of Direct Charitable Activities	de velevent statistical information such as the number	of
List the foundation's four largest direct charitable activities during the tax year Inclu organizations and other beneficiaries served, conferences convened, research papers	s produced, etc	Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments	•	A
Describe the two largest program-related investments made by the foundation du 1 N/A	uring the tax year on lines 1 and 2	Amount
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		. •
		Form 990-PF (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

2

3a 3h

4

5

243.528

1.081

242.447

Form 990-PF (2018)

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

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

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

Amounts set aside for specific charitable projects that satisfy the

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

2

3

4

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43,843

156,644

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			•	
rt	ΧI	• •		

orm 990-PF (20	J18)
Part XIII	Undistributed Income (see instructions)

990-PF (2	018)
t XIII	Ur
•	

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. **b** Total for prior years

2015 , 20____ , 20____ Excess distributions carryover, if any, to 2018

a From 2013.

b From 2014. . . . c From 2015. . . d From 2016. e From 2017.

e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the

6 Enter the net total of each column as

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) . . .

9 Excess distributions carryover to 2019.

10 Analysis of line 9

a Excess from 2014. . . **b** Excess from 2015. . c Excess from 2016. . . . d Excess from 2017. . . e Excess from 2018. .

Subtract lines 7 and 8 from line 6a

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

indicated below:

4 Qualifying distributions for 2018 from Part

f Total of lines 3a through e. XII, line 4 🕨 \$

(Election required—see instructions).

d Applied to 2018 distributable amount. . . .

same amount must be shown in column (a))

(a)

Corpus

(b)

Years prior to 2017

20,502

20.502

20,502

(c)

2017

199,685

199,685

a Applied to 2017, but not more than line 2a **b** Applied to undistributed income of prior years c Treated as distributions out of corpus (Election



inter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section	(e) Related or exemp	
_	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions
d						
f						
g Fees	and contracts from government agencies					
	rship dues and assessments					
Interes Investn	t on savings and temporary cash nents			14	10,414	
	ids and interest from securities			14	98,875	
	tal income or (loss) from real estate					
	financed property					
	ebt-financed property					
	Ital Income or (loss) from personal property			+		
	(loss) from sales of assets other than	+		+		
invento	` '			18	20,352	
	ome or (loss) from special events				20,332	
	profit or (loss) from sales of inventory					
	revenue a					
b						
с						
d		1				
е						
e	al Add columns (b), (d), and (e).				129,641	
e 2 Subtot 3 Total.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)			13	129,641	
e 2 Subtot 3 Total. (See wo	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations)				
e Subtot Total. (See wo	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations) le Accomplish income is reporti	ment of Exem	pt Purposes of Part XVI-A contribut	Bted importantly to	129,641
e 2 Subtot 3 Total. (See wo art XV ine No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu EXPLAIN BELOW HOW EACH ACTIVITIES TO THE COMMENT OF THE COMMENT OF THE COMMENT OF THE CO	lations) le Accomplish income is reporti	ment of Exem	pt Purposes of Part XVI-A contribut	Bted importantly to	129,641
e	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu EXPLAIN BELOW HOW EACH ACTIVITIES TO THE COMMENT OF THE COMMENT OF THE COMMENT OF THE CO	lations) le Accomplish income is reporti	ment of Exem	pt Purposes of Part XVI-A contribut	Bted importantly to	129,641
e 2 Subtot 3 Total. (See wo art XV ine No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu EXPLAIN BELOW HOW EACH ACTIVITIES TO THE COMMENT OF THE COMMENT OF THE COMMENT OF THE CO	lations) le Accomplish income is reporti	ment of Exem	pt Purposes of Part XVI-A contribut	Bted importantly to	129,641
e 2 Subtot 3 Total. (See wo art XV ine No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu EXPLAIN BELOW HOW EACH ACTIVITIES TO THE COMMENT OF THE COMMENT OF THE COMMENT OF THE CO	lations) le Accomplish income is reporti	ment of Exem	pt Purposes of Part XVI-A contribut	Bted importantly to	129,641
e	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu EXPLAIN BELOW HOW EACH ACTIVITIES TO THE COMMENT OF THE COMMENT OF THE COMMENT OF THE CO	lations) le Accomplish income is reporti	ment of Exem	pt Purposes of Part XVI-A contribut	Bted importantly to	129,641
e	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu EXPLAIN BELOW HOW EACH ACTIVITIES TO THE COMMENT OF THE COMMENT OF THE COMMENT OF THE CO	lations) le Accomplish income is reporti	ment of Exem	pt Purposes of Part XVI-A contribut	Bted importantly to	129,641
e	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu EXPLAIN BELOW HOW EACH ACTIVITIES TO THE COMMENT OF THE COMMENT OF THE COMMENT OF THE CO	lations) le Accomplish income is reporti	ment of Exem	pt Purposes of Part XVI-A contribut	Bted importantly to	129,641
e 2 Subtot 3 Total. (See wo art XV ine No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu EXPLAIN BELOW HOW EACH ACTIVITIES TO THE COMMENT OF THE COMMENT OF THE COMMENT OF THE CO	lations) le Accomplish income is reporti	ment of Exem	pt Purposes of Part XVI-A contribut	Bted importantly to	129,641
e 2 Subtot 3 Total. (See wo art XV ine No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu EXPLAIN BELOW HOW EACH ACTIVITIES TO THE COMMENT OF THE COMMENT OF THE COMMENT OF THE CO	lations) le Accomplish income is reporti	ment of Exem	pt Purposes of Part XVI-A contribut	Bted importantly to	129,641
e 2 Subtot 3 Total. (See wo art XV ine No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu EXPLAIN BELOW HOW EACH ACTIVITIES TO THE COMMENT OF THE COMMENT OF THE COMMENT OF THE CO	lations) le Accomplish income is reporti	ment of Exem	pt Purposes of Part XVI-A contribut	Bted importantly to	129,641
e Subtotal. (See wo art XV ine No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu EXPLAIN BELOW HOW EACH ACTIVITIES TO THE COMMENT OF THE COMMENT OF THE COMMENT OF THE CO	lations) le Accomplish income is reporti	ment of Exem	pt Purposes of Part XVI-A contribut	Bted importantly to	129,641
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e 2 Subtot 3 Total. (See wo art XV ine No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu EXPLAIN BELOW HOW EACH ACTIVITIES TO THE COMMENT OF THE COMMENT OF THE COMMENT OF THE CO	lations) le Accomplish income is reporti	ment of Exem	pt Purposes of Part XVI-A contribut	Bted importantly to	129,641
e 2 Subtot 3 Total. (See wo art XV ine No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu EXPLAIN BELOW HOW EACH ACTIVITIES TO THE COMMENT OF THE COMMENT OF THE COMMENT OF THE CO	lations) le Accomplish income is reporti	ment of Exem	pt Purposes of Part XVI-A contribut	Bted importantly to	129,641
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e Subtotal. (See wo art XV ine No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu EXPLAIN BELOW HOW EACH ACTIVITIES TO THE COMMENT OF THE COMMENT OF THE COMMENT OF THE CO	lations) le Accomplish income is reporti	ment of Exem	pt Purposes of Part XVI-A contribut	Bted importantly to	129,641
e Subtotal. (See wo art XV ine No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu EXPLAIN BELOW HOW EACH ACTIVITIES TO THE COMMENT OF THE COMMENT OF THE COMMENT OF THE CO	lations) le Accomplish income is reporti	ment of Exem	pt Purposes of Part XVI-A contribut	Bted importantly to	129,641
e Subtotal. (See wo art XV ine No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu EXPLAIN BELOW HOW EACH ACTIVITIES TO THE COMMENT OF THE COMMENT OF THE COMMENT OF THE CO	lations) le Accomplish income is reporti	ment of Exem	pt Purposes of Part XVI-A contribut	Bted importantly to	129,641
e 2 Subtot 3 Total. (See wo art XV ine No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu EXPLAIN BELOW HOW EACH ACTIVITIES TO THE COMMENT OF THE COMMENT OF THE COMMENT OF THE CO	lations) le Accomplish income is reporti	ment of Exem	pt Purposes of Part XVI-A contribut	Bted importantly to	129,641
e	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu EXPLAIN BELOW HOW EACH ACTIVITIES TO THE COMMENT OF THE COMMENT OF THE COMMENT OF THE CO	lations) le Accomplish income is reporti	ment of Exem	pt Purposes of Part XVI-A contribut	Bted importantly to	129,641
e 2 Subtot 3 Total. (See wo art XV ine No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu EXPLAIN BELOW HOW EACH ACTIVITIES TO THE COMMENT OF THE COMMENT OF THE COMMENT OF THE CO	lations) le Accomplish income is reporti	ment of Exem	pt Purposes of Part XVI-A contribut	Bted importantly to	129,641
e	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu EXPLAIN BELOW HOW EACH ACTIVITIES TO THE COMMENT OF THE COMMENT OF THE COMMENT OF THE CO	lations) le Accomplish income is reporti	ment of Exem	pt Purposes of Part XVI-A contribut	Bted importantly to	129,641

. ,	/
	Information Regarding Transfers To and Transactions and Relationships With Noncharitable
П	Exempt Organizations

Part XVII	Exempt Organiz	zations			iio uiiu itolutio	monipo mien mon	onanica bio		
	ganization directly or inc than section 501(c)(3)	directly engage ii					n 501	Yes	No
a Transfers f	rom the reporting found	dation to a nonch	naritable ex	empt organization	of				
(1) Cash.							1a(1)		No
(2) Other	assets						. 1a(2)		No
b Other tran	sactions								
(1) Sales		. 1b(1)		No					
(2) Purch	ases of assets from a n	oncharitable exe	mpt organiz	zation			. 1b(2)		No
(3) Renta	al of facilities, equipmen	t, or other asset	s				. 1b(3)		No
(4) Reimi	bursement arrangement	ts					1b(4)		No
` '	or loan guarantees.						. 1b(5)	_	No
	mance of services or me						1b(6)		No
-	facilities, equipment, m	-	-						No
	ver to any of the above ds, other assets, or serv								
	us, other assets, or serv isaction or sharing arrai								
		,	•			,			
(a) Line No	(b) Amount involved	(c) Name of nonc	haritable exe	mpt organization	(d) Description of	transfers, transactions, a	and sharing arra	ngemen	ts
+									
2 7 11 6									
	ndation directly or indire	•	•				[.Z]		
	in section 501(c) (other		1(c)(3)) or	in section 52/7.		Ll Yes	s ⊻ No		
b If "Yes," co	omplete the following so		1 4	h	. 1	(a) Danamahan	- - - -		
	(a) Name of organizatio	<u>n</u>	(b) Type of organizatio	ın	(c) Description o	or relationship		
Unde	er penalties of perjury, I	I declare that I h	ave examın	ed this return, incl	uding accompany	ing schedules and sta	tements, and	to the l	best
of m	y knowledge and belief,	, it is true, correc							
	h preparer has any kno	wledge		I					
Sign	*****			2019-05-06	*****		May the IRS d return	iscuss th	ıIS
Here							with the prepa	rer show	٧n
	Signature of officer or tr	ustee		Date	Title		below	٦ ،	п I
	<u>-</u>						(see instr)?	Yes └	⊣ No
	Print/Type preparer's	name Pre	parer's Sigi	nature	Date	P-	TIN		
			-			Check if self-	P0023	1860	
	MICHAEL J PETERS	.ON			2010 05 06	employed ▶ 🔲	F0025	1000	
Paid	CPA				2019-05-06				
Preparer	Firm's name ▶ PETE	RSON ACCOUNT	ING GROUP	PC	1	' -	umala ETNI N OF	20207	
Jse Only						Fi	rm's EIN ▶27	-39387	91
	Firm's address ► 17	98 PLANK ROAD	SUITE 302						
	DU	INCANSVILLE. PA	16635			PI	hone no (814) 695-7	7441
		DUNCANSVILLE, PA 16635							

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation DONALD DEGOL JR SECRETARY/TR 0 0 000 00 3229 PLEASANT VALLEY BLVD ALTOONA, PA 16602 DONALD A DEGOL SR 0 0 PRESIDENT 0 000 00 3229 PLEASANT VALLEY BLVD ALTOONA, PA 16602 DAVID A DEGOL VICE-PRESIDE 0 0 0 000 00 3229 PLEASANT VALLEY BLVD ALTOONA, PA 16602 DAVID DEGOL JR ٥ 0 DIRECTOR 0 000 00 3229 PLEASANT VALLEY BLVD ALTOONA, PA 16602 BRUNO A DEGOL JR 0 0 DIRECTOR 000 00 3229 PLEASANT VALLEY BLVD ALTOONA, PA 16602 **DENNIS W DEGOL** DIRECTOR 0 0 0 000 00 3229 PLEASANT VALLEY BLVD ALTOONA, PA 16602 TERRY BURGAN 0 DIRECTOR 0 0 000 00 3229 PLEASANT VALLEY BLVD ALTOONA, PA 16602 DENNIS DEGOL JR 0 DIRECTOR 0 0 000 00 3229 PLEASANT VALLEY BLVD ALTOONA, PA 16602 RYAN BURGAN 0 0 DIRECTOR 0 000 00 3229 PLEASANT VALLEY BLVD ALTOONA, PA 16602 JOE ADAMS DIRECTOR 0 0 0 000 00 3229 PLEASANT VALLEY BLVD ALTOONA, PA 16602 BRUNO DEGOL III DIRECTOR 0 0 000 00 3229 PLEASANT VALLEY BLVD ALTOONA, PA 16602 NICK DEGOL 0 0 DIRECTOR 0 000 00 3229 PLEASANT VALLEY BLVD ALTOONA, PA 16602 MEGAN DEGOL DIRECTOR 0 0 0 000 00 3229 PLEASANT VALLEY BLVD ALTOONA, PA 16602 ANTHONY DEGOL DIRECTOR 0 0 0 000 00 3229 PLEASANT VALLEY BLVD ALTOONA, PA 16602 ANDREW DEGOL DIRECTOR 0 0 000 00 3229 PLEASANT VALLEY BLVD ALTOONA, PA 16602

(a) Name and address

Title, and average hours per week
(b) devoted to position

(c) Compensation (If not paid, enter -0-)

Contributions to employee benefit plans and deferred

			and deferred compensation	
HEATHER PALAU	DIRECTOR	0	0	0
3229 PLEASANT VALLEY BLVD	7 000 00			

ALTOONA, PA 16602

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 than \$5,000).

DONALD A DEGOL

BRUNO A DEGOL JR

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 recipient

Name and address (home or husiness)

Name and address (nome or business)	or substantial contributor	·		
a Paid during the year				
ST VINCENT COLLEGE 300 FRASER PURCHASE ROAD	NONE	PUBLIC	CHARITABLE	1,000

LATROBE, PA 15650				
N BLAIR COUNTY RECREATION CENTER 4080 PLEASANT VALLEY BLVD ALTOONA, PA 16601	NONE	PUBLIC	CHARITABLE	10,800
		1		

4080 PLEASANT VALLEY BLVD ALTOONA, PA 16601	NONE	POBLIC	CHARITABLE	10,800
NATIONAL SHRINE OF ST JUDE PO BOX 8537 CHICAGO, IL 60680	NONE	PUBLIC	CHARITABLE	200

4080 PLEASANT VALLEY BLVD ALTOONA, PA 16601				
NATIONAL SHRINE OF ST JUDE PO BOX 8537 CHICAGO, IL 60680	NONE	PUBLIC	CHARITABLE	200
Total			▶ 3a	241,778

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 CARMELITE COMMUNITY OF THE WORD I NONE PUBLIC CHARITABLE 1 300

394 BEM ROAD GALLITZIN, PA 16641	NONE	T OBLIC	CHARTABLE	1,300
CATHEDRAL OF THE BLESSED SACRAMENT ONE CATHEDRAL SQUARE ALTOONA, PA 16601	NONE	PUBLIC	CHARITABLE	2,000

SACRAMENT ONE CATHEDRAL SQUARE ALTOONA, PA 16601				
HOLLIDAYSBURG AREA SD FOUNDATION 405 CLARK STREET HOLLIDAYSBURG, PA 16648	NONE	PUBLIC	CHARITABLE	500

Total .

3a

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 recipient Name and address (home or business) or substantial contributor a Paid during the year

SISTER SERVANTS OF THE MOST SACRED 866 CAMBRIA STREET CRESSON, PA 16630	NONE	PUBLIC	CHARITABLE	350
ST VINCENT DEPAUL SOCIETY	NONE	PUBLIC	CHARITABLE	6,000

CRESSON, PA 16630				
ST VINCENT DEPAUL SOCIETY 2201 UNION AVENUE ALTOONA, PA 16601	NONE	PUBLIC	CHARITABLE	6,000
GALLITZIN PUBLIC LIBRARY	NONE	PUBLIC	CHARITABLE	700

ST VINCENT DEPAUL SOCIETY 2201 UNION AVENUE ALTOONA, PA 16601	NONE	PUBLIC	CHARITABLE	6,000
GALLITZIN PUBLIC LIBRARY 411 CONVENT STREET GALLITZIN, PA 16641	NONE	PUBLIC	CHARITABLE	700

ALTOONA, PA 16601				
GALLITZIN PUBLIC LIBRARY 411 CONVENT STREET GALLITZIN, PA 16641	NONE	PUBLIC	CHARITABLE	700

Total .

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

Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
LEGACY FOUNDATION	NONE	PUBLIC	CHARITABLE	5,000

401 PLYMOUTH ROAD STE 150 PLYMOUTH MEETING, PA 19462				
LITTLE SISTER JESUS CONVENT 347 TUNNELHILL STREET GALLITZIN PA 16641	NONE	PUBLIC	CHARITABLE	100

LITTLE SISTER JESUS CONVENT 347 TUNNELHILL STREET GALLITZIN, PA 16641	NONE	PUBLIC	CHARITABLE	100
INDIANA UNIVERSITY OF PA	NONE	PUBLIC	CHARITABLE	1,250

347 TUNNELHILL STREET GALLITZIN, PA 16641				
INDIANA UNIVERSITY OF PA 1090 SOUTH DRIVE INDIANA, PA 15705	NONE	PUBLIC	CHARITABLE	1,250

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

- ·				
DREAMS GO ON311 HEATHER AVENUE ALTOONA, PA 16602	NONE	PUBLIC	CHARITABLE	1,000
FRANCISCAN FRIARS TOR	NONE	PUBLIC	CHARITABLE	200

FRANCISCAN FRIARS TOR 788 MONASTERY ROAD HOLLIDAYSBURG, PA 16648	NONE	PUBLIC	CHARITABLE	200
AMERICAN RESCUE WORKERS 502 MULBERRY STREET	NONE	PUBLIC	CHARITABLE	40,500

HOLLIDATSBOKG,TA 10040				
AMERICAN RESCUE WORKERS 502 MULBERRY STREET HOLLIDAYSBURG, PA 16648	NONE	PUBLIC	CHARITABLE	40,500
Total			▶ 3a	241,778

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 recipient Name and address (home or business) or substantial contributor a Paid during the year

- '				
PENN CAMBRIA HIGH SCHOOL 401 LINDEN AVE CRESSON, PA 16630	NONE	PUBLIC	CHARITABLE	1,500
MENDING HEARTS ANIMAL RESCUE	NONE	PUBLIC	CHARITABLE	200

MENDING HEARTS ANIMAL RESCUE PO BOX 97 HOLLIDAYSBURG, PA 16648	NONE	PUBLIC	CHARITABLE	200
ST FRANCIS UNIVERSITYPO BOX 600 LORETTO, PA 15940	NONE	PUBLIC	CHARITABLE	1,100

HOLLIDAYSBURG, PA 16648				
ST FRANCIS UNIVERSITYPO BOX 600 LORETTO, PA 15940	NONE	PUBLIC	CHARITABLE	1,100
Total			▶ 3a	241,778

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

SHOOT FOR THE CAUSE 1205 N MONTGOMERY STREET HOLLIDAYSBURG, PA 16648	NONE	PUBLIC	CHARITABLE	1,000
ALLEGHENY LUTHERAN SOCIAL	NONE	PUBLIC	CHARITABLE	1,500

MINISTRIE 998 LOGAN BLVD ALTOONA, PA 16602	NONE	РОВПС	CHARITABLE	1,500
WISE WOMEN OF BLAIR COUNTY	NONE	PUBLIC	CHARITABLE	100

998 LOGAN BLVD ALTOONA, PA 16602				
WISE WOMEN OF BLAIR COUNTY PO BOX 134 HOLLIDAYSBURG, PA 16648	NONE	PUBLIC	CHARITABLE	100

7.2.1001077777 20002				
WISE WOMEN OF BLAIR COUNTY PO BOX 134 HOLLIDAYSBURG, PA 16648	NONE	PUBLIC	CHARITABLE	100
Total			▶ 3a	241,778

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

Name and address (home or husiness)

Name and address (nome or business)	or substantial contributor	-		
a Paid during the year				
BISHOP CARROLL HIGH SCHOOL	NONE	PUBLIC	CHARITABLE	1,500

recipient

EBENSBURG, PA 15931				
CENTRAL PA HUMANE SOCIETY 1837 E PLEASANT VALLEY B	NONE	PUBLIC	CHARITABLE	250

ı	,				
	CENTRAL PA HUMANE SOCIETY 1837 E PLEASANT VALLEY B ALTOONA, PA 16602	NONE	PUBLIC	CHARITABLE	250
	KIWANIS GOLF TOURNAMENT 2677 GRANDVIEW ROAD	NONE	PUBLIC	CHARITABLE	50

1837 E PLEASANT VALLEY B ALTOONA, PA 16602				
KIWANIS GOLF TOURNAMENT 2677 GRANDVIEW ROAD TYRONE, PA 16686	NONE	PUBLIC	CHARITABLE	50

· · · · · · · · · · · · · · · · · · ·				
KIWANIS GOLF TOURNAMENT 2677 GRANDVIEW ROAD TYRONE, PA 16686	NONE	PUBLIC	CHARITABLE	5
Total			▶ 3a	241,778

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				
TYRONE CARNIVAL	NONE	PUBLIC	CHARITABLE	200

1300 BALD EAGLE AVENUE TYRONE, PA 16686	INONE	POBLIC	CHARITABLE	200
AMERICAN CANCER SOCIETY 1004 NORTH JUNIATA STREET HOLLIDAYSBURG, PA 16648	NONE	PUBLIC	CHARITABLE	1,000

AMERICAN CANCER SOCIETY 1004 NORTH JUNIATA STREET HOLLIDAYSBURG, PA 16648	NONE	PUBLIC	CHARITABLE	1,000
MOUNT ALOYSIUS COLLEGE 7373 ADMIRAL PEARY HIGHWA CRESSON, PA 16630	NONE	PUBLIC	CHARITABLE	4,500

	Total			▶ 3a	241,778
	MOUNT ALOYSIUS COLLEGE 7373 ADMIRAL PEARY HIGHWA CRESSON, PA 16630	NONE	PUBLIC	CHARITABLE	4,500
1	1004 NORTH JUNIATA STREET HOLLIDAYSBURG, PA 16648	NONE	FOBLIC	CHARTABLE	1,000

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

NONE

LAUDEL HIGHLANDS COUNCIL BSA

Total .

500 GALLERIA DR SUITE 180 JOHNSTOWN, PA 15904	NONE	FOBLIC	CHARTABLE	300
ALTOONA BLAIR COUNTY DEVELOPMENT 3900 INDUSTRIAL PARK DRIV	NONE	PUBLIC	CHARITABLE	5,500

DUBLIC

I CHADITABI E

500

ALTOONA BLAIR COUNTY DEVELOPMENT 3900 INDUSTRIAL PARK DRIV ALTOONA, PA 16602	NONE	PUBLIC	CHARITABLE	5,500
GRIFFITH FAMILY FOUNDATION PO BOX 28 HOLLIDAYSBURG, PA 16648	NONE	PUBLIC	CHARITABLE	2,300

3900 INDUSTRIAL PARK DRIV ALTOONA, PA 16602				
GRIFFITH FAMILY FOUNDATION PO BOX 28 HOLLIDAYSBURG, PA 16648	NONE	PUBLIC	CHARITABLE	2,300

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 contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

NONE

PENN STATE UNIVERSITY

Total . .

103 SHIELDS BUILDING UNIVERSITY PARK, PA 16802	NONE	OBLIC	CHARTABLE	2,300
UNIVERSITY OF PITTSBURGH PO BOX 643092	NONE	PUBLIC	CHARITABLE	3,750

PUBLIC

CHARITARIF

▶ 3a

2 500

PO BOX 643092 PITTSBURGH, PA 15264				,
BOYS TOWN200 FLANAGAN BLVD	NONE	PUBLIC	CHARITABLE	260

P1115BURGH, PA 15264				
BOYS TOWN200 FLANAGAN BLVD BOYS TOWN, NE 68010	NONE	PUBLIC	CHARITABLE	2

BOYS TOWN200 FLANAGAN BLVD	NONE	PUBLIC	CHARITABLE	
BOYS TOWN, NE 68010				

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				
RONALD MCDONALD HOUSEPO BOX 310 NEWRY, PA 16665	NONE	PUBLIC	CHARITABLE	500
KNIGHTS OF COLUMBUS	NONE	PUBLIC	CHARITABLE	100

KNIGHTS OF COLUMBUS 613 WHITE STREET LILLY, PA 15938	NONE	PUBLIC	CHARITABLE	100
WILDLIFE FOR EVERYONE FOUNDATION 341 SCIENCE PARK ROAD	NONE	PUBLIC	CHARITABLE	2,250

LILLY, PA 15938				
WILDLIFE FOR EVERYONE FOUNDATION 341 SCIENCE PARK ROAD STATE COLLEGE, PA 16803	NONE	PUBLIC	CHARITABLE	2,25

Total .

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 business)

309 ALLEGHENY STREET HOLLIDAYSBURG, PA 16648

Total .

,	or substantial contributor			
a Paid during the year				
DISABLED VETERANS NAT FOUNDATION PO BOX 96262 WASHINGTON, DC 20090	NONE	PUBLIC	CHARITABLE	100
BLAIR SENIOR SERVICES 1320 12TH AVENUE ALTOONA, PA 16601	NONE	PUBLIC	CHARITABLE	100

recipient

300

WASHINGTON, DC 20090				
BLAIR SENIOR SERVICES 1320 12TH AVENUE ALTOONA, PA 16601	NONE	PUBLIC	CHARITABLE	
BLAIR COUNTY CHAMBER FOUNDATION	NONE	PUBLIC	CHARITABLE	

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

Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	
a Paid during the year				
BLAIR COUNTY NAACP 2100 SIXTH AVENUE ALTOONA, PA 16602	NONE	PUBLIC	CHARITABLE	220
JUNIATA VALLEY COUNCIL BSA 9 TAYLOR DRIVE REEDSVILLE, PA 17084	NONE	PUBLIC	CHARITABLE	480
THE DOOR STUDENT SERVICES INC PO BOX 6 BELLWOOD, PA 16617	NONE	PUBLIC	CHARITABLE	500
Total			▶ 3a	241,778

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

Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	
a Paid during the year				
COMMUNITY WORSHIP CENTER 1300 BALD EAGLE AVENUE TYRONE, PA 16686	NONE	PUBLIC	CHARITABLE	100
GIORGIO FOUNDATION 118 MCDONALD DRIVE DUNCANSVILLE, PA 16635	NONE	PUBLIC	CHARITABLE	500
JUNIOR ACHIEVEMENT OF WESTERN PA 647 MAIN STREET SUITE 300 JOHNSTOWN, PA 15901	NONE	PUBLIC	CHARITABLE	375
Total			▶ 3a	241,778

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

OPERATION OUR TOWN 5508 6TH AVE REAR ALTOONA, PA 16602	NONE	PUBLIC	CHARITABLE	2,000
GRIER SCHOOLPO BOX 308	NONE	PUBLIC	CHARITABLE	2,000

GRIER SCHOOLPO BOX 308 TYRONE, PA 16686	NONE	PUBLIC	CHARITABLE	2,000
TRILEO FOUNDATION 977 VETERANS MEMORIAL HIG ALTOONA, PA 16601	NONE	PUBLIC	CHARITABLE	2,000
Total	241,778			

Recipient If recipient is an individual, Purpose of grant or Foundation 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

1				
ANGEL FLIGHT EAST 1501 NARCISSA ROAD BLUE BELL, PA 19422	NONE	PUBLIC	CHARITABLE	1,000
BOY SCOUT TROOP 3031407 ELM LANE	NONE	PUBLIC	CHARITABLE	100

l e e e e e e e e e e e e e e e e e e e				
BOY SCOUT TROOP 3031407 ELM LANE DUNCANSVILLE, PA 16635	NONE	PUBLIC	CHARITABLE	100
GEISINGER HEALTH FOUNDATION PO BOX 900 DANVILLE PA 17821	NONE	PUBLIC	CHARITABLE	100

DUNCANSVILLE, PA 16635				
GEISINGER HEALTH FOUNDATION PO BOX 900 DANVILLE, PA 17821	NONE	PUBLIC	CHARITABLE	100
Total			▶ 3a	241,778

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				
GALLITZIN LIONS163 HICKORY DRIVE GALLITZIN, PA 16641	NONE	PUBLIC	CHARITABLE	100

GALLITZIN, PA 16641	110112	1 05220	011111111111111111111111111111111111111	100
PHOENIX VOLUNTEER FIRE COMPANY 206 WAYNE STREET HOLLIDAYSBURG, PA 16648	NONE	PUBLIC	CHARITABLE	800

PHOENIX VOLUNTEER FIRE COMPANY 206 WAYNE STREET HOLLIDAYSBURG, PA 16648	NONE	PUBLIC	CHARITABLE	800
PRAYERS FOR ADAM105 GULF DRIVE	NONE	PUBLIC	CHARITABLE	500

206 WAYNE STREET HOLLIDAYSBURG, PA 16648				
PRAYERS FOR ADAM105 GULF DRIVE	NONE	PUBLIC	CHARITABLE	500

HOLLIDAYSBURG, PA 16648				
PRAYERS FOR ADAM105 GULF DRIVE DUNCANSVILLE, PA 16635	NONE	PUBLIC	CHARITABLE	500

PRAYERS FOR ADAM105 GULF DRIVE DUNCANSVILLE, PA 16635	NONE	PUBLIC	CHARITABLE	500
			_	

DUNCANSVILLE, PA 16635	NONE	TOBLIC	CHARTABLE	
Total			▶ 3a	241,778

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

Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year				
HOLLIDAYSBURG AREA PUBLIC LIBRARY 1 FURNANCE ROAD HOLLIDAYSBURG, PA 16648	NONE	PUBLIC	CHARITABLE	900
BLAIRCLEARFIELD ASSOC FOR BLIND 300 5TH AVENUE ALTOONA, PA 16602	NONE	PUBLIC	CHARITABLE	150
FAMILY SERVICES INC 2022 BROAD AVENUE ALTOONA, PA 16601	NONE	PUBLIC	CHARITABLE	500
Total			▶ За	241,778

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

BLAIR COUNTY VETERANS DAY PARADE 2000 PLEASANT VALLEY BLVD ALTOONA, PA 16602	NONE	PUBLIC	CHARITABLE	1,250
ROSARY SHRINE OF SAINT JUDE 141 E 65TH STREET	NONE	PUBLIC	CHARITABLE	100

2000 PLEASANT VALLEY BLVD ALTOONA, PA 16602				
ROSARY SHRINE OF SAINT JUDE 141 E 65TH STREET NEW YORK, NY 10065	NONE	PUBLIC	CHARITABLE	100
NATIONAL MULTIPLE SCLEROSIS SOCIETY 506 THIRD AVENUE	NONE	PUBLIC	CHARITABLE	600

141 E 65TH STREET NEW YORK, NY 10065	NONE	FOBLIC	CHARTABLE	100
NATIONAL MULTIPLE SCLEROSIS SOCIETY 506 THIRD AVENUE DUNCANSVILLE, PA 16635	NONE	PUBLIC	CHARITABLE	600
Total	241,778			

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

a Paid during the year

Recipient S - Grants and Contributions Paid During the Year or Approved for Future Payment

Foundation status of recipient satus of recipi

NONE

DEFLICE VOLITH NETWORK

Total . .

600 RITTS ROAD ALTOONA, PA 16601	NONE	FUBLIC	CHARITABLE	230
STRIKE BACK AT AUTISM 965 VALLEY FORGE ROAD DUNCANSVILLE PA 16635	NONE	PUBLIC	CHARITABLE	150

DUBLIC

CHADITABLE

▶ 3a

250

965 VALLEY FORGE ROAD DUNCANSVILLE, PA 16635	1.0.12	7 0 0 2 1 0		155
ST JOSEPH INDIAN SCHOOLPO BOX 300 CHAMBERLAIN, SD 57325	NONE	PUBLIC	CHARITABLE	100

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)

Total .

	or substantial contributor			
a Paid during the year				
PENN CAMBRIA GIRLS BASKETBALL 1618 RODGERS AVENUE CRESSON, PA 16630	NONE	PUBLIC	CHARITABLE	1,250
MIRACLE LEAGUE OF BLAIR COUNTY	NONE	PUBLIC	CHARITABLE	100

recipient

CKE330N, FA 10030				
MIRACLE LEAGUE OF BLAIR COUNTY PO BOX 1091 ALTOONA, PA 16603	NONE	PUBLIC	CHARITABLE	
PENN CAMBRIA SPECIAL EDUCATION	NONE	PUBLIC	CHARITABLE	

PO BOX 1091 ALTOONA, PA 16603				
PENN CAMBRIA SPECIAL EDUCATION 201 6TH STREET CRESSON, PA 16630	NONE	PUBLIC	CHARITABLE	250

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

BOB HAHN MEMORIAL GOLF TOURNAMENT PO BOX 600 LORETTO, PA 15940	NONE	PUBLIC	CHARITABLE	2,000

LORETTO, PA 15940				
MARCH OF DIMES 5168 CAMPBELLS RUN ROAD PITTSBURGH, PA 15202	NONE	PUBLIC	CHARITABLE	250

PITTSBURGH, PA 15202				
BISHOP GUILFOYLE HIGH SCHOOL 2400 PLEASANT VALLEY BLVD ALTOONA, PA 16602	NONE	PUBLIC	CHARITABLE	250

Total .

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 a Paid during the year

HOME NURSING AGENCY 201 CHESTNUT AVE ALTOONA, PA 16601	NONE	PUBLIC	CHARITABLE	100
SPECIAL OLYMPICS 200 CEDAR RIDGE DRIVE	NONE	PUBLIC	CHARITABLE	2,000

SPECIAL OLYMPICS 200 CEDAR RIDGE DRIVE PITTSBURGH, PA 15205	NONE	PUBLIC	CHARITABLE	2,000
DREAMS GO ON INC2612 DYSART AVE	NONE	PUBLIC	CHARITABLE	250

PITTSBURGH, PA 15205				
DREAMS GO ON INC2612 DYSART AVE ALTOONA, PA 16602	NONE	PUBLIC	CHARITABLE	250

DREAMS GO ON INC2612 DYSART AVE ALTOONA, PA 16602	NONE	PUBLIC	CHARITABLE	•

Total .

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 recipient Name and address (home or business) or substantial contributor a Paid during the year SAINT LEONARD'S HOME NONE PUBLIC CHARITABLE 500

HOLLIDAYSBURG, PA 16648				
UPMC ALTOONA FOUNDATION 620 HOWARD AVENUE ALTOONA, PA 16601	NONE	PUBLIC	CHARITABLE	25,000

620 HOWARD AVENUE ALTOONA, PA 16601	NONE	POBLIC	CHARITABLE	25,000
OBLATE MISSIONSPO BOX 659439	NONE	PUBLIC	CHARITABLE	100

ALTOONA, PA 16601				
OBLATE MISSIONSPO BOX 659439 SAN ANTONIO, TX 78265	NONE	PUBLIC	CHARITABLE	1

ı	712100111,717 10001				
	OBLATE MISSIONSPO BOX 659439	NONE	PUBLIC	CHARITABLE	
	SAN ANTONIO, TX 78265				

Total . .

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 contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

NICKIE

Total .

4 PENN CENTER BLVD PITTSBURGH, PA 15276	NONE	POBLIC	CHARITABLE	500
WE CARE FOUNDATION	NONE	PUBLIC	CHARITABLE	500

DUDLIC

241,778

▶ 3a

WE CARE FOUNDATION 501 VALLEY VIEW BLVD ALTOONA, PA 16602	NONE	PUBLIC	CHARITABLE	500
GALLITZIN FIRE COMPANYPO BOX 41	NONE	PUBLIC	CHARITABLE	300

LTOONA, PA 16602				
GALLITZIN FIRE COMPANYPO BOX 41 GALLITZIN, PA 16641	NONE	PUBLIC	CHARITABLE	30

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

Name and address (home or husiness)

Total .

Name and address (nome or business)	or substantial contributor	·		
a Paid during the year				
VETERANS OF FOREIGN WARS PO BOX 8954 TOPEKA, KS 66608	NONE	PUBLIC	CHARITABLE	200
NANTY-GLO CENTENNIAL COMMITTEE 1015 FIRST STREET	NONE	PUBLIC	CHARITABLE	250

recipient

100

NANTY-GLO CENTENNIAL COMMITTEE 1015 FIRST STREET NANTYGLO, PA 15943	NONE	PUBLIC	CHARITABLE	
GOOD SHEPHERD CHURCH	NONE	PUBLIC	CHARITABLE	

NANTY-GLO CENTENNIAL COMMITTEE 1015 FIRST STREET NANTYGLO, PA 15943	NONE	PUBLIC	CHARITABLE	
GOOD SHEPHERD CHURCH 547 THOMAS ROAD LORETTO, PA 15940	NONE	PUBLIC	CHARITABLE	

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment 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				
CARMELITE MONASTERY 2101 MANOR DRIVE LORETTO, PA 15940	NONE	PUBLIC	CHARITABLE	200

LORETTO, PA 15940				
CENTRAL BLAIR REC COMMISSION 2101 5TH AVENUE ALTOONA, PA 16602	NONE	PUBLIC	CHARITABLE	100
MECHANICSBURG AREA SCHOOL	NONE	PUBLIC	CHARITABLE	500

2101 5TH AVENUE ALTOONA, PA 16602	NONE	FOBLIC	CHARITABLE	100
MECHANICSBURG AREA SCHOOL DISTRICT 402 LAKE DRIVE MECHANICSBURG, PA 17055	NONE	PUBLIC	CHARITABLE	500

2101 5TH AVENUE ALTOONA, PA 16602				
MECHANICSBURG AREA SCHOOL DISTRICT 402 LAKE DRIVE MECHANICSBURG, PA 17055	NONE	PUBLIC	CHARITABLE	500
Total			▶ 3a	241,778

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 recipient Name and address (home or business) or substantial contributor a Paid during the year

a raid daring the year				
SMILES FOR MILES506 N 4TH STREET BELLWOOD, PA 16617	NONE	PUBLIC	CHARITABLE	100
CAMBRIA-SOMERSET OUTSTANDING YOUNG 323 CHANCELLOR STREET	NONE	PUBLIC	CHARITABLE	100

YOUNG 323 CHANCELLOR STREET JOHNSTOWN, PA 15904	NONE	FODLIC	CHARTABLE	100
BEST OF FRIENDS THERAPEUTIC SERVICE 304 HELSEL ROAD JOHNSTOWN, PA 15907	NONE	PUBLIC	CHARITABLE	100

323 CHANCELLOR STREET JOHNSTOWN, PA 15904				
BEST OF FRIENDS THERAPEUTIC SERVICE 304 HELSEL ROAD JOHNSTOWN, PA 15907	NONE	PUBLIC	CHARITABLE	100
Total	241.778			

Recipient If recipient is an individual, show any relationship to status of contribution.

Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
a Paid during the year				
PENN STATE EXTENSION BLAIR COUNTY 266 AVIATION WAY MARTINSBURG, PA 16662	NONE	PUBLIC	CHARITABLE	100
MAINLINE AREA COMMUNITY CENTER 715 FRONT STREET CRESSON, PA 16630	NONE	PUBLIC	CHARITABLE	250
SERRA CLUB OF CAMBRIA COUNTY 1820 PITT AVENUE JOHNSTOWN, PA 15905	NONE	PUBLIC	CHARITABLE	150

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				
REMEMBERING ADAMPO BOX 665	NONE	PUBLIC	CHARITABLE	2,750

HASTINGS, PA 16646	NONE	TOBLIC	CHARTABLE	2,730
MUSIC FOR MSPO BOX 87 GIBSONIA, PA 15044	NONE	PUBLIC	CHARITABLE	50
MOUNTAIN LION BACKBACK BROCKAM	NONE	DUBLIC	CHARITABLE	500

GIBSONIA, PA 15044	NONE	PUBLIC	CHARITABLE	50
MOUNTAIN LION BACKPACK PROGRAM 2100 6TH AVENUE ALTOONA, PA 16602	NONE	PUBLIC	CHARITABLE	500

GIBSONIA, FA 13044				
MOUNTAIN LION BACKPACK PROGRAM 2100 6TH AVENUE ALTOONA, PA 16602	NONE	PUBLIC	CHARITABLE	500
Total			▶ 3a	241,778

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				
BLUEGRASS FESTIVAL FOR WISHES 203 SHEEHAN ROAD LORETTO, PA 15940	NONE	PUBLIC	CHARITABLE	500

LORETTO, PA 15940				
NEWS WORTHY NETWORK 1029 58TH STREET ALTOONA, PA 16601	NONE	PUBLIC	CHARITABLE	500
FRIENDS OF FATHER JUDGE HIGH	NONE	PUBLIC	CHARITABLE	500

NEWS WORTHY NETWORK 1029 58TH STREET ALTOONA, PA 16601	NONE	PUBLIC	CHARITABLE	500
FRIENDS OF FATHER JUDGE HIGH SCHOOL 3301 SOLLY AVENUE PHILADELPHIA, PA 19136	NONE	PUBLIC	CHARITABLE	500

1029 58TH STREET ALTOONA, PA 16601				
FRIENDS OF FATHER JUDGE HIGH SCHOOL 3301 SOLLY AVENUE PHILADELPHIA, PA 19136	NONE	PUBLIC	CHARITABLE	500
Total			▶ 3a	241,778

FRIENDS OF FATHER JUDGE HIGH NONE PUBLIC CHARITABLE	ALTOONA, PA 16601				
SCHOOL 3301 SOLLY AVENUE PHILADELPHIA, PA 19136	SCHOOL 3301 SOLLY AVENUE	NONE	PUBLIC	CHARITABLE	500

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 recipient Name and address (home or business) or substantial contributor a Paid during the year THE VILLAGE AT MORRISONS COVE NONE PUBLIC CHARITABLE 500

429 S MARKET STREET MARTINSBURG, PA 16662				
CAMP CADET OF CAMBRIA COUNTY PO BOX 361 EBENSBURG, PA 15931	NONE	PUBLIC	CHARITABLE	500
CHAD EDMUNDSON MEMORIAL FOUNDATION	NONE	PUBLIC	CHARITABLE	250

PO BOX 361 EBENSBURG, PA 15931				
CHAD EDMUNDSON MEMORIAL FOUNDATION PO BOX 59 WILLIAMSBURG, PA 16693	NONE	PUBLIC	CHARITABLE	25

Total .

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)	or substantial contributor	recipient		
a Paid during the year				
ST ROSE OF LIMA ENDOWMENT FUND 5514 ROSELAWN AVENUE ALTOONA, PA 16602	NONE	PUBLIC	CHARITABLE	250
MS 150 KEYSTONE COUNTRY RIDE 433 SABBATH REST ROAD ALTOONA, PA 16601	NONE	PUBLIC	CHARITABLE	100

500

241,778

ALTOONA, PA 16602				
MS 150 KEYSTONE COUNTRY RIDE 433 SABBATH REST ROAD ALTOONA, PA 16601	NONE	PUBLIC	CHARITABLE	
TRINITY LUTHERAN CHURCH 2221 N OAK LANE	NONE	PUBLIC	CHARITABLE	

STATE COLLEGE, PA 16803

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				
MISSION DISCOVERY816 OLIM STREET JOHNSTOWN, PA 15904	NONE	PUBLIC	CHARITABLE	100
<u>†</u>		i		

JOHNSTOWN, PA 15904	NONE	POBLIC	CHARITABLE	100
ALTOONA FIREFIGHTERSPO BOX 1901 ALTOONA, PA 16603	NONE	PUBLIC	CHARITABLE	100
HOME RUN AGAINST DRUGS	NONE	PUBLIC	CHARITABLE	200

ALTOONA FIREFIGHTERSPO BOX 1901 ALTOONA, PA 16603	NONE	PUBLIC	CHARITABLE	100
HOME RUN AGAINST DRUGS 286 TODD AVENUE HOLLIDAYSBURG, PA 16648	NONE	PUBLIC	CHARITABLE	200

ALTOONA, PA 16603				
HOME RUN AGAINST DRUGS 286 TODD AVENUE HOLLIDAYSBURG, PA 16648	NONE	PUBLIC	CHARITABLE	200
Total			▶ 3a	241,778

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 GROCERS FIGHT CANCER GOLF NONE **PUBLIC** CHARITABLE 600

TOURNAMEN

Total .

	881 COLLEGE PLAZA EBENSBURG, PA 15931				
	CENTRAL PA AUTISM SOCIETY 507 SPRUCE STREET HOLLIDAYSBURG, PA 16648	NONE	PUBLIC	CHARITABLE	600
11					

507 SPRUCE STREET HOLLIDAYSBURG, PA 16648				
ST THERESE CHILD JESUS CATHOLIC CHU 2301 5TH STREET ALTOONA, PA 16601	NONE	PUBLIC	CHARITABLE	250

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 recipient Name and address (home or business) or substantial contributor a Paid during the year FRANCISCAN FRIARS ATONEMENT NONE PUBLIC CHARITABLE 100

GRAYMOO PO BOX 313 GARRISON, NY 10524				
NEWBURG VOLUNTEER FIRE DEPT 2808 WASHINGTON AVENUE	NONE	PUBLIC	CHARITABLE	300

NEWBURG VOLUNTEER FIRE DEPT 2808 WASHINGTON AVENUE ALTOONA, PA 16601	NONE	PUBLIC	CHARITABLE	300
BRIAN GATES FOUNDATION 715 5TH AVENUE PATTON, PA 16668	NONE	PUBLIC	CHARITABLE	500

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

HOLLIDAYSBURG WRESTLING PO BOX 337 NEWRY, PA 16665 NONE PUBLIC CHARITABLE	200

NEWRY, PA 16665				
ASSOC OF THE MIRACULOUS MEDAL 1811 W SAINT JOSEPH ST PERRYVILLE, MO 63775	NONE	PUBLIC	CHARITABLE	100
BLAIR COUNTY CONSERVATION DISTRICT	NONE	PUBLIC	CHARITBALE	100

-				
ASSOC OF THE MIRACULOUS MEDAL 1811 W SAINT JOSEPH ST PERRYVILLE, MO 63775	NONE	PUBLIC	CHARITABLE	100
BLAIR COUNTY CONSERVATION DISTRICT 1407 BLAIR STREET HOLLIDAYSBURG, PA 16648	NONE	PUBLIC	CHARITBALE	100

Tatal			N 2-	241 770
BLAIR COUNTY CONSERVATION DISTRICT 1407 BLAIR STREET HOLLIDAYSBURG, PA 16648	NONE	PUBLIC	CHARITBALE	100
1811 W SAINT JOSEPH ST PERRYVILLE, MO 63775	NONE	POBLIC	CHARITABLE	100

BLAIR COUNTY CONSERVATION DISTRICT 1407 BLAIR STREET HOLLIDAYSBURG, PA 16648	NONE	PUBLIC	CHARITBALE	100
Total			▶ 3a	241,778

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

a raid during the year				
UNITED WAY OF BLAIR COUNTY 208 HOLLIDAYSBURG PLAZA DUNCANSVILLE, PA 16635	NONE	PUBLIC	CHARITABLE	250
DISABLED AMERICAN VETERANS	NONE	PUBLIC	CHARITABLE	100

B 0110111011111111111111111111111111111				
DISABLED AMERICAN VETERANS PO BOX 14301 CINCINNATI, OH 45250	NONE	PUBLIC	CHARITABLE	100
FRANKIE FINELLI MEMORIAL SCHOLARSHI	NONE	PUBLIC	CHARITABLE	500

CINCINNATI, OH 45250				
FRANKIE FINELLI MEMORIAL SCHOLARSHI 1813 4TH AVENUE ALTOONA, PA 16602	NONE	PUBLIC	CHARITABLE	500

CINCINI, (11, 611 1525)				
FRANKIE FINELLI MEMORIAL SCHOLARSHI 1813 4TH AVENUE ALTOONA, PA 16602	NONE	PUBLIC	CHARITABLE	500
Total			▶ 3a	241,778

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

Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	
a Paid during the year				
JOSIE KENT MEMORIAL 301 CHURCH STREET GALLITZIN, PA 16641	NONE	PUBLIC	CHARITABLE	250
PENN CAMBRIA GIRLS SOCCER 136 MAPLE DRIVE LILLY, PA 15938	NONE	PUBLIC	CHARITABLE	150
ODU BASKETBALL GOLF TOURNAMENT 4417 MONARCH WAY NORFOLK, VA 23529	NONE	PUBLIC	CHARITABLE	650
Total				241,778

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

Name and address (home or business)

DUNCANSVILLE, PA 16635

Total .

Name and address (nome or business)	or substantial contributor	·		
a Paid during the year				
PAULINE RODGERS SCHOOL OF DANCE 331 N 6TH AVENUE ALTOONA, PA 16601	NONE	PUBLIC	CHARITABLE	100
LILY KENNEDY GOLF BENEFIT SCOTUS HALL 218 LORETTO, PA 15940	NONE	PUBLIC	CHARITABLE	300

recipient

500

ALTOONA,TA 10001				
LILY KENNEDY GOLF BENEFIT SCOTUS HALL 218 LORETTO, PA 15940	NONE	PUBLIC	CHARITABLE	
LADY TIGER BASKETBALL BOOSTERS 220 HAMER DRIVE	NONE	PUBLIC	CHARITABLE	

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 business)

HOLLIDAYSBURG, PA 16648

Total .

,	or substantial contributor			
a Paid during the year				
COMPANIONS OF SAINT ANTHONY 12290 FOLLY QUARTER ROAD ELLICOTT CITY, MD 21042	NONE	PUBLIC	CHARITABLE	100
CATHOLIC CHARITIES 1300 12TH AVENUE ALTOONA, PA 16603	NONE	PUBLIC	CHARITABLE	500

recipient

ELLICOTT CITY, MD 21042				
CATHOLIC CHARITIES 1300 12TH AVENUE ALTOONA, PA 16603	NONE	PUBLIC	CHARITABLE	500
GARVEY MANOR 1037 SOUTH LOGAN BLVD	NONE	PUBLIC	CHARITABLE	210

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

Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
MISSIONARY OBLATES MARY IMMACULATE PO BOX 23004 BELLEVILLE, IL 62223	NONE	PUBLIC	CHARITABLE	100
BAIR FOUNDATION 615 HOWARD AVENUE ALTOONA, PA 16601	NONE	PUBLIC	CHARITABLE	100

BELLEVILLE, IL 62223				
BAIR FOUNDATION 615 HOWARD AVENUE ALTOONA, PA 16601	NONE	PUBLIC	CHARITABLE	
		1		

Total .

1			D	0	
	615 HOWARD AVENUE ALTOONA, PA 16601				
	BAIR FOUNDATION	NONE	PUBLIC	CHARITABLE	10

615 HOWARD AVENUE ALTOONA, PA 16601				
AMERICA NEEDS FATIMAPO BOX 341	NONE	PUBLIC	CHARITABLE	100

ALTOONA, PA 16601				
AMERICA NEEDS FATIMAPO BOX 341	NONE	PUBLIC	CHARITABLE	100

ALTOONA, PA 16601				
AMERICA NEEDS FATIMAPO BOX 341 HANOVER, PA 17331	NONE	PUBLIC	CHARITABLE	10

Recipient If recipient is an individual, show any relationship to status of status of

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
SO ALLEGHENIES MUSEUM OF ART PO BOX 3061 ALTOONA, PA 16601	NONE	PUBLIC	CHARITABLE	500
NAT ASSOC OF BLIND VETERANS PO BOX 17252 BALTIMORE, MD 21298	NONE	PUBLIC	CHARITABLE	100
WOOD GIRLS BASKETBALL 207 RED BARN ROAD WILLOW GROVE, PA 19090	NONE	PUBLIC	CHARITABLE	500

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 LADV BLUE DEVIL BACKETBALL NONE DUBLIC CHADITABLE 100

BOOSTERS 1049 SANDBANK ROAD ALTOONA, PA 16601	NONE	FODEIC	CHARLABLE	
DOCTORS WITHOUT BORDERS	NONE	PUBLIC	CHARITABLE	

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

ALTOONA, PA 16601				
DOCTORS WITHOUT BORDERS PO BOX 5023 HAGERSTOWN, MD 21741	NONE	PUBLIC	CHARITABLE	100
PITT JOHNSTOWN ALUMNI	NONE	PUBLIC	CHARITABLE	200

HAGERSTOWN, MD 21741				
PITT JOHNSTOWN ALUMNI ASSOCIATION 450 SCHOOLHOUSE ROAD JOHNSTOWN, PA 15904	NONE	PUBLIC	CHARITABLE	200

3a

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

Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year				
FRONTIER GIRLS TROOP 213 145 MEADOW BROOK LANE GALLITZIN, PA 16641	NONE	PUBLIC	CHARITABLE	100
UPMC HILLMAN CANCER CENTER 5150 CENTRE AVENUE PITTSBURGH, PA 15232	NONE	PUBLIC	CHARITABLE	250
NO BLAIR COUNTY KIWANIS CLUB PO BOX 195 TYRONE, PA 16686	NONE	PUBLIC	CHARITABLE	50

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

	or substantial contributor			
a Paid during the year				
IUP FOUNDATION1011 SOUTH DRIVE INDIANA, PA 15705	NONE	PUBLIC	CHARITABLE	8,333

INDIANA, PA 15705	NONE	FOBLIC	CHARTABLE	0,333
LIFESTEPS383 NEW CASTLE ROAD BUTLER, PA 16601	NONE	PUBLIC	CHARITABLE	1,000
CENTRAL PA NAT GUARD & VETERANS	NONE	PUBLIC	CHARITABLE	2,500

BUTLER, PA 16601	HONE	TOBLIC	CHARTABLE	1,000
CENTRAL PA NAT GUARD & VETERANS 1330 11TH AVENUE ALTOONA, PA 16601	NONE	PUBLIC	CHARITABLE	2,500

Total			▶ 3a	241,778
CENTRAL PA NAT GUARD & VETERANS 1330 11TH AVENUE ALTOONA, PA 16601	NONE	PUBLIC	CHARITABLE	2,500
· - - · · · · · · · · · · · · · · · 				

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 business)

405 CHURCH STREET GALLITZIN, PA 16641

Total .

,	or substantial contributor			
a Paid during the year				
JOSHUA HOUSE926 LOGAN AVENUE TYRONE, PA 16686	NONE	PUBLIC	CHARITABLE	1,000
YOUTH SERVICE BUREAU 325 W AARON DRIVE STATE COLLEGE, PA 16803	NONE	PUBLIC	CHARITABLE	1,800

recipient

TYRONE, PA 16686				
YOUTH SERVICE BUREAU 325 W AARON DRIVE STATE COLLEGE, PA 16803	NONE	PUBLIC	CHARITABLE	1,800
GALLITZIN UNITED METHODIST CHURCH	NONE	PUBLIC	CHARITABLE	1,000

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 business)

CRESSON, PA 16630

Total .

,	or substantial contributor			
a Paid during the year				
FRANKSTOWN ELEMENTARY PTO 2463 RESERVOIR ROAD HOLLIDAYSBURG, PA 16648	NONE	PUBLIC	CHARITABLE	2,500
HEALTHNETWORK FOUNDATION 33 RIVER STREET CHAGRIN FALLS, OH 44022	NONE	PUBLIC	CHARITABLE	5,000

recipient

HOLLIDAYSBURG, PA 16648				
HEALTHNETWORK FOUNDATION 33 RIVER STREET CHAGRIN FALLS, OH 44022	NONE	PUBLIC	CHARITABLE	5,000
PENN CAMBRIA HS GYM PROJECT 401 LINDEN AVENUE	NONE	PUBLIC	CHARITABLE	5,000

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)

a Paid during the year				
ABLEPO BOX 603	NONE	PUBLIC	CHARITABLE	2,000

ILIOONA, IA 10005				İ
RONALD MCDONALD HOUSE CHARITIES 227 SCOTCH VALLEY ROAD	NONE	PUBLIC	CHARITABLE	

or substantial contributor

Total .

RONALD MCDONALD HOUSE CHARITIES 2227 SCOTCH VALLEY ROAD HOLLIDAYSBURG, PA 16648	NONE	PUBLIC	CHARITABLE	

HOLLIDAYSBURG, PA 16648				
JUNIATA COLLEGE1700 MOORE STREET	NONE	PUBLIC	CHARITABLE	1,250

1,200

HULLIDAYSBURG, PA 16648				
JUNIATA COLLEGE1700 MOORE STREET	NONE	PUBLIC	CHARITABLE	1,2

JNIATA COLLEGE1700 MOORE STREET UNTINGDON, PA 16652	NONE	PUBLIC	CHARITABLE	1.
				1

JUNIATA COLLEGE1700 MOORE STREET	NONE	PUBLIC	CHARITABLE	1
HUNTINGDON, PA 16652				

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)

Total .

recipient

a Paid during the year				
HOLLIDAYSBURG HIGH SCHOOL 405 CLARK STREET HOLLIDAYSBURG, PA 16648	NONE	PUBLIC	CHARITABLE	3,750
REFUGE YOUTH NETWORK 600 RITTS ROAD ALTONA PA 16601	NONE	PUBLIC	CHARITABLE	1,000

REFUGE YOUTH NETWORK 600 RITTS ROAD ALTOONA, PA 16601	NONE	PUBLIC	CHARITABLE	1
DOROTHY DAY BIKE RIDE 117 EVERGREEN DRIVE	NONE	PUBLIC	CHARITABLE	1

REFUGE YOUTH NETWORK 600 RITTS ROAD ALTOONA, PA 16601	NONE	PUBLIC	CHARITABLE	1,000
DOROTHY DAY BIKE RIDE 117 EVERGREEN DRIVE LORETTO PA 15940	NONE	PUBLIC	CHARITABLE	1,000

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

recipient

241,778

any foundation manager

Name and address (home or business)

BELLEFONTE, PA 16823

Total .

Traine and dadress (nome of pasiness)	or substantial contributor			
a Paid during the year				
CHILDREN'S HOSPITAL FOUNDATION 4401 PENN AVENUE PITTSBURGH, PA 15224	NONE	PUBLIC	CHARITABLE	5,000
HOLY TRINITY CATHOLIC SCHOOL 5519 SIXTH AVENUE ALTOONA, PA 16602	NONE	PUBLIC	CHARITABLE	1,000

	1			
HOLY TRINITY CATHOLIC SCHOOL 5519 SIXTH AVENUE ALTOONA, PA 16602	NONE	PUBLIC	CHARITABLE	1,000
ENDURANCE ORG WOUNDED WARRIOR 2780 BENNER PIKE	NONE	PUBLIC	CHARITABLE	1,350

Recipient

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

Recipient

Foundation status of recipient

recipient

Purpose of grant or contribution

any foundation manager or substantial contributor

NONE

GEESEYTOWN COMMUNITY FIRE

Total .

COMPANY 215 MARY STREET HOLLIDAYSBURG, PA 16648				
ST BENEDICT'S PREPARATORY SCHOOL 520 MARTIN LUTHER KING BL	NONE	PUBLIC	CHARITABLE	6,000

PUBLIC

CHARITABLE

20,000

ST BENEDICT'S PREPARATORY SCHOOL 520 MARTIN LUTHER KING BL NEWARK, NJ 07103	NONE	PUBLIC	CHARITABLE	6,000
AMERICAN PARADIGM SCHOOLS 735 BIRCH AVENUE BENSALEM, PA 19020	NONE	PUBLIC	CHARITABLE	1,000

Recipient

Recipient

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

Name and address (home or business)

Recipient

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

a Paid during the year				
AUTISM SPEAKS1060 STATE ROAD PRINCETON, NJ 08540	NONE	PUBLIC	CHARITABLE	1,000

Total .

efile GRAPHIC print - DO NOT PF	ROCESS	As Filed Data -		D	LN: 93491129006429		
TY 2018 Accounting Fees Schedule							
Name: THE BRUNO & LENA DEGOL FAMILY FOUND							
	C/O THE DEGOL ORGANIZATION						
EIN: 25-1753903							
Category	Amo	unt Ne	t Investment	Adjusted Net	Disbursements		
	7		Income	Income	for Charitable		
					Purposes		

PROFESSIONAL FEES

1,750

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491129006429
TY 2018 Investments Corpora	te Stock Schedule		
Name	THE BRUNO & LENA DEC	SOL FAMILY FOUND	
	C/O THE DEGOL ORGAN		

EIN: 25-1753903				
Investments Corporation Stock Schedule				
Name of Stock	End of Year Book Value	End of Year Fair Market Value		
CHARLES SCHWAB	1,035,603	1,035,603		
RAYMOND JAMES	1,164,747	1,164,747		

TY 2018 O	ther Assets Schedule		

Name: THE BRUNO & LENA DEGOL FAMILY FOUND

C/O THE DEGOL ORGANIZATION

	EIN: 25-1/53903	
Other Assets Schedule		

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End of Year - Book Value

End of Year - Fair Market Value

1,377,403

DLN: 93491129006429

Beginning of Year -Book Value

1,311,450

1,377,403

Description

LIFE INSURANCE CASH VALUE

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491129006429
TY 2018 Other Decreases Sch	edule		
Name:	THE BRUNO &	LENA DEGOL FAMILY FOUND	
	C/O THE DEGO	OL ORGANIZATION	
EIN:	25-1753903		
De	escription		Amount
NET UNREALIZED LOSSES			162,875

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLI	N: 93491129006429		
TY 2018 Other Expenses Schedule						
Name:	THE BRUNO & L	ENA DEGOL FAM	ILY FOUND			
	C/O THE DEGOL ORGANIZATION					
EIN:	25-1753903					
Other Expenses Schedule						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
EXPENSES						
BANK SERVICE CHARGE	137	137				
MISCELLANEOUS	42	42				

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491129006429
TY 2018 Other Increases Sche	edule		
Name:	THE BRUNO &	LENA DEGOL FAMILY FOUND	
	C/O THE DEGO	OL ORGANIZATION	
EIN:	25-1753903		
De	escription		Amount
INCREASE IN CSV - LIFE INSURANCE			65,953

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	-	DLN	N: 93491129006429			
TY 2018 Other Professional Fees Schedule							
Nai	me: THE BRUNO	& LENA DEGOL FA	MILY FOUND				
	C/O THE DEGOL ORGANIZATION						
E	EIN : 25-1753903						
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			

13,650

INVESTMENT MANAGEMENT FEES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491129006429	
TY 2018 Substantial Contribut Schedule	cors			
Name: THE BRUNO & LENA DEGOL FAMILY FOUND C/O THE DEGOL ORGANIZATION EIN: 25-1753903				
Name		Add	Iress	
BRUNO AND POLLY DEGOL		351 DEGOL DRIVE TYRONE, PA 16686		
DONALD DEGOL SR		100 SYLVAN WOODS DRIVE HOLLIDAYSBURG, PA 16648	1	

efile GRAPHIC print - DO NOT PROCESS		As Filed Data	-	DI	.N: 93491129006429
TY 2018 Taxes Schedule					
	Name:	THE BRUNO	& LENA DEGOL FA	AMILY FOUND	
C/O THE DEGOL ORGANIZATION					
EIN: 25-1753903					
Category	An	nount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OTHER TAX		15			
EXCISE TAX		1,100			
EXCISE TAX		6,151			

efile GRAPHIC print -	DO NOT PROCESS	As Filed Data -			[DLN: 93491129006429
Schedule B		Schedu	ule of Contribute	ors		OMB No 1545-0047
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service			o Form 990, 990-EZ, or 990 ov/Form990 for the latest			2018
Name of the organizat					Employer ide	entification number
THE BRUNO & LENA DEG C/O THE DEGOL ORGANI					25-1753903	
Organization type (ch	eck one)					
Filers of:	Section:					
Form 990 or 990-EZ	☐ 501(c)() (enter number) o	organization			
	☐ 4947(a)(1) nonexempt chai	ritable trust not treated a	as a private foundat	ion	
	☐ 527 polit	☐ 527 political organization				
Form 990-PF	✓ 501(c)(3) exempt private fo	undation			
	☐ 4947(a)(4947(a)(1) nonexempt charitable trust treated as a private foundation				
	☐ 501(c)(3) taxable private fo	undation			
			PF that received, during complete Parts I and II S			
Special Rules						
under sections received from a	509(a)(1) and 170(b)(1)(A)(vı), that che during the year, tota	g Form 990 or 990-EZ tl cked Schedule A (Form al contributions of the gr plete Parts I and II	990 or 990-EZ), Pa	art II, line 13, 1	l6a, or 16b, and that
during the year,	total contributions of	of more than \$1,000	, or (10) filing Form 990 Dexclusively for religiou animals Complete Par	s, charitable, scienti		
during the year, If this box is che purpose Don't o	contributions <i>exclus</i> ecked, enter here the complete any of the	sively for religious, e total contributions parts unless the G	or (10) filing Form 990 charitable, etc., purpose s that were received dur eneral Rule applies to t or more during the year	es, but no such cont ing the year for an e his organization bed	ributions totale exclusively relication	ed more than \$1,000 gious, charitable, etc , ed <i>nonexclusively</i>
990-EZ, or 990-PF), bu	t it must answer "No	o" on Part IV, line 2	ile and/or the Special Ri 2, of its Form 990, or che at it doesn't meet the filir	eck the box on line h	d of its	
For Paperwork Reduction for Form 990, 990-EZ, or 9		tructions	Cat No 30613X	Schedu	e B (Form 990,	990-EZ, or 990-PF) (2018)

Name of organiz THE BRUNO & LEI C/O THE DEGOL O	NA DEGOL FAMILY FOUND	Employer identification 25-1753903	Employer identification number 25-1753903		
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	BRUNO AND POLLY DEGOL 351 DEGOL DRIVE	© FO 000	Person Payroll		
	TYRONE, PA 16686	\$ 50,000	Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
2	DONALD DEGOL SR 100 SYLVAN WOODS DRIVE HOLLIDAYSBURG, PA 16648	\$ 58,002	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		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(Complete Part II for noncash contributions) (d) Type of contribution		
	Name, address, and Zir + 4	s s	Person Payroll 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		
		\$ Sahadula D/F	Person Payroll Noncash (Complete Part II for noncash contributions) orm 990, 990-EZ, or 990-PF) (2018)		

Schedule B (Form 99	0, 990-EZ, or 990-PF) (2018)		Page 3	
Name of organization THE BRUNO & LENA DE	EGOL FAMILY FOUND	Employer identification number		
C/O THE DEGOL ORGA		25-1/	753903	
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	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
=				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
=		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
	-	Schedule B (Form 9	990, 990-EZ, or 990-PF) (2018)	

Schedule B (Form	990, 990-EZ, or 990-PF) (2018)		Page 4
C/O THE DEGOL OR	DEGOL FAMILY FOUND		Employer identification number 25-1753903
than \$1, organiz the year	000 for the year from any one contributor	r. Complete columns (a) throu of exclusively religious, charit ctions.) ▶ \$	d in section 501(c)(7), (8), or (10) that total more ugh (e) and the following line entry. For able, etc., contributions of \$1,000 or less for
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP 4 R	elationship of transferor to transferee
(a)	41.5		
No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift R	elationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP 4 R	elationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP 4 R	elationship of transferor to transferee
			chedule B (Form 990, 990-EZ, or 990-PF) (2018)