

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 www.irs.gov/Form990PF for instructions and the latest information.

OMB No. 1545-0052
2019
Open to Public Inspection

For calendar year 2019, or tax year beginning 10-01-2019 , and ending 09-30-2020

Name of foundation GAMBER FOUNDATION		A Employer identification number 23-2331958	
Number and street (or P.O. box number if mail is not delivered to street address) Room/suite 2220 DUTCH GOLD DRIVE		B Telephone number (see instructions) (717) 393-1716	
City or town, state or province, country, and ZIP or foreign postal code LANCASTER, PA 17601		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here..... <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ... <input type="checkbox"/>	
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ <u>5,048,995</u>		J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ <i>(Part I, column (d) must be on cash basis.)</i>	
		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)</i>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	124,000			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	175,806	175,806		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	-9,668			
	b Gross sales price for all assets on line 6a <u>271,876</u>				
	7 Capital gain net income (from Part IV, line 2)		0		
	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)					
11 Other income (attach schedule)					
12 Total. Add lines 1 through 11	290,138	175,806			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	0	0		0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	1,500	750		750
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	5,313	0		0
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	20	0		15
	24 Total operating and administrative expenses. Add lines 13 through 23	6,833	750		765
	25 Contributions, gifts, grants paid	248,000			248,000
26 Total expenses and disbursements. Add lines 24 and 25	254,833	750		248,765	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	35,305				
b Net investment income (if negative, enter -0-)		175,056			
c Adjusted net income (if negative, enter -0-)					

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing			
	2 Savings and temporary cash investments	11,510	-1,712	-1,712
	3 Accounts receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	4 Pledges receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U.S. and state government obligations (attach schedule)	115,042	321,069	329,020
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)	2,284,930	2,082,558	2,273,680
	11 Investments—land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	2,076,504	2,121,376	2,448,007
	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)	4,487,986	4,523,291	5,048,995	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)			
	23 Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input type="checkbox"/> and complete lines 24, 25, 29 and 30.			
	24 Net assets without donor restrictions			
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds	4,487,986	4,523,291	
	27 Paid-in or capital surplus, or land, bldg., and equipment fund	0	0	
	28 Retained earnings, accumulated income, endowment, or other funds	0	0	
29 Total net assets or fund balances (see instructions)	4,487,986	4,523,291		
30 Total liabilities and net assets/fund balances (see instructions) .	4,487,986	4,523,291		

Part III Analysis of Changes in Net Assets or Fund Balances			
1 Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)		1	4,487,986
2 Enter amount from Part I, line 27a		2	35,305
3 Other increases not included in line 2 (itemize) ▶ _____		3	0
4 Add lines 1, 2, and 3		4	4,523,291
5 Decreases not included in line 2 (itemize) ▶ _____		5	0
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .		6	4,523,291

Part IV Capital Gains and Losses for Tax on Investment Income

	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)			
1a See Additional Data Table			
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a See Additional Data Table			
b			
c			
d			
e			

(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
a See Additional Data Table			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	2	-9,668
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8	3	

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?
If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part. Yes No

1 Enter the appropriate amount in each column for each year; see instructions before making any entries.			
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018	241,265	4,846,768	0.049779
2017	246,369	4,744,604	0.051926
2016	243,031	4,657,730	0.052178
2015	228,165	4,527,882	0.050391
2014	183,362	3,665,540	0.050023
2 Total of line 1, column (d)			2 0.254297
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years			3 0.050859
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5			4 5,029,378
5 Multiply line 4 by line 3			5 255,789
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 1,751
7 Add lines 5 and 6			7 257,540
8 Enter qualifying distributions from Part XII, line 4			8 248,765

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

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

Table with 11 rows for excise tax calculation. Includes questions about exempt foundations, tax under section 511, and tax due. Total tax due is 99, with 99 refunded.

Part VII-A Statements Regarding Activities

Table with 10 rows for statements regarding activities. Includes questions about political campaigns, political expenditures, and state reporting. Includes Yes/No columns.

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions.		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ <u>N/A</u>	Yes	
14	The books are in care of ▶ <u>NANCY GAMBER</u> Telephone no. ▶ <u>(717) 393-1716</u> Located at ▶ <u>2220 DUTCH GOLD DR LANCASTER PA</u> ZIP+4 ▶ <u>17601</u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year ▶ <u>15</u>		
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ▶	Yes	No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

		Yes	No
1a	During the year did the foundation (either directly or indirectly):		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here. ▶ <input type="checkbox"/>	1b	
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019?	1c	No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a	At the end of tax year 2019, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2019? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions.)	2b	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ▶ 20____, 20____, 20____, 20____		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period?(Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2019.)	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b	No

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

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

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total 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 relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 NONE	0
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 the tax year on lines 1 and 2.

	Amount
1 NONE	0
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ▶	0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see 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	5,019,212
b	Average of monthly cash balances.	1b	86,756
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	5,105,968
e	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	5,105,968
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	76,590
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	5,029,378
6	Minimum investment return. Enter 5% of line 5.	6	251,469

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

1	Minimum investment return from Part X, line 6.	1	251,469
2a	Tax on investment income for 2019 from Part VI, line 5.	2a	3,501
b	Income tax for 2019. (This does not include the tax from Part VI.).	2b	
c	Add lines 2a and 2b.	2c	3,501
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	247,968
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	247,968
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 XIII, line 1.	7	247,968

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	248,765
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	248,765
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	248,765

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				247,968
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only.			0	
b Total for prior years: 20___, 20___, 20___		0		
3 Excess distributions carryover, if any, to 2019:				
a From 2014.				
b From 2015.				
c From 2016.				1,470
d From 2017.				12,853
e From 2018.				2,520
f Total of lines 3a through e.	16,843			
4 Qualifying distributions for 2019 from Part XII, line 4: ▶ \$ <u>248,765</u>				
a Applied to 2018, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2019 distributable amount.				247,968
e Remaining amount distributed out of corpus	797			
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:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	17,640			
b Prior years' undistributed income. Subtract line 4b from line 2b		0		
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.		0		
d Subtract line 6c from line 6b. Taxable amount—see instructions		0		
e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions			0	
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				0
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).	0			
8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions).	0			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	17,640			
10 Analysis of line 9:				
a Excess from 2015.				
b Excess from 2016.				1,470
c Excess from 2017.				12,853
d Excess from 2018.				2,520
e Excess from 2019.				797

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

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling. ▶

b Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

	Tax year	Prior 3 years			(e) Total
	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
b 85% of line 2a					
c 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					
e 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:					
a "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					

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

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:
 MICHAEL T KANE PRESIDENT GAMBER FOU
 2220 DUTCH GOLD DRIVE
 LANCASTER, PA 17601
 (717) 393-1716

b The form in which applications should be submitted and information and materials they should include:
 NO STANDARD FORM USED. APPLICANT SHOULD INCLUDE ANY PERTINENT INFORMATION APPLICANT DEEMS HELPFUL.

c Any submission deadlines:
 NONE

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:
 NONE

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	248,000
b <i>Approved for future payment</i>				
Total			▶ 3b	0

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e.g., real estate, (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
AFLAC INC 4.00 02/15/22	P		
BLACKROCK FLOATING RATE INCOME TRUST	P		
CISCO SYSTEMS INC 4.450 1/15/20	P		
CREDIT SUISSE 5.400 1/14/20	P		
JPMORGAN CHASE & CO 4.400 7/22/20	P		
VANGUARD INDEX FDS ETF REAL ESTATE INDEX	P		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
52,129		50,490	1,639
44,444		50,476	-6,032
25,000		25,130	-130
25,000		25,248	-248
100,000		101,505	-1,505
25,303		28,695	-3,392

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
			1,639
			-6,032
			-130
			-248
			-1,505
			-3,392

Form 990FP Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
WR GAMBER II C/O 2220 DUTCH GOLD DRIVE LANCASTER, PA 17601	DIRECTOR 1.00	0	0	0
MARIANNE M GAMBER C/O 2220 DUTCH GOLD DRIVE LANCASTER, PA 17601	DIRECTOR 1.00	0	0	0
NANCY J GAMBER C/O 2220 DUTCH GOLD DRIVE LANCASTER, PA 17601	TREASURER 1.00	0	0	0
TIMOTHY M ZIMMERMAN C/O 2220 DUTCH GOLD DRIVE LANCASTER, PA 17601	DIRECTOR 1.00	0	0	0
KITTY L GAMBER C/O 2220 DUTCH GOLD DRIVE LANCASTER, PA 17601	DIRECTOR 1.00	0	0	0
JULIE A GOOD C/O 2220 DUTCH GOLD DRIVE LANCASTER, PA 17601	SECRETARY 1.00	0	0	0
MICHAEL T KANE C/O 2220 DUTCH GOLD DRIVE LANCASTER, PA 17601	PRESIDENT 1.00	0	0	0
STEVEN E KANE C/O 2220 DUTCH GOLD DRIVE LANCASTER, PA 17601	DIRECTOR 1.00	0	0	0
CHRISTOPHER MARKLEY C/O 2220 DUTCH GOLD DRIVE LANCASTER, PA 17601	DIRECTOR 1.00	0	0	0
LAURA EMILY OLCOTT C/O 2220 DUTCH GOLD DRIVE LANCASTER, PA 17601	DIRECTOR 1.00	0	0	0

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AARON'S ACRES1861 CHARTER LANE LANCASTER, PA 17601	N/A	PUBLIC	CAMP SCHOLARSHIP PROGRAM	5,000
ANCHORAGE FIRST UNITED METHODIST CHURCH 109 NORTH DUKE STREET LANCASTER, PA 17602	N/A	PUBLIC	ANCHORAGE BREAKFAST PROGRAM	4,000
BOYS AND GIRLS CLUBS OF LANCASTER PO BOX 104 LANCASTER, PA 17602	N/A	PUBLIC	HOMEWORK HELP PROGRAM	20,000
Total ▶ 3a				248,000

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BRIDGES AT WORTHMORE 11570 STILL POND ROAD WORTON, MD 21678	N/A	PUBLIC	THERAPEUTIC RIDING PROGRAM	6,000
CHILDREN DESERVE A CHANCE 16 WEST KING STREET LANCASTER, PA 17603	N/A	PUBLIC	ATTOLLO PROGRAM	6,000
CRISPUS ATTUCKS CENTER PO BOX 894 LANCASTER, PA 17602	N/A	PUBLIC	GENERAL FUND	12,000
Total ▶ 3a				248,000

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
EXCENTIA1810 ROHRERSTOWN ROAD LANCASTER, PA 17601	N/A	PUBLIC	GENERAL FUND	9,500
FRIENDSHIP COMMUNITY MINISTRIES 1149 E OREGON ROAD LITITZ, PA 17543	N/A	PUBLIC	BUILDING FUND	7,500
KEYSTONE PET ENHANCED THERAPY SERVICES 2120 OREGON PIKE 2ND FLOOR LANCASTER, PA 17601	N/A	PUBLIC	BROCHURES AND CAPITAL COSTS	7,500
Total ▶ 3a				248,000

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
LANCASTER AREA HABITAT FOR HUMANITY 443 FAIRVIEW AVENUE LANCASTER, PA 17603	N/A	PUBLIC	BUILDING FUND	5,000
LANCASTER CLEFT PALATE CLINIC 223 NORTH LIME STREET LANCASTER, PA 17603	N/A	PUBLIC	ENDOWMENT FUND	15,000
LANCASTER EARLY EDUCATION CENTER 150 S QUEEN DTREET LANCASTER, PA 17603	N/A	PUBLIC	GENERAL FUND	15,000
Total ▶ 3a				248,000

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MILAGRO HOUSE 320 SOUTH CHRISTIAN STREET LANCASTER, PA 17602	N/A	PUBLIC	MILAGRO HOUSE EDUCATION CENTER	7,500
MOM'S HOUSE INC OF LANCASTER PO BOX 787 LANCASTER, PA 17608	N/A	PUBLIC	DAYCARE SOFTWARE SYSTEM, COMPUTERS, AND DESK	5,000
SALVATION ARMY 131 SOUTH QUEEN STREET LANCASTER, PA 17602	N/A	PUBLIC	PATHWAYS OF HOPE	15,000
Total ▶ 3a				248,000

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SCHREIBER PEDIATRIC REHAB CENTER 625 COMMUNITY WAY LANCASTER, PA 17602	N/A	PUBLIC	CAPITAL IMPROVEMENTS FOR BUILDING ENTRANCE	25,000
TABOR COMMUNITY SERVICES 308 EAST KING STREET LANCASTER, PA 17602	N/A	PUBLIC	TRANSITIONAL LIVING CENTER GENERAL OPERATING SUPPORT	12,000
THE BANCROFT HOUSE PO BOX 344 FRANCONIA, NH 03580	N/A	PUBLIC	GENERAL FUND	2,000
Total ▶ 3a				248,000

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THE GATE HOUSE 649 E MAIN ST LITITZ, PA 17543	N/A	PUBLIC	TRANSITIONAL LIVING SCHOLARSHIPS	10,000
THE MIX AT ARBOR PLACE YOUTH CENTER 507 LOCUST STREET LANCASTER, PA 17602	N/A	PUBLIC	AFTER SCHOOL PROGRAM	5,000
UNITED DISABILITY SERVICES PO BOX 10485 LANCASTER, PA 17601	N/A	PUBLIC	SUPPORTS UDS PROGRAMS AND SERVICES ONLY	25,000
Total ▶ 3a				248,000

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
UNIVERSITY OF VERMONT 601 MAIN STREET BURLINGTON, VT 05401	N/A	PUBLIC	PROCTOR MAPLE RESEARCH ENDOWMENT	3,000
VISION CORPS 244 NORTH QUEEN STREET LANCASTER, PA 17603	N/A	PUBLIC	GENERAL FUND	3,000
WATER STREET RESCUE MISSION 210 SOUTH PRINCE STREET LANCASTER, PA 17601	N/A	PUBLIC	WATER STREET HEALTH SERVICES	23,000
Total ▶ 3a				248,000

TY 2019 Accounting Fees Schedule**Name:** GAMBER FOUNDATION**EIN:** 23-2331958

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	1,500	750		750

TY 2019 Investments Corporate Bonds Schedule**Name:** GAMBER FOUNDATION**EIN:** 23-2331958**Investments Corporate Bonds Schedule**

Name of Bond	End of Year Book Value	End of Year Fair Market Value
MAGNA INTERNATIONAL INC. SR NOTE 3.625% 6/15/24	49,786	55,059
MORGAN STANLEY SR UNSECURED NOTE 3.750% 2/25/23	36,724	37,568
NATIONAL RURAL UTILITY MED TERM NOTE 3.15% 4/15/23	50,000	51,780
NORDSTROM INC. 4.00% 12/15/26	25,434	21,258
PNC FINANCIAL SERVICES SR NOTE 3.900% 4/29/24	51,091	55,063
QUALCOMM INC. SR NOTE 3.450% 5/20/25	47,487	55,736
EOG RESOURCES INC. SR UNSECURED BOND AT 4.150% 1/15/26	50,357	57,248
ROYAL BANK OF CANADA SUBORDINATED GLOBAL MED TERM NOTE 4.650% 1/27/26	107,412	118,012
TRANSCANADA PIPELINES NOTE 4.250% 5/15/28	50,359	57,772
VENTAS REALTY COMPANY LP SR NOTE 4.125% 1/15/26	102,484	112,334
WELLS FARGO COMPANY SUBORDINATED NOTE 4.125% 8/15/23	101,906	103,485
WELLS FARGO COMPANY TERM NOTE 3.000% 8/4/26	101,139	112,589
LAZARD GROUP MATURING 09-19-28	50,314	57,808
METLIFE INC. SR NOTE 3.048% 12/15/22	50,295	52,878
MORGAN STANLEY MED TERM NOTE 4.350% 9/8/26	50,835	57,793
BROOKFIELD ASSET MAN SR UNSECURED MATURING 03/29/29	45,863	53,548
HCP INC. SR NOTE 4.000% 6/1/25	49,788	56,221
BLACKROCK INC. SR NOTE 3.5% 3/18/24	50,199	55,091
ALTRIA GROUP INC SR 4.8% MATURING 02/14/29	50,533	59,296
AMAZON.COM INC. SR NOTE 3.800% 12/5/24	50,793	56,307

Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
BOSTON PROPERTIES LP 12/01/28	51,296	58,899
BIOGEN INC. SR UNSECURED BOND AT 3.625% 9/15/22	62,458	63,656
BROOKFIELD ASSET MAN INC. SR UNSECURED NOTE 4.00% 1/15/25	80,886	89,708
BERKSHIRE HATHAWAY TERM NOTE 3.50% 01/15/21	100,005	101,157
GOLDMAN SACHS GROUP SR NOTE 3.750% 5/22/25	100,007	111,118
ABBVIE INC. SR NOTE 3.600% 5/14/25	100,007	110,814
BANK OF NOVA SCOTIA TERM NOTE 4.375% 01/13/21	101,454	101,152
MARSH & MCLENNAN COS MATURING 03-15-29	102,086	121,390
AT&T INC. GLOBAL NOTE 4.250% 12/1/26	104,541	116,051
ASSURED GUARANTY US HLDG SR TERM NOTE 5.00% 7/1/24	107,019	112,889

TY 2019 Investments Government Obligations Schedule**Name:** GAMBER FOUNDATION**EIN:** 23-2331958**US Government Securities - End
of Year Book Value:**

115,042

**US Government Securities - End
of Year Fair Market Value:**

115,490

**State & Local Government
Securities - End of Year Book
Value:**

206,027

**State & Local Government
Securities - End of Year Fair
Market Value:**

213,530

TY 2019 Investments - Other Schedule**Name:** GAMBER FOUNDATION**EIN:** 23-2331958**Investments Other Schedule 2**

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
ISHARES MSCI INDEX FUND	FMV	96,597	100,567
PRUDENTIAL HIGH YIELD FUND A	FMV	229,776	217,382
PRUDENTIAL SHORT TERM CORP BOND FUND A	FMV	702,450	689,483
SPDR S&P 500 TRUST ET	FMV	167,206	351,635
SPDR S&P DIVIDEND ET	FMV	204,700	280,434
WASHINGTON MUTAL INVESTOTS FUND- CLASS A	FMV	249,855	309,992
VANGUARD INDEX FDS ETF REAL ESTATE INDEX	FMV	11,764	10,660
GOLDMAN SACHS CD 2.450% 3/4/22	FMV	40,000	41,337
GOLDMAN SACHS CD 3.3% 6/18/24	FMV	50,000	55,296
GE CAPITAL BANK 3.3% 3/28/24	FMV	50,133	55,306
GE CAPITAL RETAIL BANK CD 2.100% 12/21/22	FMV	100,000	104,185
DISCOVER BANK CD 3.000% 8/21/23	FMV	100,000	108,129
PIMCO INCOME FUND-CLASS A	FMV	80,014	77,988
IS SHARES S&P 500 GROWTH FUND	FMV	24,948	30,040
VANGUARD INFORMATION ETF TECHNOLOGY	FMV	13,933	15,573

TY 2019 Other Expenses Schedule**Name:** GAMBER FOUNDATION**EIN:** 23-2331958**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PA REGISTRATION STATEMENT FEE	15	0		15
MISC. EXPENSE	5	0		0

TY 2019 Taxes Schedule**Name:** GAMBER FOUNDATION**EIN:** 23-2331958

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAX	5,313	0		0

Schedule B
(Form 990, 990-EZ,
or 990-PF)
Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047
2019

Name of the organization
GAMBER FOUNDATION

Employer identification number
23-2331958

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

Form 990-PF

501(c)(3) exempt private foundation

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 other 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 33¹/₃% 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 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
GAMBER FOUNDATION

Employer identification number
23-2331958

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	DUTCH GOLD HONEY INC 2220 DUTCH GOLD DRIVE LANCASTER, PA 176011997	\$ 100,000	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
2	GAMBER GLASS CONTAINER 2220 DUTCH GOLD DRIVE LANCASTER, PA 176011997	\$ 24,000	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
.		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
.		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
.		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
.		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)

Name of organization
GAMBER FOUNDATION

Employer identification number

23-2331958

Part II			
Noncash Property			
(a) No. from Part I	(b) Description of noncash property given <small>(see instructions). Use duplicate copies of Part II if additional space is needed.</small>	(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 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 Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____ _____ _____	_____ \$	_____

Name of organization
GAMBER FOUNDATION

Employer identification number
23-2331958

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____	_____ _____	_____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____ _____		_____ _____	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____	_____ _____	_____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____ _____		_____ _____	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____	_____ _____	_____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____ _____		_____ _____	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____	_____ _____	_____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____ _____		_____ _____	