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2019

OMB No. 1545-0052

Form 990-PF

Department of the Treasury Internal Revenue Service

Return of Private Foundation

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

▶ Do not enter social security numbers on this form as it may be made public. ▶ 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 b	peginning 01-01-20	19 , aı	nd er	nding 12-31-	2019			
		Indation				A Employer identification number				
C/	O MID F	WEST FAMILY CHAR TRUST PENN BANK TRUST DEPARTMENT				27-6777707				
		I street (or P.O. box number if mail is not JTE 61 SOUTH	delivered to street address)	Room/suite		B Telephone number (see instructions)				
							5			
		, state or province, country, and ZIP or fo , PA 17901	oreign postal code			C If exemption	application is pendin	g, check here		
i Cł	neck al	l that apply: 🔲 Initial return	☐ Initial return of a	former public charity		D 1. Foreign or	ganizations, check he	ere		
		☐ Final return	Amended return				ganizations meeting			
		Address change	e 🔲 Name change			test, chec	k here and attach co	mputation 🕨 🔲		
C l	neck ty	pe of organization: 🗹 Section 50	1(c)(3) exempt private t	foundation			undation status was t n 507(b)(1)(A), chec			
<u></u>	Section	4947(a)(1) nonexempt charitable t	trust 🔲 Other taxable	e private foundation			. ,			
			Accounting method:	☑ Cash ☐ Accru	al		ation is in a 60-mont			
		rom Part II, col. (c), \$ 845,902	Other (specify)	 		under sectio	n 507(b)(1)(B), chec	ck here		
	,		Part I, column (d) must	be on cash basis.)						
Pa	rt I	Analysis of Revenue and E of amounts in columns (b), (c), and (d) equal the amounts in column (a) (see it) may not necessarily	(a) Revenue and expenses per books	(b)	Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)		
	1	Contributions, gifts, grants, etc., reschedule)	eceived (attach							
	2	Check ► ✓ if the foundation is no Sch. B	ot required to attach							
	3	Interest on savings and temporary	cash investments	1,263		1,263				
	4	Dividends and interest from securit	ties	21,101		21,101				
	5a	Gross rents								
	ь	Net rental income or (loss)								
KIE	6a	Net gain or (loss) from sale of asse	ets not on line 10	1,657						
Revenue	ь 7	Gross sales price for all assets on I Capital gain net income (from Part				1,657				
Ľ	8	Net short-term capital gain				-,				
	9	Income modifications								
	10a	Gross sales less returns and allowa	ances							
	ь	Less: Cost of goods sold								
	С	Gross profit or (loss) (attach sched	lule)							
	11	Other income (attach schedule)								
	12	Total. Add lines 1 through 11 .		24,021		24,021				
	13	Compensation of officers, directors	s, trustees, etc.	10,994						
	14	Other employee salaries and wage	s							
∧ th	15	Pension plans, employee benefits								
2	16a	Legal fees (attach schedule)								
Expenses	b	Accounting fees (attach schedule)		% J 505						
i) D	c	Other professional fees (attach sch	nedule)							
\tilde{r}	17	Interest								
Z Z	18	Taxes (attach schedule) (see instru	uctions)	739		259				
<u> </u>	19	Depreciation (attach schedule) and	d depletion							
and Administrative	20	Occupancy								
₹	21	Travel, conferences, and meetings								
Ē	22	Printing and publications								
<u>=</u>	23	Other expenses (attach schedule)								
Operaring	24	Total operating and administra	-							
ğ		Add lines 13 through 23		12,238		259		C		
د	25	Contributions, gifts, grants paid		37,275				37,275		
	26	Total expenses and disburseme 25	ents. Add lines 24 and	49,513		259		37,275		
	27	Subtract line 26 from line 12:								
	a	Excess of revenue over expense disbursements	es and	-25,492						
	ь	Net investment income (if negation	tive, enter -0-)	23,132		23,762				
	С	Adjusted net income (if negative	e, enter -0-)							
_					ь					

Forn	n 990-l	PF (2019)				Page 2
Pa	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year			of year
	_	should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Bo	ook Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	46,296		33,218	33,218
	2	Accounts receivable	40,290		33,216	33,216
	3	Less: allowance for doubtful accounts				
	4	Pledges receivable				
	4	Less: allowance for doubtful accounts				
	5					
	_	Grants receivable				
	6	· · · · · · · · · · · · · · · · · · · ·				
	_	disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule)				
		Less: allowance for doubtful accounts				
ets	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
۷	10a	Investments—U.S. and state government obligations (attach schedule)	201 500	n6.1	265 620	477.057
	b	Investments—corporate stock (attach schedule)	281,598		265,639	, , , , , , , , , , , , , , , , , , ,
	С	Investments—corporate bonds (attach schedule)	25,000	* 2	25,000	25,500
	11	Investments—land, buildings, and equipment: basis ▶				
		Less: accumulated depreciation (attach schedule) ▶				
	12	Investments—mortgage loans		ag 1		
	13	Investments—other (attach schedule)	283,330	* 3	283,330	308,945
	14	Land, buildings, and equipment: basis				
		Less: accumulated depreciation (attach schedule) ▶		1		
	15	Other assets (describe ►)		% 3	1,182	1,182
	16	Total assets (to be completed by all filers—see the				
		instructions. Also, see page 1, item I)	636,224		608,369	845,902
	17	Accounts payable and accrued expenses				
۱.	18	Grants payable				
ties	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
Lia	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe)				
	23	Total liabilities(add lines 17 through 22)			0	
Š		Foundations that follow FASB ASC 958, check here				
126		and complete lines 24, 25, 29 and 30.				
<u>a</u>	24	Net assets without donor restrictions				
ä	25	Net assets with donor restrictions				1
Fund Balances		Foundations that do not follow FASB ASC 958, check here				
		and complete lines 26 through 30.				
5 or	26	Capital stock, trust principal, or current funds				
Assets	27	Paid-in or capital surplus, or land, bldg., and equipment fund				
Ass	28	Retained earnings, accumulated income, endowment, or other funds	636,224		608,369	
Net /	29	Total net assets or fund balances (see instructions)	636,224		608,369	
Z	30	Total liabilities and net assets/fund balances (see instructions) .	636,224		608,369	
Pa	rt III	, , ,	•		-	
1		I net assets or fund balances at beginning of year—Part II, column (a), line	e 29 (must agree with	end-		
		ear figure reported on prior year's return)		. 1		636,224
2		r amount from Part I, line 27a			_	-25,492
3		er increases not included in line 2 (itemize)		3	<u> </u>	793
4		lines 1, 2, and 3		. 4		611,525
5		reases not included in line 2 (itemize)		. 6		3,156
6	TOLA	l net assets or fund balances at end of year (line 4 minus line 5)—Part II, o	Loidinii (D), line 29	. 6		608,369 Form 990-PF (2019)
					ı	OIIII 330-FF (2019)

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	pe the kind(s) of property sold (e.g., arehouse; or common stock, 200 shs		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	Gain o	h) r (loss)) minus (g)
a	,	' '		()	, (3)
b					
C					
d					
е					
Complete only for asset	s showing gain in column (h) and ow	ned by the foundation	on 12/31/69		I)
(i)	(j)		(k)		h) gain minus less than -0-) or
F.M.V. as of 12/31/69	Adjusted basis as of 12/31/69		s of col. (i) l. (j), if any		om col.(h))
a			(3))	, ,	
b					
C					
d					
e					
·	gain or (loss) as defined in sections art I, line 8, column (c) (see instructi	. ,	, ,	3	1,657
Part V Qualification	Under Section 4940(e) for Re	educed Tax on Net	Investment Inc	come	
(For optional use by domestic p	private foundations subject to the sec	ction 4940(a) tax on ne	et investment incom	e.)	
If section 4940(d)(2) applies, I	eave this part blank.			_	_
	ne section 4942 tax on the distributa ot qualify under section 4940(e). Do			? ✓ Ye	es Ll No
	nount in each column for each year;	see instructions before	making any entries		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab	ole-use assets	(d) Distribution rati (col. (b) divided by c	
2018					
2017					
2016 2015					
2014					
2 Total of line 1, column (d)		2		
·	o for the 5-year base period—divide				
,	ndation has been in existence if less oncharitable-use assets for 2019 fron	,	3		
5 Multiply line 4 by line 3			5		
	ent income (1% of Part I, line 27b)		6		
			7		
	ions from Part XII, line 4 ,			10/ 1	
If line 8 is equal to or gr instructions.	eater than line 7, check the box in Pa	art VI, line 1b, and com	npiete that part usin	g a 1% tax rate. Se	e tne Part VI

(b)

	st VIII - Statements Begand	lim-	Activities for Which	Form 4720 May Da	Doguired (continue	d)			age C
			Activities for Which	FORM 4720 May Be	Required (continued	u)		l v	
5a	During the year did the foundation p		•					Yes	No
	(1) Carry on propaganda, or otherw			, , , , , , , , , , , , , , , , , , , ,	☐ Yes	✓ N	lo		
	(2) Influence the outcome of any sp		•		_	_			
	on, directly or indirectly, any voter registration drive?						lo		
	• •	le a grant to an individual for travel, study, or other similar purposes? Yes No							
	• •	nt to an organization other than a charitable, etc., organization described 45(d)(4)(A)? See instructions					.		
		ovide for any purpose other than religious, charitable, scientific, literary, or					' 0		
	educational purposes, or for the prevention of cruelty to children or animals?						lo		
b	b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in								
						5b			
	Organizations relying on a current notice regarding disaster assistance check here								
С	If the answer is "Yes" to question 5a			•					
	tax because it maintained expenditu		· · · · · ·		· · 🗌 Yes	\square N	lo		
	If "Yes," attach the statement requi	red b	y Regulations section 53.	4945-5(d).					
6a	Did the foundation, during the year,	rece	ive any funds, directly or	indirectly, to pay premiu	ims on				
	a personal benefit contract?				· 🗌 Yes	✓ N	lo		
b	Did the foundation, during the year,	pay	premiums, directly or inc	lirectly, on a personal be	nefit contract?	•	6b		No
	If "Yes" to 6b, file Form 8870.								
7a	At any time during the tax year, was				∟ Yes	✓ N			
b	If "Yes", did the foundation receive		•			•	7b		
8	Is the foundation subject to the sect		,		in remuneration or				
	excess parachute payment during th	ie ye	ar?		· · 🗌 Yes	✓ N	lo 📖		
Dai	Information About C	Offic	ers, Directors, Trust	tees, Foundation Ma	nagers, Highly Paid	d Emp	ployees,	,	
Fa	and Contractors								
1	List all officers, directors, trustee	es, fo	oundation managers ar	d their compensation.	See instructions				
	(-) News and address	(b) Title, and average	(c) Compensation (If	(d) Contributions to		(e) Exper	ise acc	ount,
	(a) Name and address		hours per week devoted to position	not paid, enter -0-)	employee benefit plans deferred compensation	and J	other a		
MID F	ENN BANK TRUST DEPARTMENT	CO-T	RUSTEE	8,258	acidirea companication	0			0
1504	ROUTE 61 SOUTH	5.00		,,,,,,					_
	SVILLE, PA 17901								
	S C BOHORAD	CO-T 1.00	RUSTEE	2,736	5	이			0
	OX 1280 SVILLE, PA 17901	1.00							
2	Compensation of five highest-pa	id en	nployees (other than t	hose included on line 1	.—see instructions). If	f none	e, enter "	NONE	."
	· ·		T -		(d) Contributions to				
(a)	Name and address of each employee	paid	(b) Title, and average hours per week	(c) Compensation	employee benefit		e) Expen		
	more than \$50,000		devoted to position	(5) 55	plans and deferred compensation		other all	owanc	es
NON					compensation				
11011	-								
T	I mumahan af akhan amalawa a a di	45	0.000						
lota	I number of other employees paid over	er \$5	0,000		<u> </u>		F 00	0 55	(2010)
							Form 99	ひーピト り	2019

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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 service	ces (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		
Total 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 rel organizations and other beneficiaries served, conferences convened, research papers produ	evant statistical information such as the numbe uced, etc.	r of Expenses
1	,	
2		_
3		
4		
Part IX-B Summary of Program-Related Investments (see	instructions)	
Describe the two largest program-related investments made by the foundation during t		Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		•
Iotal. Add lines 1 through 3	 	Form 900 PE (2010)

2a |

2b

40.979

475

40.504

40.504

40.504

37,275

37,275

37,275

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2c

3

4

5

6

7

1a

1b

2

За 3h

4

5

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

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

Tax on investment income for 2019 from Part VI, line 5.

Income tax for 2019. (This does not include the tax from Part VI.). . .

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

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

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1

2a

3

4 5

6

1

2

3

4

5

b

Part XII

Part XIII Undistributed Income (see instructions)

Form **990-PF** (2019)

Page 9

		(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from Part XI, line 7	,			40,504
2	Undistributed income, if any, as of the end of 2019:				
а	Enter amount for 2018 only				
b	Total for prior years: 20, 20				
3	Excess distributions carryover, if any, to 2019:				
а	From 2014				
b	From 2015 2,969				
С	From 2016 1,033				
d	From 2017				
е	From 2018				
f	Total of lines 3a through e	6,647			
4	Qualifying distributions for 2019 from Part				
	XII, line 4: ▶ \$37,275				
а	Applied to 2018, but not more than line 2a				
b	Applied to undistributed income of prior years (Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2019 distributable amount				37,275
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2019.	3,229			3,229
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	3,418			
b	Prior years' undistributed income. Subtract				

lied to 2019 distributable amount				37,275
naining amount distributed out of corpus				
ess distributions carryover applied to 2019.	3,229			3,229
an amount appears in column (d), the same amount must be shown in column (a).)				
er the net total of each column as dicated below:				
ous. Add lines 3f, 4c, and 4e. Subtract line 5	3,418			
r years' undistributed income. Subtract 4b from line 2b				
	naining amount distributed out of corpus ess distributions carryover applied to 2019. In amount appears in column (d), the same amount must be shown in column (a).) er the net total of each column as dicated below: bus. Add lines 3f, 4c, and 4e. Subtract line 5 r years' undistributed income. Subtract	naining amount distributed out of corpus ess distributions carryover applied to 2019. 3,229 en amount appears in column (d), the same amount must be shown in column (a).) er the net total of each column as dicated below: ous. Add lines 3f, 4c, and 4e. Subtract line 5 r years' undistributed income. Subtract	naining amount distributed out of corpus ess distributions carryover applied to 2019. In amount appears in column (d), the same amount must be shown in column (a).) er the net total of each column as dicated below: bus. Add lines 3f, 4c, and 4e. Subtract line 5 r years' undistributed income. Subtract	naining amount distributed out of corpus ess distributions carryover applied to 2019. en amount appears in column (d), the same amount must be shown in column (a).) er the net total of each column as dicated below: ous. Add lines 3f, 4c, and 4e. Subtract line 5 r years' undistributed income. Subtract

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

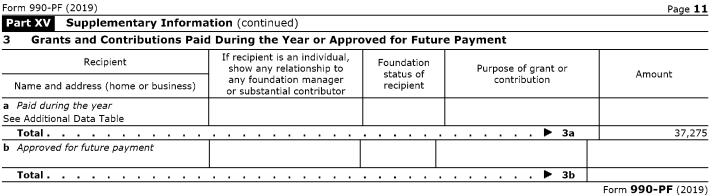
e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) 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. 3,418 Subtract lines 7 and 8 from line 6a . .

10 Analysis of line 9: 583 a Excess from 2015. 1,033 **b** Excess from 2016. .

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	art XIV Private Operating Found	ations (see instr	uctions and Part \	VII-A, question 9)		
1a	If the foundation has received a ruling or det foundation, and the ruling is effective for 20					
b	Check box to indicate whether the organizati	on is a private oper	ating foundation des	scribed in section \Box	│ 4942(j)(3) or □] 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) iotai
	year listed					
b	85% of line 2a					
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test—enter:					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3					
	of minimum investment return shown in Part X, line 6 for each year listed.					
c	"Support" alternative test—enter:					
	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt organizations as provided in					
	section $4942(j)(3)(B)(iii)$.					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
	Supplementary Information	(Complete this	part only if the	foundation had s	\$5,000 or more	in
	assets at any time during th		ructions.)			
1 a	Information Regarding Foundation Mana List any managers of the foundation who hav before the close of any tax year (but only if	e contributed more				n
b	List any managers of the foundation who own					
	ownership of a partnership or other entity) o					
2	Information Regarding Contribution, Gra	ant, Gift, Loan, Sc	holarship, etc., Pr	ograms:		
	Check here $ ightharpoonup \square$ if the foundation only mak					
	unsolicited requests for funds. If the foundar			uals or organizations	under	
	other conditions, complete items 2a, b, c, ar	d d. See instruction	15			
а	The name, address, and telephone number of	or e-mail address of	the person to whon	n applications should	be addressed:	
	MID PENN BANK TRUST DEPARTMENT					
	1504 ROUTE 61 SOUTH POTTSVILLE, PA 17901					
_	(570) 516-8325					
	The form in which applications should be sub	omitted and informa	tion and materials t	hey should include:		
	LETTER FORM, INDICATING THE PURPOSE F					
С	Any submission deadlines:					
	N/A					
d	Any restrictions or limitations on awards, such factors:	ch as by geographic	al areas, charitable	fields, kinds of institu	utions, or other	
	N/A					



nter gross amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
1 Program service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions.)
a					
b					
d					
e					
f					
g Fees and contracts from government agencies					
Membership dues and assessments Interest on savings and temporary cash investments					1 76
Dividends and interest from securities					1,26 21,10
Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
Other investment income					
Gain or (loss) from sales of assets other than					
inventory					1,65
Net income or (loss) from special events:					
Gross profit or (loss) from sales of inventory Other revenue: a					
b					
с					
d					
e					
Subtotal. Add columns (b), (d), and (e).					· · · · · · · · · · · · · · · · · · ·
Total. Add line 12, columns (b), (d), and (e)	lations.)		13	3	· · · · · · · · · · · · · · · · · · ·
Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcu	lations.)			3	· · · · · · · · · · · · · · · · · · ·
Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculart XVI-B Relationship of Activities to the	lations.) ne Accomplisi income is report	hment of Exem ted in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	24,02
Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the second	lations.) ne Accomplisi income is report	hment of Exem ted in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	24,02
Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the second	lations.) ne Accomplisi income is report	hment of Exem ted in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	24,02
Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the ne No. Explain below how each activity for which the accomplishment of the foundation's explain below the accomplishment of the foundation's explain the foundation of the	lations.) ne Accomplisi income is report	hment of Exem ted in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	24,02
Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the Relationship of Activity for which the accomplishment of the foundation's expenses.	lations.) ne Accomplisi income is report	hment of Exem ted in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	24,02
Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the Relationship of Activity for which the accomplishment of the foundation's expenses.	lations.) ne Accomplisi income is report	hment of Exem ted in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	24,02
Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the Relationship of Activity for which the accomplishment of the foundation's expenses.	lations.) ne Accomplisi income is report	hment of Exem ted in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	24,02
Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculant XVI-3 Relationship of Activities to the second section of the section of the second section of the section of the second section of the section of the second section of the	lations.) ne Accomplisi income is report	hment of Exem ted in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	24,02
Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculant XVI-3 Relationship of Activities to the second section of the section of the second section of the section of the second section of the section of the second section of the	lations.) ne Accomplisi income is report	hment of Exem ted in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	24,02
Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the Relationship of Activity for which the accomplishment of the foundation's expenses.	lations.) ne Accomplisi income is report	hment of Exem ted in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	24,02
Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculart XVI-B Relationship of Activities to the No. Explain below how each activity for which the accomplishment of the foundation's explain below the second section of the foundation of the foundat	lations.) ne Accomplisi income is report	hment of Exem ted in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	24,02
Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the Relationship of Activity for which the accomplishment of the foundation's expenses.	lations.) ne Accomplisi income is report	hment of Exem ted in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	24,02
Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the ne No. Explain below how each activity for which the accomplishment of the foundation's explain below the accomplishment of the foundation's explain the foundation of the	lations.) ne Accomplisi income is report	hment of Exem ted in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	24,02
Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the second secon	lations.) ne Accomplisi income is report	hment of Exem ted in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	24,02
Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the ne No. Explain below how each activity for which the accomplishment of the foundation's explain below the accomplishment of the foundation's explain the foundation of the	lations.) ne Accomplisi income is report	hment of Exem ted in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	24,02
Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the ne No. Explain below how each activity for which the accomplishment of the foundation's explain below the accomplishment of the foundation's explain the foundation of the	lations.) ne Accomplisi income is report	hment of Exem ted in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	24,02
Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the ne No. Explain below how each activity for which the accomplishment of the foundation's explain below the accomplishment of the foundation's explain the foundation of the	lations.) ne Accomplisi income is report	hment of Exem ted in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	24,02
Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the ne No. Explain below how each activity for which the accomplishment of the foundation's explain below the accomplishment of the foundation's explain the foundation of the	lations.) ne Accomplisi income is report	hment of Exem ted in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	24,02
Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the Relationship of Activity for which the accomplishment of the foundation's expenses.	lations.) ne Accomplisi income is report	hment of Exem ted in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	24,02
Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the second	lations.) ne Accomplisi income is report	hment of Exem ted in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	24,02
Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the ne No. Explain below how each activity for which the accomplishment of the foundation's explain below the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the foundation of the found	lations.) ne Accomplisi income is report	hment of Exem ted in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	24,02
ine No. Explain below how each activity for which the accomplishment of the foundation's explain the accomplishment of the foundation's explain the accomplishment of the foundation of the foun	lations.) ne Accomplisi income is report	hment of Exem ted in column (e) o	pt Purposes f Part XVI-A contribu	ted importantly to	24,021

Fo	rm 990-PF	(2019)				Pa	ge 13
	Part XVI	Information Re Exempt Organi		ions and Relationships With Nonchari	table		
1			directly engage in any of the following with a organizations) or in section 527, relating to	any other organization described in section 501 political organizations?		Yes	No
a	Transfer	s from the reporting foun	dation to a noncharitable exempt organization	on of:			
	(1) Cas	h			1a(1)		No
					1a(2)		No
Ŀ	Other tra	ansactions:					
	(1) Sal-	es of assets to a nonchari	itable exempt organization		1b(1)		No
	(2) Pur	chases of assets from a n	noncharitable exempt organization		1b(2)		No
	(3) Rer	ital of facilities, equipmer	nt, or other assets		1b(3)		No
	(4) Rei	mbursement arrangemen	ts		1b(4)		No
	(5) Loa	ns or loan guarantees.			1b(5)		No
	(6) Perf	ormance of services or m	embership or fundraising solicitations		1b(6)		No
c	Sharing	of facilities, equipment, n	nailing lists, other assets, or paid employees		1c		No
c	of the go	oods, other assets, or ser		olumn (b) should always show the fair market be foundation received less than fair market valu he goods, other assets, or services received.			
(a) Line No.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sha	ıring arra	ngemer	its
_							
_							
_							
_							
_							
_							
_							
_							

2a Is the fo	oundation directly or indire	ectly affiliated with	, or related to, one or mo	e tax-exem	ot organizations
describe	ed in section 501(c) (other	r than section 501((c)(3)) or in section 527?		□ Yes ☑ No
b If "Yes,"	complete the following s	chedule.			
	(a) Name of organization	on	(b) Type of organiza	ntion	(c) Description of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best

of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign May the IRS discuss this 2020-05-27 return Here with the preparer shown Signature of officer or trustee Title Date (see instr.) 🗹 Yes 🗆 No Print/Type preparer's name Preparer's Signature PTIN Date

Paid **Preparer Use Only**

Firm's address ▶

THOMAS J CAMPION JR Firm's name ▶ MARSHALL BOHORAD THORNBURG PRICE&CAMPION

1940 W NORWEGIAN ST PO BOX 1280

POTTSVILLE, PA 179017280

2020-05-27

Check if selfemployed ▶ 🔲

Phone no. (570) 622-1811

Firm's EIN ▶23-2039016

P00027851

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)

Name and address (nome or business)	or substantial contributor	·		
a Paid during the year				
AVENUES FOUNDATION2 PARK STREET	NONE	501(C)(3)	PUBLIC CHARITY	1,920

POTTSVILLE, PA 17901	NONE	301(C)(3)	POBLIC CHARITT	1,920
BLUE MOUNTAIN YOUTH FOOTBALL ASSOC	NONE	501(C)(3)	COMMUNITY SUPPORT	3,000

BLUE MOUNTAIN YOUTH FOOTBALL ASSOC 103 GLENWORTH ROAD POTTSVILLE, PA 17901	NONE	501(C)(3)	COMMUNITY SUPPORT	3,000
CONSERVANCY OF SOUTHWEST	NONE	501(C)(3)	EDUCATIONAL	50

103 GLENWORTH ROAD POTTSVILLE, PA 17901				
CONSERVANCY OF SOUTHWEST FLORIDA	NONE	501(C)(3)	EDUCATIONAL	50

POTTSVILLE, PA 17901				
CONSERVANCY OF SOUTHWEST FLORIDA 1495 SMITH PRESERVE WAY	NONE	501(C)(3)	EDUCATIONAL	50

POTISVILLE, PA 1/901				
CONSERVANCY OF SOUTHWEST FLORIDA 1495 SMITH PRESERVE WAY NAPLES, FL 34102	NONE	501(C)(3)	EDUCATIONAL	50

FLORIDA 1495 SMITH PRESERVE WAY NAPLES, FL 34102	NONE	301(0)(3)	EDUCATIONAL	3
Total			▶ 3a	37,275

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

	or substantial contributor			
a Paid during the year				
DOCTORS WITHOUT BORDERS USA	NONE	501(C)(3)	MEDICAL	100

HAGERSTOWN, MD 21741				
EEDING AMERICAPO BOX 96749	NONE	501(C)(3)	PUBLIC CHARITY	

or substantial contributor

	HAGERSTOWN, MD 21/41				
	FEEDING AMERICAPO BOX 96749 WASHINGTON, DC 20077	NONE	501(C)(3)	PUBLIC CHARITY	
1					

FEEDING AMERICAPO BOX 96749 WASHINGTON, DC 20077	NONE	501(C)(3)	PUBLIC CHARITY	100
FINCAPO BOX 98048	NONE	501(C)(3)	PUBLIC CHARITY	100

WASHINGTON, DC 20077				
FINCAPO BOX 98048 WASHINGTON, DC 20077	NONE	501(C)(3)	PUBLIC CHARITY	100

FINCAPO BOX 98048 WASHINGTON, DC 20077	NONE	501(C)(3)	PUBLIC CHARITY	100
With the toll, be 20077				

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

FREEDOM FROM HUNGER 1644 DAVINCI COURT DAVIS, CA 95617	NONE	501(C)(3)	CHARITY	100
a Paid during the year				

DAVIS, CA 95617				
GUTTMACHER INSTITUTE L25 MAIDEN LANE 7TH FL NEW YORK, NY 100384723	NONE	501(C)(3)	EDUCATIONAL	

Total . .

125 MAIDEN LANE 7TH FL NEW YORK, NY 100384723	NONE	501(C)(3)	EDUCATIONAL	50
HABITAT FOR HUMANITYPO BOX 1729	NONE	501(C)(3)	CHARITY	200

125 MAIDEN LANE 7TH FL NEW YORK, NY 100384723				
HABITAT FOR HUMANITYPO BOX 1729 AMERICUS, GA 31709	NONE	501(C)(3)	CHARITY	200

▶ 3a

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

	or substantial continuation			
a Paid during the year				
HAMBURG AREA MUSIC ASSOCIATION 701 WINDSOR STREET	NONE	501(C)(3)	EDUCATIONAL	4,500

HAMBURG, PA 19526				
HILLSIDE SPCA51 SPCA ROAD	NONE	501(C)(3)	ANIMAL SHELTER	

HILLSIDE SPCA51 SPCA ROAD POTTSVILLE, PA 17901	NONE	501(C)(3)	ANIMAL SHELTER	1,440
HUMAN PIGHTS WATCHPO BOY 4803	NONE	501(C)(3)	EDUCATIONAL	200

HILLSIDE SPCA51 SPCA ROAD POTTSVILLE, PA 17901	NONE	501(C)(3)	ANIMAL SHELTER	1,440
HUMAN RIGHTS WATCHPO BOX 4803	NONE	501(C)(3)	EDUCATIONAL	200

POTTSVILLE, PA 17901				
HUMAN RIGHTS WATCHPO BOX 4803 TOMS RIVER, NJ 08754	NONE	501(C)(3)	EDUCATIONAL	200

HUMAN RIGHTS WATCHPO BOX 4803 TOMS RIVER, NJ 08754	NONE	501(C)(3)	EDUCATIONAL	
				<i>i</i>

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				
HUMANE FIRE CO NO 1 OF POTTSVILLE 200 HUMANE AVENUE	NONE	FIRE COMPANY	COMMUNITY SUPPORT	500

POTISVILLE, PA 1/901				
IMMOKALEE HOUSING & FAMILY SERVICES 2449 SANDERS PINES CIRCLE IMMOKALEE FL 34142	NONE	501(C)(3)	EDUCATIONAL	50

SERVICES 2449 SANDERS PINES CIRCLE IMMOKALEE, FL 34142	NONE	301(0)(3)	EDUCATIONAL	30
INTERNATIONAL RESCUE COMMITTEE	NONE	501(C)(3)	CHARITY	100

IMMOKALEE, FL 34142				
INTERNATIONAL RESCUE COMMITTEE PO BOX 6068	NONE	501(C)(3)	CHARITY	100

37,275

MMOKALEE, FL 34142				
NTERNATIONAL RESCUE COMMITTEE PO BOX 6068 ALBERT LEA, MN 56007	NONE	501(C)(3)	CHARITY	100

ALBERT LEA, MN 56007	NTERNATIONAL RESCUE COMMITTEE O BOX 6068 LBERT LEA, MN 56007	NONE	501(C)(3)	CHARITY	
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Total .

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

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
LEAGUE OF WOMEN VOTERS EDUCATION FD	NONE	501(C)(3)	EDUCATIONAL	1,500

1730 H STREET NW WASHINGTON, DC 200364508				
NORTHEAST PA MAN & EMP COUNCIL ONE NORWEGIAN PLZ2ND FL POTTSVILLE, PA 17901	NONE	501(C)(3)	EDUCATIONAL	5,000

			1	
NORTHEAST PA MAN & EMP COUNCIL ONE NORWEGIAN PLZ2ND FL POTTSVILLE, PA 17901	NONE	501(C)(3)	EDUCATIONAL	5,000
OXFAM AMERICA226 CAUSEWAY ST	NONE	501(C)(3)	PUBLIC CHARITY	100

ONE NORWEGIAN PLZ2ND FL POTTSVILLE, PA 17901		301(0)(3)		3,000
OXFAM AMERICA226 CAUSEWAY ST BOSTON, MA 02114	NONE	501(C)(3)	PUBLIC CHARITY	100

POTTSVILLE, PA 17901				
OXFAM AMERICA226 CAUSEWAY ST BOSTON, MA 02114	NONE	501(C)(3)	PUBLIC CHARITY	100

Total .

37,275

▶ 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 business) or substantial contributor

a Paid during the year				
PLANNED PARENTHOOD FED OF AMERICA 434 W 33RD STREET NEW YORK, NY 10001	NONE	501(C)(3)	EDUCATIONAL	3,000

434 W 33RD STREET NEW YORK, NY 10001				
SCHUYLKILL CHAMBER FOUNDATION 1 PROGRESS CIRCLE STE 201 POTTSVILLE, PA 17901	NONE	501(C)(3)	PUBLIC SUPPORT	8,915
	i e		·	

SCHUYLKILL CHAMBER FOUNDATION 1 PROGRESS CIRCLE STE 201 POTTSVILLE, PA 17901	NONE	501(C)(3)	PUBLIC SUPPORT	8,915
SCHUYLKILL COUNTY'S VISION 11 E MAIN ST	NONE	501(C)(3)	CHARITY	1,000

POTTSVILLE, PA 17901				
SCHUYLKILL COUNTY'S VISION 11 E MAIN ST SCHUYLKILL HAVEN, PA 17972	NONE	501(C)(3)	CHARITY	1,000

SCHUYLKILL COUNTY'S VISION 11 E MAIN ST SCHUYLKILL HAVEN, PA 17972	NONE	501(C)(3)	CHARITY	1,0

Total		▶ 3a	27 275
11 E MAIN ST SCHUYLKILL HAVEN, PA 17972			

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				
SOUTHERN POVERTY LAW CENTER 400 WASHINGTON AVENUE	NONE	501(C)(3)	CHARITY	100

MONTGOMERY, AL 36177				
ST JOSEPH CENTER FOR SPECIAL LEARNING 2075 W NORWEGIAN STREET POTTSVILLE, PA 17901	NONE	SCHOOL	EDUCATION	5,000

2075 W NORWEGIAN STREET POTTSVILLE, PA 17901				
USA FOR UNHCRPO BOX 97114	NONE	501(C)(3)	CHARITY	100

·				
JSA FOR UNHCRPO BOX 97114 NASHINGTON, DC 20077	NONE	501(C)(3)	CHARITY	10

Total .

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

Name and address (nome or business)	or substantial contributor			
a Paid during the year				
WGCU10501 FGCU BLVD SOUTH FORT MYERS, FL 339656565	NONE	501(C)(3)	EDUCATIONAL	50

recipient

37,275

any foundation manager

Name and address (home or business)

Total.

WOMEN FOR WOMEN INTERNATIONAL PO BOX 9224	NONE	501(C)(3)	EDUCATIONAL	100
CENTRAL SLIP, NY 11722				

efile GRAPHIC print - DO NOT P	ROCESS	As Filed D	ata -			DLN: 93491150009040
TY 2019 Accounting Fe	es Scho	edule				
	Name:	THOMAS	J WES	T FAMILY CH	IAR TRUST	
		C/O MID	PENN E	BANK TRUST	DEPARTMENT	
	EIN:	27-67777	707			
Category	Amo	ount		nvestment ncome	Adjusted Net Income	Disbursements for Charitable
						Purposes
TAX PREPARATION FEE		505				

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491150009040	<u> </u>
TY 2019 Investments Corporat	e Bonds Sche	edule	
Name: ¬	THOMAS J WEST	FAMILY CHAR TRUST	

25,500

25,000

C/O MID PENN BANK TRUST DEPARTMENT **EIN:** 27-6777707

CITIBANK NA STEP 8/29/18 3.3%

Investments Corporate Bonds Schedule				
Name of Bond	End of Year Book Value	End of Year Fair Market Value		

TY 2019 Investments Corporate Stock Schedule

Name: THOMAS J WEST FAMILY CHAR TRUST

C/O MID PENN BANK TRUST DEPARTMENT

EIN: 27-6777707

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
ABBVIE INC.	2,824	9,739
AFLAC INC.	3,769	8,464
ALTRIA GROUP INC.	2,795	6,239
AMGEN INC.	8,137	12,054
APPLE INC.	11,395	29,365
AT&T INC.	4,454	6,448
CHEVRON CORP.	5,188	8,435
CHUBB LTD.	4,332	6,071
CISCO SYS INC.	5,279	8,872
CORNING INC.	6,984	8,733
CSX CORP	6,463	12,663
CUMMINS INC.	7,365	8,948
EMERSON ELECTRIC CO.	4,661	7,626
FORD MOTOR CO.	6,252	3,720
FRANKLIN SMALL CAP GROWTH FUND ADV	5,823	7,056
GENERAL DYNAMICS CORP.	7,046	8,818
HOME DEPOT INC.	1,807	14,195
HOST HOTELS & RESORTS INC.	7,254	5,565
INTEL CORP.	3,891	13,167
J P MORGAN CHASE & CO.	6,945	15,334
JOHNSON & JOHNSON	4,288	10,940
ELI LILLY & CO.	3,706	14,457
LYONDELLBASELL INDUSTRIES N SHS - A	6,485	7,558
MCDONALDS CORP.	5,117	13,833
MICROSOFT CORP.	3,995	26,809
NEWELL BRANDS INC.		
NEXTERA ENERGY INC.	3,487	15,740
NORFOLK SOUTHERN CORP.	3,218	11,648
PEPSICO INC.	4,490	9,567
PPG INDUSTRIES INC.	1,971	8,009

Name of Stock

T ROWE PRICE MID CAP GWTH FD

WALGREENS BOOTS ALLIANCE INC.

UNITED TECHNOLOGIES CORP.

VERIZON COMMUNICATIONS

VALERO ENERGY CORP.

WAL MART STORES INC.

Investments Corporation Stock Schedule

PPL CORP.	18,847	
PROCTER & GAMBLE CO.	4,169	
QUALCOMM INC.	3,588	
ROYAL DUTCH SHELL PLC	6,377	
SEAGATE TECHNOLOGY	8,179	
SPDR FINANCIAL SELECT SECTOR	8,155	
TARGET CORP.	2,558	
TEVA PHARMACEUTICAL INDS LTD	7,445	
TRAVELERS COMPANIES INC.	6,972	
T ROWE PRICE INTL DISCOVERY I	8,081	

End of Year Book

Value

14,078

3,580

7,515

4,453

6,075

6,146

End of Year Fair

Market Value

25,116

8,743

8,823 7,078

7,140

9,234

6,411

1,274

8,902 10,670

19,062

8,237

14,048

9,210

8,319

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TY 2019 Investments - Other Schedule

Name: THOMAS J WEST FAMILY CHAR TRUST

C/O MID PENN BANK TRUST DEPARTMENT

DIN. 02/01/1500000/

EIN: 27-6777707

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Investments Other Schedule 2			
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
FEDERATED INTL LEADERS INST	AT COST	31,875	35,213
FEDERATED INTMD CORP BD FD	AT COST	31,245	31,962
FEDERATED ULTRA SHORT BD	AT COST	10,066	10,166
FIDELITY SPARTAN INTMD TREAS	AT COST	30,058	30,709
OPPENHEIMER DEVELOPING MKTS CI Y	AT COST	14,388	18,616
VANGUARD I/T BOND INDEX ADM	AT COST	109	114
VANGUARD I/T INV GRADE ADM	AT COST	38,877	37,998
VANGUARD S/T BOND INDEX ADM	AT COST	85,551	87,988
VANGUARD MID-CAP VALUE INDEX	AT COST	25,786	35,234
VANGUARD SMALL-CAP VALUE INDEX	AT COST	15.375	20.945

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TY 2019 Other Assets Schedule		
11 2019 Other Assets Scheduk	3	

Name: THOMAS J WEST FAMILY CHAR TRUST

C/O MID PENN BANK TRUST DEPARTMENT

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Other	Assets	Schedu

ACCRUED INTEREST

Description		Beginning of Year -	End of Year -
Other Assets Schedule			
	EIN: 27-6777707	•	

1,182

End of Year - Fair

1,182

Book Value

Value

End of Year - Book

Market Value

DI N. 02/01/1500000/0

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491150009040
TY 2019 Other Decreases Sch	edule		
Name:	THOMAS J WE	ST FAMILY CHAR TRUST	
	C/O MID PENI	N BANK TRUST DEPARTMENT	
EIN:	27-6777707		
D ₍	escription		Amount
LOSS ON SALE OF 700.000 SHS NEWELL	L BRANDS INC		3,156

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 9349115000	09040
TY 2019 Other Increases Sche	dule			
Name:	THOMAS J WEST	Γ FAMILY CHAR TRUST		
	C/O MID PENN E	BANK TRUST DEPARTMENT		
EIN:	27-6777707			
De	escription		Amount	
ADJUSTING ENTRY				793

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DL	N: 93491150009040
TY 2019 Taxes Schedule				
Name	e: THOMAS J W	VEST FAMILY CHAF	R TRUST	
C/O MID PENN BANK TRUST DEPARTMENT				
EIN	N: 27-6777707			
Category	Amount	Net Investment	Adjusted Net	Disbursements
		Income	Income	for Charitable Purposes
2018 FEDERAL EXCISE	480			
FOREIGN TAX WITHHELD	259	259		