

For calendar year 2019, or tax year beginning 11-01-2019, and ending 10-31-2020

Name of foundation PENN FRUIT FOUNDATION CO VAL ROSSMAN		A Employer identification number 23-2120341	
Number and street (or P.O. box number if mail is not delivered to street address) 334 LLANDRILLO ROAD		Room/suite	B Telephone number (see instructions) (215) 885-5555
City or town, state or province, country, and ZIP or foreign postal code BALA CYNWYD, PA 19004		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) ▶\$ 760,525	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)		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 (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)				
	2 Check <input checked="" type="checkbox"/> if the foundation is <b>not</b> required to attach Sch. B . . . . .				
	3 Interest on savings and temporary cash investments . . . . .	121	121		
	4 Dividends and interest from securities . . . . .	14,613	14,613		
	5a Gross rents . . . . .				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	91,587			
	b Gross sales price for all assets on line 6a 350,826				
	7 Capital gain net income (from Part IV, line 2) . . . . .		91,587		
	8 Net short-term capital gain . . . . .				
	9 Income modifications . . . . .				
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	b Less: Cost of goods sold . . . . .				
	c Gross profit or (loss) (attach schedule) . . . . .				
	11 Other income (attach schedule) . . . . .	144	144		
	12 Total. Add lines 1 through 11 . . . . .	106,465	106,465		
	13 Compensation of officers, directors, trustees, etc.				
	14 Other employee salaries and wages . . . . .				
	15 Pension plans, employee benefits . . . . .				
	16a Legal fees (attach schedule) . . . . .	285	285		
	b Accounting fees (attach schedule) . . . . .	1,922	1,922		
	c Other professional fees (attach schedule) . . . . .				
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see instructions) . . . . .				
	19 Depreciation (attach schedule) and depletion . . . . .				
	20 Occupancy . . . . .				
	21 Travel, conferences, and meetings . . . . .				
	22 Printing and publications . . . . .				
	23 Other expenses (attach schedule) . . . . .	120	120		
	24 Total operating and administrative expenses. Add lines 13 through 23 . . . . .	2,327	2,327		0
	25 Contributions, gifts, grants paid . . . . .	69,870			69,870
	26 Total expenses and disbursements. Add lines 24 and 25	72,197	2,327		69,870
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	34,268			
	b Net investment income (if negative, enter -0-)		104,138		
	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	<b>1</b> Cash—non-interest-bearing . . . . .	55,772	20,908	20,908
	<b>2</b> Savings and temporary cash investments . . . . .			
	<b>3</b> Accounts receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	<b>4</b> Pledges receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	<b>5</b> Grants receivable . . . . .			
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	<b>7</b> Other notes and loans receivable (attach schedule) ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	<b>8</b> Inventories for sale or use . . . . .			
	<b>9</b> Prepaid expenses and deferred charges . . . . .			
	<b>10a</b> Investments—U.S. and state government obligations (attach schedule)			
	<b>b</b> Investments—corporate stock (attach schedule) . . . . .	592,065	739,617	739,617
	<b>c</b> Investments—corporate bonds (attach schedule) . . . . .			
	<b>11</b> Investments—land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
	<b>12</b> Investments—mortgage loans . . . . .			
	<b>13</b> Investments—other (attach schedule) . . . . .	104,546		
	<b>14</b> Land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
<b>15</b> Other assets (describe ▶ _____)				
<b>16</b> <b>Total assets</b> (to be completed by all filers—see the instructions. Also, see page 1, item I)	752,383	760,525	760,525	
Liabilities	<b>17</b> Accounts payable and accrued expenses . . . . .			
	<b>18</b> Grants payable . . . . .			
	<b>19</b> Deferred revenue . . . . .			
	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons			
	<b>21</b> Mortgages and other notes payable (attach schedule) . . . . .			
	<b>22</b> Other liabilities (describe ▶ _____)			
	<b>23</b> <b>Total liabilities</b> (add lines 17 through 22) . . . . .		0	
Net Assets or Fund Balances	<b>Foundations that follow FASB ASC 958, check here</b> ▶ <input checked="" type="checkbox"/> <b>and complete lines 24, 25, 29 and 30.</b>			
	<b>24</b> Net assets without donor restrictions . . . . .	752,383	760,525	
	<b>25</b> Net assets with donor restrictions . . . . .			
	<b>Foundations that do not follow FASB ASC 958, check here</b> ▶ <input type="checkbox"/> <b>and complete lines 26 through 30.</b>			
	<b>26</b> Capital stock, trust principal, or current funds . . . . .			
	<b>27</b> Paid-in or capital surplus, or land, bldg., and equipment fund			
	<b>28</b> Retained earnings, accumulated income, endowment, or other funds			
	<b>29</b> <b>Total net assets or fund balances</b> (see instructions) . . . . .	752,383	760,525	
<b>30</b> <b>Total liabilities and net assets/fund balances</b> (see instructions) .	752,383	760,525		

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

<b>1</b> 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) . . . . .	<b>1</b>	752,383
<b>2</b> Enter amount from Part I, line 27a . . . . .	<b>2</b>	34,268
<b>3</b> Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>	
<b>4</b> Add lines 1, 2, and 3 . . . . .	<b>4</b>	786,651
<b>5</b> Decreases not included in line 2 (itemize) ▶ _____	<b>5</b>	26,126
<b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 . . . . .	<b>6</b>	760,525

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

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

  

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b> 2,134		2,043	91
<b>b</b> 347,759		257,196	90,563
<b>c</b>			
<b>d</b>			
<b>e</b>			

  

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
<b>a</b>			91
<b>b</b>			90,563
<b>c</b>			
<b>d</b>			
<b>e</b>			

  

<b>2</b> Capital gain net income or (net capital loss)	2	91,587
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8	3	91

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

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

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

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

☐ Yes ☒ No

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

**1** Enter the appropriate amount in each column for each year; see instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018	31,155	751,353	0.041465
2017	7,398	765,578	0.009663
2016	6,250	709,971	0.008803
2015	27,721	292,402	0.094804
2014	21,102	705,914	0.029893

  

<b>2</b> Total of line 1, column (d)	2	0.184628
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	0.036926
<b>4</b> Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	0
<b>5</b> Multiply line 4 by line 3	5	
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	6	1,041
<b>7</b> Add lines 5 and 6	7	1,041
<b>8</b> Enter qualifying distributions from Part XII, line 4	8	69,870

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

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

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions)		
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	<b>1</b>	1,041
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	1,041
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5</b>	1,041
<b>6</b>	Credits/Payments:		
<b>a</b>	2019 estimated tax payments and 2018 overpayment credited to 2019	<b>6a</b>	
<b>b</b>	Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868) . . . . .	<b>6c</b>	
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	
<b>7</b>	Total credits and payments. Add lines 6a through 6d. . . . .	<b>7</b>	
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached.	<b>8</b>	19
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . . ▶	<b>9</b>	1,060
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . . ▶	<b>10</b>	
<b>11</b>	Enter the amount of line 10 to be: <b>Credited to 2020 estimated tax</b> ▶ <b>Refunded</b> ▶	<b>11</b>	

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .		No
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). . . . . <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i>		No
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .		No
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: <b>(1)</b> On the foundation. ▶ \$ _____ <b>(2)</b> On foundation managers. ▶ \$ _____		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ _____		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities.</i>		No
<b>3</b> Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i> . . . . .		No
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .		No
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .		
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T.</i>		No
<b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	Yes	
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i> . . . . .	Yes	
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ PA _____		
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation .</i>	Yes	
<b>9</b> Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the taxable year beginning in 2019? See the instructions for Part XIV. <i>If "Yes," complete Part XIV</i> . . . . .	Yes	
<b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i> . . . . .		No

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

<b>11</b>	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions. . . . .	<b>11</b>		<b>No</b>
<b>12</b>	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions . . . . .	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>VALROSSMAN@GMAIL.COM</u>	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of ► <u>VAL ROSSMAN</u> Telephone no. ► <u>(215) 885-5555</u>			

Located at ► 334 LLANDRILLO ROAD BALA CYNWYD PA ZIP+4 ► 19004

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

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

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

<b>1a</b>	During the year did the foundation (either directly or indirectly):		<b>Yes</b>	<b>No</b>
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions . . . . .	<b>1b</b>		
	Organizations relying on a current notice regarding disaster assistance check here. . . . . ► <input type="checkbox"/>			
<b>c</b>	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019? . . . . .	<b>1c</b>		
<b>2</b>	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
<b>a</b>	At the end of tax year 2019, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2019? . . . . . <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
	If "Yes," list the years ► 2016 , 20____ , 20____ , 20____			
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions.) . . . . .	<b>2b</b>	<b>Yes</b>	
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here. ► 20____ , 20____ , 20____ , 20____			
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If "Yes," did it have excess business holdings in 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.) . . . . .	<b>3b</b>		
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>		<b>No</b>
<b>b</b>	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	<b>4b</b>		<b>No</b>

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

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

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

<b>1 List all officers, directors, trustees, foundation managers and their compensation. See instructions</b>				
<b>(a)</b> Name and address	<b>(b)</b> Title, and average hours per week devoted to position	<b>(c)</b> Compensation (If not paid, enter -0-)	<b>(d)</b> Contributions to employee benefit plans and deferred compensation	<b>(e)</b> Expense account, other allowances
VAL ROSSMAN 334 LLANDRILLO ROAD BALA CYNWYD, PA 19004	TRUSTEE 000.00	0	0	0
<b>2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."</b>				
<b>(a)</b> Name and address of each employee paid more than \$50,000	<b>(b)</b> Title, and average hours per week devoted to position	<b>(c)</b> Compensation	<b>(d)</b> Contributions to employee benefit plans and deferred compensation	<b>(e)</b> Expense account, other allowances
NONE				
<b>Total number of other employees paid over \$50,000.</b> . . . . .				

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

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

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

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
<b>1</b> THE PENN FRUIT FOUNDATION GOALS ARE TO CONTRIBUTE FUNDS TO CHARITABLE, NOT FOR PROFIT ORGANIZATIONS. THE FOUNDATION'S INTENT IS TO CONTRIBUTE TO ORGANIZATIONS IN THE AREA OF HUMANITARIAN AID, EDUCATION AND THE ARTS.	12,500
<b>2</b> THE PENN FRUIT FOUNDATION GOALS ARE TO CONTRIBUTE FUNDS TO CHARITABLE, NOT FOR PROFIT ORGANIZATIONS. THE FOUNDATION'S INTENT IS TO CONTRIBUTE TO ORGANIZATIONS IN THE AREA OF HUMANITARIAN AID, EDUCATION AND THE ARTS.	10,000
<b>3</b> THE PENN FRUIT FOUNDATION GOALS ARE TO CONTRIBUTE FUNDS TO CHARITABLE, NOT FOR PROFIT ORGANIZATIONS. THE FOUNDATION'S INTENT IS TO CONTRIBUTE TO ORGANIZATIONS IN THE AREA OF HUMANITARIAN AID, EDUCATION AND THE ARTS.	4,500
<b>4</b> THE PENN FRUIT FOUNDATION GOALS ARE TO CONTRIBUTE FUNDS TO CHARITABLE, NOT FOR PROFIT ORGANIZATIONS. THE FOUNDATION'S INTENT IS TO CONTRIBUTE TO ORGANIZATIONS IN THE AREA OF HUMANITARIAN AID, EDUCATION AND THE ARTS.	3,650

**Part IX-B Summary of Program-Related Investments (see instructions)**

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

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

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

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

<b>1</b>	Minimum investment return from Part X, line 6. . . . .	<b>1</b>	
<b>2a</b>	Tax on investment income for 2019 from Part VI, line 5. . . . .	<b>2a</b>	
<b>b</b>	Income tax for 2019. (This does not include the tax from Part VI.). . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b. . . . .	<b>2c</b>	
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1. . . . .	<b>3</b>	
<b>4</b>	Recoveries of amounts treated as qualifying distributions. . . . .	<b>4</b>	
<b>5</b>	Add lines 3 and 4. . . . .	<b>5</b>	
<b>6</b>	Deduction from distributable amount (see instructions). . . . .	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . . . .	<b>7</b>	

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

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26. . . . .	<b>1a</b>	69,870
<b>b</b>	Program-related investments—total from Part IX-B. . . . .	<b>1b</b>	
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes. . . . .	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required). . . . .	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule). . . . .	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	69,870
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions. . . . .	<b>5</b>	1,041
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	<b>6</b>	68,829

**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
<b>1</b> Distributable amount for 2019 from Part XI, line 7				
<b>2</b> Undistributed income, if any, as of the end of 2019:				
<b>a</b> Enter amount for 2018 only. . . . .			4,973	
<b>b</b> Total for prior years: 2014, 20____, 20____		14,554		
<b>3</b> Excess distributions carryover, if any, to 2019:				
<b>a</b> From 2014. . . . .				
<b>b</b> From 2015. . . . .				
<b>c</b> From 2016. . . . .				
<b>d</b> From 2017. . . . .				
<b>e</b> From 2018. . . . .				
<b>f</b> Total of lines 3a through e. . . . .				
<b>4</b> Qualifying distributions for 2019 from Part XII, line 4: ► \$ 69,870				
<b>a</b> Applied to 2018, but not more than line 2a			4,973	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .				
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .				
<b>d</b> Applied to 2019 distributable amount. . . . .				
<b>e</b> Remaining amount distributed out of corpus	64,897			
<b>5</b> Excess distributions carryover applied to 2019. (If an amount appears in column (d), the same amount must be shown in column (a).)				
<b>6 Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	64,897			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b. . . . .		14,554		
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .		14,554		
<b>d</b> Subtract line 6c from line 6b. Taxable amount—see instructions. . . . .				
<b>e</b> Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions. . . . .				
<b>f</b> Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020. . . . .				
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions). . . . .				
<b>8</b> Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions). . . . .				
<b>9 Excess distributions carryover to 2020.</b> Subtract lines 7 and 8 from line 6a. . . . .				
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2015. . . . .				
<b>b</b> Excess from 2016. . . . .				
<b>c</b> Excess from 2017. . . . .				
<b>d</b> Excess from 2018. . . . .				
<b>e</b> Excess from 2019. . . . .				

**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		
0				0	
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .	69,870	31,875	7,693	6,250	115,688
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .	69,870	31,875	7,693	6,250	115,688

**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. . .

(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:

**b** The form in which applications should be submitted and information and materials they should include:

**c** Any submission deadlines:

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:  
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)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total</b> . . . . .			<b>3a</b>	69,870
<b>b</b> <i>Approved for future payment</i>				
<b>Total</b> . . . . .			<b>3b</b>	

Enter gross amounts unless otherwise indicated.

Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions.)
(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
Enter gross amounts unless otherwise indicated.				
<b>1</b> Program service revenue:				
a _____				
b _____				
c _____				
d _____				
e _____				
f _____				
g Fees and contracts from government agencies				
<b>2</b> Membership dues and assessments. . . .				
<b>3</b> Interest on savings and temporary cash investments . . . . .				
				121
				14,613
<b>4</b> Dividends and interest from securities. . . .				
<b>5</b> Net rental income or (loss) from real estate:				
a Debt-financed property. . . . .				
b Not debt-financed property. . . . .				
<b>6</b> Net rental income or (loss) from personal property				
<b>7</b> Other investment income. . . . .				
				144
<b>8</b> Gain or (loss) from sales of assets other than inventory . . . . .				
				91,587
<b>9</b> Net income or (loss) from special events:				
<b>10</b> Gross profit or (loss) from sales of inventory				
<b>11</b> Other revenue: a _____				
b _____				
c _____				
d _____				
e _____				
<b>12</b> Subtotal. Add columns (b), (d), and (e). . .				
				106,465
<b>13 Total.</b> Add line 12, columns (b), (d), and (e). . . . . <b>13</b>				
				106,465

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

[illegible]

## Part XVII

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

--	--	--

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

--	--	--

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

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

value  
ue

[illegible]

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

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

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

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

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.

\*\*\*\*\*

Title

(see instr.) ☒ Yes ☐ No

**Paid  
Preparer  
Use Only**

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	NORBERT L YAGLINSKI JR CPA		2021-01-20		P00009609
	Firm's name ▶ SOLOMON AND YAGLINSKI PC				Firm's EIN ▶ 47-3771607
	Firm's address ▶ 595 SKIPPACK PIKE SUITE 100 BLUE BELL, PA 19422				Phone no. (215) 885-5555

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ALBERT EINSTEIN MEDICAL CENTER 5501 OLD YORK ROAD GROUND FLOOR PHILADELPHIA, PA 19141	NONE	CHARITABLE	UNRESTRICTED	12,500
AMERICAN ACADEMY OF PEDIATRICS 211 EAST CHICAGO AVENUE SUITE 1600 CHICAGO, IL 60611	NONE	CHARITABLE	UNRESTRICTED	200
AMERICAN CANCER SOCIETY 250 WILLIAMS STREET NW ATLANTA, GA 30303	NONE	CHARITABLE	UNRISTRICTED	100
<b>Total . . . . . ▶ 3a</b>				69,870

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
AMERICAN RIVERS1101 14 STREET NW WASHINGTON, DC 20005	NONE	CHARITABLE	UNRESTRICTED	100
ANTI-DEFAMATION LEAGUE 1500 MARKET STREET WEST TOWER SUITE 2415 PHILADELPHIA, PA 19130	NONE	CHARITABLE	UNRESTRICTED	250
ARTIST IN WILDERNESSPO BOX 1442 CARBONDALE, CO 81623	NONE	CHARITABLE	UNRESTRICTED	250
<b>Total . . . . . ▶ 3a</b>				69,870

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ASTRAL ARTISTS1500 WALNUT STREET SUITE 413 PHILADELPHIA, PA 19102	NONE	CHARITABLE	UNRESTRICTED	1,500
AUTISM SPEAKS1060 STATE ROAD 2ND FLOOR PRINCETON, NJ 08540	NONE	CHARITABLE	UNRESTRICTED	200
BALA CYNWYD LIBRARY 131 OLD LANCASTER ROAD BALA CYNWYD, PA 19004	NONE	CHARITABLE	UNRESTRICTED	100
<b>Total . . . . . ▶ 3a</b>				69,870



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
BALDWIN SCHOOL 701 MONTGOMERY AVENUE BRYN MAWR, PA 19010	NONE	CHARITABLE	UNRESTRICTED	250
BE THE MARCH FOUNDATION PO BOX 1450 MINNEAPOLIS, MN 55485	NONE	CHARITABLE	UNRESTRICTED	200
BETH DAVID SYNAGOGUE 1130 VAUGHAN LANE GLADWYNE, PA 19035	NONE	CHARITABLE	UNRESTRICTED	10,000
<b>Total . . . . . ▶ 3a</b>				69,870

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
BRYN MAWR FILM INSTITUTE 824 WEST LANCASTER AVENUE BRYN MAWR, PA 19010	NONE	CHARITABLE	UNRESTRICTED	90
CONGREGATION RODEPH SHALOM 615 N BRAOD STREET PHILADELPHIA, PA 19123	NONE	CHARITABLE	UNRESTRICTED	3,650
COURT APPOINTED SPECIAL ADVOCATES 1501 CHERRY STREET PHILADELPHIA, PA 19102	NONE	CHARITABLE	UNRESTRICTED	100
<b>Total . . . . . ▶ 3a</b>				69,870

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CURTIS INST OF MUSIC 1726 LOCUST STREET PHILADELPHIA, PA 19103	NONE	CHARITABLE	UNRESTRICTED	500
CYNWYD HERITAGE TRAILPO BOX 695 BALA CYNWYD, PA 19004	NONE	CHARITABLE	UNRESTRICTED	500
DARTMOUTH COLLEGE 6066 DEVELOPMENT OFFICE HANOVER, NH 037554400	NONE	CHARITABLE	UNRESTRICTED	100
<b>Total . . . . . ▶ 3a</b>				69,870

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
DARTMOUTH LAX 6066 DEVELOPMENT OFFICE HANOVER, NH 03755	NONE	CHARITABLE	UNRESTRICTED	100
DIENTES COMMUNITY DENTAL CARE 5300 SOQUEL AVENUE SUITE 103 SANTA CRUZ, CA 95062	NONE	CHARITABLE	UNRESTRICTED	200
EMILY'S ENTOURAGEPO BOX 71 MERION STATION, PA 19066	NONE	CHARITABLE	UNRESTRICTED	100
<b>Total . . . . . ▶ 3a</b>				69,870

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
FAIRMOUNT PARK CONSERVATORY RESEVOIR DRIVE PHILADELPHIA, PA 19119	NONE	CHARITABLE	UNRESTRICTED	250
FAJAPO BOX 95000 PHILADELPHIA, PA 191954000	NONE	CHARITABLE	UNRESTRICTED	1,000
FRIENDS OF THE WISSAHICKON 40 W EVERGREEN AVENUE SUITE 108 PHILADELPHIA, PA 191954000	NONE	CHARITABLE	UNRESTRICTED	250
<b>Total . . . . . ▶ 3a</b>				69,870

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
GIFT OF LIFE401 N 3RD STREET PHILADELPHIA, PA 19123	NONE	CHARITABLE	UNRESTRICTED	550
IMPACT 100PO BOX 275 WYNNEWOOD, PA 19096	NONE	CHARITABLE	UNRISTRICTED	1,150
INLIQUID1400 N AMERICAN STREET SUITE 314 PHILADELPHIA, PA 19122	NONE	CHARITABLE	UNRESTRICTED	200
<b>Total . . . . . ▶ 3a</b>				69,870

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
JEVS1845 WALNUT STREET 7TH FLOOR PHILADELPHIA, PA 19103	NONE	CHARITABLE	UNRESTRICTED	250
JUVENILE DIABETES RESEARCH FUND 120 GULPH ROAD WYNNEWOOD, PA 19096	NONE	CHARITABLE	UNRESTRICTED	50
LARCHMONT COMM COUNSELING CENTER 234 STANLEY AVENUE MAMARONECK, NY 10543	NONE	CHARITABLE	UNRESTRICTED	50
<b>Total . . . . . ▶ 3a</b>				69,870

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
LOWER MERION CONSERVANCY 1301 ROSE GLEN ROAD GLADWYNE, PA 19035	NONE	CHARITABLE	UNRESTRICTED	100
MULTIPLE SCLEROSIS900 S BROODWAY SUITE 200 DENVER, CO 80209	NONE	CHARITABLE	UNRESTRICTED	100
MURAL ARTS1727 MT VERNON STREET PHILADELPHIA, PA 19130	NONE	CHARITABLE	UNRISTRICED	100
<b>Total . . . . . ▶ 3a</b>				69,870



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MYELOPROLIFERATIVE NEOPLASM RESEARC 180 N MICHIGAN AVENUE SUITE 1870 CHICAGO, IL 60601	NONE	CHARITABLE	UNRESTRICTED	200
NARBERTH AMBULANCE 101 SIBLEY AVENUE ARDMORE, PA 19003	NONE	CHARITABLE	UNRESTRICTED	100
NATIONAL RESOURCES DEFENSE COUNCIL PO BOX 1830 MERRIFIELD, VA 221168030	NONE	CHARITABLE	UNRESTRICTED	200
<b>Total . . . . .</b>			<b>▶ 3a</b>	69,870

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
PENN DENTAL240 S 40TH STREET PHILADELPHIA, PA 19104	NONE	CHARITABLE	UNRESTRICTED	3,200
PENN DENTAL MEDICINE 240S 40TH STREET PHILADELPHIA, PA 19104	NONE	CHARITABLE	UNRESTICTED	2,000
PHILA MUSEUM OF ART 1528 WALNUT STREET SUITE 301 PHILADELPHIA, PA 19102	NONE	CHARITABLE	UNRESTRICTED	500
<b>Total . . . . . ▶ 3a</b>				69,870

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
PHILA MUSEUM OF ART 2600 BENJAMIN FRANKLIN PK PHILADELPHIA, PA 19130	NONE	CHARITABLE	UNRESTRICTED	500
PHILADELPHIA ORCHESTRA 240 S BROAD STREET PHILADELPHIA, PA 19107	NONE	CHARITABLE	UNRESTRICTED	4,500
PHILADELPHIA ZOO 3400 W GIRARD AVENUE PHILADELPHIA, PA 19104	NONE	CHARITABLE	UNRESTRICTED	153
<b>Total . . . . . ▶ 3a</b>				69,870

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
PROJECT HOME 1515 FAIRMOUNT AVENUE PHILADELPHIA, PA 19130	NONE	CHARITABLE	UNRESTRICTED	250
SPHINX AT DARTMOUTH EAST WHEELOCK STREET HANOVER, NH 03755	NONE	CHARITABLE	UNRESTRICTED	100
STANFORD UNIVERSITYPO BOX 20466 STANFORD, CA 943090466	NONE	CHARITABLE	UNRESTRICTED	500
<b>Total . . . . . ▶ 3a</b>				69,870

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
TEMPE UNIVERSITY 1801 NORTH BROAD STREET PHILADELPHIA, PA 19122	NONE	CHARITABE	UNRESTRICTED	250
THE FOUNDATION OF THE AAE 180 N STETSON AVENUE SUITE 1500 CHICAGO, IL 606016710	NONE	CHARITABLE	UNRESTRICTED	2,000
THE HAVERFORD SCHOOOL 450 LANCASTER AVENUE HAVERFORD, PA 190419987	NONE	CHARITABLE	UNRESTRICTED	100
<b>Total . . . . . ▶ 3a</b>				69,870

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
THETA DELTA CHIPO BOX 22 HANOVER, NH 03755	NONE	CHARITABLE	UNRESTRICTED	50
TROUT UNLLIMITEDPO BOX 7400 WOOLY BUGGER, WV 25438	NONE	CHARITABLE	UNRESTRICTED	100
UNION FIRE ASSOCIATION 149 MONTGOMERY AVENUE BALA CYNWYD, PA 190049955	NONE	CHARITABLE	UNRESTRICTED	100
<b>Total . . . . . ▶ 3a</b>				69,870

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
UNIVERSITY OF PENNSYLVANIA 2929 WALNUT STREET SUITE 300 PHILADELPHIA, PA 191045099	NONE	CHARITABLE	UNRESTRICTED	250
VARIOUS334 LLANDRILL ROAD BALA CYNWYD, PA 19004	NONE	CHARITABLE	UNRESTRICTED	18,327
VILLANOVA LAW SCHOOL 299 N SPRING MILL ROAD VILLANOVIA, PA 19085	NONE	CHARITABLE	UNRESTRICTED	250
<b>Total . . . . . ▶ 3a</b>				69,870

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
VIRGINIA COMMONWEALTH UNIVERSITY VIRGINIA COMMONWEALTH UNI RICHMOND, VA 23286	NONE	CHARITABLE	UNRESTRICTED	250
WAYNE ART CENTER 413 MAPLEWOOD AVENUE WAYNE, PA 19087	NONE	CHARITABLE	UNRESTRICTED	100
WHYY RADIO150 N 6TH STREET PHILADELPHIA, PA 19106	NONE	CHARITABLE	UNRESTRICTED	500
Total . . . . . ▶ 3a				69,870



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
WISTAR INSTITUTE 3601 SPRUCE STREET PHILADELPHIA, PA 19104	NONE	CHARITABLE	UNRESTRICTED	250
WOODMERE ART MUSEUM 9201 GERMANTOWN AVENUE PHILADELPHIA, PA 19118	NONE	CHARITABLE	UNRESTRICTED	100
<b>Total . . . . . ▶ 3a</b>				69,870

**TY 2019 Accounting Fees Schedule**

**Name:** PENN FRUIT FOUNDATION  
CO VAL ROSSMAN

**EIN:** 23-2120341

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
SOLOMON & YAGLINKSI PC	1,922	1,922		

**TY 2019 Investments Corporate Stock Schedule**

**Name:** PENN FRUIT FOUNDATION  
CO VAL ROSSMAN  
**EIN:** 23-2120341

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
APPLE	141,518	141,518
BOEING	86,634	86,634
CATERPILLAR	62,820	62,820
CHUBB		
CISCO	10,770	10,770
COMCAST	12,672	12,672
CVS HEALTH	6,619	6,619
EMERSON ELECTRIC		
EXXON MOBIL	6,524	6,524
IBM	7,035	7,035
INTEL	13,284	13,284
JOHNSON & JOHNSON	21,663	21,663
JPMORGAN	16,765	16,765
KELLOGG		
LOCKHEED MARTIN	35,013	35,013
MCDONALDS		
MCKESSON	29,498	29,498
MERCK	23,240	23,240
MICROSOFT	50,618	50,618
NVIDIA	150,408	150,408
PFIZER	9,544	9,544
PRUDENTIAL		
ROYAL DUTCH SHELL	1,916	1,916
TRAVELERS COS		
UNITED TECHNOLOGIES		
VERIZON	3,875	3,875
WAL-MART	27,750	27,750
CARRIER GLOBAL CORPORATION	2,705	2,705
OTIS WORLDWIDE CORP	2,451	2,451
RAYTHEON TECHNOLOGIES CORP	16,295	16,295

**TY 2019 Investments - Other Schedule**

**Name:** PENN FRUIT FOUNDATION  
CO VAL ROSSMAN

**EIN:** 23-2120341

**Investments Other Schedule 2**

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
OPPENHEIMER DEV	FMV		
PGIM TOTAL RETURN BOND CL Z	FMV		

**TY 2019 Legal Fees Schedule**

**Name:** PENN FRUIT FOUNDATION  
CO VAL ROSSMAN

**EIN:** 23-2120341

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
HAMBURG, RUBIN, MULLEN	285	285		

**TY 2019 Other Decreases Schedule**

**Name:** PENN FRUIT FOUNDATION  
CO VAL ROSSMAN

**EIN:** 23-2120341

Description	Amount
FEDERAL TAXES 2018	4,514
UNREALIZED LOSSES ON EQUITIES	21,612

**TY 2019 Other Expenses Schedule**

**Name:** PENN FRUIT FOUNDATION  
CO VAL ROSSMAN

**EIN:** 23-2120341

**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
BANK CHARGES	120	120		

## TY 2019 Other Income Schedule

**Name:** PENN FRUIT FOUNDATION  
CO VAL ROSSMAN

**EIN:** 23-2120341

### Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
WELLS FARGO	144	144	