

For calendar year 2018, or tax year beginning 11-01-2018, and ending 10-31-2019

Name of foundation WILLIAM AND JEMIMA BROSSMAN CHARITA CHARITABLE FOUNDATION		A Employer identification number 23-6087844	
Number and street (or P.O. box number if mail is not delivered to street address) 47 EAST MAIN STREET		Room/suite	B Telephone number (see instructions) (717) 733-6576
City or town, state or province, country, and ZIP or foreign postal code EPHRATA, PA 17522		C If exemption application is pending, check here ▶ <input type="checkbox"/>	
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		D 1. Foreign organizations, check here..... ▶ <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ... ▶ <input type="checkbox"/>	
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ..... ▶ <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 6,507,093		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ..... ▶ <input type="checkbox"/>	
J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)			

Part 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 (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	98,202			
	2 Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch. B . . . . .				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities . . .	176,470	176,470	176,470	
	5a Gross rents . . . . .				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	567,234			
	b Gross sales price for all assets on line 6a 1,401,491				
	7 Capital gain net income (from Part IV, line 2) . . .		567,234		
	8 Net short-term capital gain . . . . .				
	9 Income modifications . . . . .				
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	b Less: Cost of goods sold . . . . .				
	c Gross profit or (loss) (attach schedule) . . . . .				
	11 Other income (attach schedule) . . . . .	107	107	107	
	12 Total. Add lines 1 through 11 . . . . .	842,013	743,811	176,577	
	13 Compensation of officers, directors, trustees, etc.	38,821	24,571		14,250
	14 Other employee salaries and wages . . . . .				
	15 Pension plans, employee benefits . . . . .				
	16a Legal fees (attach schedule) . . . . .				
	b Accounting fees (attach schedule) . . . . .	2,000			
	c Other professional fees (attach schedule) . . . . .				
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see instructions) . . . .	16,513			
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy . . . . .				
	21 Travel, conferences, and meetings . . . . .				
	22 Printing and publications . . . . .				
	23 Other expenses (attach schedule) . . . . .	4,027			4,000
	24 Total operating and administrative expenses. Add lines 13 through 23 . . . . .	61,361	24,571		18,250
	25 Contributions, gifts, grants paid . . . . .	718,818			718,818
	26 Total expenses and disbursements. Add lines 24 and 25	780,179	24,571		737,068
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	61,834			
	b Net investment income (if negative, enter -0-)		719,240		
				176,577	

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing . . . . .			
	2 Savings and temporary cash investments . . . . .	62,926	111,253	111,253
	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 ▶ _____			
	8 Inventories for sale or use . . . . .			
	9 Prepaid expenses and deferred charges . . . . .			
	10a Investments—U.S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule) . . . . .	1,915,928	2,386,817	4,207,623
	c Investments—corporate bonds (attach schedule) . . . . .	2,215,682	2,133,895	2,188,217
	11 Investments—land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans . . . . .			
	13 Investments—other (attach schedule) . . . . .	371,583		
	14 Land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
15 Other assets (describe ▶ _____)				
16 <b>Total assets</b> (to be completed by all filers—see the instructions. Also, see page 1, item I)	4,566,119	4,631,965	6,507,093	
Liabilities	17 Accounts payable and accrued expenses . . . . .			
	18 Grants payable . . . . .			
	19 Deferred revenue . . . . .			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule) . . . . .			
	22 Other liabilities (describe ▶ _____)			
	23 <b>Total liabilities</b> (add lines 17 through 22) . . . . .		0	
Net Assets or Fund Balances	<b>Foundations that follow SFAS 117, check here</b> ▶ <input type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>			
	24 Unrestricted . . . . .			
	25 Temporarily restricted . . . . .			
	26 Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here</b> ▶ <input checked="" type="checkbox"/> <b>and complete lines 27 through 31.</b>			
	27 Capital stock, trust principal, or current funds . . . . .			
	28 Paid-in or capital surplus, or land, bldg., and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds	4,566,119	4,631,965	
30 <b>Total net assets or fund balances</b> (see instructions) . . . . .	4,566,119	4,631,965		
31 <b>Total liabilities and net assets/fund balances</b> (see instructions) .	4,566,119	4,631,965		

**Part III Analysis of Changes in Net Assets or Fund Balances**

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . .	<b>1</b>	4,566,119
2 Enter amount from Part I, line 27a . . . . .	<b>2</b>	61,834
3 Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>	4,012
4 Add lines 1, 2, and 3 . . . . .	<b>4</b>	4,631,965
5 Decreases not included in line 2 (itemize) ▶ _____	<b>5</b>	
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	<b>6</b>	4,631,965

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1 a</b> CORPORATE BONDS AND NOTES	P	2018-10-31	2019-10-31
<b>b</b> COMMON STOCK - LARGE CAP	P	2018-10-31	2019-10-31
<b>c</b> PREFERRED STOCK	P	2018-10-31	2019-10-31
<b>d</b> FOREIGN EQUITIES - LARGE CAP	P	2018-10-31	2019-10-31
<b>e</b>			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b> 396,700		392,285	4,415
<b>b</b> 931,723		364,840	566,883
<b>c</b> 12,500		12,880	-380
<b>d</b> 60,568		64,252	-3,684
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
<b>a</b>			4,415
<b>b</b>			566,883
<b>c</b>			-380
<b>d</b>			-3,684
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss) <div style="display: inline-block; vertical-align: middle; margin-left: 10px;">           { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }         </div>	<b>2</b>	567,234
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8	<b>3</b>	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐

Yes

☒

No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

**1** Enter the appropriate amount 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 noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2017	733,616	6,659,876	0.110155
2016	749,174	6,734,544	0.111243
2015	778,074	6,806,961	0.114306
2014	722,386	7,325,031	0.098619
2013	775,047	7,633,032	0.101539

<b>2</b> Total of line 1, column (d)	<b>2</b>	0.535862
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	<b>3</b>	0.107172
<b>4</b> Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	<b>4</b>	6,356,089
<b>5</b> Multiply line 4 by line 3	<b>5</b>	681,195
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	<b>6</b>	7,192
<b>7</b> Add lines 5 and 6	<b>7</b>	688,387
<b>8</b> Enter qualifying distributions from Part XII, line 4	<b>8</b>	737,068

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)**

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions)		
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	<b>1</b>	7,192
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	7,192
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5</b>	7,192
<b>6</b>	Credits/Payments:		
<b>a</b>	2018 estimated tax payments and 2017 overpayment credited to 2018	<b>6a</b>	12,400
<b>b</b>	Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868) . . . . .	<b>6c</b>	
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	
<b>7</b>	Total credits and payments. Add lines 6a through 6d. . . . .	<b>7</b>	12,400
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached.	<b>8</b>	
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . . ▶	<b>9</b>	
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . . ▶	<b>10</b>	5,208
<b>11</b>	Enter the amount of line 10 to be: <b>Credited to 2019 estimated tax</b> ▶ 5,208 <b>Refunded</b> ▶	<b>11</b>	

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .		No
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). . . . . <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i>		No
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .		No
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: <b>(1)</b> On the foundation. ▶ \$ _____ <b>(2)</b> On foundation managers. ▶ \$ _____		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ _____		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities.</i>		No
<b>3</b> Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i> . . . . .		No
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .		No
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .		
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T.</i>		No
<b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	Yes	
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i> . . . . .	Yes	
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ PA _____		
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation .</i>	Yes	
<b>9</b> Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2018 or the taxable year beginning in 2018? See the instructions for Part XIV. <i>If "Yes," complete Part XIV</i> . . . . .		No
<b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i> . . . . .		No

**Part VII-A Statements Regarding Activities** (continued)

<b>11</b>	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions. . . . .	<b>11</b>		<b>No</b>
<b>12</b>	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions . . . . .	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ <u>N/A</u>	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of ▶ <u>EPHRATA NATIONAL BANK</u> Telephone no. ▶ <u>(717) 733-6576</u>			

Located at ▶ 47 E MAIN ST EPHRATA PAZIP+4 ▶ 17522

<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —check here . . . . . ▶ <input type="checkbox"/>			
	and enter the amount of tax-exempt interest received or accrued during the year . . . . . ▶ <b>15</b>			
<b>16</b>	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? . . . . .	<b>16</b>	<b>Yes</b>	<b>No</b>
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ▶			

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required****File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

		<b>Yes</b>	<b>No</b>
<b>1a</b>	During the year did the foundation (either directly or indirectly):		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> 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.) . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions . . . . . <input type="checkbox"/>	<b>1b</b>	
<b>c</b>	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2018? . . . . . <input type="checkbox"/>	<b>1c</b>	
<b>2</b>	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
<b>a</b>	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____		
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions.) . . . . . <input type="checkbox"/>	<b>2b</b>	
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here. ▶ 20____, 20____, 20____, 20____		
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2018.) . . . . . <input type="checkbox"/>	<b>3b</b>	
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>	<b>No</b>
<b>b</b>	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	<b>4b</b>	<b>No</b>

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

<b>5a</b>	During the year did the foundation pay or incur any amount to:		<b>Yes</b>	<b>No</b>
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions. . . . .	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions . . . . .		<b>5b</b>	<b>No</b>
	Organizations relying on a current notice regarding disaster assistance check here. . . . .	<input type="checkbox"/>		
<b>c</b>	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? . . . . .	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
	<i>If "Yes," attach the statement required by Regulations section 53.4945–5(d).</i>			
<b>6a</b>	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .		<b>6b</b>	<b>No</b>
	<i>If "Yes" to 6b, file Form 8870.</i>			
<b>7a</b>	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? . . . . .		<b>7b</b>	
<b>8</b>	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

<b>1 List all officers, directors, trustees, foundation managers and their compensation. See instructions</b>				
<b>(a)</b> Name and address	<b>(b)</b> Title, and average hours per week devoted to position	<b>(c)</b> Compensation (If not paid, enter -0-)	<b>(d)</b> Contributions to employee benefit plans and deferred compensation	<b>(e)</b> Expense account, other allowances
EPHRATA NATIONAL BANK 47 E MAIN ST EPHRATA, PA 17522	TRUSTEE 000.00	38,821	0	0
<b>2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."</b>				
<b>(a)</b> Name and address of each employee paid more than \$50,000	<b>(b)</b> Title, and average hours per week devoted to position	<b>(c)</b> Compensation	<b>(d)</b> Contributions to employee benefit plans and deferred compensation	<b>(e)</b> Expense account, other allowances
NONE				
<b>Total number of other employees paid over \$50,000.</b> . . . . .				

**Part VIII**

**Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** *(continued)*

**3**

**Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
<b>Total</b> number of others receiving over \$50,000 for professional services.		

**Part IX-A**

**Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
<b>1</b> <div></div>	
<b>2</b> <div></div>	
<b>3</b> <div></div>	
<b>4</b> <div></div>	

**Part IX-B**

**Summary of Program-Related Investments** (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
<b>1</b> N/A	
<b>2</b> <div></div>	
All other program-related investments. See instructions.	
<b>3</b> <div></div>	
<b>Total.</b> Add lines 1 through 3	

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b>	Average monthly fair market value of securities. . . . .	<b>1a</b>	6,365,792
<b>b</b>	Average of monthly cash balances. . . . .	<b>1b</b>	87,090
<b>c</b>	Fair market value of all other assets (see instructions). . . . .	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c). . . . .	<b>1d</b>	6,452,882
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	<b>1e</b>	
<b>2</b>	Acquisition indebtedness applicable to line 1 assets. . . . .	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d. . . . .	<b>3</b>	6,452,882
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	<b>4</b>	96,793
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	6,356,089
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	<b>6</b>	317,804

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6. . . . .	<b>1</b>	317,804
<b>2a</b>	Tax on investment income for 2018 from Part VI, line 5. . . . .	<b>2a</b>	7,192
<b>b</b>	Income tax for 2018. (This does not include the tax from Part VI.). . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b. . . . .	<b>2c</b>	7,192
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1. . . . .	<b>3</b>	310,612
<b>4</b>	Recoveries of amounts treated as qualifying distributions. . . . .	<b>4</b>	
<b>5</b>	Add lines 3 and 4. . . . .	<b>5</b>	310,612
<b>6</b>	Deduction from distributable amount (see instructions). . . . .	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . . . .	<b>7</b>	310,612

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26. . . . .	<b>1a</b>	737,068
<b>b</b>	Program-related investments—total from Part IX-B. . . . .	<b>1b</b>	
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes. . . . .	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required). . . . .	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule). . . . .	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	737,068
<b>5</b>	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. . . . .	<b>5</b>	7,192
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	<b>6</b>	729,876

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.



**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
<b>1</b> Distributable amount for 2018 from Part XI, line 7				310,612
<b>2</b> Undistributed income, if any, as of the end of 2018:				
<b>a</b> Enter amount for 2017 only. . . . .				
<b>b</b> Total for prior years: 20____, 20____, 20____				
<b>3</b> Excess distributions carryover, if any, to 2018:				
<b>a</b> From 2013. . . . .	407,535			
<b>b</b> From 2014. . . . .	364,184			
<b>c</b> From 2015. . . . .	444,786			
<b>d</b> From 2016. . . . .	422,699			
<b>e</b> From 2017. . . . .	412,814			
<b>f</b> <b>Total</b> of lines 3a through e. . . . .	2,052,018			
<b>4</b> Qualifying distributions for 2018 from Part XII, line 4: ► \$ 737,068				
<b>a</b> Applied to 2017, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .				
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .				
<b>d</b> Applied to 2018 distributable amount. . . . .				310,612
<b>e</b> Remaining amount distributed out of corpus	426,456			
<b>5</b> Excess distributions carryover applied to 2018. (If an amount appears in column (d), the same amount must be shown in column (a).)				
<b>6</b> <b>Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	2,478,474			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b. . . . .				
<b>c</b> 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. . . . .				
<b>d</b> Subtract line 6c from line 6b. Taxable amount—see instructions. . . . .				
<b>e</b> Undistributed income for 2017. Subtract line 4a from line 2a. Taxable amount—see instructions. . . . .				
<b>f</b> Undistributed income for 2018. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019. . . . .				0
<b>7</b> 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). . . . .				
<b>8</b> Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions). . . . .	407,535			
<b>9</b> <b>Excess distributions carryover to 2019.</b> Subtract lines 7 and 8 from line 6a. . . . .	2,070,939			
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2014. . . . .	364,184			
<b>b</b> Excess from 2015. . . . .	444,786			
<b>c</b> Excess from 2016. . . . .	422,699			
<b>d</b> Excess from 2017. . . . .	412,814			
<b>e</b> Excess from 2018. . . . .	426,456			

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

<b>1a</b> If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling. . . . . ▶					
<b>b</b> Check box to indicate whether the organization is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)					
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .	Tax year	Prior 3 years			(e) Total
	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon:					
<b>a</b> "Assets" alternative test—enter:					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .					
<b>c</b> "Support" alternative test—enter:					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

**Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)**

<b>1 Information Regarding Foundation Managers:</b>	
<b>a</b> 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). (See section 507(d)(2).)	
<b>b</b> List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.	
<b>2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:</b>	
Check here <input type="checkbox"/> if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions	
<b>a</b> The name, address, and telephone number or e-mail address of the person to whom applications should be addressed: STEVEN ARMBRUSTER EPHRATA NATIONAL BANK EPHRATA, PA 17522 (717) 733-6576	
<b>b</b> The form in which applications should be submitted and information and materials they should include: APPLICATION TO BE OBTAINED FROM THE SELECTION COMMITTEE.	
<b>c</b> Any submission deadlines: NONE.	
<b>d</b> Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors: RECIPIENTS MUST BE 501(C)(3) ORGANIZATIONS	

**Part XV** **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
See Additional Data Table				
<b>Total . . . . .</b>			<b>▶ 3a</b>	
<b>b</b> <i>Approved for future payment</i>				
<b>Total . . . . .</b>			<b>▶ 3b</b>	

Enter gross amounts unless otherwise indicated.

Enter gross amounts unless otherwise indicated.	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions.)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
<b>1</b> Program service revenue:					
<b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>f</b> _____					
<b>g</b> Fees and contracts from government agencies					
<b>2</b> Membership dues and assessments. . . .					
<b>3</b> Interest on savings and temporary cash investments . . . . .					
<b>4</b> Dividends and interest from securities. . . .			14	176,470	
<b>5</b> Net rental income or (loss) from real estate:					
<b>a</b> Debt-financed property. . . . .					
<b>b</b> Not debt-financed property. . . . .					
<b>6</b> Net rental income or (loss) from personal property					
<b>7</b> Other investment income. . . . .					
<b>8</b> Gain or (loss) from sales of assets other than inventory . . . . .					567,234
<b>9</b> Net income or (loss) from special events:					
<b>10</b> Gross profit or (loss) from sales of inventory					
<b>11</b> Other revenue:					
<b>a</b> REDEMPTION / REBATE FEES _____			14	107	
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>12</b> Subtotal. Add columns (b), (d), and (e). .				176,577	567,234
<b>13</b> <b>Total.</b> Add line 12, columns (b), (d), and (e). . . . . (See worksheet in line 13 instructions to verify calculations.)			<b>13</b>		<b>743,811</b>

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

## Part XVII

- |  |  |     |    |
|--|--|-----|----|
|  |  | Yes | No |
|--|--|-----|----|

--	--	--

- |       |  |    |
|-------|--|----|
| 1a(1) |  | No |
| 1a(2) |  | No |

--	--	--

- |              |  |           |
|--------------|--|-----------|
| <b>1b(1)</b> |  | <b>No</b> |
| <b>1b(2)</b> |  | <b>No</b> |
| <b>1b(3)</b> |  | <b>No</b> |
| <b>1b(4)</b> |  | <b>No</b> |
| <b>1b(5)</b> |  | <b>No</b> |
| <b>1b(6)</b> |  | <b>No</b> |

1c		No
----	--	----

value  
ue

[illegible]

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations

described in section 501(c) (other than section 501(c)(3)) or in section 527? . . . . . ☐ Yes ☒ No

**b** If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship

<p><b>Sign Here</b></p> <p>*****</p> <p>_____</p> <p>Signature of officer or trustee</p>	<p>2020-09-14</p> <p>_____</p> <p>Date</p>	<p>*****</p> <p>_____</p> <p>Title</p>
--	--	--

May the IRS discuss this return with the preparer shown below

(see instr.)? ☐ **Yes** ☐ **No**

<b>Paid Preparer Use Only</b>	JEFFREY A GROFF		2020-09-14		
	Firm's name ► ROSS BUEHLER FALK & COMPANY LLP				Firm's EIN ► 23-2327390
	Firm's address ► 1500 LITITZ PIKE LANCASTER, PA 176016506				Phone no. (717) 393-2700

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
BROSSMAN FAMILY 47 E MAIN ST PO BOX 457 EPHRATA, PA 17522	NONE	PRIVATE	SCHOLARSHIP	361,068
ADAMSTOWN AREA LIBRARY 3000 NORTH READING ROAD PO BOX 356 ADAMSTOWN, PA 19501	NONE	PUBLIC	GENERAL FUND	2,000
FULTON THEATRE12 NORTH PRINCE ST PO BOX 1865 LANCASTER, PA 176081865	NONE	PUBLIC	GENERAL FUND	35,000
<b>Total . . . . . ▶ 3a</b>				718,818

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
NORTH MUSEUM OF NATURE AND SCIENCE 400 COLLEGE AVENUE LANCASTER, PA 17602	NONE	PUBLIC	GENERAL FUND	10,000
PENNSYLVANIA COLLEGE OF HEALTH SCIE 850 GREENFIELD ROAD LANCASTER, PA 17601	NONE	PUBLIC	GENERAL FUND	25,000
REAL LIFE COMMUNITY SERVICES 240 MAIN STREET DENVER, PA 17517	NONE	PUBLIC	GENERAL FUND	5,000
<b>Total . . . . . ▶ 3a</b>				718,818

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
LIGHTHOUSE VOCATIONAL SERVICE 144 ORLAN ROAD NEW HOLLAND, PA 17557	NONE	PUBLIC	GENERAL FUND	5,000
BRIGHT SIDE OPPORTUNITIES CENTER 515 HERSHEY AVENUE LANCASTER, PA 17603	NONE	PUBLIC	GENERAL FUND	12,500
HISTORICAL SOCIETY OF COCALICO VALL 237-249 WEST MAIN STREET EPHRATA, PA 17522	NONE	PUBLIC	GENERAL FUND	3,250
<b>Total . . . . .</b> ► <b>3a</b>				718,818



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CENTRAL PENNSYLVANIA FOOD BANK 3908 COREY ROAD HARRISBURG, PA 17109	NONE	PUBLIC	GENERAL FUND	15,000
WITF4801 LINDLE ROAD HARRISBURG, PA 17111	NONE	PUBLIC	GENERAL FUND	25,000
MILLERSVILLE UNIVERSITY PO BOX 1002 MILLERSVILLE, PA 175510302	NONE	PUBLIC	VISUAL AND PERFORMING ARTS	25,000
<b>Total . . . . . ▶ 3a</b>				718,818

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
PA COLLEGE OF ART AND DESIGN 204 NORTH PRINCE STREET PO BOX 59 LANCASTER, PA 176080059	NONE	PUBLIC	GENERAL FUND	25,000
LEBANON VALLEY COLLEGE 101 NORTH COLLEGE AVE ANNVILLE, PA 170030501	NONE	PUBLIC	SCHOLARSHIP	25,000
UNITED WAY OF LANCASTER 1910 HARRINGTON DRIVE LANCASTER, PA 17601	NONE	PUBLIC	GENERAL FUND	2,000
<b>Total . . . . . ▶ 3a</b>				718,818


Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
EPHRATA AREA SOCIAL SERVICES 227 N STATE STREET EPHRATA, PA 17522	NONE	PUBLIC	GENERAL FUND	5,000
LANCASTERHISTORYORG 230 NORTH PRESIDENT AVE LANCASTER, PA 17603	NONE	PUBLIC	READING ROOM	12,500
COCALICO ALUMNI FOUNDATION COCALICO HIGH SCHOOL DENVER, PA 17517	NONE	PUBLIC	GENERAL FUND	1,500
<b>Total . . . . . ▶ 3a</b>				718,818

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
WELLSPAN PHILHAVEN 283 S BUTLER ROAD PO BOX 550 MOUNT GRETN, PA 17064	NONE	PUBLIC	GENERAL FUND	11,000
BOY SCOUTS OF AMERICA PA DUTCH COUNCIL630 JANET AVE LANCASTER, PA 17601	NONE	PUBLIC	GENERAL FUND	6,000
JUNIOR ACHIEVEMENT OF CENTRAL PA 2420 GEHMAN LANE SUITE 100 LANCASTER, PA 17602	NONE	PUBLIC	GENERAL FUND	2,500
<b>Total . . . . . ▶ 3a</b>				718,818

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
GIRLS SCOUTS IN THE HEART OF PA 2120 OREGON PIKE LANCASTER, PA 17601	NONE	PUBLIC	GENERAL FUND	6,000
LANCASTER SYMPHONY 226 NORTH ARCH STREET LANCASTER, PA 17603	NONE	PUBLIC	GENERAL FUND	2,500
THEODORE R SPRECHER SCHOLARSHIP MEMORIAL FUND803 OAK BLVD EPHRATA, PA 17522	NONE	PUBLIC	SCHOLARSHIP	1,000
<b>Total . . . . .</b> ► <b>3a</b>				718,818

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
THADDEUS STEVENS COLLEGE OF TECHNOLOGY 750 EAST KING STREET LANCASTER, PA 17602	NONE	PUBLIC	GENERAL FUND	20,000
LANCASTER COUNTY CAREER AND TECHNOLOGY FOUNDATION 1730 HANS HERR DRIVE PO BOX 527 WILLOW STREET, PA 17584	NONE	PUBLIC	GENERAL FUND	35,000
HARRISBURG AREA COMMUNITY COLLEGE ONE HACC DRIVE HARRISBURG, PA 17110	NONE	PUBLIC	GENERAL FUND	25,000
<b>Total</b> . . . . .			<b>3a</b>	718,818

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MILLERSVILLE UNIVERSITY PO BOX 1002 MILLERSVILLE, PA 175510302	NONE	PUBLIC	SCIENCE LECTURE	15,000
<b>Total</b> . . . . .  <b>3a</b>				718,818

**TY 2018 Accounting Fees Schedule**

**Name:** WILLIAM AND JEMIMA BROSSMAN CHARITA  
CHARITABLE FOUNDATION

**EIN:** 23-6087844

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PREP OF 990-PF	2,000			



## TY 2018 Investments Corporate Bonds Schedule

**Name:** WILLIAM AND JEMIMA BROSSMAN CHARITA  
CHARITABLE FOUNDATION

**EIN:** 23-6087844

### Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
CORPORATE BONDS AND NOTES	2,133,895	2,188,217

## TY 2018 Investments Corporate Stock Schedule

**Name:** WILLIAM AND JEMIMA BROSSMAN CHARITA  
CHARITABLE FOUNDATION

**EIN:** 23-6087844

### Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
EQUITIES	2,386,817	4,207,623

## TY 2018 Investments - Other Schedule

**Name:** WILLIAM AND JEMIMA BROSSMAN CHARITA  
CHARITABLE FOUNDATION

**EIN:** 23-6087844

### Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
MUTUAL FUNDS - EQUITIES	AT COST		

**TY 2018 Other Expenses Schedule**

**Name:** WILLIAM AND JEMIMA BROSSMAN CHARITA  
CHARITABLE FOUNDATION

**EIN:** 23-6087844

**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
CONSULTING	4,000			4,000
OFFICE EXPENSES	27			

## TY 2018 Other Income Schedule

**Name:** WILLIAM AND JEMIMA BROSSMAN CHARITA  
CHARITABLE FOUNDATION

**EIN:** 23-6087844

### Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
REDEMPTION / REBATE FEES	107	107	107

**TY 2018 Other Increases Schedule**

**Name:** WILLIAM AND JEMIMA BROSSMAN CHARITA  
CHARITABLE FOUNDATION

**EIN:** 23-6087844

Description	Amount
COST BASIS EQUITY ADJUSTMENT	4,012

**TY 2018 Taxes Schedule**

**Name:** WILLIAM AND JEMIMA BROSSMAN CHARITA  
CHARITABLE FOUNDATION

**EIN:** 23-6087844

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PA REGISTRATION FEE	15			
EXCISE TAX	16,498			

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93491258008140	
<div>Schedule B (Form 990, 990-EZ, or 990-PF) <small>Department of the Treasury Internal Revenue Service</small></div>		<div>Schedule of Contributors</div> <div>▶ Attach to Form 990, 990-EZ, or 990-PF. ▶ Go to <a href="http://www.irs.gov/Form990">www.irs.gov/Form990</a> for the latest information.</div>			<div>OMB No. 1545-0047</div> <div>2018</div>
<div>Name of the organization WILLIAM AND JEMIMA BROSSMAN CHARITA CHARITABLE FOUNDATION</div>				<div>Employer identification number 23-6087844</div>	
<div>Organization type (check one):</div> <div><div>Filers of:</div><div>Form 990 or 990-EZ</div><div>Form 990-PF</div></div> <div><div>Section:</div><div><div><input type="checkbox"/> 501(c)( ) (enter number) organization</div><div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation</div><div><input type="checkbox"/> 527 political organization</div><div><input checked="" type="checkbox"/> 501(c)(3) exempt private foundation</div><div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation</div><div><input type="checkbox"/> 501(c)(3) taxable private foundation</div></div></div>					



<b>Name of organization</b> WILLIAM AND JEMIMA BROSSMAN CHARITA CHARITABLE FOUNDATION	<b>Employer identification number</b> 23-6087844
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<b>Part I</b> <b>Contributors</b> (See instructions). Use duplicate copies of Part I if additional space is needed.			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ANN BROSSMAN SWEIGERT TRUST 47 EAST MAIN STREET  EPHRATA, PA 17522	  \$ 98,202	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions.)</small>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-	  	 \$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions.)</small>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-	  	 \$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions.)</small>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-	  	 \$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions.)</small>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-	  	 \$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions.)</small>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-	  	 \$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions.)</small>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-	  	 \$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions.)</small>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-	  	 \$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions.)</small>

23-6087844

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

<b>Name of organization</b> WILLIAM AND JEMIMA BROSSMAN CHARITA CHARITABLE FOUNDATION	<b>Employer identification number</b> 23-6087844
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<b>Part III</b>	<b>Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ _____</b> Use duplicate copies of Part III if additional space is needed.
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
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	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
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	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	

WILLIAM AND JEMIMA BROSSMAN CHARITABLE FOUNDATION – EIN 23-6087844  
C/O EPHRATA NATIONAL BANK  
P.O. BOX 457  
EPHRATA, PA 17522

ATTACHMENT TO FORM 990-PF  
FYE – 10/31/19

Statement required under Treas. Reg. §53.4945-5(d)(2) concerning expenditure responsibility exercised by the William and Jemima Brossman Charitable Foundation.

1. Name and address of the grantee:

Brossman Family Charitable Trust for Scholarships  
c/o Ephrata National Bank  
P.O. Box 457  
Ephrata, PA 17522

2. The date and amount of the grants:

November 6, 2018	5,581.67	July 31, 2019	9,000.00
November 14, 2018	3,000.00	August 7, 2019	12,000.00
December 14, 2018	2,999.91	August 14, 2019	9,000.00
January 9, 2019	3,000.00	August 16, 2019	89.20
February 13, 2019	2,040.36	August 21, 2019	9,000.00
March 20, 2019	14.17	September 4, 2019	6,000.00
April 12, 2019	1,025.00	September 18, 2019	3,000.00
July 22, 2019	280,317.80	October 2, 2019	3,000.00
July 23, 2019	6,000.00	October 17, 2019	3,000.00
July 29, 2019	3,000.00		

3. Purpose of the grant:

To fund and maintain a scholarship program to benefit high school graduates (or persons holding equivalent certificates or diplomas):

A. From Ephrata Senior High School of Ephrata, PA, or a high school graduate or equivalent who is a resident in the service area of D & E Communications, Inc. (now Windstream Communications).

B. Who will matriculate or currently is matriculated in the year the scholarship is granted at an educational institution meeting the requirements of §170(b)(1)(A)(ii) of the Internal Revenue Code of 1986, as amended.

C. So long as that person complies with all eligibility requirements and is not a disqualified person within the meaning of §4946 of the Internal Revenue Code of 1986, as amended.

The other purposes of the grant are to fund all expenses necessary to the proper operation and maintenance of this program.

4. The amount expended by the grantee:

Undistributed scholarships carried from previous year	\$	-0-
Scholarships granted	\$	354,000
Grant expenses incurred	\$	7,019
2017 Distributable amount	\$	<u>-0-</u>
 Total amount distributed from Corpus	 \$	 361,019
 Amount to be expended in succeeding year	 \$	 -0-

5. To the best knowledge and belief of the managers of the Foundation, and based on the report furnished by the grantee, the grantee has not diverted any portion of the funds from the purpose of the grants.
6. The Foundation received these reports as of the close of the grantee organization's accounting period (October 31, 2018).
7. Pursuant of Treas. Reg. §53.4945-5(c)(1) and Treas. Reg. §53.4945-5(d)(2)(vii), the grantor organization has no reason to doubt the accuracy or reliability of the report it has received from the grantee; consequently, it has not conducted an independent verification of such reports.