orm 990-PF	▶ Do not ent	Section 4947(a)(1) Trust Trea er social security numbers of	n this form as it may be m	ade public.	2019
or calendar year 2019		w.irs.gov/Form990PF for inst AN 28, 2019	uctions and the latest int	DEC 31, 2019	Open to Public Inspe
Name of foundation	or tax your oughning O.	20, 2023	, and onemy	A Employer identification	
	FAMILY FOUNDAT		<u>-</u>	83-3318104	
•	ox number if mail is not delivered to stre	et address)	Room/suite	B Telephone number	- 4
	RSVILLE ROAD			651-494-20	
DOYLESTOWN	ovince, country, and ZIP or foreig ,PA 18902	n postal code		C If exemption application is p	ending, check here
Check all that apply	X Initial return	Initial return of a	former public charity	D 1. Foreign organization	s. check here
onoun an anatoppi,	Final return	Amended return	,		.,
	Address change	Name change		Foreign organizations me check here and attach co	eeting the 85% test, emputation
Check type of organiz		exempt private foundation	α	E If private foundation sta	itus was terminated
) nonexempt charitable trust	Other taxable private found		under section 507(b)(1)(A), check here
Fair market value of all	·	Inting method X Cash	Accrual	F If the foundation is in a	_
(from Part II, col. (c), li	1,474,020. (Part I, co	Other (specify) llumn (d), must be on cash ba	sis.)	under section 507(b)(1)(D), CHECK HERE
Part I Analysis of R	evenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
The total of amo	ounts in columns (b), (c), and (d) may not al the amounts in column (a))	expenses per books	income	income	for charitable purpos (cash basis only)
1 Contributions,	gitts, grantš, etč., rēčēivēd	1,510,953.		N/A	
_ Interest on saving	if the foundation is not required to attach Sch. B				CON MINISTER
3 cash investments		8,055.	8,055.		STATEMENT STATEMENT
5a Gross rents	interest from securities	0,033.	0,033.	0.]	STATEMENT
h Net rental income	or (loss)				
	from sale of assets not on line 10	1,034,807.			
b Gross sales price assets on line 6a	for all 1,510,961.	_			
<u> </u>	ncome (from Part IV, line 2)		1,034,807.	•	
6 Net Short-term					
9 Income modific Gross sales less r 10a and allowances					
b Less Cost of goo	ds sold				
c Gross profit or	(loss)			アドロエン	:0
11 Other income			1 242 255		70
	es 1 through 11	2,553,819.	1,042,866.	1 1	
1	officers, directors, trustees, etc e salaries and wades	0.	0.	, W	162
15 Pension plans,	 			OGLIN	IT
1					
b Accounting fee	S				
to the repenses Add O 25.	onal fees				
of 17 Interest				<u> </u>	
18 Taxes	nd depletion			 	
19 Depreciation at 20 Occupancy	no achicumi	-			
21 Travel, confere	nces, and meetings				
22 Printing and pu	· -				
23 Other expenses	S			<u> </u>	
24 Total operation	g and administrative				
expenses Add	d lines 13 through 23	45,000.	0.	· 	45,00
25 Continuutions,	gifts, grants paid s and disbursements.	45,000.		 	45,00
Add lines 24 ar		45,000.	/ 0.	.]	45,00
27 Subtract line 2				<u> </u>	,
	over expenses and disbursements	2,508,819.			
	t income (if negative, enter -0-)	1	1,042,866.	i	1

923501 12-17-19 LHA For Paperwork Reduction Act Notice, see Instructions.

Part II Balance Sheets Allached schedules and amounts in the description column should be for end-of-year amounts only		Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	nd of year			
Р	aπ	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value			
	1	Cash - non-interest-bearing		1,474,020.	1,474,020.			
		Savings and temporary cash investments						
		Accounts receivable		, .	,			
	_	Less allowance for doubtful accounts						
	4	Pledges receivable			1			
	`	Less, allowance for doubtful accounts						
	5	Grants receivable						
	6	Receivables due from officers, directors, trustees, and other						
	-	disqualified persons						
	7	Other notes and loans receivable						
		Less allowance for doubtful accounts						
u	8	Inventories for sale or use						
Assets	9	Prepaid expenses and deferred charges						
As	 10a	Investments - U.S. and state government obligations			-			
	1	Investments - corporate stock						
	ı	Investments - corporate bonds			· /55			
	1	Investments - land, buildings, and equipment basis						
		Less accumulated depreciation						
	12	Investments - mortgage loans						
	13	Investments - other						
	14	Land, buildings, and equipment basis						
		Less accumulated depreciation						
	15	Other assets (describe			*			
	16	Total assets (to be completed by all filers - see the						
		instructions. Also, see page 1, item 1)	0.	1,474,020.	1,474,020.			
	17	Accounts payable and accrued expenses						
	18	Grants payable						
Š	19	Deferred revenue						
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons						
ap	21	Mortgages and other notes payable						
ت	22	Other liabilities (describe)						
				•				
	23	Total liabilities (add lines 17 through 22)	0.	0.				
		Foundations that follow FASB ASC 958, check here						
es	l	and complete lines 24, 25, 29, and 30.						
Balances	24	Net assets without donor restrictions						
	25	Net assets with donor restrictions						
or Fund		Foundations that do not follow FASB ASC 958, check here						
Ē		and complete lines 26 through 30.	0.	0.	•			
S O	26	Capital stock, trust principal, or current funds	0.	0.				
set	27 28	Paid-in or capital surplus, or land, bldg., and equipment fund Retained earnings, accumulated income, endowment, or other funds	0.	1,474,020.				
As	29	Total net assets or fund balances	0.	1,474,020.	``			
Net Assets	29	lotal lift assets of fulla palatices	,	1,1,1,020.				
	30	Total liabilities and net assets/fund balances	0.	1,474,020.				
ᆮ								
Р	art	III Analysis of Changes in Net Assets of Fund Ba	liances					
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	29					
	(mus	t agree with end-of-year figure reported on prior year's return)		1	0.			
2	Ente	amount from Part I, line 27a		2	2,508,819.			
3	Othe	r increases not included in line 2 (itemize)		3	0.			
		ines 1, 2, and 3		4	2,508,819.			
		eases not included in line 2 (itemize) UNREALIZED GAI		SECURITIES 5	1,034,799.			
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 29	6	1,474,020.			
					Form 990-PF (2019)			

Part IV Capital Gains a	nd Losses for Tax on Ir	nvestment	Income				
(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)					v acquired urchase Jonation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
a DE LUXE CORP	DE LUXE CORP D				08/04/08	07/26/19	
b DE LUXE CORP				D	08/04/08	10/24/19	
<u> </u>							
<u>d</u>			_	Ļ			
e		1		<u> </u>			ļ
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			(h) Gain or (loss ((e) plus (f) minus	(g))
a 1,016,653.			329,44				687,207
d 494,308.	,	ļ	146,70	8.			347,600
<u>c</u>				-			
d							
Complete only for accets chaying	a care to column (h) and owned by	the foundation	on 12/21/60	-		//\ C /C-1 /b\	
Complete only for assets snowing	gain in column (h) and owned by			-	c	(I) Gains (Col. (h) gair ol (k), but not less that	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i)		·	Losses (from col.	(h))
•		1		+			687,207
a b				\dashv			347,600
c		1		\dashv			2 = 1 , 2 0 0
d				$\neg \vdash$			
Capital gain net income or (net cap	ortal loss) { If gain, also enter-	er in Part I, line	7	} ;	,		1,034,807
	•			7 H			2,032,00,
Net short-term capital gain or (loss if gain, also enter in Part I, line 8, of		ind (6)		٦			
	Jululilli (G).						
If (loss) enter -0- in Part I line 8					,	N/A	
If (loss), enter -0- in Part I, line 8 Part V Qualification Un	der Section 4940(e) for	r Reduced	Tax on Net	Invest	ment Inc	N/A	1
Part V Qualification Un	······································				ment Inc		N/A
Part V Qualification Un For optional use by domestic private	foundations subject to the section				ment Inc		
Part V Qualification United on the Optional use by domestic private	foundations subject to the section				ment Inc		
Part V Qualification Un	foundations subject to the section s part blank.	4940(a) tax on	net investment in	come.)	ment Inc		N/A
Part V Qualification Unfor optional use by domestic private section 4940(d)(2) applies, leave this as the foundation liable for the section.	foundations subject to the section s part blank. on 4942 tax on the distributable ar	4940(a) tax on	net investment inc	come.)	ment Inc		N/A
Part V Qualification Unfor optional use by domestic private section 4940(d)(2) applies, leave the foundation liable for the section "Yes," the foundation doesn't qualify Enter the appropriate amount in each	foundations subject to the section s part blank. on 4942 tax on the distributable ar under section 4940(e). Do not coi	4940(a) tax on mount of any ye mplete this part	net investment in ear in the base peri	od?	ment Inc	come	N/A Yes N
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Part V Qualification Unfor optional use by domestic private section 4940(d)(2) applies, leave the foundation liable for the section "Yes," the foundation doesn't qualify	foundations subject to the section s part blank. on 4942 tax on the distributable ar under section 4940(e). Do not column for each year, see the local column for each year, see the local tax of	4940(a) tax on mount of any ye mplete this part instructions bef	net investment in ear in the base peri	oome.) od? atries.		Distri	N/A
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Part V Qualification Unfor optional use by domestic private section 4940(d)(2) applies, leave this section 4940(d)(d) Base period years (a) Base period years Calendar year (or tax year beginning 2018 2017 2016 2015 2014 Total of line 1, column (d) Average distribution ratio for the 5-the foundation has been in existent foundation has been in existent Enter the net value of noncharitable Multiply line 4 by line 3 Enter 1% of net investment income Add lines 5 and 6	foundations subject to the section s part blank. on 4942 tax on the distributable ar under section 4940(e). Do not collact column for each year, see the (b) Adjusted qualifying distributable ar under section 4940(e). Do not collact column for each year, see the (b) Adjusted qualifying distributable ar under section 4940(e). Do not collact column for each year, see the (b) Adjusted qualifying distributable ar under section 4940(e). Do not collact column for each year, see the (b) Adjusted qualifying distributable ar under section 4940(e). Do not collact column for each year, see the (b) Adjusted qualifying distributable ar under section 4940(e). Do not collact column for each year, see the (b) Adjusted qualifying distributable ar under section 4940(e). Do not collact column for each year, see the (b) Adjusted qualifying distributable ar under section 4940(e). Do not collact column for each year, see the (b) Adjusted qualifying distributable ar under section 4940(e). Do not collact column for each year, see the (b) Adjusted qualifying distributable ar under section 4940(e). Do not collact column for each year, see the (b) Adjusted qualifying distributable ar under section 4940(e). Do not collact column for each year, see the (b) Adjusted qualifying distributable ar under section 4940(e). Do not collact column for each year, see the (b) Adjusted qualifying distributable ar under section 4940(e). Do not collact column for each year, see the (b) Adjusted qualifying distributable ar under section 4940(e). Do not collact column for each year, see the (b) Adjusted qualifying distributable ar under section 4940(e). Do not collact collac	mount of any ye mplete this part instructions bef stributions on line 2 by 5.0	net investment incear in the base performed any error making any error Net value of no	oome.) od? itries. (c) ncharital	ble-use asset	2 3 4 5 6 7	N/A Yes N (d) button ratio
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	990-PF (2019) THE SCHRAM FAMILY FOUNDATION rt VI Excise Tax Based on Investment Income (Section 4)	040(a) 44	040/h\ 40	40/e) or 40	<u>83-331</u>	8104	tion	Page 4
				70(6), UI 48	-0 - SEE	struC	, cion	"
1a	Exempt operating foundations described in section 4940(d)(2), check here a			.		-		
	Date of ruling or determination letter (attach copy of letter if			18)			0 0]
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here		and enter 1%	P I	1		0,8	<u>5/.</u>
	of Part I, line 27b							1
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter	r 4% of Part	I, line 12, col.	(b) J				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only	y, others, ent	ter -0-)		2			0.
3	Add lines 1 and 2				3	2	0,8	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations on	ly; others, en	iter -0-)		4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-				5	2	0,8	<u>57.</u>
6	Credits/Payments:							- 1
а	2019 estimated tax payments and 2018 overpayment credited to 2019	6a		0.				- 1
b	Exempt foreign organizations - tax withheld at source	6b		0.			•	
C	Tax paid with application for extension of time to file (Form 8868)	6c		0.				- (
d	Backup withholding erroneously withheld	6d		0.				
7	Total credits and payments. Add lines 6a through 6d				7			0.
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is	attached			8		3	85.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			▶	9	2	1,2	42.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpai	id			10			
11	Enter the amount of line 10 to be Credited to 2020 estimated tax		1	Refunded >	11			
	rt VII-A Statements Regarding Activities				 			
1a	During the tax year, did the foundation attempt to influence any national, state, or local	legislation or	did it particio	ate or intervene	ın		Yes	No
•	any political campaign?					1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political pu	rooses? See	e the instructio	ns for the defini	tion	1b		х
-	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and cop							1
	distributed by the foundation in connection with the activities.		210.10.0					
c	Did the foundation file Form 1120-POL for this year?					10		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during	the year				"		
٠	(1) On the foundation. \blacktriangleright \$ (2) On foundation mana			0.				
۰	Enter the reimbursement (if any) paid by the foundation during the year for political exp						ŀ	
٠	managers. > \$ 0.	onditoro tax						
2	Has the foundation engaged in any activities that have not previously been reported to the	he IRS2				2		X
-	If "Yes," attach a detailed description of the activities.						-	
2	Has the foundation made any changes, not previously reported to the IRS, in its government	ına instrumei	nt articles of ii	ncorporation or			ľ	
J	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	ing instrume	int, at tible3 of th	ncorporation, or		3		X
4.	Did the foundation have unrelated business gross income of \$1,000 or more during the	vear2				4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	your.			N/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the y	03r2			,	5		x
3		cai				<u> </u>		
	If "Yes," attach the statement required by General Instruction T	nd outhor						
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfie By language in the governing instrument, or	o ciuici.						
	 By state legislation that effectively amends the governing instrument so that no mand 	atory directio	one that conflic	et wath the etete	law			
		atory uncolle	טווס נוופנ בטווווונ	v with the State	10 4A	6	$\overline{\mathbf{x}}$	<i>-</i>
_	remain in the governing instrument?	amalata Dort	til ool (a) an	d Doct VI			X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," c	omplete Part	ı н, соі. (с), an	u Parl AV		7	^	
_								
8a	Enter the states to which the foundation reports or with which it is registered. See instru	uctions. 🟲				-		}
	PA					-		
-								
0	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	he Attorney (General (or des	signate)				
	of each state as required by General Instruction G2 If "No," attach explanation					8b	X	
	of each state as required by $General\ Instruction\ G^2$ If "No," attach explanation is the foundation claiming status as a private operating foundation within the meaning of	of section 494	42(j)(3) or 494		ıdar		<u>x</u>	
9	of each state as required by General Instruction G2 If "No," attach explanation	of section 494 complete Pai	42(j)(3) or 494 rt XIV	2(j)(5) for calen	dar TMT 3	8b 	х 	

Form 990-PF (2019)

had not been removed from jeopardy before the first day of the tax year beginning in 2019?

Form 990-PF (2019) THE SCHRAM FAMILY FOUNDA			83-33181	04	Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be Re	equired (contin	ued)		
5a During the year, did the foundation pay or incur any amount to.	<u> </u>			Yes	s No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?		es X No		
(2) Influence the outcome of any specific public election (see section 4955); o	` "				1 1
any voter registration drive?			es X No		1 1
(3) Provide a grant to an individual for travel, study, or other similar purposes	?		es X No	- ,	1 1
(4) Provide a grant to an organization other than a charitable, etc., organization		'' لـــا			1 1
	ii described iii section		es 🗓 No	ł	1
4945(d)(4)(A)? See instructions	ar advertional averages or fo	_	ES A NO		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or it		₹		
the prevention of cruelty to children or animals?			es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	·	n Regulations .			-
section 53.4945 or in a current notice regarding disaster assistance? See instri			. — F	5b	 ,
Organizations relying on a current notice regarding disaster assistance, check l				i	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for					
expenditure responsibility for the grant?	N	[/A	es 💹 No 🖟		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).					'
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				.
a personal benefit contract?		Y	es 🗶 No 📙	_	_
b Did the foundation, during the year, pay premiums, directly or indirectly, on a g	ersonal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870.			<u> </u>		Ti
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	☐ Ye	es X No		
b If "Yes," did the foundation receive any proceeds or have any net income attribu			[7b	1
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$					
excess parachute payment(s) during the year?	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		es X No	į	
Part VIII Information About Officers, Directors, Trusto	es. Foundation Mar				
Paid Employees, and Contractors					
1 List all officers, directors, trustees, and foundation managers and the	neir compensation.				
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) E	rpense it, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	accour	it, other ances
LEE J. SCHRAM	 		DIRECTOR	4,1011	
5530 CARVERSVILLE ROAD		T			
DOYLESTOWN, PA 18902	2.50	0.	0.		0.
CAROLE A. SCHRAM		RECTOR	•		
5530 CARVERSVILLE ROAD		LECTOR			
DOYLESTOWN, PA 18902	0.25	0.	0.		0.
ERIC SCHRAM	DIRECTOR	· · · · ·	· · ·		
	DIRECTOR				
5530 CARVERSVILLE ROAD	۸ ، ۲۰	١ ,	_		^
DOYLESTOWN, PA 18902	0.25	0.	0.		0.
ELIZABETH SCHRAM	DIRECTOR				
5530 CARVERSVILLE ROAD			_ ا		_
DOYLESTOWN, PA 18902	0.25	0.	0.		0.
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to	4-1 °C	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	accoun	rpense it, other
	devoted to position	(-,	compensation	allow	ances
NONE					
Total number of other employees paid over \$50,000			▶		0
			Form	990-PF	(2019)

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Form 990-PF (2019) THE SCHRAM FAMILY FOUNDATION	<u>83-3318</u>	104 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, High Paid Employees, and Contractors (continued)	nly	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of	service	(c) Compensation
NONE		
		ļ
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
		
1N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 <u>N/A</u>		
2		
		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3	>	0.
	For	m 990-PF (2019)

<u> </u>	art'X Minimum investment Return (All domestic foundations minimum	ust complete this part. For	eign foundations, see	e instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable	, etc., purposes		
a	Average monthly fair market value of securities		1a	0.
b	Average of monthly cash balances		1b	629,904.
C	Fair market value of all other assets		1c	
d	Total (add lines 1a, b, and c)		1d	629,904.
е	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation)	1e	0.	
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d		3	629,904.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, s	see instructions)	4	9,449.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on	Part V, line 4	5	620,455.
6	Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHO	RT TAX PERIOD	6	28,728.
Į.P.	art:XII Distributable Amount (see instructions) (Section 4942(j)(3) and	f (j)(5) private operating foun	dations and certain	
_	foreign organizations, check here 🕨 🔲 and do not complete this part.)			
1	Minimum investment return from Part X, line 6		1	28,728.
2a	Tax on investment income for 2019 from Part VI, line 5	2a 20,	857.	
b	Income tax for 2019. (This does not include the tax from Part VI.)	2b		
C	Add lines 2a and 2b		2c	20,857.
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	7,871.
4	Recoveries of amounts treated as qualifying distributions		4	0.
5	Add lines 3 and 4		5	7,871.
6	Deduction from distributable amount (see instructions)		6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part X	III, line 1	7	7,871.
ſΡ	art:XII] Qualifying Distributions (see instructions)			·
Ξ	Annual and (column administration and annual and annual and annual and annual and annual and annual			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purpo	ises	4.0	45,000.
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26 Program-related investments - total from Part IX-B		1a 1b	43,000.
		ata nuraanan	2	<u> </u>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable Amounts set aside for specific charitable projects that satisfy the	s, etc., purposes		
3	Suitability test (prior IRS approval required)		3a	
			3b	
þ	, , ,	I Dart VIII June 4	4	45,000.
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and		-	43,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net invest income. Enter 1% of Part I, line 27b	mem	5	0.
	Adjusted qualifying distributions Subtract line 5 from line 4		6	45,000.
6	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years wh	an calculating whether the for		
	4940(e) reduction of tax in those years	on calculating whether the lui	יווט 101 כסוווונטן ווטונטטווינט	5 3560011

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Part XIII Undistributed Income (see instructions) (c) (d) (b) 2018 2019 Corpus Years prior to 2018 1 Distributable amount for 2019 from Part XI, 7,871. line 7 2 Undistributed income, if any, as of the end of 2019 0 a Enter amount for 2018 only b Total for prior years 0. 3 Excess distributions carryover, if any, to 2019 a From 2014 **b** From 2015 o I rom 2016 d From 2017 e From 2018 υ. f Total of lines 3a through c 4 Qualifying distributions for 2019 from 45,000. Part XII, line 4. ►\$ 0 a Applied to 2018, but not more than line 2a b Applied to undistributed income of prior 0. years (Election required - see instructions) c Treated as distributions out of corpus 0. (Election required - see instructions) 7,871 d Applied to 2019 distributable amount 37,129. e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a)) 0. 0. 6 Enter the net total of each column as indicated below: 37,129. a Corpus Add lines 3f. 4c. and 4e Subtract line 5 b Prior years' undistributed income. Subtract 0 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 0 assessed d Subtract line 6c from line 6b. Taxable 0. amount - see instructions e Undistributed income for 2018. Subtract line 0 4a from line 2a. Taxable amount - see instr. f Undistributed income for 2019 Subtract lines 4d and 5 from line 1. This amount must 0. 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 0. may be required - see instructions) 8 Excess distributions carryover from 2014 0. not applied on line 5 or line 7 9 Excess distributions carryover to 2020. 37,129. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9. a Excess from 2015 b Excess from 2016 c Excess from 2017 d Excess from 2018

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e Excess from 2019

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37,129

	RAM FAMILY				318104 Page 10
Part XIV Private Operating Fo			I-A, question 9)	N/A	
1 a If the foundation has received a ruling or					
foundation, and the ruling is effective for	•	-	un acetion] 4042(1)(2) or []	40.42(1)(6)
b Check box to indicate whether the founda 2 a Enter the lesser of the adjusted net	Tax year	y tourioation described	Prior 3 years	4942(j)(3) or	4942(j)(5)
income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
investment return from Part X for		· ,	· · · · · · · · · · · · · · · · · · ·	` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	(1,7,111
each year listed					
b 85% of line 2a				<u> </u>	
c Qualifying distributions from Part XII,					
line 4, for each year listed					
d Amounts included in line 2c not		k .			
used directly for active conduct of					
exempt activities			ļ		ļ
e Qualifying distributions made directly					
for active conduct of exempt activities.			J		
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the					
alternative test relied upon					
a "Assets" alternative test - enter (1) Value of all assets					
`` <i>`</i>				<u> </u>	
(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					1
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					
Part XV Supplementary Infor	mation (Complet	e this part only	f the foundation	had \$5,000 or mo	ore in assets
at any time during th				• •	
1 Information Regarding Foundation	Managers:				
a List any managers of the foundation who			ributions received by the	foundation before the clo	se of any tax
year (but only if they have contributed mo	ore man \$5,000). (See Si	scaon 507(a)(2))			
SEE STATEMENT 4 . b List any managers of the foundation who	own 10% or more of the	stock of a corporation	for an aqually large ports	on of the ownership of a	partnerchip or
other entity) of which the foundation has			or an equally large porti	on or the ownership or a ;	Dartifer Strip Of
NONE					
2 Information Regarding Contributio	n, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms:		· · · ·
Check here 🕨 🗓 if the foundation on					uests for funds. If
the foundation makes gifts, grants, etc., to	o individuals or organiza	tions under other condit	ions, complete items 2a,	b, c, and d.	
a The name, address, and telephone number	er or email address of th	e person to whom applic	ations should be addres	sed	
	1			•	
b The form in which applications should be	submitted and informat	ion and materials they sl	rould include		- 1,
c Any submission deadlines					
					
d Any restrictions or limitations on awards,	such as by geographica	i areas, charitable fields,	kinds of institutions, or	other factors.	
					•
					Form 990-DE (2010)

	Payment		
I show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
or substantial contributor	recipient		_
	PC	GENERAL PURPOSE	
		CONTRIBUTION	
		_	5,00
	PC	1	
		ACADEMICS	E 00
			5,00
	PC PC	GENERAL DIEDOGE	
		CONTRIBUTION	
			10,00
	PC	EQUINE CENTER	
			25,00
	<u> </u>	▶ 3a	45,00
	1		•
			
,			,
 	 		
	I	▶ 3b	
	If recipient is an individual,	show any relationship to any foundation manager or substantial contributor PC PC PC PC	Trecipient is an individual, show any relationship to any foundation manager or substantial contribution PC DENERAL PURPOSE CONTRIBUTION PC TUITION ASSISTANCE ← ACADEMICS PC BENERAL PURPOSE CONTRIBUTION PC BENERAL PURPOSE CONTRIBUTION PC BENERAL PURPOSE CONTRIBUTION PC BOUINE CENTER 3a

Enter gross amounts unless otherwise indicated.	Unrelated I	ousiness income	Excluded	by section 512, 513, or 514	(a)
	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	(e) Related or exempt function income
1 Program service revenue	code		code	, and an	Tundadii indome
a b			+ +		
			- 	-	•
			<u> </u>	-	
e					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					· · · · · · · · · · · · · · · · · · ·
investments			14	4.	
4 Dividends and interest from securities			14	8,055.	
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	1,034,807.	
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a	_				
b	_		\rightarrow		
c	_				
d	_		\rightarrow		
e	_		_ —	1 212 255	
12 Subtotal. Add columns (b), (d), and (e)	<u> </u>		0.	1,042,866.	1 042 066
13 Total. Add line 12, columns (b), (d), and (e)				13	1,042,866
See worksheet in line 13 instructions to verify calculations					
Part XVI-B Relationship of Activitie	s to the Accom	plishment of	Exempt P	urposes	
		aluma (a) of Davi M	// A	.d.,	tob mont of
Explain below how each activity for which the foundation's exempt purposes (other t				o importantly to the accomp	iisnment or
the foundation's exempt purposes (other t	nan by providing tunus	Tor Socii porposes,	<u> </u>		
					
					
		· · · · · · · · · · · · · · · · · · ·			
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The state of the s					
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		CHRAM FAM	ILY FO	OUNDATION		83-33	18104	Pa	ige 13
Part 3			sfers to	and Transactions an	d Relationsh	ips With Noncha	ritable		
	Exempt Organ							V	NI-
	the organization directly or indi				in described in secti	on 501(c)		Yes	No
•	ner than section 501(c)(3) organ	•							
	nsfers from the reporting found	ation to a noncharita	abie exempt d	organization of			4-40		· 😽
٠,	Cash						1a(1)		X
	Other assets						1a(2)		Λ_
	er transactions	able average areas	ton				45/43	-	v .
	Sales of assets to a noncharita						1b(1)		X
, ,	Purchases of assets from a no	•	organization				1b(2)		X
	Rental of facilities, equipment,						1b(3)		X
	Reimbursement arrangements						1b(4)		X
	Loans or loan guarantees	anharahin ar firadia	are e coloritat				1b(5)		X
	Performance of services or me		-				1b(6) 1c		X
	aring of facilities, equipment, ma	-		· ·	uave chow the fair s	narket value of the goods		otc	
	ne answer to any of the above is services given by the reporting f		_	, ,	-	-	•	E15,	
	umn (d) the value of the goods,				e iii ariy iransaciion	or sharing arrangement,	2110W III		
(a) Line n	T'			ole exempt organization	(d) Description	of transfers, transactions, an	d sharing arr	engemen	ıts
(4/2	(b) ranount mivored	(6) 1141110	N/A	·	(0) 200 (200				
	-		11,11		 		· · · · · · · · · · · · · · · · · · ·		
		 							
		 			 				
		 							
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		1			İ				
		1			ĺ				
		1		••	ĺ				
		1			ĺ				
	he foundation directly or indirectly or indirectly or section 501(c) (other than section	•		ne or more tax-exempt organiz	zations described		Yes	X] No
<u>b if "</u>	es," complete the following sch			Tax to the		4.15			
	(a) Name of org	ganization		(b) Type of organization		(c) Description of relatio	nship		
	N/A								
	Under penalties of perjury, I declare t	that I have examined thi	s return, includu	no accompanying schedules and sta	tements, and to the be	st of my knowledge			
Sign Here	and belief, it is pref, correct, and con Signature of officer or trustee	polete Declaration of pro	eparer (other tha	an taxpayer) is based on all informati	TREASU	ENT	May the IRS of turn with the shown below X Yes	e prepare ? Se <u>e ins</u>	*
·	Print/Type preparer's na		Preparer's	Date /	Date	Check I if PTII	V		
	1		richaters	Signature —		self- employed	•		
Paid	BENJAMIN M	. TAKE,	1	mft	6/2/20	P	01270	403	
Prepa Use 0	erer Firm's name ► CRE	ATIVE PLA	NNING	TAX, LLC		Firm's EIN ► 47-	10199	42	

Phone no 913-338-2727

Form **990-PF** (2019)

Firm's address ► 5454 W 110TH STREET

OVERLAND PARK, KS 66211

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2019

Employer identification number Name of the organization THE SCHRAM FAMILY FOUNDATION 83-3318104 Organization type (check one) Filers of: Section: Form 990 or 990-EZ ___ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

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Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1	LEE J. SCHRAM 5530 CARVERSVILLE ROAD DOYLESTOWN, PA 18902	ss	Person Payroll Noncash X (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		 \$	Person Payroll Oncash Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		s	Person Payroll Oncash Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		 \$	Person Payroll Omnicash Omnicash If for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions)		

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THE SCHRAM FAMILY FOUNDATION

83-3318104

(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
Part I	10,000 SHARES OF DLX	, ,	
_1			
		sss	07/26/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1 21.11	22,980 SHARES OF DLX		
_1			
		\$ 1,016,635.	10/24/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	·
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	-
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate)	(d) Date received
Part I		(See instructions)	
]			

	At		
) No. from Part I	(b) Purpose of gift (c) Use of gift		(d) Description of how gift is held
ŀ		(e) Transfer of gift	

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
• "	
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FORM 990-PF INTERE	ST ON SAVING	S AND TEMPOR	ARY CASH IN	VESTMENTS	STATEMENT 1
SOURCE	(A) REVENUE PER BOOK	NET IN	(B) VESTMENT COME	(C) ADJUSTED NET INCOME	
CHARLES SCHWAB ACCO	UNT		4.	4.	
TOTAL TO PART I, LI		4.	4.		
FORM 990-PF	DIVIDENDS	AND INTEREST	FROM SECUR	ITIES	STATEMENT 2
SOURCE	GROSS. AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS		(C) - ADJUSTED ME NET INCOME
CHARLES SCHWAB ACCOUNT	8,055.	0.	8,055.	8,05	5.
TO PART I, LINE 4	8,055.	0.	8,055.	8,055	5.
FORM 990-PF		SUBSTANTIAL C			STATEMENT 3

FORM 990-PF	PART XV - LINE 1A LIST OF FOUNDATION MANAGERS	STATEMENT 4

5530 CARVERSVILLE ROAD DOYLESTOWN, PA 18902

NAME OF MANAGER

LEE & CAROLE SCHRAM

LEE J. SCHRAM CAROLE A. SCHRAM