KILE & COMPANY 812D CENTRAL RD BLOOMSBURG, PA 17815 (570) 784-4350

May 2, 2019

BLOOMSBURG AREA COMMUNITY FOUNDATION 725 WEST FRONT ST BERWICK, PA 18603

Dear Client:

Your 2018 Federal Return of Private Foundation will be electronically filed with the Internal Revenue Service upon receipt of a signed Form 8879-EO - IRS e-file Signature Authorization. No tax is payable with the filing of this return.

Please be sure to call us if you have any questions.

Sincerely,

WILLIAM E KILE CPA

Form **8879-EO**

IRS e-file Signature Authorization for an Exempt Organization

or calendar	year 2018, or fiscal	year beginning	, 2018, and ending

Department of the Treasury	► Do not send to the IRS. Ke ► Go to www.irs.gov/Form8879EC			2018
Internal Revenue Service Name of exempt organization	- Go to www.irs.gov/Formee/9EC	7 for the latest information.	Employer id	entification number
, 3	COMMUNITY FOUNDATION		23-284	
Name and title of officer	COMMUNITY FOUNDATION		23 204	3073
JOHN THOMPSON		PRESIDENT		
Part I Type of Retu	rn and Return Information (Whole Dolla	rs Only)		
check the box on line 1a, 2 leave line 1b, 2b, 3b, 4b, o	rn for which you are using this Form 8879-EO and and an and an are using the amount on that lift or 5b, whichever is applicable, blank (do not enter bo not complete more than one line in Part I.	ne for the return being filed wit	h this form	was blank, then
1 a Form 990 check here	b Total revenue, if any (Form 990, F	Part VIII, column (A), line 12)		1 b
	nere b Total revenue, if any (Form 99			2 b
	k here b Total tax (Form 1120-POL			3 b
	nere			4b 0.
5 a Form 8868 check her	re ▶			5 b
Post II Declaration a	and Signature Authorization of Officer			
•	and Signature Authorization of Officer I declare that I am an officer of the above organi	ization and that I have examine	nd a copy o	f the organization's 2019
I further declare that the an intermediate service provic the IRS (a) an acknowledg refund, and (c) the date of funds withdrawal (direct deorganization's federal taxe contact the U.S. Treasury I authorize the financial inst answer inquiries and resoli	panying schedules and statements and to the best of mount in Part I above is the amount shown on the der, transmitter, or electronic return originator (EF ement of receipt or reason for rejection of the transpression of the U.S. Treebit) entry to the financial institution account indicts of the solution of the transpression of the transpression of the electronic of the electronic of the transpression of the electronic of the electroni	e copy of the organization's ele RO) to send the organization's insmission, (b) the reason for a sasury and its designated Finar tated in the tax preparation soful to debit the entry to this account to the paying payment of taxes to receive a personal identification numb	ectronic return to the return	irn. I consent to allow my e IRS and to receive from processing the return or to initiate an electronic ayment of the oke a payment, I must ement) date. I also I information necessary to
Officer's PIN: check one b	ox only			
X I authorize KILE &		to enter my PIN	2255	1 as my signature
· 	ERO firm name		Enter five numl do not enter all	
on the organization's tax a state agency(ies) reg the return's disclosure	year 2018 electronically filed return. If I have indicate gulating charities as part of the IRS Fed/State proconsent screen.	ed within this return that a copy ogram, I also authorize the afore	f the return ementioned	is being filed with ERO to enter my PIN on
indicated within this re	nization, I will enter my PIN as my signature on the o turn that a copy of the return is being filed with a y PIN on the return's disclosure consent screen.	rganization's tax year 2018 electr state agency(ies) regulating ch	onically filed narities as p	d return. If I have part of the IRS Fed/State
Officer's signature		Date ►		
Part III Certification	and Authentication			
ERO's EFIN/PIN. Enter you	ur six-digit electronic filing identification		_	
number (EFIN) followed by	your five-digit self-selected PIN			24352603968
				Do not enter all zeros
above. I confirm that I am su	neric entry is my PIN, which is my signature on the submitting this return in accordance with the requireme ders for Business Returns.			
ERO's signature ► <u>WILL</u>	IAM E KILE CPA	Date ►		
	ERO Must Retain This Form			

BAA For Paperwork Reduction Act Notice, see instructions.

Form **8879-EO** (2018)

Form **990-PF**

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

OMB No. 1545-0052 2018

Department of the Treasury Internal Revenue Service

► 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.

Open to Public Inspection

For c	alendai	year 2018 or tax year beginning	, 2018	, and ending		,	
BI O	OMCRI	JRG AREA COMMUNITY FOUNDA	TT∩N		Α	Employer identification null 23-2843673	nber
725	WES7	FRONT ST	ITTON		В	Telephone number (see inst	
BER	WICK,	PA 18603				(570) 752-393	30
			_		С	If exemption application is	pending, check here.
G C	heck al	I that apply: Initial return	Initial return of a form	ner public charity	D	1 Foreign organizations, chec	ck here
		X Final return Address change	Amended return Name change			2 Foreign organizations meet	ting the 85% test, check
H C	heck ty		(c)(3) exempt private f	oundation		here and attach computation	on ►
		ction 4947(a)(1) nonexempt charitable t		orivate foundation	Ε	If private foundation status	
			counting method: X C	ash Accrual		under section 507(b)(1)(A)	, check here
►	\$	' ' ' '	Other (specify) column (d) must be or	cash hasis	F	If the foundation is in a 60 under section 507(b)(1)(B)	-month termination
Par	I A	nalysis of Revenue and		·			(d) Disbursements
	co ne	(penses (The total of amounts in lumns (b), (c), and (d) may not cessarily equal the amounts in lumn (a) (see instructions).)	(a) Revenue and expenses per books	(b) Net investmer income	nt	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)					
	2	Check \blacktriangleright X if the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments					
Revenue	4 5a	Dividends and interest from securities					
	b	Net rental income or (loss)					
	6a	Net gain or (loss) from sale of assets not on line 10					
	7	assets on line 6a					
	8	Net short-term capital gain					
	9	Income modifications					
	IUa	returns and allowances					
	b	Less: Cost of goods sold					
	l `	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	0.		0.	0.	
	13	Compensation of officers, directors, trustees, etc	0.				
	14	Other employee salaries and wages					
es	15	Pension plans, employee benefits Legal fees (attach schedule)					
enses		Accounting fees (attach sch)					
_	_	Other professional fees (attach sch)					
e E	17	Interest					
¥į	18	Taxes (attach schedule)(see instrs)					
stra	19	Depreciation (attach schedule) and depletion					
<u>=</u>	20	Occupancy					
β	21	Travel, conferences, and meetings					
þ	22	Printing and publications					
ā	23	Other expenses (attach schedule)					
đi,	24	Total operating and administrative					
Operating and Administrative Exp	25	expenses. Add lines 13 through 23					
o	25 26	Total expenses and disbursements.					
		Add lines 24 and 25	0.		0.	0.	0.
	27	Subtract line 26 from line 12:					
	a	Excess of revenue over expenses and disbursements	0.				
	b	Net investment income (if negative, enter -0-)			0.		
	C	Adjusted net income (if negative, enter -0-)				0.	

Par	ŀ 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 o	f year
ıaı				(a) Book Value	(b) Book Value	(c) Fair Market Value
	1		-bearing			
	2		ary cash investments			
	3	Accounts receivable				
		Less: allowance for				
	4	Pledges receivable.				
			doubtful accounts ►			
	5	Grants receivable				
	6	disqualified persons (attac	cers, directors, trustees, and other ch schedule) (see instructions)			
	7	Other notes and loans rec	eivable (attach sch)			
		Less: allowance for	doubtful accounts ►			
STS.	8	Inventories for sale	or use			
Assets	9	Prepaid expenses a	nd deferred charges			
•	10 a	Investments – U.S. obligations (attach s	and state government chedule)			
	Ł	Investments — corporate	stock (attach schedule)			
	(: Investments — corporate	bonds (attach schedule)			
	11	Investments – land, equipment: basis	buildings, and			
		Less: accumulated deprec (attach schedule)	iation			
	12	Investments - morte	gage loans			
	13	Investments - other	(attach schedule)			
	14	Land, buildings, and	equipment: basis			
		(attach schedule)	ation ►			
	15	Other assets (descri	be ►)			
	16		be completed by all filers — Also, see page 1, item I)	0.	0.	0.
	17		nd accrued expenses			
S	18					
Liabilities	19					
abi	20	,	tors, trustees, & other disqualified persons			
Ï	21		s payable (attach schedule)			
	22	Other liabilities (des	cribe)			
	23	Total liabilities (add	lines 17 through 22)	0.	0.	
ses		Foundations that fo	llow SFAS 117, check here > 24 through 26, and lines 30 and 31.			
Net Assets or Fund Balances	24 25					
<u>B</u>	26	Permanently restrict	ed			
2	20		not follow SFAS 117, check here			
or Fu		and complete lines	27 through 31.			
ts (27	·	orincipal, or current funds			
Se	28		or land, bldg., and equipment fund			
As	29	= ·	ulated income, endowment, or other funds			
et	30 31		und balances (see instructions)net assets/fund balances	0.	0.	
_	"	(see instructions)	· · · · · · · · · · · · · · · · · · ·	0.	0.	
Par		Analysis of Chan	ges in Net Assets or Fund Balanc	es		
1	Total end-	I net assets or fund ba of-year figure reported	alances at beginning of year — Part II, colu d on prior year's return)	mn (a), line 30 (must a	gree with	0.
2			line 27a			0.
3	Other	increases not included in li	ne 2 (itemize) ►		3	
4	Add	lines 1, 2, and 3			4	0.
5	Decrea	ases not included in line 2 (itemize) ►		5	
6	Total	net assets or fund ba	alances at end of year (line 4 minus line 5)	- Part II, column (b), I	ine 30 6	0.

Par	t IV Capital Gains and I	Losses for Tax on Investmen	nt Income			
		the kind(s) of property sold (for examp arehouse; or common stock, 200 sh		(b) How acquir P — Purchase D — Donation	(mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a	N/A					
b						
С						
d						
е		<u>, </u>				
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sal		(h) Gain or ((e) plus (f) m	
а						
b						
С						
d						
е						
	Complete only for assets showing	g gain in column (h) and owned by the	foundation on 12/31/69.		(I) Gains (Col	
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		gain minus col. (k), I than -0-) or Losses (f	
а						
b						
С						
d						
е						
2	Capital gain net income or (ne	t capital loss) If gain, also	enter in Part I, line 7 ter -0- in Part I, line 7		2	
3	Net short-term capital gain or	(loss) as defined in sections 1222(5	and (6):			
		e 8, column (c). See instructions. If	(loss), enter -0-		3	
Par	V Qualification Under	r Section 4940(e) for Reduce	d Tax on Net Investm	ent Incon	ne	
(For c		oundations subject to the section 4940				
16	tion 4040(d)(0) and in a large t	ulai a sank lata ada				
it sec	tion 4940(d)(2) applies, leave t	this part blank.				
Was	the foundation liable for the sec	ction 4942 tax on the distributable a	amount of any year in the ba	ase period?	Yes	X No
If 'Ye	s,' the foundation doesn't quali	fy under section 4940(e). Do not co	mplete this part.		ш	
1	Enter the appropriate amount in	each column for each year; see the in	structions before making any	entries.		
	(a)	(b)	(c)		(d)	
(Base period years Calendar year (or tax year	Adjusted qualifying distributions	Net value of noncharitable-use ass	ets	Distribution (col. (b) divided	
	beginnin'g in)		noncharitable ase ass	0013	(coi. (b) aivided	by coi. (c))
	2017	252,418.	234	1,256.		1.077531
	2016	16,048.	219	9,589.		0.073082
	2015	18,209.	232	2,218.		0.078413
	2014	19,868.	244	1,985.		0.081099
	2013	10,014.	230),553.		0.043435
2	Total of line 1, column (d)				2	1.353560
3	Average distribution ratio for the	5-year base period — divide the total of	on line 2 by 5.0. or by the			
	number of years the foundation	n has been in existence if less than	5 years		3	0.270712
4	Enter the net value of nonchar	itable-use assets for 2018 from Par	t X, line 5		1	
5	Multiply line 4 by line 3				5	
6	Enter 1% of net investment inc	come (1% of Part I, line 27b)			5	
7	Add lines 5 and 6				7	
8	Enter qualifying distributions fr	rom Part XII, line 4			3	
	, , ,	an line 7, check the box in Part VI, line		<u> </u>		

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions	5)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1.	•		
	Date of ruling or determination letter: (attach copy of letter if necessary – see instructions)			
Ł	Domestic foundations that meet the section 4940(e) requirements in Part V,			0.
	check here. ► X and enter 1% of Part I, line 27b			
C	: All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			0.
3	Add lines 1 and 2			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-). 4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 5			0.
6	Credits/Payments:			
	a 2018 estimated tax pmts and 2017 overpayment credited to 2018			
	Exempt foreign organizations – tax withheld at source			
	: Tax paid with application for extension of time to file (Form 8868)			
_ (Backup withholding erroneously withheld			_
7	Total credits and payments. Add lines 6a through 6d			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid. Figure 10 to be: Credited to 2019 estimated tax Refunded 10			
11 D ar	Enter the amount of line 10 to be: Credited to 2019 estimated tax * Refunded * 11 * VII-A Statements Regarding Activities			
			Yes	No
1 a	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?	1 a	162	X
	i i i i i i i i i i i i i i i i i i i			71
ŗ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1 b		Х
	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.	1.0		37
	Did the foundation file Form 1120-POL for this year?	1 c		X
	(1) On the foundation ►\$ 0. (2) On foundation managers ►\$			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
_	foundation managers •\$ 0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If 'Yes,' attach a detailed description of the activities.			
3	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? If 'Yes,' attach a conformed copy of the changes	3		v
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4 a		X
	Diff 'Yes,' has it filed a tax return on Form 990-T for this year?	4b	N	/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	X	711
	If 'Yes,' attach the statement required by General Instruction T.			
6	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?	6		Χ
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col. (c), and Part XV	7		Χ
8 a	Enter the states to which the foundation reports or with which it is registered. See instructions			
	N/A			
k	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 <i>General Instruction G?</i> If 'No,' attach explanation	8 b	N	/ A
^		3.5	IN	
9	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 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If 'Yes,' complete Part XIV.	9		Χ
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses.	10		X

BAA Form **990-PF** (2018)

	1 990-PF (2018) BLOOMSBURG AREA COMMUNITY FOUNDATION 23-28436	73	P	age 5
Par	t 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	11	Yes	No X
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	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		Х	Λ
14	Website address			
14	The books are in care of ► JOHN THOMPSON Telephone no. ► (570) Located at ► 725 WEST FRONT ST BERWICK PA ZIP + 4 ► 18603	<u> 152</u>	<u>-393</u>	<u> </u>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — check here. and enter the amount of tax-exempt interest received or accrued during the year	IN./. F	<u>.</u> -	 N/A
16	At any time during calendar year 2018, 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?		Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
ı uı	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		Yes	No
1 :	During the year, did the foundation (either directly or indirectly):		163	140
1 6				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	disqualified person?Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?			
	(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.)			
k	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	1 b	NT.	/A
	Organizations relying on a current notice regarding disaster assistance, check here	10	IN.	A
	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 2018?	1 c		Х
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	a At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018?			
	If 'Yes,' list the years ► 20 _ , 20 _ , 20 , 20			
k	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.).	2 b	N	/A
,	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		IN	ГΛ
	► 20 , 20 , 20 , 20			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
ŀ	If 'Yes,' did it have excess business holdings in 2018 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 2018.)	2.		43
	determine if the toundation had excess business holdings in 2018.)	3 b	N.	/A
4 a	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a		Х
ŀ	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 2018?	4 b		Х

Part VII-B Statements Regarding Activit	ies for Which Form	1 4/20 May Be Req	uired (continued)		
5a During the year, did the foundation pay or incur a (1) Carry on propaganda, or otherwise attemption	•	n (section 4945(e))?		No	Yes No
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	lic election (see section ation drive?	4955); or to carry			
(3) Provide a grant to an individual for travel,			Yes X	No	
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? See instructions	a charitable, etc., organi	zation described		No	
(5) Provide for any purpose other than religio educational purposes, or for the prevention	n of cruelty to children	or animals?		No	
b If any answer is 'Yes' to 5a(1)—(5), did any of described in Regulations section 53.4945 or in a See instructions	f the transactions fail to current notice regarding c	qualify under the exce lisaster assistance?	ptions	5 b	N/A
Organizations relying on a current notice rega	irding disaster assistand	ce, check here	· · · · · · · · · · · · · · · · · · ·		
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon If 'Yes,' attach the statement required by Reg	sibility for the grant?		N/A Yes	No	
6 a Did the foundation, during the year, receive and on a personal benefit contract?			Yes X	No	
b Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870.	iums, directly or indirec	tly, on a personal bene	fit contract?	6 b	X
7a At any time during the tax year, was the found b If 'Yes,' did the foundation receive any proceed					
8 Is the foundation subject to the section 4960 tax of			_	N/A: 7b	
or excess parachute payment(s) during the year				No	
Part VIII Information About Officers, D					,
and Contractors 1 List all officers, directors, trustees, and found	dation managers and th	neir compensation. See	e instructions.		
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other al	e account, lowances
SEE STATEMENT 2			,		
		0.	0.		0.
		0.	0.		<u>.</u>
2 Compensation of five highest-paid employees (o	(b) Title, and average	on line 1 – see instructio	(d)Contributions to		
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	(e) Expense other al	e account, lowances
<u>NONE</u>					
Total number of other employees paid over \$50,000	D		<u></u>		0

3 Five highest-paid independent contractors for professional services. See in	structions. 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
		0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistica organizations and other beneficiaries served, conferences convened, research papers produced, etc.	l information such as the number of	Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see instruc		
Describe the two largest program-related investments made by the foundation during the	tax year on lines 1 and 2.	Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		0.
BAA		Form 990-PF (2018)

ı uı	see instructions.)	reigii ioana	410115,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: Average monthly fair market value of securities	1.0	
	Average of monthly cash balances.	1 a	
	Fair market value of all other assets (see instructions)	1 c	
	l Total (add lines 1a, b, and c)e. Reduction claimed for blockage or other factors reported on lines 1a and	1 d	0.
e			
•	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets.	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0.
6	Minimum investment return. Enter 5% of line 5	6	0.
Par	TXI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operation and certain foreign organizations, check here □ and do not complete this part.)	ting founda	tions
1	Minimum investment return from Part X, line 6	1	
2 a	Tax on investment income for 2018 from Part VI, line 5		
	Income tax for 2018. (This does not include the tax from Part VI.)	1	
	Add lines 2a and 2b.	2 c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	0.
Par	t XII Qualifying Distributions (see instructions)		
1 a	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	1 a	
b	Program-related investments – total from Part IX-B	1 b	
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: Suitability test (prior IRS approval required)	3a	
	Cash distribution test (attach the required schedule)		
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	0.
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	0.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the four qualifies for the section 4940(e) reduction of tax in those years.	ndation	
BAA		Form	n 990-PF (2018)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				0
2 Undistributed income, if any, as of the end of 2018:				0.
a Enter amount for 2017 only			0.	
b Total for prior years: 20, 20, 20		0.		
3 Excess distributions carryover, if any, to 2018:				
a From 2013				
b From 2014				
c From 2015 6,832.				
d From 2016				
e From 2017				
f Total of lines 3a through e	262,512.			
4 Qualifying distributions for 2018 from Part				
XII, line 4: ► \$				
a Applied to 2017, 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 2018 distributable amount				0.
e Remaining amount distributed out of corpus.	0.			
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the	0.			0.
same amount must be shown in column (a).)				
6 Enter the net total of each column as				
indicated below:	0.60 510			
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	262,512.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed		0.		
income for which a notice of deficiency has				
been issued, or on which the section 4942(a) tax has been previously assessed		0.		
		0.		
d Subtract line 6c from line 6b. Taxable amount – see instructions		0.		
- Hadishibatad in company of the Only Only of the Astronomy		0.		
e Undistributed income for 2017. Subtract line 4a from line 2a. Taxable amount — see instructions			0.	
			J.	
f Undistributed income for 2018. Subtract lines 4d and 5 from line 1. This amount must be				
distributed in 2019				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 2013 not				
applied on line 5 or line 7 (see instructions).	0.			
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	262 512			
Subtract lines / and 8 from line 6a	262,512.			
a Excess from 2014 8,167.				
b Excess from 2015 6,832.				
c Excess from 2016 5,264.				
d Excess from 2017 242,249.				
e Excess from 2018				
\ A A				Farra 000 PF (2019)

Part XIV	Private Operating Foundat					N/A
1 a If the fo	undation has received a ruling or dete	ermination letter that	it is a private opera	ting foundation, and th	ne ruling	
	tive for 2018, enter the date of the box to indicate whether the foundate					4042(i)(E)
	ne lesser of the adjusted net	· · · · · · · · · · · · · · · · · · ·	erating foundation		4942(j)(3) or	4942(j)(5)
income	from Part I or the minimum	Tax year (a) 2018	(b) 2017	Prior 3 years (c) 2016	(d) 2015	(e) Total
	nent return from Part X for ear listed	(a) 2016	(b) 2017	(6) 2010	(a) 2015	
	line 2a					
c Qualifyi	ng distributions from Part XII, or each year listed					
d Amounts	included in line 2c not used directly conduct of exempt activities					
for activ	ng distributions made directly ve conduct of exempt activities.					
3 Comple alternat	ete 3a, b, or c for the cive test relied upon:					
a 'Assets	alternative test - enter:					
` '	ue of all assets					
(2) Val sec	ue of assets qualifying under tion 4942(j)(3)(B)(i)					
minimum	ent' alternative test — enter 2/3 of investment return shown in Part X, each year listed					
c 'Suppor	t' alternative test - enter:					
inve divi on	al support other than gross estment income (interest, dends, rents, payments securities loans (section t(a)(5)), or royalties)					
more	port from general public and 5 or e exempt organizations as provided ection 4942(j)(3)(B)(iii)					
	gest amount of support from exempt organization					
(4) Gro	ss investment income					
Part XV	Supplementary Information	(Complete this	part only if the	foundation had	\$5,000 or more	
	assets at any time during th		istructions.)			N/A
a List any	nation Regarding Foundation Managers of the foundation who have fany tax year (but only if they have	e contributed more t	han 2% of the total of than \$5,000). (See	contributions received e section 507(d)(2).)	by the foundation befo	ore the
b List any	managers of the foundation who own	10% or more of the	stock of a corporati	on (or an equally large	e portion of the owner	ship of
a parth	ership or other entity) of which the	foundation has a 1	10% or greater inte	rest.		
2 Informa	tion Regarding Contribution, Grant,	Gift, Loan, Scholars	hip, etc Programs:			
Check I	nere if the foundation only ma	akes contributions to	preselected charital	ole organizations and		
	s for funds. If the foundation make , and d. See instructions.	s gifts, grants, etc.	., to individuals or o	organizations under	other conditions, cor	nplete items
	ne, address, and telephone number o	r email address of th	ne person to whom a	pplications should be	addressed:	
	•		·			
b The for	m in which applications should be	submitted and info	rmation and materi	als they should inclu	de:	
c Any sub	omission deadlines:					
d Anv res	strictions or limitations on awards,	such as by geogran	ohical areas, charit	able fields, kinds of i	nstitutions, or other	factors:
	in the state of th				, 51 54161	

3 Grants and Contributions Paid During the Ye	or or Approved for Fut	ura Dayman	.+	NT / T
5 Grants and Contributions Faid During the 16	If reginient is an individual	ure Fayilleli	T	N/A
Recipient	show any relationship to	Foundation	Purpose of grant or	
	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
Total			> 3	Ba
b Approved for future payment				
Total	II.	1	<u> </u>	\ I_

Tall Allary 515 of income i roducing						
Enter gross	s amounts unless otherwise indicated.	Unrelate	ed business income	Excluded	l by section 512, 513, or 514	(e)
1 Progr	ram service revenue:	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income (See instructions.)
а						
b						
С						
d						
e						
· —						
	and analysis from any avanced an arcica					
•	and contracts from government agencies					
	bership dues and assessments					
	st on savings and temporary cash investments			14		
	ends and interest from securities			14		
5 Net re	ental income or (loss) from real estate:					
a Debt-	financed property					
b Not d	lebt-financed property					
6 Net ren	ntal income or (loss) from personal property					
	r investment income					
8 Gain o	r (loss) from sales of assets other than inventory					
	ncome or (loss) from special events					
	s profit or (loss) from sales of inventory					
	r revenue:					
	revenue.					
a						
b						
b						
cd						
cd	otal. Add columns (b), (d), and (e)					
c d e Subto	. Add line 12, columns (b), (d), and (e)				13	0.
c d e Subto					13	0.
c d e Subto	. Add line 12, columns (b), (d), and (e)sheet in line 13 instructions to verify calculatio	ns.)				0.
c d e Subto 13 Total (See works	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculatio -B Relationship of Activities to the	ns.) Accompl	ishment of Exemp	ot Purpo	oses	
c d e Subto	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculatio -B Relationship of Activities to the	ns.) Accompl	ishment of Exemp	ot Purpo	oses	
c d e 12 Subto 13 Total (See works Part XVI	. Add line 12, columns (b), (d), and (e)sheet in line 13 instructions to verify calculatio	ns.) Accompl	ishment of Exemp	ot Purpo	oses	
c d e 12 Subtot 13 Total (See works Part XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculatio -B Relationship of Activities to the	ns.) Accompl	ishment of Exemp	ot Purpo	oses	
c d e 12 Subto 13 Total (See works Part XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculatio -B Relationship of Activities to the	ns.) Accompl	ishment of Exemp	ot Purpo	oses	
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c d e 12 Subto 13 Total (See works Part XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculatio -B Relationship of Activities to the	ns.) Accompl	ishment of Exemp	ot Purpo	oses	
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c d e 12 Subto 13 Total (See works Part XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculatio -B Relationship of Activities to the	ns.) Accompl	ishment of Exemp	ot Purpo	oses	
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c d e 12 Subto 13 Total (See works Part XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculatio -B Relationship of Activities to the	ns.) Accompl	ishment of Exemp	ot Purpo	oses	
c d e 12 Subto 13 Total (See works Part XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculatio -B Relationship of Activities to the	ns.) Accompl	ishment of Exemp	ot Purpo	oses	
c d e 12 Subto 13 Total (See works Part XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculatio -B Relationship of Activities to the	ns.) Accompl	ishment of Exemp	ot Purpo	oses	
c d e 12 Subto 13 Total (See works Part XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculatio -B Relationship of Activities to the	ns.) Accompl	ishment of Exemp	ot Purpo	oses	
c d e 12 Subto 13 Total (See works Part XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculatio -B Relationship of Activities to the	ns.) Accompl	ishment of Exemp	ot Purpo	oses	
c d e 12 Subto 13 Total (See works Part XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculatio -B Relationship of Activities to the	ns.) Accompl	ishment of Exemp	ot Purpo	oses	
c d e 12 Subto 13 Total (See works Part XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculatio -B Relationship of Activities to the	ns.) Accompl	ishment of Exemp	ot Purpo	oses	
c d e 12 Subto 13 Total (See works Part XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculatio -B Relationship of Activities to the	ns.) Accompl	ishment of Exemp	ot Purpo	oses	
c d e 12 Subto 13 Total (See works Part XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculatio -B Relationship of Activities to the	ns.) Accompl	ishment of Exemp	ot Purpo	oses	
c d e 12 Subto 13 Total (See works Part XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculatio -B Relationship of Activities to the	ns.) Accompl	ishment of Exemp	ot Purpo	oses	
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c d e 12 Subto 13 Total (See works Part XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculatio -B Relationship of Activities to the	ns.) Accompl	ishment of Exemp	ot Purpo	oses	
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c d e 12 Subto 13 Total (See works Part XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculatio -B Relationship of Activities to the	ns.) Accompl	ishment of Exemp	ot Purpo	oses	

Form 990-PF (2018) BLOOMSBURG AREA COMMUNITY FOUNDATION 23-2843673 Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

								Yes	No
describ	organization directly led in section 501(c) (g to political organizat	other than section	age in any of the following wn 501(c)(3) organizations) o	rith any o r in section	ther organizatio on 527,	n			
•	, ,		oncharitable exempt organi	zation of:	:				
(1) Cas	sh						1 a (1)		Χ
(2) Oth	ner assets						1 a (2)		Χ
b Other to	ransactions:								
			t organization				1 b (1)		Χ
			exempt organization				1 b (2)		X
` '		•	ssets				1 b (3)		X
							1 b (4)		X
							1 b (5)		X
` '		·	or fundraising solicitations				1 b (6)		X
c Sharing	g of facilities, equipme	ent, mailing lists,	other assets, or paid emplo	yees			1 c		X
d If the a the good any train	nswer to any of the a ds, other assets, or ser nsaction or sharing a	bove is 'Yes,' cor vices given by the rrangement, show	nplete the following schedul reporting foundation. If the for in column (d) the value of	e. Colum undation r the goods	n (b) should alw eceived less thar s, other assets,	vays show the fair r n fair market value in or services receive	narket valı d.	ue of	
(a) Line no.	(b) Amount involved	(c) Name of no	ncharitable exempt organization	(d)	Description of tran	sfers, transactions, and	sharing arrar	igement	S
N/A									
	oundation directly or included in section 501(c) (th, or related to, one or more n 501(c)(3)) or in section 52	tax-exemp	ot organizations		. Yes	X	No
. ,	a) Name of organization	<u> </u>	(b) Type of organizatio	n	(c) Description of rela	ationship		
N/A	,		(-))		(0)	, ,	- 2111		
, ==									
Under	penalties of perjury, I declaration	e that I have examined of preparer (other than	this return, including accompanying staxpayer) is based on all information	schedules ar of which pr	nd statements, and to eparer has any knowl	the best of my knowledge ledge.	and belief, i	t is true,	
Sign Here			1)	PRESIDENT		May the I this return preparer See instr	n with th shown b	е
Sign	nature of officer or trustee		Date		itle			Yes	No
•	Print/Type preparer's nam	ne	Preparer's signature		Date	Check X if	PTIN		
Paid	WILLIAM E KI	LE CPA	WILLIAM E KILE	CPA	5/02/19	self-employed	P00412	463	
Preparer	Firm's name ► K	ILE & COMPA	ANY			Firm's EIN ► 47-50	042657		
Jse Only		12D CENTRAL							
	В	LOOMSBURG,	PA 17815			Phone no. (570	784-4	<u> 4350</u>	
ВАА		<u></u>					Form 99	0-PF (2018)

FEDERAL STATEMENTS

PAGE 1

BLOOMSBURG AREA COMMUNITY FOUNDATION

23-2843673

5/02/19

10:53AM

STATEMENT 1 FORM 990-PF, PART VII-A, LINE 5 LIQUIDATION, DISSOLUTION, TERMINATION, OR SUBSTANTIAL CONTRACTION

LIQUIDATION, DISSOLUTION, TERMINATION, OR SUBSTANTIAL CONTRACTION

ASSETS WITH A FMV OF \$246,246 WERE TRANSFERRED TO THE CENTRAL SUSQUEHANNA COMMUNITY FOUNDATION EIN:23-2982141 A 501(C)3 ORGANIZATION ADDRESS 725 WEST FRONT ST BERWICK PA 18603 ON 12/31/2017.

STATEMENT 2 FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	
FRED TRUMP 53 EYER ST BLOOMSBURG, PA 17815	DIRECTOR 1.00	\$ 0.	\$ 0.	\$ 0.
FRED GAFFNEY 238 MARKET ST BLOOMSBURG, PA 17815	DIRECTOR 1.00	0.	0.	0.
JOHN THOMPSON 1253 CHESTNUT ST BLOOMSBURG, PA 17815	PRESIDENT 2.00	0.	0.	0.
PAUL REICHART 232 EAST STREET BLOOMSBURG, PA 17815	DIRECTOR 1.00	0.	0.	0.
C CLEVELAND HUMMEL 3 E FIFTH STREET BLOOMSBURG, PA 17815	VICE PRESIDENT 2.00	0.	0.	0.
LAUREN MARTZ 301 E SECOND ST BLOOMSBURG, PA 17815	SECRETARY 2.00	0.	0.	0.
RICK VANDERPOOL 270 SUNKEN HEIGHTS AVENUE BLOOMSBURG, PA 17815	DIRECTOR 1.00	0.	0.	0.
REV HOWELL SASSER III 125 E MAIN ST BLOOMSBURG, PA 17815	DIRECTOR 1.00	0.	0.	0.
	TOTAL	\$ 0.	\$ 0.	\$ 0.