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2019

OMB No. 1545-0052

# **Return of Private Foundation**

Form 990-PF

Department of the Treasury

Internal Revenue Service

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

▶ Do not enter social security numbers on this form as it may be made public. ▶ Go to <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

or	caler	ndar year 2019, or tax year beginning 01-01-20	)19 , aı	nd ending 12-31-	2019				
		ındation		A Employer id	entification numbe	er			
SH	IOVAL F	COUNDATION		23-3024646	23-3024646				
		d street (or P.O. box number if mail is not delivered to street address) C SQUARE SUITE 504	Room/suite	<b>B</b> Telephone nu	<b>B</b> Telephone number (see instructions)				
	J T OBLI	10 SQUARE SUITE SUIT	(570) 825-9900	(570) 825-9900					
		n, state or province, country, and ZIP or foreign postal code RRE, PA 18701	•	<b>C</b> If exemption	application is pendin	g, check here			
G Ch	neck al	I that apply: Initial return Initial return of a	former public charity	<b>D 1.</b> Foreign or	ganizations, check h	ere			
	reek ui	Final return Amended return	former public charity		ganizations meeting	▶ ∟			
		✓ Address change ☐ Name change			k here and attach co				
<b>1</b> Ch	eck ty	rpe of organization: Section 501(c)(3) exempt private	foundation		undation status was				
		· · · · · · · · · · · · · · · · · · ·	e private foundation	under section	n 507(b)(1)(A), ched	ck here			
			☑ Cash ☐ Accru	F If the found:	ation is in a 60-mont	h termination -			
of '	year (f	from Part II, col. (c),  ▶\$ 3,270,867  (Part I, column (d) must			n 507(b)(1)(B), chec				
Pa	rt I	Analysis of Revenue and Expenses (The total		<u> </u>		(d) Disbursements			
		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	for charitable purposes (cash basis only)			
	1	Contributions, gifts, grants, etc., received (attach schedule)							
	2	Check ▶ ☑ if the foundation is <b>not</b> required to attach Sch. B							
	3	Interest on savings and temporary cash investments	75,529	75,529					
	4	Dividends and interest from securities	95,869	95,869					
	5a	Gross rents							
	b	Net rental income or (loss)							
K	6a	Net gain or (loss) from sale of assets not on line 10	39,846						
Revenue	b	Gross sales price for all assets on line 6a 551,581							
2	7	Capital gain net income (from Part IV, line 2)		39,846					
	8	Net short-term capital gain							
	9	Income modifications							
	10a	Gross sales less returns and allowances							
	b	Less: Cost of goods sold							
	C	Gross profit or (loss) (attach schedule)	<b>05.1</b> 0	4 200					
	11	Other income (attach schedule)	0	-1,206					
	12	Total. Add lines 1 through 11	211,244	· ·					
	13	Compensation of officers, directors, trustees, etc.	0	0		(			
	14	Other employee salaries and wages							
ses	15	Pension plans, employee benefits							
Ē	16a								
X	b	Accounting fees (attach schedule)							
- Ae	C	Other professional fees (attach schedule)							
<u> </u>	17	Interest	<b>06.1</b> 4.75						
Operating and Administrative Expenses	18	Taxes (attach schedule) (see instructions)	175	0		-			
<u> </u>	19	Depreciation (attach schedule) and depletion							
₽	20	Occupancy							
ב ב	21	Travel, conferences, and meetings							
ਰ	22	Printing and publications	<b>66-1</b> 634	0		(3)			
ב ב	23		621			621			
era:	24	Total operating and administrative expenses.	300			(3)			
ă	25	Add lines 13 through 23	796 87,286			621			
_	25	Contributions, gifts, grants paid	87,286			87,286			
	26	<b>Total expenses and disbursements.</b> Add lines 24 and 25	88,082	0		87,90			
	27	Subtract line 26 from line 12:							
	а	Excess of revenue over expenses and disbursements	123,162						
	ь	Net investment income (if negative, enter -0-)		210,038					
	С	Adjusted net income (if negative, enter -0-)							
_			<b>.</b>						

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Part III

2

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	1	Cash—non-interest-bearing			
	2	Savings and temporary cash investments	59,538	121,676	121,676
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less: allowance for doubtful accounts ▶			
S	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U.S. and state government obligations (attach schedule)	329,595	<b>9</b> 169,472	169,472
	b	Investments—corporate stock (attach schedule)	7,257	<b>9</b> 311,569	311,569
	c	Investments—corporate bonds (attach schedule)	2,390,656	<b>9</b> 2,668,150	2,668,150
	11	Investments—land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe )			
	16	Total assets (to be completed by all filers—see the			
		instructions. Also, see page 1, item I)	2,787,046	3,270,867	3,270,867
	17	Accounts payable and accrued expenses			
	18	Grants payable			
Liabilities	19	Deferred revenue			
yi jit	20	Loans from officers, directors, trustees, and other disqualified persons			
jat	21	Mortgages and other notes payable (attach schedule)			
1	22	Other liabilities (describe )			
	23	Total liabilities(add lines 17 through 22)	0	0	
Ş		Foundations that follow FASB ASC 958, check here			
nce		and complete lines 24, 25, 29 and 30.			
ala	24	Net assets without donor restrictions			
<b>Fund Balance</b>	25	Net assets with donor restrictions			
ınc		Foundations that do not follow FASB ASC 958, check here			
		and complete lines 26 through 30.			
s or	26	Capital stock, trust principal, or current funds	2,787,046	3,270,867	
Net Assets	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0	0	
Ass	28	Retained earnings, accumulated income, endowment, or other funds	0	0	
et ,	29	Total net assets or fund balances (see instructions)	2,787,046	3,270,867	
Z			2 707 046	2 272 267	

2,787,046

3,270,867

2,787,046

123,162

360,659

3,270,867

3,270,867

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1

2

3

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5 6

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

Total net assets or fund balances at beginning of year-Part II, column (a), line 29 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

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

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

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Add lines 1, 2, and 3 . . . . . . . . . . . . . . . . Decreases not included in line 2 (itemize) ▶

Page **3** 

Part IV Capit	tal Gains and Lo	sses for Tax on Invest	ment Income			
		nd(s) of property sold (e.g., i e; or common stock, 200 shs		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1</b> a AT&T				Р	2017-10-25	2019-09-25
<b>b</b> BARCLAYS BA	ANK PLC			Р		
c GNMA POOL				Р		
d HEWLETT-PA	CKARD			Р		
e SAC PENSION	N-B			Р		
	(e) Gross sales price  (f) Depreciation allowed (or allowable)			(g) other basis ense of sale	Gain o	<b>h)</b> r (loss) ) minus (g)
a	132,155			125,000		7,155
b	25,591			24,875		716
С	208			216		-8
d	220,860			204,759		16,101
е	172,767			156,885		15,882
	,	g gain in column (h) and ow	ned by the foundation	· · · · · · · · · · · · · · · · · · ·	,	·
(	(i) of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	( <b>k</b> ) of col. (i) . (j), if any	Gains (Col. ( col. (k), but not	l) h) gain minus less than -0-) <b>or</b> om col.(h))
a						7,155
b						716
C						-8
d						16,101
<u>е</u>						15,882
	enter in Part I, line	loss) as defined in sections 1 8, column (c) (see instruction	ons). If (loss), enter -0	· }	3	
		Section 4940(e) for Repundations subject to the sec				
If "Yes," the founda	liable for the sectio tion does not qualify	s part blank.  n 4942 tax on the distributate y under section 4940(e). Do each column for each year;	not complete this part.			es 🗹 No
(a)		· · · · · · · · · · · · · · · · ·		an, chares	(d)	
Base period years year (or tax year be		sted qualifying distributions	(c) Net value of noncharitab		Distribution rati (col. (b) divided by c	ol. (c))
2018		143,672		2,906,498		0.049431
2017		104,416		2,971,164		0.035143
2016		144,780		2,826,835		0.051216
2015		131,806		2,816,415		0.046799
2014		140,544		2,762,652		0.050873
2 Total of line	1, column (d)			2		0.233462
number of ye 4 Enter the net	ars the foundation h value of noncharita	5-year base period—divide t nas been in existence if less t ble-use assets for 2019 from	than 5 years . ´. n Part X, line 5	3		0.046692 2,983,522
<b>5</b> Multiply line 4	•			5		139,307
		me (1% of Part I, line 27b)		6		2,100
				7		141,407
		n Part XII, line 4 , an line 7, check the box in Pa			g a 1% tax rate. Se	87,907 e the Part VI
					Fc	rm <b>990-PF</b> (2019)

	1 9 90 - FT (2019)									age c
Pa	rt VIII-B Statements Regard	ling	Activities for Which	Form 4720 May Be	Required (continu	ed)				
5a	During the year did the foundation	oay o	r incur any amount to:						Yes	No
	(1) Carry on propaganda, or otherv	vise a	ttempt to influence legisl	ation (section 4945(e))?	□ v <sub>-</sub> -	<b>✓</b>	NI -			
	(2) Influence the outcome of any s	oecifi	c public election (see sect	tion 4955); or to carry	□ Tes		NO			
	on, directly or indirectly, any vo	ter r	egistration drive?		· · 🔲 Yes		No			
	(3) Provide a grant to an individual	for t	ravel, study, or other sim	ilar purposes?	Yes	<b></b>	No			
	(4) Provide a grant to an organizati	on of	her than a charitable, etc	, organization described			NO			
	in section 4945(d)(4)(A)? See in	nstru	ctions		🗌 Yes	<b>✓</b>	Na			
	(5) Provide for any purpose other t educational purposes, or for the		•	* * * * * * * * * * * * * * * * * * * *	□ Tes		NO			
b	If any answer is "Yes" to $5a(1)-(5)$ ,	•	•		rcentions described in	<b>~</b>	No			
	Regulations section 53.4945 or in a					_		5b		
	Organizations relying on a current n				_	· —				
c	If the answer is "Yes" to question 5					Ш				
Ū	tax because it maintained expenditu			•	$\Box$					
	If "Yes," attach the statement requi		· · · · · · · · · · · · · · · · · · ·		' ·	ш	No			
6a	Did the foundation, during the year,		-		ime on					
<b>O</b> a	a personal benefit contract?									
b	Did the foundation, during the year,				' Yes	<b>✓</b>	No	6b		No
	If "Yes" to 6b, file Form 8870.	puy	premiums, unecery or ma	meetry, on a personal be	nent contract. 1 1 1	•				110
7a	At any time during the tax year, wa	s the	foundation a party to a p	prohibited tax shelter train	nsaction?					
b	If "Yes", did the foundation receive				⊥ Yes	. <u>✓</u>	No	7b		
8	Is the foundation subject to the sec		,			-				
_	excess parachute payment during tl					. 🖈				
	Information About (				<u>∟ Yes</u>				<u> </u>	<u> </u>
Pa	and Contractors	JIIIC	ers, Directors, Trust	lees, roundation Ma	inagers, nigniy Pa	iiu Ei	npio	yees,		
_										
	List all officers, directors, truste		<b>b)</b> Title, and average	(c) Compensation (If	(d) Contributions	to	1			
	(a) Name and address	'	hours per week	not paid, enter	employee benefit plar				ise acc	
			devoted to position	-0-)	deferred compensa	tion	L°	ther a	llowand	
	DD SHOVAL	PRES 0.00	SIDENT	0		0				C
	AST NORTHAMPTON STREET ES BARRE, PA 18701	0.00								
	N W SHOVAL	TREA	SURER	0		0				
	AST NORTHAMPTON STREET	0.00				·				·
WILK	ES BARRE, PA 18701									
_2_	Compensation of five highest-pa	id er	nployees (other than tl	hose included on line 1			ne, e	nter "	NONE	<u>."                                    </u>
(a)	Name and address of each employee more than \$50,000	paid	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions employee benefi plans and deferre compensation	t			se acco owanc	
NON	 F				compensation					
11011	<u>-</u>		1							
			1							
						+				
-			1							
			1							
			-							
Tota	I number of other employees paid ov	or ¢E	<u> </u>		<u> </u>	+				
1014	in hamber of other employees paid ov	CI PO	0,0001 1 1 1 1	<u> </u>	· · · · · · · ·		For	m 00	0-PF (	(2010
							1 01	> >	- 1 I V	(2013

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Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	aid Employees,
3 Five highest-paid independent contractors for professional servic	es (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		• 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include rele organizations and other beneficiaries served, conferences convened, research papers produ		r of Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see i	nstructions)	
Describe the two largest program-related investments made by the foundation during the	<u> </u>	Amount
1	,	
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		• o
Total Add Mico Landagn 5		Form <b>990-PF</b> (2019)

3

4

5

6

7

1a

1b

2

3a 3b

4

5

144.975

144.975

144.975

87,907

87,907

87.907

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Distributable amount before adjustments. Subtract line 2c from line 1. . . . . . . . . . . . . . . .

Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . .

Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26. . . . . . . . . . . .

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

income. Enter 1% of Part I, line 27b. See instructions.

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

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

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

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

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

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

3

4 5

6

1

2

3

4

5

b

Part XII

Part XIII Undistributed Income (see instructions)

d Applied to 2019 distributable amount. . . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a).)

**5** Excess distributions carryover applied to 2019. (If an amount appears in column (d), the

a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5
b Prior years' undistributed income. Subtract line 4b from line 2b.
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.
d Subtract line 6c from line 6b. Taxable amount—see instructions.
e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see

6 Enter the net total of each column as

7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).
 8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions).

**9 Excess distributions carryover to 2020.** Subtract lines 7 and 8 from line 6a . . .

Analysis of line 9:
 Excess from 2015.
 Excess from 2016.
 Excess from 2017.
 Excess from 2018.
 Excess from 2019.

indicated below:

		(a) Corpus	(b) Years prior to 2018	(c) 2018	<b>(d)</b> 2019
1 Distributable amount for 2019 from	om Part XI, line 7				144,975
2 Undistributed income, if any, as	of the end of 2019:				
a Enter amount for 2018 only				90,079	
<b>b</b> Total for prior years: 20,	20		0		
3 Excess distributions carryover, if	any, to 2019:				
a From 2014					
<b>b</b> From 2015					
c From 2016					
<b>d</b> From 2017					
e From 2018					
f Total of lines 3a through e		0			
4 Qualifying distributions for 2019 f	rom Part				
XII, line 4: ► \$	87,907				
a Applied to 2018, but not more th	an line 2a			87,907	
b Applied to undistributed income of (Election required—see instruction)			0		
<ul> <li>c Treated as distributions out of co required—see instructions).</li> </ul>		0			

0

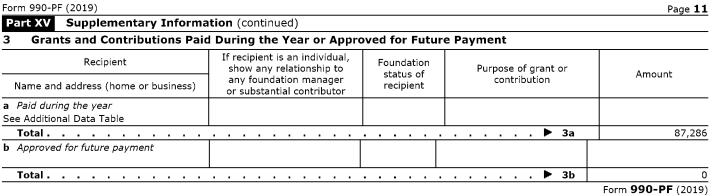
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2,172

144,975

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- - **b** The form in which applications should be submitted and information and materials they should include:
  - c Any submission deadlines:
- d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:



nter gross amounts unless otherwise indicated.		usiness income	Excluded by section	1 512, 513, or 514	(e) Related or exempt
1 Program service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	( <b>d)</b> Amount	function income (See instructions.)
a b					
c					
d e					
f					
<ul><li>g Fees and contracts from government agencies</li><li>2 Membership dues and assessments</li></ul>					
3 Interest on savings and temporary cash investments			14	75,529	
4 Dividends and interest from securities 5 Net rental income or (loss) from real estate:			14	95,869	
a Debt-financed property					
<ul><li>b Not debt-financed property.</li><li>6 Net rental income or (loss) from personal property</li><li>7 Other investment income.</li></ul>					
8 Gain or (loss) from sales of assets other than inventory			18	39,846	
9 Net income or (loss) from special events:				·	
Output  Outpu					
b					
c					
d					
e					
e		0		211,244	
e	lations.)		13	211,244	
e	lations.)  ne Accomplis  income is report	hment of Exempted in column (e) of	ot Purposes Part XVI-A contribu	3	211,244
2 Subtotal. Add columns (b), (d), and (e).  3 Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calcu  Part XVI-B  Relationship of Activities to the second columns.  Explain below how each activity for which the accomplishment of the foundation's explain.	lations.)  ne Accomplis  income is report	hment of Exempted in column (e) of	ot Purposes Part XVI-A contribu	3	211,244
e	lations.)  ne Accomplis  income is report	hment of Exempted in column (e) of	ot Purposes Part XVI-A contribu	3	211,244
e	lations.)  ne Accomplis  income is report	hment of Exempted in column (e) of	ot Purposes Part XVI-A contribu	3	211,244
e	lations.)  ne Accomplis  income is report	hment of Exempted in column (e) of	ot Purposes Part XVI-A contribu	3	211,244
e	lations.)  ne Accomplis  income is report	hment of Exempted in column (e) of	ot Purposes Part XVI-A contribu	3	211,244
e	lations.)  ne Accomplis  income is report	hment of Exempted in column (e) of	ot Purposes Part XVI-A contribu	3	211,244
e	lations.)  ne Accomplis  income is report	hment of Exempted in column (e) of	ot Purposes Part XVI-A contribu	3	211,244
e	lations.)  ne Accomplis  income is report	hment of Exempted in column (e) of	ot Purposes Part XVI-A contribu	3	211,244
e	lations.)  ne Accomplis  income is report	hment of Exempted in column (e) of	ot Purposes Part XVI-A contribu	3	211,244
e	lations.)  ne Accomplis  income is report	hment of Exempted in column (e) of	ot Purposes Part XVI-A contribu	3	211,244
e	lations.)  ne Accomplis  income is report	hment of Exempted in column (e) of	ot Purposes Part XVI-A contribu	3	211,244
e	lations.)  ne Accomplis  income is report	hment of Exempted in column (e) of	ot Purposes Part XVI-A contribu	3	211,244
e	lations.)  ne Accomplis  income is report	hment of Exempted in column (e) of	ot Purposes Part XVI-A contribu	3	211,244
2 Subtotal. Add columns (b), (d), and (e).  3 Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calcu  Part XVI-B  Relationship of Activities to the second columns.  Explain below how each activity for which the accomplishment of the foundation's explain.	lations.)  ne Accomplis  income is report	hment of Exempted in column (e) of	ot Purposes Part XVI-A contribu	3	211,244
e	lations.)  ne Accomplis  income is report	hment of Exempted in column (e) of	ot Purposes Part XVI-A contribu	3	211,244

orm 9	90-PF (2												Pa	ge <b>13</b>
Part	XVII	Information Re Exempt Organia		ansf	ers To a	nd Transa	ctio	ns and R	elatio	nships With No	ncharit	able		
		anization directly or in- han section 501(c)(3)									ion 501		Yes	No
a Tra	nsfers fr	om the reporting foun	dation to a no	ncha	ritable exe	mpt organiza	tion (	of:			-			
(1)	Cash.										.	1a(1)		No
(2)	Other	assets									1	1a(2)		No
<b>b</b> Oth	er trans	actions:									l			
(1)	Sales	of assets to a nonchari	table exempt	orga	nization.							<b>1</b> b(1)		No
(2)	Purcha	ases of assets from a n	oncharitable (	exem	pt organiz	ation					[	1b(2)		No
(3)	Rental	of facilities, equipmen	it, or other as	sets.							[	<b>1</b> b(3)		No
(4)	Reimb	ursement arrangemen	ts								. [	<b>1</b> b(4)		No
(5)	Loans	or loan guarantees.										1b(5)		No
(6)	Perforn	nance of services or m	embership or	fundr	raising soli	citations					.	<b>1</b> b(6)		No
c Sha	aring of t	facilities, equipment, n	nailing lists, o	ther a	assets, or	paid employe	es.				. [	1c		No
of t	he good iny trans	er to any of the above s, other assets, or servantion or sharing arra  (b) Amount involved	vices given by ngement, sho	the i	reporting f column <b>(d</b>	oundation. If	the f f the	oundation goods, oth	receive er asse	d less than fair ma	rket value ived.	е	ngemen	nts
							_							
							+							
							+							
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							+							
des	cribed in	dation directly or indirent on section 501(c) (other mplete the following so	than section	,	,	•			_	_	′es 🔽	No No		
		(a) Name of organization	n		(b	) Type of organ	nizatio	n		(c) Description	n of relatio	nship		
C:	of my which	r penalties of perjury, knowledge and belief preparer has any kno	, it is true, co								ased on a	all infor	matio	n of
Sign Here		****				2020-06-22			****		return with th	e IRS di ie prepa		
	s	ignature of officer or to	rustee			Date		Tit	le		below (see in	str.) 🔽	Yes [	No
		Print/Type preparer's	name	Prepa	arer's Sign	ature		Date		Check if self-	PTIN			
Paid		DEBORAH EASTWO	DOD					2020-0	06-22	employed ▶ □		P00132	2605	
	arer Only	Firm's name ► KRO	NICK KALADA	BERI	DY & CO P	С		1		1	Firm's EI	IN ▶23	-26678	390
	-	Firm's address ▶ 19	0 LATHROP S	Т										
		KI	NGSTON, PA	1870	)4						Phone no	o. (570	) 283-	2727

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ADVENTURE CYCLING ASSOCIATION NONE PUBLIC UNRESTRICTED 41 150 E PINE STREET CHARITY MISSOULA, MT 59802

AFRICAN AMERICAN CHAMBER OF COMMERCE OF WESTERN PENNSYLVANIA 436 7TH AVE PITTSBURGH, PA 15219	NONE	PUBLIC CHARITY	UNRESTRICTED	150
ALZHEIMER'S ASSOCIATION 225 N MICHIGAN AVE FL 17	NONE	PUBLIC CHARITY	UNRESTRICTED	50

За

87,286

CHICAGO, IL 60601

Total .

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

or substantial contributor

Total .

	or substantial continuator			
a Paid during the year				
APPALACHAIN MOUNTAIN CLUB 5 JOY STREET	NONE	PUBLIC CHARITY	UNRESTRICTED	44

OSTON, MA 021081490				
PPALACHAIN TRAIL CONSERVANCY 99 WASHINGTON STREET IARPERS FERRY, WV 254250807	NONE	PUBLIC CHARITY	UNRESTRICTED	

APPALACHAIN TRAIL CONSERVANCY 799 WASHINGTON STREET HARPERS FERRY, WV 254250807	NONE	PUBLIC CHARITY	UNRESTRICTED	200
B'NAI B'RITH INTERNATIONAL	NONE	PUBLIC	UNRESTRICTED	103

HARPERS FERRY, WV 254250807		CHARITY		
B'NAI B'RITH INTERNATIONAL 2020 K STREET 7TH FLOOR WASHINGSTON, DC 20006	NONE	PUBLIC CHARITY	UNRESTRICTED	103

87,286

▶ 3a

TIARFERS TERRIT, WV 254250007				
B'NAI B'RITH INTERNATIONAL 2020 K STREET 7TH FLOOR WASHINGSTON, DC 20006	NONE	PUBLIC CHARITY	UNRESTRICTED	103

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

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
BARRINGTON STAGE COMPANY	NONE	PUBLIC	UNRESTRICTED	500

30 UNION STREET PITTSFIELD, MA 01201	NONE	CHARITY	UNRESTRICTED	500
BERKSHIRE COUNTRY DAY SCHOOL	NONE	PUBLIC	UNRESTRICTED	7,500

PITTSFIELD, MA 01201		CHARGIT		
BERKSHIRE COUNTRY DAY SCHOOL PO BOX 867 LENOX, MA 01240	NONE	PUBLIC CHARITY	UNRESTRICTED	7,500
BERKSHIRE FAMILY & INDIVIDUAL	NONE	PUBLIC	UNRESTRICTED	250

PO BOX 867 LENOX, MA 01240	NONE	CHARITY	ONNESTIMETED	7,300
BERKSHIRE FAMILY & INDIVIDUAL 771 CHURCH ST NORTH ADAMS, MA 01247	NONE	PUBLIC CHARITY	UNRESTRICTED	250

BERKSHIRE FAMILY & INDIVIDUAL NONE PUBLIC UNRESTRICTED 250 771 CHURCH ST NORTH ADAMS, MA 01247	LENOX, MA 01240				
	771 CHURCH ST	NONE		UNRESTRICTED	250

Total			▶ 3a	87,286	
771 CHURCH ST NORTH ADAMS, MA 01247		CHARITY			
DEKNOTIKE FAMILI & INDIVIDUAL	INONE		ONKESTRICIED		

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

BERKSHIRE GROWNPO BOX 983 GREAT BARRINGTON, MA 01230	NONE	PUBLIC CHARITY	UNRESTRICTED	250
BERKSHIRE MUSEUM39 SOUTH STREET PITTSFIELD, MA 01201	NONE	PUBLIC CHARITY	UNRESTRICTED	396
BERKSHIRE NATURAL RESOURCES	NONE	PUBLIC	UNRESTRICTED	500

BERKSHIRE MUSEUM39 SOUTH STREET PITTSFIELD, MA 01201	NONE	PUBLIC CHARITY	UNRESTRICTED	396
BERKSHIRE NATURAL RESOURCES COUNCIL 20 BANK ROW PITTSFIELD, MA 01201	NONE	PUBLIC CHARITY	UNRESTRICTED	500

				l
BERKSHIRE NATURAL RESOURCES COUNCIL 20 BANK ROW PITTSFIELD, MA 01201	NONE	PUBLIC CHARITY	UNRESTRICTED	500
Total	87,286			

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year 00

_ ,				
BERKSHIRE THEATER GROUP 111 SOUTH STREET PITTSFIELD, MA 01201	NONE	PUBLIC CHARITY	UNRESTRICTED	500
CO JEWISH FEDERATION OF THE	NONE	PUBLIC	UNRESTRICTED	8,000

<i>'</i>				
CO JEWISH FEDERATION OF THE BEACH COUNTY 1 HARVARD CIR 100 WEST PALM BEACH, FL 33409	NONE	PUBLIC CHARITY	UNRESTRICTED	8,0
CHILDREN'S HOSPITAL OF LOS	NONE	PUBLIC	UNRESTRICTED	

BEACH COUNTY 1 HARVARD CIR 100 WEST PALM BEACH, FL 33409		CHARITY		
CHILDREN'S HOSPITAL OF LOS ANGELES 4650 SUNSET BLVD	NONE	PUBLIC CHARITY	UNRESTRICTED	360

WEST PALM BEACH, FL 33409				
CHILDREN'S HOSPITAL OF LOS ANGELES 4650 SUNSET BLVD	NONE	PUBLIC CHARITY	UNRESTRICTED	360
LOS ANGELES CA 90027	1	l		1

CHILDREN'S HOSPITAL OF LOS ANGELES 4650 SUNSET BLVD LOS ANGELES, CA 90027	NONE	PUBLIC CHARITY	UNRESTRICTED	360
Total			▶ 3a	87,286

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CHILDREN'S SERVICE CENTER NONE UNRESTRICTED 300 PUBLIC 22F C EDANIZITM CEDEET CHADITY

WILKES BARRE, PA 18702		CHARITT		
CLARKS ART INSTITUTE225 SOUTH ST WILLIAMSTOWN, MA 01267	NONE	PUBLIC CHARITY	UNRESTRICTED	150
CLOSE ENCOUNTERS WITH MUSIC	NONE	PUBLIC	UNRESTRICTED	600

642 CASTLE STREET

GREAT BARRINGTON, MA 01230

CHARITY

87,286

■ 3a

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

Name and address (nome or business)	or substantial contributor			
a Paid during the year				
COMPREHENSIVE DEVELOPMENT INC 240 SECOND AVENUE	NONE	PUBLIC CHARITY	UNRESTRICTED	50

NEW YORK, NY 10013				
CYCLE FOR SURVIVAL 885 SECOND AVENUE 7TH FL NEW YORK, NY 10017	NONE	PUBLIC CHARITY	UNRESTRICTED	100

CYCLE FOR SURVIVAL 885 SECOND AVENUE 7TH FL NEW YORK, NY 10017	NONE	PUBLIC CHARITY	UNRESTRICTED	100
DIABETES RESEARCH FOUNDATION 200 SOUTH PARK ROAD STE 100 HOLLYWOOD, FL 33021	NONE	PUBLIC CHARITY	UNRESTRICTED	500

885 SECOND AVENUE 7TH FL NEW YORK, NY 10017		CHARITY		
DIABETES RESEARCH FOUNDATION 200 SOUTH PARK ROAD STE 100 HOLLYWOOD, FL 33021	NONE	PUBLIC CHARITY	UNRESTRICTED	500

Total .

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

a Paid during the year				
DISTINGUISHED DAUGHTERS OF PA 897 STEVENDALE DRIVE	NONE	PUBLIC CHARITY	UNRESTRICTED	1,000

897 STEVENDALE DRIVE PITTSBURGH, PA 15221		CHARITY		·
FAIRVIEW HOSPITAL29 LEWIS AVE GREAT BARRINGTON, MA 01230	NONE	PUBLIC CHARITY	UNRESTRICTED	10,000

FAIRVIEW HOSPITAL29 LEWIS AVE GREAT BARRINGTON, MA 01230	NONE	PUBLIC CHARITY	UNRESTRICTED	10,000
FINE ARTS FIESTAPO BOX 2053	NONE	PUBLIC	UNRESTRICTED	250

GREAT BARRINGTON, MA 01230		CHARITY		<u> </u>
FINE ARTS FIESTAPO BOX 2053 WILKESBARRE, PA 187032053	NONE	PUBLIC CHARITY	UNRESTRICTED	25

FINE ARTS FIESTAPO BOX 2053 WILKESBARRE, PA 187032053	NONE	PUBLIC CHARITY	UNRESTRICTED	250

Total			▶ 3a	87.286
VILKESBARRE, PA 187032053	NONE	CHARITY	OWESTRICIES	250

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

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
GIRLS INC120 WALL STREET	NONE	PUBLIC	UNRESTRICTED	500

NEW YORK, NY 10005	NONE	CHARITY	UNKESTRICTED	500
GLOBAL MINDS INITIATIVE 6101 PENN AVE	NONE	PUBLIC CHARITY	UNRESTRICTED	100

GLOBAL MINDS INITIATIVE 6101 PENN AVE PITTSBURGH, PA 15206	NONE	PUBLIC CHARITY	UNRESTRICTED	100
GREAT BARRINGTON HISTORICAL SOCIETY	NONE	PUBLIC CHARITY	UNRESTRICTED	150

PITTSBURGH, PA 15206				
GREAT BARRINGTON HISTORICAL SOCIETY 817 SOUTH MAIN STREET GREAT BARRINGTON, MA 01230	NONE	PUBLIC CHARITY	UNRESTRICTED	150

GREAT BARRINGTON HISTORICAL SOCIETY 817 SOUTH MAIN STREET GREAT BARRINGTON, MA 01230	NONE	PUBLIC CHARITY	UNRESTRICTED	150
Total			▶ 3a	87.286

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

Baid during the year

Total .

a Faid during the year				
HEBREW IMMIGRANT AID SOCIETY 2100 ARCH STREET 3RD FL PHILADELPHIA, PA 19103	NONE	PUBLIC CHARITY	UNRESTRICTED	500
HEADER OF CONTREDA BEDREHIDE	NONE	DUDLIC	LINDESTRICTED	2 102

PHILADELPHIA, PA 19103		CHARITT		
HEVREH OF SOUTHERN BERKSHIRE 270 STATE ROAD GREAT BARRINGTON, MA 01230	NONE	PUBLIC CHARITY	UNRESTRICTED	2,193

HEVREH OF SOUTHERN BERKSHIRE 270 STATE ROAD GREAT BARRINGTON, MA 01230	NONE	PUBLIC CHARITY	UNRESTRICTED	2,193
HILLEL800 EIGHTH STREET WASHINGSTON, DC 20037	NONE	PUBLIC CHARITY	UNRESTRICTED	500

GREAT BARRINGTON, MA 01230				
HILLEL800 EIGHTH STREET WASHINGSTON, DC 20037	NONE	PUBLIC CHARITY	UNRESTRICTED	500

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

a Paid during the year				
HOUSATONIC VALLEY ASSOCIATION 1383 PLEASANT STREETPO BOX251 SOUTH LEE, MA 01260	NONE	PUBLIC CHARITY	UNRESTRICTED	250

OUTH LEE, MA 01260		0111111		
WISH HOME OF EASTERN PA 01 VINE STREET RANTON PA 18510	NONE	PUBLIC CHARITY	UNRESTRICTED	

Total .

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

JEWISH HOME OF EASTERN PA 1101 VINE STREET SCRANTON, PA 18510	NONE	PUBLIC CHARITY	UNRESTRICTED	
LEAGUE OF WOMEN VOTERS OF PA-CEF	NONE	PUBLIC	UNRESTRICTED	

SCRANTON, PA 18510			
LEAGUE OF WOMEN VOTERS OF PA-CEF NONE 226 FORESTER STREET HARRISRING PA 17102	PUBLIC CHARITY	UNRESTRICTED	200

100

SCRANTON, FA 18310				
LEAGUE OF WOMEN VOTERS OF PA-CEF 226 FORESTER STREET HARRISBURG, PA 17102	NONE	PUBLIC CHARITY	UNRESTRICTED	200

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

a Paid during the year				
MAHAIWE PERFORMING ARTS CENTER PO BOX 690 GREAT BARRINGTON, MA 01230	NONE	PUBLIC CHARITY	UNRESTRICTED	15,640

GREAT BARRINGTON, MA 01230				
MASSACHUSETTS GENERAL HOSPITAL 55 FRUIT ST BOSTON, MA 02114	NONE	PUBLIC CHARITY	UNRESTRICTED	10

MASSACHUSETTS GENERAL HOSPITAL 55 FRUIT ST BOSTON, MA 02114	NONE	CHARITY	UNRESTRICTED	100
MEDICAL ONCOLOGY ASSOCIATES PRESCRIPTION ASSISTANCE FUND 382 PIERCE ST	NONE	PUBLIC CHARITY	UNRESTRICTED	125

BOSTON, MA 02114		CHARTT		
MEDICAL ONCOLOGY ASSOCIATES PRESCRIPTION ASSISTANCE FUND 382 PIERCE ST KINGSTON, PA 18704	NONE	PUBLIC CHARITY	UNRESTRICTED	125

MEDICAL ONCOLOGY ASSOCIATES PRESCRIPTION ASSISTANCE FUND 382 PIERCE ST KINGSTON, PA 18704	NONE	PUBLIC CHARITY	UNRESTRICTED	125
Total	87.286			

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

NATIONAL INSTITUTE OF REPRODUCTIVE HEALTH 470 PARK AVE SOUTH 7TH FLOOR NEW YORK, NY 10016	NONE	PUBLIC CHARITY	UNRESTRICTED	500
NATIONAL ORGANIZATION FOR WOMEN PO BOX 1848 MERRIFIELD, VA 22116	NONE	PUBLIC CHARITY	UNRESTRICTED	250

NEW YORK, NY 10016				
NATIONAL ORGANIZATION FOR WOMEN PO BOX 1848 MERRIFIELD, VA 22116	NONE	PUBLIC CHARITY	UNRESTRICTED	250
NATIONAL PARKS CONSERVATION ASSOCIATION 777 6TH ST NW SUITE 700 WASHINGSTON, DC 20001	NONE	PUBLIC CHARITY	UNRESTRICTED	100

Total .

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

Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
NEW ISRAEL FUND	NONE	PUBLIC	UNRESTRICTED	1 000

NEW ISRAEL FUND 330 SEVENTH AVE 11TH FLOOR NEW YORK, NY 10001	NONE	PUBLIC CHARITY	UNRESTRICTED	1,000
NEW YORK HISTORICAL SOCIETY	NONE	PUBLIC	UNRESTRICTED	200

NEW YORK, NY 10001		CHARITY		
NEW YORK HISTORICAL SOCIETY 170 CENTRAL PARK WEST NEW YORK, NY 10024	NONE	PUBLIC CHARITY	UNRESTRICTED	200
NORMAN ROCKWELL MUSEUM	NONE	PUBLIC	UNRESTRICTED	114

NEW YORK HISTORICAL SOCIETY 170 CENTRAL PARK WEST NEW YORK, NY 10024	NONE	PUBLIC CHARITY	UNRESTRICTED	200
NORMAN ROCKWELL MUSEUM PO BOX 308 ROUTE 183 STOCKBRIDGE, MA 01262	NONE	PUBLIC CHARITY	UNRESTRICTED	114

NEW YORK, NY 10024				
NORMAN ROCKWELL MUSEUM PO BOX 308 ROUTE 183 STOCKBRIDGE, MA 01262	NONE	PUBLIC CHARITY	UNRESTRICTED	114
Total			▶ 3a	87,286

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

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
OSTERHOUT FREE LIBRARY	NONE	PUBLIC	UNRESTRICTED	500

71 S FRANKLIN ST WILKES BARE, PA 18701	NONE	CHARITY	ONNESTIMETED	
PAN MASS CHALLENGE ANNIE WEISS	NONE	PUBLIC CHARITY	UNRESTRICTED	

PAN MASS CHALLENGE ANNIE WEISS 21 RITTENHOUSE ROAD WORCESTER, MA 01602	NONE	PUBLIC CHARITY	UNRESTRICTED	1
RACE TO ERASE MS	NONE	PUBLIC	UNRESTRICTED	1

WORCESTER, MA 01602		CHARITI		
RACE TO ERASE MS 206 FROST HOLLOW ROAD	NONE	PUBLIC CHARITY	UNRESTRICTED	100

•				
RACE TO ERASE MS 206 FROST HOLLOW ROAD EASTON, PA 18040	NONE	PUBLIC CHARITY	UNRESTRICTED	100
Total			▶ 3a	87,286

100

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

recipient

any foundation manager

Name and address (home or business)

408 WYOMING AVENUE KINGSTON, PA 18704

Total .

	or substantial contributor			
a Paid during the year				
RECANATI MILLER TRANSPLANTATION INSTITUTE 1 GUSTAVE LEVY PLACE NEW YORK, NY 10029	NONE	PUBLIC CHARITY	UNRESTRICTED	15,000
REFORM ISRAEL APPEALPO BOX 170305 MILWAUKEE, IL 532179962	NONE	PUBLIC CHARITY	UNRESTRICTED	500

CHARITY

▶ 3a

NEW YORK, NY 10029				
REFORM ISRAEL APPEALPO BOX 170305 MILWAUKEE, IL 532179962		PUBLIC CHARITY	UNRESTRICTED	500
TEMPLE B'NAI B'RITH	NONE	PUBLIC	UNRESTRICTED	300

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

l	Name and address (home or business)	or substantial contributor	recipient		
I	a Paid during the year				
Ī	TEMPLE ISRAEL	NONE	PUBLIC	UNRESTRICTED	1,250

239 SOUTH RIVER STREET WILKES BARRE, PA 18702	NONE	CHARITY	ONNESTRICTED	1,230
THE AMERICAN FRIENDS OF BATSHEVA 1201 BROADWAY SUITE 507 NEW YORK, NY 10001	NONE	PUBLIC CHARITY	UNRESTRICTED	350

Trierces Brance, in 10702				
THE AMERICAN FRIENDS OF BATSHEVA 1201 BROADWAY SUITE 507 NEW YORK, NY 10001	NONE	PUBLIC CHARITY	UNRESTRICTED	
THE JEWISH MUSEUM 1109 5TH AVENUE AT 92ND STREET	NONE	PUBLIC CHARITY	UNRESTRICTED	

	1201 BROADWAY SUITE 507 NEW YORK, NY 10001	NONE	CHARITY	UNKESTRICTED	3.
П	THE JEWISH MUSEUM 1109 5TH AVENUE AT 92ND STREET	NONE	PUBLIC CHARITY	UNRESTRICTED	50

	NEW YORK, NY 10001		Cristical		
П	THE JEWISH MUSEUM 1109 5TH AVENUE AT 92ND STREET NEW YORK, NY 10128	NONE	PUBLIC CHARITY	UNRESTRICTED	500

THE JEWISH MUSEUM 1109 5TH AVENUE AT 92ND STREET NEW YORK, NY 10128	NONE	PUBLIC CHARITY	UNRESTRICTED	500
Total			<b>&gt;</b> 3a	87,286

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

I	Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	
ı	- Detail desires the second				

a Paid during the year				
THE NATURE CONSERVANCY	NONE	PUBLIC	UNRESTRICTED	

ALBERT LEA, MN 56007		CHARITT		
THE TRUSTEES OF RESERVATIONS 200 HIGH STREET 4TH FLOOR	NONE	PUBLIC CHARITY	UNRESTRICTED	

Total .

<u>'</u>				
THE TRUSTEES OF RESERVATIONS 200 HIGH STREET 4TH FLOOR BOSTON, MA 02110	NONE	PUBLIC CHARITY	UNRESTRICTED	60
HIA FEDERATION OF NEW YORK	NONE	DUDLIC	LINDECTRICTED	10.010

250

200 HIGH STREET 4TH FLOOR BOSTON, MA 02110		CHARITY		
UJA-FEDERATION OF NEW YORK 130 E 59TH STREET SUITE 929A	NONE	PUBLIC CHARITY	UNRESTRICTED	10,010

BOSTON, MA 02110				
UJA-FEDERATION OF NEW YORK 130 E 59TH STREET SUITE 929A NEW YORK, NY 10022	NONE	PUBLIC CHARITY	UNRESTRICTED	10,010

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

,	or substantial contributor			
a Paid during the year				
UNION FOR REFORM JUDAISM 633 THIRD AVENUE 7TH FLOOR	NONE	PUBLIC CHARITY	UNRESTRICTED	100

NEW YORK, NY 10017		CHARITY		
UNIVERSITY OF SCRANTON 800 LINDEN ST SCRANTON, PA 18510	NONE	PUBLIC CHARITY	UNRESTRICTED	2,500

UNIVERSITY OF SCRANTON 800 LINDEN ST SCRANTON, PA 18510	NONE	PUBLIC CHARITY	UNRESTRICTED	2,500
US HOLOCAUST MEMORIAL MUSEUM PO BOX 7022	NONE	PUBLIC CHARITY	UNRESTRICTED	100

800 LINDEN ST SCRANTON, PA 18510		CHARITY		
US HOLOCAUST MEMORIAL MUSEUM PO BOX 7022 ALBERT LEA, MN 560078022	NONE	PUBLIC CHARITY	UNRESTRICTED	100

US HOLOCAUST MEMORIAL MUSEUM PO BOX 7022 ALBERT LEA, MN 560078022	NONE	PUBLIC CHARITY	UNRESTRICTED	100
Total			▶ 3a	87,286

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

Recipient

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

Recipient

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

WGBY-TV PBS44 HAMPDEN STREET	NONE	PUBLIC	UNRESTRICTED	150
SPRINGFIELD, MA 01103		CHARITY		
WILKES UNIVERSITY 111 EAST MARKET STREET	NONE	PUBLIC CHARITY	UNRESTRICTED	750

WILKES UNIVERSITY 111 EAST MARKET STREET WILKES BARRE, PA 187019988	NONE	PUBLIC CHARITY	UNRESTRICTED	750
WILLIAMSTOWN THEATRE FESTIVAL PO BOX 517 WILLIAMSTOWN, MA 01267	NONE	PUBLIC CHARITY	UNRESTRICTED	300

Total .

87,286

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

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
YUDICHAK FAMILY LIGHTHOUSE FUN	NONE	PUBLIC	UNRESTRICTED	150

<b>3</b> /			
DICHAK FAMILY LIGHTHOUSE FUN MAIN STREET 2ND FLOOR	NONE	PUBLIC CHARITY	UNRESTRICTED
ZEDNE DA 18700			

YUDICHAK FAMILY LIGHTHOUSE FUN 140 MAIN STREET 2ND FLOOR LUZERNE, PA 18709	NONE	PUBLIC CHARITY	UNRESTRICTED	
--	------	-------------------	--------------	--

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -			
TV 2010 Investments Cornerate Bands Schodule				

### TY 2019 Investments Corporate Bonds Schedule

Name: SHOVAL FOUNDATION

<b>EIN:</b> 23-3024646					
Investments Corporate Bonds Schedule					
Name of Bond	End of Year Book Value	End of Year Fair Market Value			
PRUDENTIAL FINANCIAL INC	215,000	215,000			
BANK OF AMERICA CORP	261,250	261,250			
CITIGROUP INC 6.3%	270,893	270,893			
JP MORGAN CHASE & CO	261,250	261,250			
NATIONWIDE FINL SVCS	232,000	232,000			
WESTERN UNION COMPANY	222,492	222,492			
CITIGROUP INC 5.9%	212,500	212,500			
GOLDMAN SACHS GROUP INC 5.3%	241,875	241,875			
KEYCORP 5%	159,396	159,396			
GENERAL ELECTRIC CO 5.0000%	146,919	146,919			
GENERAL MOTORS FIN CO 5.7500%	152,625	152,625			
FORD MOTOR CO	212,240	212,240			
SEMPRA ENERGY	79,710	79,710			

DLN: 93491197017960

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491197017960				
TY 2019 Investments Corporate Stock Schedule						

136,700

125,450

40,283

136,700

125,450

40,283

Name: SHOVAL FOUNDATION

**EIN:** 23-3024646

Investments Comparation Stock Schodule

AMERICAN INTERNATIONAL 5.85%

CAPITAL ONE FINANCIAL 5%

ICAHN ENTERPRISES LP

Investments Corporation Stock Schedule				
Name of Stock	End of Year Book Value	End of Year Fair Market Value		
214 SHS CIENA CORP	9,136	9,136		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491197017960		
TY 2019 Investments Government Obligations Schedule					
Name:	SHOVAL FOUN	IDATION			
EIN:	23-3024646				
US Government Securities - End of Year Book Value:		7,188			
US Government Securities - End of Year Fair Market Value:		7,188			
State & Local Government Securities - End of Year Book Value:		162,284			
State & Local Government Securities - End of Year Fair Market Value:		162,284			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491197017960
TY 2019 Other Expenses Schedule				
Name:	me: SHOVAL FOUNDATION			
EIN:	23-3024646			
Other Expenses Schedule				4
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK FEES	621	0		621

DLN: 93491197017960

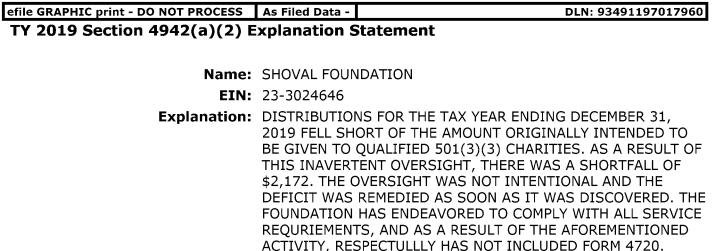
# Name: SHOVAL FOUNDATION

### **EIN:** 23-3024646

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Other Income Schedule					
Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income		
INCOME FROM PASSTHROUGH ENTITY		-1,206			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491197017960		
TY 2019 Other Increases Schedule					
Name:	SHOVAL FOUN	DATION			
EIN:	23-3024646				
Do	escription		Amount		
UNREALIZED GAIN ON INVESTMENTS			360,659		



efile GRAPHIC print - DO NOT	PROCESS	As Filed Data	-	DL	N: 93491197017960
TY 2019 Taxes Schedule					
Name: SHOVAL FOUNDATION					
<b>EIN:</b> 23-3024646					
Category	An	nount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAX		175	0		0