Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

► Do not enter social security numbers on this form as it may be made public.

OMB No 1545-0052

			GO TO WWW.IIS. GOV/FOITH 950FF	or manachom	s anu	the late	st intormati	on. 1 /OQD Great	to rubile inspection
			dar year 2018 or tax year beginning	Jul 1	, 201	8, and	ending	Jι	ın 30 ,20 19
	Nam	e of fou	ndation				A Employe	r identification number	er
			LE B. AND DAVID BADER FAMILY FOUNDAT:	ION			31-1	496075	
	Num	ber and	street (or P O box number if mail is not delivered to street address)		Roon	n/suite	B Telephor	e number (see instruct	ions)
			IGEL HILL RD BOX 242				(610	294-9091	
	City	or town	state or province, country, and ZIP or foreign postal code				C If exempt	tion application is pend	ing, check here ▶
·	ER	WINN.	A PA 18920						_
	G	Check	all that apply: Initial return Initial return	n of a former	public	charity	D 1 Foreig	n organizations, check	here ►
			☐ Final return ☐ Amended	return			2 Foreign	n organizations meeting	the 95% test
			Address change Name cha				check	here and attach compu	utation ► 🗌
اري(Н	Check	type of organization. X Section 501(c)(3) exempt p	rivate founda	ation	04		foundation status was 07(b)(1)(A) check here	terminated under
		Sectio	n 4947(a)(1) nonexempt charitable trust 🔲 Other ta	xable private	found	dation	Sections	or(b)(T)(A) check here	▶⊔
7	ŀ	Fair m	narket value of all assets at J Accounting method	d ⊠ Cash	□ A	ccrual	F If the four	ndation is in a 60-mont	h termination
			f year (from Part II, col (c), Other (specify)					ction 507(b)(1)(B), chec	
			i) ▶ \$ 179. (Part I, column (d) must be	e on cash basi	s)				
	Pa	art I'		(a) Revenue	and	/s		(-) (-)	(d) Disbursements
			amounts in columns (b), (c), and (d) may not necessarily equal	expenses p			investment ncome	(c) Adjusted net income	for charitable purposes
			the amounts in column (a) (see instructions))	GOOKS					(cash basis only)
		1	Contributions, gifts, grants, etc , received (attach schedule)		0.		METAL CONT	定了能計論所能	2年7月1日二十八三十
		2	Check ► 🗵 If the foundation is not required to attach Sch. B	FR CERE	<u>}</u>	4	of the said	This Feet shift	TOMBREOT
		3	Interest on savings and temporary cash investments		1.	<u> </u>	1.	1.	"和社会被争难知
		4	Dividends and interest from securities .		0.		0.	0.	SHEWEN YOU
		5a	Gross rents						學院特別的學院
		b	Net rental income or (loss)	那些學家為	5.一次			対理事業が必	连接使被引引
	<u>a</u>	6a	Net gain or (loss) from sale of assets not on line 10				第二代に	民人的教育的出版	行的特殊是
	<u>[</u>	b	Gross sales price for all assets on line 6a		的类型	沙斯斯 斯	医治疗	是解析的。因为	计可以可能的证明
_	Revenue	7	Capital gain net income (from Part IV, line 2)	SWEETING TO SERVICE	2			2015年中国2012	方主 列 9750004
2020	«	8	Net short-term capital gain	美型社员建筑	1. A. A.	P. Carlo	於海外海水		型學學
7	ļ	9	Income modifications	46. 李四都			企业		是是一个
0	İ	10a	Gross sales less returns and allowances	35、配码校理		1990	20世纪	不可使認識。	在江南的中部江南
⊘ 3		b	Less Cost of goods sold	31.4.7 E47	it git.		では、手間を	は記録の記録の	29次元江地南地区
<u> </u>		С	Gross profit or (loss) (attach schedule) .			· \$75.			产的数据的通行
Ž		11	Other income (attach schedule) .						70位公司
Ω.		_12	Total. Add lines 1 through 11	ļ	1.		1.	1.	160 0 0 CO
SANNED	ς,	13	Compensation of officers, directors, trustees, etc						
Z	euse	14	Other employee salaries and wages						
K	\sim	15	Pension plans, employee benefits						
S	ぶ│	16a	,						
	او	b	Accounting fees (attach schedule)	ļ					
	₽	C	Other professional fees (attach schedule) .		- 5	FOF	IVED		
4	إير	17	Interest					ပ္က	
Ö	<u> </u>	18	Taxes (attach schedule) (see instructions)	7,100	- N	AAY 2	<u>6_2020 </u>	\$ 0 \$	AND A STATE OF THE
2	Œ I	19	Depreciation (attach schedule) and depletion .	a	<u>. T</u>	<u> </u>	<u>~_</u> ZUZU	<u> </u>	PARTIE AND THE
3	₩	20	Occupancy		$\overline{}$	GDE	N, UT	<u> </u>	
8	o l	21	Travel, conferences, and meetings	<u> </u>			., 01	_	
33	क	22	Printing and publications						
	g	23	Other expenses (attach schedule)		-				
A	<u> </u>	24	Total operating and administrative expenses.						
5	<u> </u>	0E	Add lines 13 through 23			10. 12	انده حسر يجهيؤج	ABOUT THE FOR	
2 {	ŏ	25 26	Contributions, gifts, grants paid		-	Um (L)	Brown ill mile strait	一個人の本事を発生を持ている。	
OS 40 Barring Ogden AUG 2 8 2020		26	Total expenses and disbursements. Add lines 24 and 25			ا بوند () يون	ugagetotrack»	Kalkaline West Same and	Subject Toxas Control
920		27	Subtract line 26 from line 12		<u> </u>			多种形理	NUMBER OF STREET
_		a	Excess of revenue over expenses and disbursements	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	اد∻سىئىپىۋى	かがなり	क्ष कार्यास्त्राम्बर्धे	THE STATE OF THE PROPERTY OF	CONTRACTOR OF THE PARTY OF THE
		b	Net investment income (if negative, enter -0-) . Adjusted net income (if negative, enter -0-) .	(1) (B)(\$P\$(\$P\$)		18 1. 18 E	ا ، 1 ا تا قاراً داش شرائع	· 大学のでは、なるないのであるという	A SECTION CONTRACTOR AND
	- 1	C	Adjusted Het Income (II negative, enter -0-) .	22.31 m 6 44	CONTRACTOR	14.4	Lat. 242 . * 1 . 34.1	1.	*AMSTERNOTE 中央に続き

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

Pa	art II	Balance Sheets Attached schedules and amounts in the description column			of year
	•	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash-non-interest-bearing	0.	0.	0.
	2	Savings and temporary cash investments	178.	179.	179.
	3	Accounts receivable ▶			LANCE CONTROL
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable ▶	一方式是在这个技术的企业		
		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) ▶	THE PROPERTY OF THE	THE PROPERTY.	Manager Tall
		Less allowance for doubtful accounts ▶			
S	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges		-	
As	10a	Investments—U S and state government obligations (attach schedule)	w		
-	b	Investments—corporate stock (attach schedule)	0.	0.	0.
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶	4.084.000		ALL AND FREE
		Less accumulated depreciation (attach schedule) ▶	" "A demander of the service of the	THE ALLEY MENTANCE CLASSICS AND	Level 2 of the Control of the Contro
	12	Investments—mortgage loans			
	13	Investments – other (attach schedule)			
	14	Land, buildings, and equipment basis ▶	THE RESERVE	毛公园和	Carrel Salar Street
		Less accumulated depreciation (attach schedule) ▶	- January Str.		
	15	Other assets (describe ▶)			
	16	Total assets (to be completed by all filers—see the			
		instructions Also, see page 1, item l)	178.	179.	179.
	17	Accounts payable and accrued expenses			运用的数据数据
/ A	18	Grants payable			REGIONAL SPRING
ĕ	19	Deferred revenue			REMEMBER AND A
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	41.	41.	HANG TANKS AT ST
iab	21	Mortgages and other notes payable (attach schedule)			公司的规则也可能选择
	22	Other liabilities (describe ▶)			元元的被印度的
	23	Total liabilities (add lines 17 through 22)	41.	41.	たことは4年代を1年代は
		Foundations that follow SFAS 117, check here			
ĕ		and complete lines 24 through 26, and lines 30 and 31.			
alances	24	Unrestricted			""一个
	25	Temporarily restricted			北京時代記書中部第四時
96	26	Permanently restricted			元都是思想是思想
Ľ		Foundations that do not follow SFAS 117, check here ▶ 🗵			THE PROPERTY.
Ē		and complete lines 27 through 31.			
0	27	Capital stock, trust principal, or current funds			THE STATES AND
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	597.	597.	DESIGNATION OF THE PARTY OF THE
SS	29	Retained earnings, accumulated income, endowment, or other funds	-460.	-459.	建一次,但是是一个
t A	3024	Total net assets or fund balances (see instructions)	137.	138.	1一个一个
Net Assets or Fund B	3130	Total liabilities and net assets/fund balances (see instructions)	178.	179.	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			
1		I net assets or fund balances at beginning of year-Part II, colu		st agree with	
•		of-year figure reported on prior year's return) .		1_1_	137.
2		r amount from Part I, line 27a		2	1.
3		www.maranan.mat.mat.mat.mat.ma. 2 (stampa)		3	
4				4	138.
5	Decr	reases not included in line 2 (itemize) ▶		5	=:
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), II	ne 30 6	138.
					Form 990-DF (2018)

BAA

Capital Gains and Losses for Tax on Investment Income

Part IV

		s) of property sold (for example, real estat or common stock, 200 shs MLC Co)	e, 	P-Purchase D-Donation	(c) Date acquired (mo, day, yr)	d (d) Date sold (mo , day, yr)
1a						
<u>b</u>	······································					
<u>C</u> _						
d			***************************************			
<u>е</u>		(D.D.,	4.3.0			0. ".
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		Gain or (loss) lus (f) minus (g))
<u>a</u>						<u> </u>
b						
<u>C</u>						
<u>d</u>		-				
е_	Complete only for assets shown	ng gain in column (h) and owned by	the foundation	on 12/31/69	(h) O	(0-1 //-)
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exces		col (k), but	(Col (h) gain minus i not less than -0-) or es (from col (h))
а	· · · · · · · · · · · · · · · · · · ·			<u> </u>		
<u>a</u> b						
-						
d						
е						
2	Capital gain net income or (n		o enter in Par nter -0- in Par		2	
3	If gain, also enter in Part I, I	or (loss) as defined in sections 12 line 8, column (c) See instruction	222(5) and (6) ons If (loss)		3	
Part		Section 4940(e) for Reduce		ot Investment		
		te foundations subject to the sec				
•	non 4940(d)(2) applies, leave the	·	511011 4040(d)	an of free mives.	ment meemen	
		ction 4942 tax on the distributability under section 4940(e). Do no			pase period?	☐ Yes ⊠ No
1		It in each column for each year,			akıng anv entri	
	(a) Base period years	(b) Adjusted qualifying distributions		(c)		(d) Distribution ratio (b) divided by col (c))
Cale	endar year (or tax year beginning in) 2017	1,200	 	<u> </u>	70.	2.105263
	2016	8,000		4,5		1.744059
	2015	5,000			60.	5.208333
	2014	0,000			07.	0.000000
	2013	0			07.	0.000000
			di -		. 2	9.057655
2 3	Total of line 1, column (d) Average distribution ratio for	· · · · · · · · · · · · · · · · · · ·	the total on	line 2 by 5.0 or	——————————————————————————————————————	7.037033
3		idation has been in existence if I			3	1.811531
4	Enter the net value of noncha	arıtable-use assets for 2018 fron	n Part X, line	5	. 4	176.
5	Multiply line 4 by line 3				. 5	319.
6	Enter 1% of net investment in	ncome (1% of Part I, line 27b)			. 6	0.
7	Add lines 5 and 6				. 7	319.
8	Enter qualifying distributions		• • • • • • • • • • • • • • • • • • •	ond complete the	. 8	0.
_	If line 8 is equal to or greater Part VI instructions.	than line 7, check the box in Pa	art vi, line 1b	, and complete the	nat part using	a 1% tax rate See the

Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4940	18 – s	see i	nstru	ctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.					
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)			\$ 18		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1			0.	
	here ▶ ☐ and enter 1% of Part I, line 27b					
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of J Part I, line 12, col (b).	概集				112
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	2			0.	
3	Add lines 1 and 2	3			0.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	4			0.	
-5-	Tax based on investment income: Subtract line 4 from line 3.1f zero or less, enter -0	- 5			07	
6	Credits/Payments.				133	
а	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 300.	1				
b	Exempt foreign organizations—tax withheld at source 6b		3	7.04		
С	Tax paid with application for extension of time to file (Form 8868) . 6c 0.				7 25	7.4
d	Backup withholding erroneously withheld 6d		1	7		
7	Total credits and payments Add lines 6a through 6d	7		3	00.	
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed .	9	-			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		3	00.	
11	Enter the amount of line 10 to be Credited to 2019 estimated tax ▶ 300. Refunded ▶	11				
Part	VII-A Statements Regarding Activities			a Kraket	Vaa	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation		d it		res	No
	participate or intervene in any political campaign?			1a		×
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? instructions for the definition	See	the	1 b		×
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any	mater	rals			1
	published or distributed by the foundation in connection with the activities.				1	
С	Did the foundation file Form 1120-POL for this year?	•		1c		×
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					
	(1) On the foundation ▶ \$ (2) On foundation managers. ▶ \$					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax in	npose	ed		201	3.4
	on foundation managers ▶ \$			1		200
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? .			2	l mak	X
	If "Yes," attach a detailed description of the activities			1	1	4
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument				, , , , O,	
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the cha	inges	•	3		×
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	•	•	4a		×
b	If "Yes," has it filed a tax return on Form 990-T for this year?		•	4b 5		<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T	•		3	经验	×
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					3
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory direct	ions f	that			220
	conflict with the state law remain in the governing instrument?			6	×	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), are	nd Par	t XV	7		×
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶					4
	PA					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney (or designate) of each state as required by <i>General Instruction G</i> ? If "No," attach explanation	Gen	eral	8b		L. Committee
0	Is the foundation claiming status as a private operating foundation within the meaning of section 494	12(1)(3) or		TE CO	1000
9	4942(j)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV.	If "Ye	, o. es."	ou seef the.	~	76 aVIR
	complete Part XIV			9		×
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule lis names and addresses.	ting t	heır	10	×	

Form **990-PF** (2018)

«Part	-A; Statements Regarding Activities (continued)			
\ <u>-</u>		が	Yes	No
11	any time during the year, did the foundation, directly or indirectly, own a controlled entity within the aning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		×
12	If the foundation make a distribution to a donor advised fund over which the foundation or a disqualified reson had advisory privileges? If "Yes," attach statement. See instructions	12		×
13	the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	×	l
	ebsite address ► N/A			
14	e books are in care of ► TRUSTEE Telephone no. ► (610)2 cated at ► PO BOX 242 165 GEIGEL HILL ROAD ERWINNA, PA ZIP+4 ► 18920	294-	1061	
15	ction 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here.	-	-	▶ ^□
	d enter the amount of tax-exempt interest received or accrued during the year			
16	any time during calendar year 2018, did the foundation have an interest in or a signature or other authority		Yes	No
· 101:970:	er a bank, securities, or other financial account in a foreign country?.	16	(Carry)	× Verseason
	e the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of eforeign country ▶			
Part	-B Statements Regarding Activities for Which Form 4720 May Be Required			
	e Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	WAY.	Yes	No
1a	ring the year, did the foundation (either directly or indirectly).			F
	Engage in the sale or exchange, or leasing of property with a disqualified person? . Yes No		485	
	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	1		
	disqualified person?			
	Furnish goods, services, or facilities to (or accept them from) a disqualified person?			2
	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? . Yes No Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?	3		
	Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
b	any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in	1		
	gulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
	ganizations relying on a current notice regarding disaster assistance, check here	3	變	
С	the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			1
	re not corrected before the first day of the tax year beginning in 2018?	1c	ar in morti	X
2	xes on failure to distribute income (section 4942) (does not apply for years the foundation was a private erating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	the end of tax year 2018, did the foundation have any undistributed income (lines 6d and			150
	Part XIII) for tax year(s) beginning before 2018?	Will.		
	Yes," list the years ▶ 20 , 20 , 20			
b	e there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			1
	ating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to years listed, answer "No" and attach statement—see instructions).	25 CE		
_	the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	2b	*65	X 然級消
С	20 , 20 , 20 , 20			
За	the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	any time during the year?			*
b	Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or			
	qualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	mmissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	e 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	3,33	100	
	indation had excess business holdings in 2018)	3b		<u> </u>
4a	If the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		×
b	I the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its aritable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b	2 4600	X

Par	VIE: Statements Regarding Activities	S TOP W	THICH FORTH	4720	viay De I	equire	d (com	nucuj			
5a	During the year, did the foundation pay or incur	any am	ount to						FEF	Yes	No
	(1) Carry on propaganda, or otherwise attempt t			n (sect	ion 4945(e)?	☐ Yes	🗵 No	THE	1	
	(2) Influence the outcome of any specific public	electi	on (see secti	on 495	5), or to ca	arry on,					
	directly or indirectly, any voter registration dr	ıve?					☐ Yes	⊠ No		1	
	(3) Provide a grant to an individual for travel, stu		other similar i	ourpose	es?		_ ☐ Yes	× No	1000		2.4
	(4) Provide a grant to an organization other than	-				ribed in	_	_	1		
	section 4945(d)(4)(A)? See instructions		,	3			☐Yes	⊠ No		1	
	(5) Provide for any purpose other than religious	charit	able scientifi	c litera	rv or edu	rational	_	<u></u>	32	7.2	
	purposes, or for the prevention of cruelty to						□Yes	X No			
h	If any answer is "Yes" to 5a(1)–(5), did any of the						_		1712		
D	in Regulations section 53 4945 or in a current no							SCHEEG		ZHE.	
	•		-			JO 111501	40110113	·	5b	14.5° 25'12	ALPENIA S
	Organizations relying on a current notice regards	-				+ha +au		▶			
С	If the answer is "Yes" to question 5a(4), does the beauties of maintained expenditure reasonable with						-		200		
	because it maintained expenditure responsibility		_			•	∐ Yes	∐ No			
_	If "Yes," attach the statement required by Regula								2.0		
6a	Did the foundation, during the year, receive any	tunds,	directly or inc	directly	, to pay pre	emiums	_	<u></u>	23	表现	
	on a personal benefit contract?	•				•	∐ Yes	⊠ No		T. Lane	2.1
b	Did the foundation, during the year, pay premiun	ns, dıre	ctly or indired	ctly, on	a personal	benefit	t contract	i? .	6b	4.4.4	×
	If "Yes" to 6b, file Form 8870							_	73.		***
7a	At any time during the tax year, was the foundation						∐ Yes	× No	323	1313	T.
b	If "Yes," did the foundation receive any proceed		•					n? .	7b		
8	Is the foundation subject to the section 4960 ta			more t	han \$1,000),000 in			多条		设料
_	remuneration or excess parachute payment(s) di						☐ Yes	☐ No		1	被 对
Par	VIII Information About Officers, Direc	tors, 1	Trustees, Fo	ounda	tion Man	agers,	Highly I	Paid E	mploy	ees,	
	and Contractors										
1	List all officers, directors, trustees, and found	~							·		
		I /b) Titl	e, and average	I ION CO	mpensation	i (d) (Contribution	is to		nco 00	count
	(a) Name and address								(e) Expe		
	(a) Name and address	hou	rs per week ed to position	` (If r	not paid, ter -0-)	emplo	yee benefit erred comp	plans		allowar	
DAY	(a) Name and address ID M. BADER	hou	rs per week ed to position	` (If r	ot paid,	emplo	yee benefit	plans			nces
		hou devot	rs per week ed to position	` (If r	ot paid,	emplo	yee benefit	plans			
165	ID M. BADER	hou devot	rs per week ed to position TEE 5.00	` (If r	not paid, ter -0-)	emplo	yee benefit	plans ensation			nces
165 MIC	ID M. BADER GEIGEL HILL RD, ERWINNA, PA 18920	hou devot TRUS	rs per week ed to position TEE 5.00	` (If r	not paid, ter -0-)	emplo	yee benefit	plans ensation			nces
165 MIC	ID M. BADER GEIGEL HILL RD, ERWINNA, PA 18920 HELLE D. BERRONG	hou devot TRUS	rs per week ed to position TEE 5.00	` (If r	oot paid, ter -0-)	emplo	yee benefit	plans ensation 0.			0.
165 MIC	ID M. BADER GEIGEL HILL RD, ERWINNA, PA 18920 HELLE D. BERRONG	hou devot TRUS	rs per week ed to position TEE 5.00	` (If r	oot paid, ter -0-)	emplo	yee benefit	plans ensation 0.			0.
165 MIC	ID M. BADER GEIGEL HILL RD, ERWINNA, PA 18920 HELLE D. BERRONG	hou devot TRUS	rs per week ed to position TEE 5.00	` (If r	oot paid, ter -0-)	emplo	yee benefit	plans ensation 0.			0.
165 MIC	ID M. BADER GEIGEL HILL RD, ERWINNA, PA 18920 HELLE D. BERRONG GEIGEL HILL RD, ERWINNA PA 18920	TRUS	rs per week ed to position TEE 5.00 TEE 5.00	(If r	0 .	emplo and defi	oyee benefit	plans ensation 0.	other	allowar	0. 0.
165 MIC	ID M. BADER GEIGEL HILL RD, ERWINNA, PA 18920 HELLE D. BERRONG GEIGEL HILL RD, ERWINNA PA 18920 Compensation of five highest-paid employed	TRUS	rs per week ed to position TEE 5.00 TEE 5.00	(If r	0 .	emplo and defi	oyee benefit	plans ensation 0.	other	allowar	0. 0.
165 MIC 165	ID M. BADER GEIGEL HILL RD, ERWINNA, PA 18920 HELLE D. BERRONG GEIGEL HILL RD, ERWINNA PA 18920	TRUS	rs per week ed to position TEE 5.00 TEE 5.00	(If r	0 .	emplo and defi	oyee benefit	plans ensation 0.	other	allowar	0. 0.
165 MIC 165	ID M. BADER GEIGEL HILL RD, ERWINNA, PA 18920 HELLE D. BERRONG GEIGEL HILL RD, ERWINNA PA 18920 Compensation of five highest-paid employed "NONE."	TRUS	rs per week ed to position TEE 5.00 TEE 5.00 er than thos	(If r en	0.	empte and def	see instr	plans ensation 0. 0.	s). If no	one,	0. 0.
165 MIC 165	ID M. BADER GEIGEL HILL RD, ERWINNA, PA 18920 HELLE D. BERRONG GEIGEL HILL RD, ERWINNA PA 18920 Compensation of five highest-paid employed	TRUS	rs per week ed to position TEE 5.00 TEE 5.00 er than those	se inclusiverage	0 .	empte and def	see instr	ol. O. Cuction: utions to benefit deferred	s). If no	one,	0. 0. enter
165 MIC 165	ID M. BADER GEIGEL HILL RD, ERWINNA, PA 18920 HELLE D. BERRONG GEIGEL HILL RD, ERWINNA PA 18920 Compensation of five highest-paid employed "NONE."	TRUS	rs per week ed to position TEE 5.00 TEE 5.00 er than thos	se inclusiverage	0.	empte and def	see instr	ol. O. Cuction: utions to benefit deferred	s). If no	one,	0. 0. enter
165 MIC 165	ID M. BADER GEIGEL HILL RD, ERWINNA, PA 18920 HELLE D. BERRONG GEIGEL HILL RD, ERWINNA PA 18920 Compensation of five highest-paid employee "NONE."	TRUS	rs per week ed to position TEE 5.00 TEE 5.00 er than those	se inclusiverage	0.	empte and def	see instr	ol. O. Cuction: utions to benefit deferred	s). If no	one,	0. 0. enter
165 MIC 165	ID M. BADER GEIGEL HILL RD, ERWINNA, PA 18920 HELLE D. BERRONG GEIGEL HILL RD, ERWINNA PA 18920 Compensation of five highest-paid employee "NONE."	TRUS	rs per week ed to position TEE 5.00 TEE 5.00 er than those	se inclusiverage	0.	empte and def	see instr	ol. O. Cuction: utions to benefit deferred	s). If no	one,	0. 0. enter
165 MIC 165	ID M. BADER GEIGEL HILL RD, ERWINNA, PA 18920 HELLE D. BERRONG GEIGEL HILL RD, ERWINNA PA 18920 Compensation of five highest-paid employee "NONE."	TRUS	rs per week ed to position TEE 5.00 TEE 5.00 er than those	se inclusiverage	0.	empte and def	see instr	ol. O. Cuction: utions to benefit deferred	s). If no	one,	0. 0. enter
165 MIC 165	ID M. BADER GEIGEL HILL RD, ERWINNA, PA 18920 HELLE D. BERRONG GEIGEL HILL RD, ERWINNA PA 18920 Compensation of five highest-paid employee "NONE."	TRUS	rs per week ed to position TEE 5.00 TEE 5.00 er than those	se inclusiverage	0.	empte and def	see instr	ol. O. Cuction: utions to benefit deferred	s). If no	one,	0. 0. enter
165 MIC 165	ID M. BADER GEIGEL HILL RD, ERWINNA, PA 18920 HELLE D. BERRONG GEIGEL HILL RD, ERWINNA PA 18920 Compensation of five highest-paid employee "NONE."	TRUS	rs per week ed to position TEE 5.00 TEE 5.00 er than those	se inclusiverage	0.	empte and def	see instr	ol. O. Cuction: utions to benefit deferred	s). If no	one,	0. 0. enter
165 MIC 165	ID M. BADER GEIGEL HILL RD, ERWINNA, PA 18920 HELLE D. BERRONG GEIGEL HILL RD, ERWINNA PA 18920 Compensation of five highest-paid employee "NONE."	TRUS	rs per week ed to position TEE 5.00 TEE 5.00 er than those	se inclusiverage	0.	empte and def	see instr	ol. O. Cuction: utions to benefit deferred	s). If no	one,	0. 0. enter
165 MIC 165	ID M. BADER GEIGEL HILL RD, ERWINNA, PA 18920 HELLE D. BERRONG GEIGEL HILL RD, ERWINNA PA 18920 Compensation of five highest-paid employee "NONE."	TRUS	rs per week ed to position TEE 5.00 TEE 5.00 er than those	se inclusiverage	0.	empte and def	see instr	ol. O. Cuction: utions to benefit deferred	s). If no	one,	0. 0. enter
165 MIC 165	ID M. BADER GEIGEL HILL RD, ERWINNA, PA 18920 HELLE D. BERRONG GEIGEL HILL RD, ERWINNA PA 18920 Compensation of five highest-paid employee "NONE."	TRUS	rs per week ed to position TEE 5.00 TEE 5.00 er than those	se inclusiverage	0.	empte and def	see instr	ol. O. Cuction: utions to benefit deferred	s). If no	one,	0. 0. enter
165 MIC 165	ID M. BADER GEIGEL HILL RD, ERWINNA, PA 18920 HELLE D. BERRONG GEIGEL HILL RD, ERWINNA PA 18920 Compensation of five highest-paid employee "NONE."	TRUS	rs per week ed to position TEE 5.00 TEE 5.00 er than those	se inclusiverage	0.	empte and def	see instr	ol. O. Cuction: utions to benefit deferred	s). If no	one,	0. 0. enter
165 MIC 165 2	ID M. BADER GEIGEL HILL RD, ERWINNA, PA 18920 HELLE D. BERRONG GEIGEL HILL RD, ERWINNA PA 18920 Compensation of five highest-paid employee "NONE." (a) Name and address of each employee paid more than \$50,00	TRUS	rs per week ed to position TEE 5.00 TEE 5.00 er than those	se inclusiverage	0.	empte and def	see instr	ol. O. Cuction: utions to benefit deferred	s). If no	one,	0. 0. enter
165 MIC 165 2	ID M. BADER GEIGEL HILL RD, ERWINNA, PA 18920 HELLE D. BERRONG GEIGEL HILL RD, ERWINNA PA 18920 Compensation of five highest-paid employee "NONE."	TRUS	rs per week ed to position TEE 5.00 TEE 5.00 er than those	se inclusiverage	0.	empte and def	see instr	ol. O. Cuction: utions to benefit deferred	s). If no	one,	0. 0. enter

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly and Contractors (continued)		
3 Five	highest-paid independent contractors for professional services. See instructions. If none, en	nter "NONE.	
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	,	(c) Compensation
NONE			
			
		▶ ()
Part IX-A	Summary of Direct Charitable Activities		
	ndation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the as and other beneficiaries served, conferences convened, research papers produced, etc.	number of	Expenses
1			
	·		
2			
3			
4			
Part IX-B			A
	e two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1			
2			
All other pro	ogram-related investments. See instructions		
3			
T-A-1 A-1-1 1	inco 1 Abras ab 2		
i otal. Add li	ines 1 through 3	· •	000 BF

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreise see instructions.)	ign founda	itions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	3 33-	
	purposes		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	179.
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	179.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)], ² 2.3.	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	179.
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	3.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	176.
6	Minimum investment return. Enter 5% of line 5	6	9.
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for and certain foreign organizations, check here ► and do not complete this part.)	oundation	S
1	Minimum investment return from Part X, line 6	1	9.
2a	Tax on investment income for 2018 from Part VI, line 5 . 2a0.		
b	Income tax for 2018 (This does not include the tax from Part VI) . 2b] _ ,	
С	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	9.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	9.
6	Deduction from distributable amount (see instructions)	6	-
7	Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	9.
Part	XII Qualifying Distributions (see instructions)	<u> </u>	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	0.
b	Program-related investments – total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	0.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b See instructions	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whether t	he foundation

Part	XIII Undistributed Income (see instructi	ons)			
		(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
· 1	Distributable amount for 2018 from Part XI, line 7				9.
2	Undistributed income, if any, as of the end of 2018				
а	Enter amount for 2017 only			0.	
b	Total for prior years 20, 20, 20	TOTAL PROPERTY OF THE PROPERTY	5-5-2 17-55-65-65-65-65-65-65-65-65-65-65-65-65-		
3	Excess distributions carryover, if any, to 2018 -From-2013				
a	From 2014 U.				
Č	From 2015				
d	From 2016 8,000.				
е	From 2017 1,171.			210 60 17 20 16	ner te di Anabilia di Persi
f	Total of lines 3a through e	14,171.			
4	Qualifying distributions for 2018 from Part XII,			•	
	Inne 4. ► \$0. Applied to 2017, but not more than line 2a .			0.	
, a b	Applied to undistributed income of prior years	HERE THE LOSS OF T	- TETTING TREAST STORY		
J	(Election required—see instructions)				
C	Treated as distributions out of corpus (Election required—see instructions)				
~ d`	Applied to 2018 distributable amount .	Tipe Manager			0.
é	Remaining amount distributed out of corpus	0.	对方面的理解的	建筑和政策 数	ながら、
5	Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a).)				•
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	14,171.			
b	Prior years' undistributed income. Subtract line 4b from line 2b		0.		
С	Enter the amount of prior years' undistributed	BX增加强产业数数	r		
	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	A STATE OF THE STA			
	amount – see instructions	THE OWN DEED	0.		
e,	Undistributed income for 2017 Subtract line 4a from line 2a. Taxable amount—see				
,	instructions			0.	
f	Undistributed income for 2018. Subtract lines				<u></u>
	4d and 5 from line 1. This amount must be distributed in 2019				9.
7	Amounts treated as distributions out of corpus				
	to salisfy 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)	0.			
9	Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	, 14,171.			
10	Analysis of line 9.	Jan Sunday			
а	Excess from 2014 . 0.				
b	Excess from 2015 5,000.				
C	Excess from 2016 8,000.				
ď	Excess from 2017				

	90-PF (2018)					Page 10
Part	XIV Private Operating Foundat	ions (see insti	ructions and Part	VII-A, question 9)	l	N/A
1a	· If the foundation has received a ruling	or determination	on letter that it is a	private operating		
	foundation, and the ruling is effective for	2018, enter the	date of the ruling	▶ [
þ	Check box to indicate whether the found	dation is a prīva	ite operating founda	ition described in se	ction 🗌 4942(j)	(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(a) T-4 1
	income from Part I or the minimum investment return from Part X for	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
	each year listed	·				
ь	85% of line 2a					
c	Qualifying distributions from Part XII,		+	1		
	line 4 for each year listed					
d	Amounts included in line 2c not used directly		 			
u	for active conduct of exempt activities					
_	` <u></u>		 	$\overline{}$		-
е	Qualifying distributions made directly					
	for active conduct of exempt activities					
_	Subtract line 2d from line 2c			+X		
3	Complete 3a, b, or c for the					
	alternative test relied upon			1 \		
а	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in			İ	\	
	Part X, line 6 for each year listed	,	1	1 1	\	
С	"Support" alternative test - enter.					
	(1) Total support other than gross				\	
	investment income (interest,					
	dividends, rents, payments on]	\	
	securities loans (section 512(a)(5)), or royalties)			1		
	(2) Support from general public					
	and 5 or more exempt				·	
	organizations as provided in			1		
	section 4942(j)(3)(B)(iii) (3) Largest amount of support from					
	an exempt organization					
	- I-			-		
Dort	(4) Gross investment income XV Supplementary Information	- /Complete t	this part only if t	the foundation he	ad \$5,000 or m	oro in accordant
Part				ine roundation no	10 \$5,000 OF TH	iore iii assets at
	any time during the year –		2015.)			
1_	Information Regarding Foundation No. List any managers of the foundation w		hutad mara than 20	% of the total centre	ibutions recoved	by the foundation
а	before the close of any tax year (but or					by the loundation
			continuated more ti	iaπ ψυ,υυυ). (Gee se	(Clion 507 (a)(2).)	
	MICHELLE B. AND DAVID BADER				/	
þ	List any managers of the foundation v					arge portion of the
	ownership of a partnership or other ent	iity) of which the	e foundation has a	10% or greater inte	rest	
	N/A - NONE					
2	Information Regarding Contribution,					
	Check here \blacktriangleright $oximes$ if the foundation o					
	unsolicited requests for funds. If the fo		s gifts, grants, etc ,	to individuals or or	ganizations unde	r other conditions,
	complete items 2a, b, c, and d. See ins	tructions.				
а	The name, address, and telephone num	nber or email a	ddress of the perso	on to whom applicat	ions should be a	ddressed
b	The form in which applications should	be submitted ai	nd information and	materials they shou	ıld ınclude.	
-				,		
	Any submission deadlines					
•	y cacimicalist coacimica					
d	Any restrictions or limitations on awa	ards, such as	by geographical a	reas, charitable fie	lds, kinds of ins	stitutions, or other
-	factors	,	, <u>33 m</u> -	,	,	=
	*					

Part	XV Supplementary Information (conti	nued)			
3 .	Grants and Contributions Paid During t	he Year or Approv	ed for Fu	ture Payment	
	Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
	Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
а	Paid during the year				-
•					
			_		
				:	
				1	
	Total			▶ 3a	
b	Approved for future payment				
	•				
	 			> 2h	

Ente	r•gros:	s amounts unless otherwise indicated	Unrelated bu	siness income	Excluded by section	on 512, 513, or 514	(e)
	5		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemp function income (See instructions.)
1	•	ram service revenue					
	a b			***			
	с -						<u> </u>
	d				 		
	и _ е						
	f					····	
	g Fe	ees and contracts from government agencies			-		
2	-	bership dues and assessments					
3		est on savings and temporary cash investments	900001	0.	14	1.	0.
4		ends and interest from securities	900001	0.	14	0.	0.
5		ental income or (loss) from real estate		•		(P.) -	· ·
		ebt-financed property		·		<u>,</u>	
		ot debt-financed property					
6		ental income or (loss) from personal property		· · · · · · · · · · · · · · · · · · ·			
7		r investment income .					
8	Gain	or (loss) from sales of assets other than inventory	900001	0.	18	0.	
9	Net in	ncome or (loss) from special events					
10	Gross	s profit or (loss) from sales of inventory					
11	Other	revenue a					
	b						
	c _						
	d						
	e _						
	Subto	otal Add columns (b), (d), and (e)		0.		1.	0.
			<u> </u>	<u>U.</u>	<u> </u>		<u></u>
13	Total	. Add line 12, columns (b), (d), and (e) .				13	1.
13 (See	Total works	l. Add line 12, columns (b), (d), and (e) . sheet in line 13 instructions to verify calculation					
13 (See Pa l	Total works t XVI	 Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A 	ccomplishm	ent of Exemp	t Purposes	13	1.
13 See Pal	Total works	l. Add line 12, columns (b), (d), and (e) . sheet in line 13 instructions to verify calculation	ccomplishm	ent of Exemp	t Purposes	13	1.
13 See Pal Line	Total works t XVI e No.	 Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A 	ccomplishm	ent of Exemp	t Purposes	13	1.
13 See Pal Lin	Total works t XVI e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	ccomplishm	ent of Exemp	t Purposes	13	1.
13 See Pal Lin	Total works t XVI e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	ccomplishm	ent of Exemp	t Purposes	13	1.
13 See Pal Lin	Total works t XVI e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	ccomplishm	ent of Exemp	t Purposes	13	1.
13 See Pal Lin	Total works t XVI e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	ccomplishm	ent of Exemp	t Purposes	13	1.
13 (See Pal Line	Total works t XVI e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	ccomplishm	ent of Exemp	t Purposes	13	1.
13 See Pal Lin	Total works t XVI e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	ccomplishm	ent of Exemp	t Purposes	13	1.
13 See Pal Lin	Total works t XVI e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	ccomplishm	ent of Exemp	t Purposes	13	1.
13 See Pal Lin	Total works t XVI e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	ccomplishm	ent of Exemp	t Purposes	13	1.
13 (See Pal Line	Total works t XVI e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	ccomplishm	ent of Exemp	t Purposes	13	1.
13 See Pal Lin	Total works t XVI e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	ccomplishm	ent of Exemp	t Purposes	13	1.
13 (See Pal Line	Total works t XVI e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	ccomplishm	ent of Exemp	t Purposes	13	1.
13 (See Pal Line	Total works t XVI e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	ccomplishm	ent of Exemp	t Purposes	13	1.
13 (See Pal Line	Total works t XVI e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	ccomplishm	ent of Exemp	t Purposes	13	1.
13 (See Pal Line	Total works t XVI e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	ccomplishm	ent of Exemp	t Purposes	13	1.
13 (See Pal Line	Total works t XVI e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	ccomplishm	ent of Exemp	t Purposes	13	1.
13 (See Pal Line	Total works t XVI e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	ccomplishm	ent of Exemp	t Purposes	13	1.
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Part	XVII	Informatio Organizati	n Regarding Tran	sfers to	and Tran	saction	s and R	elations	hips Wi	th No	nchari	table	Exe	mpt
	ın se	ne organization of	directly or indirectly e other than section									Tokana I	Yes	No
а	Trans (1) C	fers from the re	porting foundation to	a noncha	rıtable exe	mpt orga	anization	of .			ł	1a(1) 1a(2)	****	× ×
b	Other	transactions ales of assets to	a noncharitable exerets from a noncharita								. }			×
	(3) R (4) R	ental of facilities eimbursement a	, equipment, or other rrangements .	r assets								1b(3) 1b(4)		×
С	(6) Po Shari	ng of facilities, e	ervices or membershi equipment, mailing lis	ip or fundr ts, other a	ssets, or p	citations aid emp	loyees			· · ·	. [1b(5) 1b(6) 1c		× ×
	value value	of the goods, our any transaction	of the above is "Yes ther assets, or servic on or sharing arrange	es given tement, sho	by the repo w in colur	orting fou nn (d) the	undation e value o	If the fou f the good	indation ds, other	receive assets	ed less s, or ser	than fa	air m ecei	arket ved
(a) Line	no (b) Amount involved	(c) Name of nonch	aritable exem	npt organizati	on	(d) Descr	iption of tran	sfers, trans	actions,	and shar	ing arrar	ngeme	nts ——
														<u></u>
	descr	ibed in section 5	ectly or indirectly aff 501(c) (other than sec e following schedule					ore tax-ex	xempt or	ganıza 		Yes	; ×	No
(a) Name of organization				(b) Type of organization				(c) Description of relationship						
Sign Here	correc			ed this return, including accompanying schedules and statements, and to an taxpayer) is based on all information of which preparer has any knowled the statements of the statements of the statements and to an taxpayer) is based on all information of which preparer has any knowled the statements of the statement of the statements of the statement						N _w	t knowledged the IRS with the pre	discuss	s this r	eturn elow?
Paid		eture of officer or true Print/Type preparer MARTIN B.	's name	Prepare S	Date Water N. B. WII	Title LENSKY		Date 04/21/		Check [P	TIN		
Prepa Use C		Firm's name Firm's address	Cupersmith Wi 2500 MCCLELLA	lensky	Stemple	er & C	ompany			<u>EIN</u> ► 2	56) 66	24521		<u>-</u>
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