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As an officer or person subject to tax with respect to the organization, I will enter my PIN as my signature on the electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure conservation officer or person subject to tax Certification and Authentication Certification and Authentication Certify that the above numeric entry is my PIN, which is my signature on the 2020 electronically filed return indicated at the above numeric entry is my PIN, which is my signature on the 2020 electronically filed return indicated at the above numeric entry is my PIN, which is my signature on the 2020 electronically filed return indicated at the above numeric entry is my PIN, which is my signature on the 2020 electronically filed return indicated at the above numeric entry is my PIN, which is my signature on the 2020 electronically filed return indicated at the above numeric entry is my PIN, which is my signature on the 2020 electronically filed return indicated at the above numeric entry is my PIN, which is my signature on the 2020 electronically filed return indicated at the above numeric entry is my PIN, which is my signature on the 2020 electronically filed return indicated at the above numeric entry is my PIN.	eing filed with a d ERO to enter my
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Part III Certification and Authentication ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. 23025 certify that the above numeric entry is my PIN, which is my signature on the 2020 electronically filed return indicated a 23025	agency(ies)
RO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. certify that the above numeric entry is my PIN, which is my signature on the 2020 electronically filed return indicated a	
umber (EFIN) followed by your five-digit self-selected PIN. 23025 certify that the above numeric entry is my PIN, which is my signature on the 2020 electronically filed return indicated at the above numeric entry is my PIN.	
certify that the above numeric entry is my PIN, which is my signature on the 2020 electronically filed return indicated a	3 10449
	3 10443 Do not enter all zeros
	oove. I confirm
RS e-file Providers for Business Returns.	
RO's signature Date	
ERO Must Retain This Form - See Instructions	
Do Not Submit This Form to the IRS Unless Requested To Do	So

Form	9	9	0	-P	F
1 Quint	1	-	-		-

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

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OMB No. 1545-0047

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.

2020 Open to Public Inspection

For	calend	lar year 2020 or tax year beginning	, 2020, and	d ending]		, 20
		ndation FOUNDATION			A Employer	identification number	
		C/O JUDITH A BOHLER			83-29016	25	
Num	ber and	street (or P.O. box number if mail is not delivered to street address)	Roor	m/suite	B Telephone	number (see instruction	s)
220	MEA	DOWLARK DRIVE			(717) 808	-5719	
		state or province, country, and ZIP or foreign postal code				on application is pendin	
EPH	RATA	A, PA 17522-9625			o il cacinpa		g, one of there —
the state of the s			of a former public cha	rity	D 1. Foreigi	n organizations, check h	iere
		☐ Final return ☐ Amended re		-	2 Earoia	arganizationa mosting	the REN test
		Address change 🔲 Name chang	e			n organizations meeting here and attach comput	
но	heck t	ype of organization: X Section 501(c)(3) exempt private for	many service and a substantian service and index on the	nin internetienen	1	oundation status was te	
-			ble private foundation			07(b)(1)(A), check here	
		rket value of all assets at J Accounting method:		crual	1		
		rear (from Part II, col. (c), Other (specify)			in an and the second se	dation is in a 60-month tion 507(b)(1)(B), check	
	ne 16)		on cash basis.)			(-)(-),-),	
-	rt I	Analysis of Revenue and Expenses (The total of	ě.	T	L		(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per		t investment	(c) Adjusted net	for charitable
		the amounts in column (a) (see instructions).)	books	i i	ncome	income	(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	5,282				
	2	Check X if the foundation is not required to attach Sch. B	5,202				
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities					
	5a	Gross rents		1			
	b	Net rental income or (loss)	Contraction of the second				
	6a	Net gain or (loss) from sale of assets not on line 10		-	<u></u>		
Revenue	b						
/en	7	Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2)					
Sev	8						
ш.	9						
	10a	Gross sales less returns and allowances					
	b	Less: Cost of goods sold					
	с 11	Gross profit or (loss) (attach schedule)					
	12	Other income (attach schedule)	F 000				
	12	Total. Add lines 1 through 11	5,282		0		
S	13	Compensation of officers, directors, trustees, etc Other employee salaries and wages					
enses	14						
0	160	Pension plans, employee benefits					
ŭ	16a	Legal fees (attach schedule)					
e	b	Accounting fees (attach schedule)					
Operating and Administrative ExI	C	Other professional fees (attach schedule)					
str	17						
i	18	Taxes (attach schedule) (see instructions)					
E	19 20	Depreciation (attach schedule) and depletion					
¥	20				alata di si si sa si sa si		
pu	21	Travel, conferences, and meetings	236	<u> </u>			
ga	22	Printing and publications					
tin	23	Other expenses (attach schedule) STM103	4,890				+
BIS	24	Total operating and administrative expenses.			10 mm		
be	05	Add lines 13 through 23	5,126		0		0
0		Contributions, gifts, grants paid	0				0
	26	Total expenses and disbursements. Add lines 24 and 25	5,126		0		0
	27	Subtract line 26 from line 12:		1.1			
	a	Excess of revenue over expenses and disbursements	156	1.	dia dia dia 19		
	b	Net investment income (if negative, enter -0-)			0		
	C	Adjusted net income (if negative, enter -0-)		1.1		0	

For Paperwork Reduction Act Notice, see instructions.

orm 990	-PF (2020) JB FOUNDATION		83-290	
Part II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End of	(c) Fair Market Value
	should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	
1	Cash - non-interest-bearing		156	156
2	Savings and temporary cash investments	-		
3	Accounts receivable			
	Less: allowance for doubtful accounts			
4	Pledges receivable			
	Less: allowance for doubtful accounts			
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other			
	disqualified persons (attach schedule) (see instructions)		and the second second	
7	Other notes and loans receivable (attach schedule)			
	Less: allowance for doubtful accounts			
8 2	Inventories for sale or use			
Assets	Prepaid expenses and deferred charges			
S 10a	Investments - U.S. and state government obligations (attach schedule)			
1	D Investments - corporate stock (attach schedule)			
	c Investments - corporate bonds (attach schedule)			
11	Investments - land, buildings, and equipment: basis		영소 영상 영화 영화 영화	
	Less: accumulated depreciation (attach schedule)			
12				
13				
14			1 : 2011년 1월	
	Less: accumulated depreciation (attach schedule)			
15				
16	the second s			
	instructions. Also, see page 1, item l)	0	156	156
17				
18				
Liabilities	and the standard attending unlifted porcons			
q 21				
1 22)		
23		0	()
	Foundations that follow FASB ASC 958, check here			
es	and complete lines 24, 25, 29, and 30.			
	Net assets without donor restrictions		15	5
2				
	Foundations that do not follow FASB ASC 958, check here			
un	and complete lines 26 through 30.			
12				
0 2	the second s			
2 sets				
2 SS) 15	6
Net Assets or Fund Balances				
ž	instructions)		0 15	6
Par	t III Analysis of Changes in Net Assets or Fund Balance	S		
1	Total net assets or fund balances at beginning of year - Part II, column (a), line 2	9 (must agree with		
	and of year faure reported on prior year's return)		1	
2	Enter amount from Part I, line 27a			2 15
2	Other increases not included in line 2 (itemize)		•	3
4	Add lines 1, 2, and 3		••••••	1 15
E	Decreases not included in line 2 (itemize)			5
c	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	umn (b), line 29		6 15

EEA

	DUNDATION nd Losses for Tax on Investm	nent Income		83-29016	25 Page 3	
(a) List and describe	(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) (b) How acquired P-Purchase D-Donation					
1a						
b						
C						
d						
e		r	1			
(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis ense of sale		n or (loss) (f) minus (g))	
а						
b						
<u> </u>						
d						
<u>e</u>		 	2/24/02			
Complete only for assets sh	owing gain in column (h) and owned by			(I) Gains (Co	. (h) gain minus	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess over col. (j	of col. (i)), if any	Losses (fr	less than -0-) or om col. (h))	
a						
b						
<u> </u>					A talvete sealisterister	
d						
<u>e</u>		gain, also enter in P	art line 7			
2 Capital gain net income or (ne	t canital loss)	(loss), enter -0- in P	7	2		
3 Net short-term capital gain or	(loss) as defined in sections 1222(5) an		art i, into i			
	e 8, column (c). See instructions. If (loss		h			
Part I, line 8				3		
	der Section 4940(e) for Redu	uced Tax on No	et Investment	Income		
	CTION 4940(e) REPEALED C				ETE.	
1 Reserved					· · · · · · · · · · · · · · · · · · ·	
(a)	(b)		(c)		(d)	
Reserved	Reserved		Reserved		Reserved	
Reserved						
Reserved						
Reserved						
Reserved						
Reserved						
2 Reserved				2		
3 Reserved				3		
4 Reserved				4		
5 Reserved				5	fraid i star an Alar Status de Latar	
6 Reserved				6		
7 Reserved						
	<u> </u>			8	E 000 DE (0000)	
EEA					Form 990-PF (2020)	

Pag		PF (2020) JB FOUNDATION 83-2903 I Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see instructions)	
		Excise fax based on investment income (Section 4940(a), 4940(b), or 4940 (b), or 4940 (c), or 49	art
		xempt operating foundations described in section 4940(d)(2), check here p and check here instructions)	а
	1	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	
		All other domestic foundations enter 1.39% of line 27b. Exempt foreign organizations, enter 4% of	b
		Part I, line 12, col. (b)	C
	2	Part I, line 12, col. (b)	_
	3		2
	4	Add lines 1 and 2	3
an a	5	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, effect -0-	4
		ax based on investment income. Subtractime 4 norm into 0. In 2010 of 1000, onto 1	5
		Credits/Payments:	6
		2020 estimated tax payments and 2010 overpayment ordered to 2020	а
			b
		Tax paid with application for extension of three to hie (r on the code)	C
	7	Sackup wiinhoiding en oneousiv widnen	d
	8	Total credits and payments. Add lines 6a through 6d	7
	9	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8
		Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9
	10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	0
	11	Enter the amount of line 10 to be: Credited to 2021 estimated tax Refunded	1
Veel		/II-A Statements Regarding Activities	Part
Yes	-	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	1a
1a	•••	participate or intervene in any political campaign?	
		Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	b
1b		instructions for the definition	
		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.	
1c		Did the foundation file Form 1120-POL for this year?	С
		Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	d
		(1) On the foundation. (2) On foundation managers. (3)	
		Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	е
		on foundation managers.	
2		Has the foundation engaged in any activities that have not previously been reported to the IRS?	2
		If "Yes," attach a detailed description of the activities.	-
		Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles	3
3		of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3
4a		Did the foundation have unrelated business gross income of \$1,000 or more during the year?	40
4b		If "Yes," has it filed a tax return on Form 990-T for this year?	4a
5		Was there a liquidation, termination, dissolution, or substantial contraction during the year?	b
		If "Yes," attach the statement required by General Instruction T.	5
		Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	~
			6
		By language in the governing instrument, or	
6	*	• 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?	
7	,		
<u>.</u>		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
		Enter the states to which the foundation reports or with which it is registered. See instructions.	8a
06		If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	b
8b	• • •	(or designate) of each state as required by General Instruction G? If "No," attach explanation	
		Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	9
		4942(j)(5) for calendar year 2020 or the tax year beginning in 2020? See the instructions for Part XIV. If "Yes,"	
9 X	• • •	complete Part XIV	
		Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	10
10		names and addresses	

Provide the local division of the local divi	990-PF (2020) JB FOUNDATION 83-2901625 t VII-A Statements Regarding Activities (continued)			Page 5
1 41	Commuea)	1	Yes	
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Tes	No
	meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		x
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	<u> </u>		
	person had advisory privileges? If "Yes," attach statement. See instructions	12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	x	
	Website address N /A	L	1 4	
14	The books are in care of C/O JUDITH A BOHLER Telephone no. 717-808	-5719	3	
	Located at > 220 MEADOWLARK DRIVE, EPHRATA, PA ZIP+4 > 17522-9			
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			
16	At any time during calendar year 2020, did the foundation have an interest in or a signature or other authority	10 100 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		1
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of		1999 - 1997 1997 - 1997	
-	the foreign country			
Par	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	. · · ·		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			12
	(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?		ar 194	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for		- 22	
	the benefit or use of a disqualified person)?	1. 1.		
	(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			
Б	termination of government service, if terminating within 90 days.)	1.1.1		
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	1b		ļ
с	Organizations relying on a current notice regarding disaster assistance, check here	1 ·	N.S	
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
2	were not corrected before the first day of the tax year beginning in 2020?	10		
-	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
а	operating foundation defined in section 4942(j)(3) or 4942(j)(5)): At the end of tax year 2020, did the foundation have any undistributed income (Part XIII, lines			
	bd and 6e) for tax year(s) beginning before 2020?			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			14. j. e K
	(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.)	24		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	2b		X
	▶ 20, 20, 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2020 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	. J.		
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of		1 ¹ 69	
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the	1.1		
	foundation had excess business holdings in 2020.)	3b	1000	100
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		x
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 2020?	4b	1	x
EA				- 4.5

Form 990-PF (2020)

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Form Of							83-20	0162	5	P	age 6
	90-PF (2020) JB FOUNDATION VII-B Statements Regarding Activities fe	or Whic	h Form 472	0 May	Be Requ	ired (C					
Laura				io may	Dontoqu	104 10		-/	10.30	Yes	No
5a	During the year, did the foundation pay or incur any amount		tion (postion 40	145(0))2			☐ Yes	X No		100	
	(1) Carry on propaganda, or otherwise attempt to influen							KY III	100		
	(2) Influence the outcome of any specific public election					,					
	directly or indirectly, any voter registration drive?							X No	Ten Set		
	(3) Provide a grant to an individual for travel, study, or o					• • •	Yes	X No)		
	(4) Provide a grant to an organization other than a chari						Π.,				
						• • • •	Yes	X No	>		10 100 10 10 10 10
	(5) Provide for any purpose other than religious, charita						-	-			
	purposes, or for the prevention of cruelty to children						Yes	X No	D		
b	If any answer is "Yes" to 5a(1)-(5), did any of the transacti					ł				- 185 O	
	in Regulations section 53.4945 or in a current notice reg	arding disa	aster assistanc	e? See in	nstructions			· · · <u>·</u>	5b		
	Organizations relying on a current notice regarding disas	ster assista	ance, check he	re .				. ► [l I i i i		
С	If the answer is "Yes" to question 5a(4), does the founda	tion claim	exemption fron	n the tax				-	- 1 - 1		
	because it maintained expenditure responsibility for the	grant?					Yes		D		
	If "Yes," attach the statement required by Regulations se	ction 53.4	945-5(d).								
6a	Did the foundation, during the year, receive any funds, d	irectly or in	ndirectly, to pay	premium	าร						
	on a personal benefit contract?						Yes	XN	0		
b	Did the foundation, during the year, pay premiums, direct	tly or indir	ectly, on a pers	onal ben	efit contract?				6b		x
	If "Yes" to 6b, file Form 8870.										
7a	At any time during the tax year, was the foundation a part	ty to a pro	hibited tax she	lter trans	action?		Yes	XN	0	1.20	
b	If "Yes," did the foundation receive any proceeds or have	any net i	ncome attributa	ble to the	e transaction	?.			7b		
8	Is the foundation subject to the section 4960 tax on payr	nent(s) of	more than \$1,0	000,000 ii	n					1.25	
	remuneration or excess parachute payment(s) during th	e year?					Yes	X N	0	1.000	
Part	VIII Information About Officers, Direct	ors, Tru	istees, Fou	ndatio	n Manag	ers, Hi	ghly Pa	id Em	ploye	es,	
L	and Contractors										
1	List all officers, directors, trustees, and foundation	nanagers	and their con	npensati	on. See inst	ructions	i.				
		(b) Title	e, and average	(c) Co	mpensation	(d)	Contribution		(e) Exp	ense ac	count,
	(a) Name and address		rs per week ed to position		ot paid, ter -0-)		erred compo		other	allowar	nces
TUDT	TH A BOHLER	PRESI									
	MEADOWLARK DR EPHRATA PA 17522	[5.00		0			0			0
	REY BOHLER	V PRE	SIDENT								
	MEADOWLARK DR EPHRATA PA 17522		1.00		0			0			0
		1				1.1	and a star in				
			na shekara dha ya guna ani sikar								
2	2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter										
-	"NONE."					,.					
			1				(d) Contrib	utions to	1		
6	a) Name and address of each employee paid more than \$50,000		(b) Title, and a hours per w		(c) Comper	sation	employee	benefit	(e) Exp	ense ac	
t.	ay mane and address of each employee paid more and object		devoted to po			Jacon	plans and compen		othe	allowa	nces
NONE									1		

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Total number of other employees paid over \$50,000

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Form 990-PF (2020)

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orm 990-PF (2020) JB FOUNDATION	83-2901	
Part VIII Information About Officers, Directors, Trustees, Four and Contractors (continued)	idation Managers, Highly Paid I	Employees,
3 Five highest-paid independent contractors for professional services. See ins	tructions. If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
ONE		
tal 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 st organizations and other beneficiaries served, conferences convened, research papers produced		Expenses
1 JB FOUNDATION IS A NONPROFIT CORPORATION ORGANIZED AN	D	
OPERATED EXCLUSIVELY FOR CHARITABLE, SCIENTIFIC,		
LITERARY AND EDUCATIONAL PURPOSES TO IMPROVE NEEDY LI	V	4,890
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see instru	uctions)	
Describe the two largest program-related investments made by the foundation during the tax yea		Amount
1		Anount
2		
All other program-related investments. See instructions.		
3		
otal. Add lines 1 through 3		•
EA		Form 990-PF (2020

Form 99		-2901625	Page 8
Part	X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundat	ions,	
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:	10 N	
а	Average monthly fair market value of securities	. 1a	0
b	Average of monthly cash balances	. 1b	150
C	Fair market value of all other assets (see instructions)	. 1c	159
d	Total (add lines 1a, b, and c)	. 1d	309
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	. 2	0
3	Subtract line 2 from line 1d		309
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	. 4	5
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	. 5	304
6	Minimum investment return. Enter 5% of line 5	. 6	15
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundatio	ns	
	and certain foreign organizations, check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	. 1	15
2a	Tax on investment income for 2020 from Part VI, line 5	1. 2. 19	
b	Income tax for 2020. (This does not include the tax from Part VI.) 2b		
С	Add lines 2a and 2b	. 2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	. 3	15
4	Recoveries of amounts treated as qualifying distributions		
5	Add lines 3 and 4	. 5	15
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,		and the second
	line 1	. 7	15
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	. 1a	0
b	Program-related investments - total from Part IX-B	. 1b	
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:		
а	Suitability test (prior IRS approval required)	. 3a	
b	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	
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	
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foun	dation	
	qualifies for the section 4940(e) reduction of tax in those years.		

EEA

Form 990-PF (2020)

	990-PF (2020) JB FOUNDATION			83-290	1625 Page 9
Par	t XIII Undistributed Income (see instruction	ons)			
		(a) Corpus	(b) Years prior to 2019	(c) 2019	(d) 2020
1	Distributable amount for 2020 from Part XI, line 7				15
2	Undistributed income, if any, as of the end of 2020:				
а	Enter amount for 2019 only				
b	Total for prior years: 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2020:				
а	From 2015				
b	From 2016				
C	From 2017				
d	From 2018				
e	From 2019				
f	Total of lines 3a through e				
4	Qualifying distributions for 2020 from Part XII,				
-	line 4:				
а	Applied to 2019, but not more than line 2a				
1.2					
b	Applied to undistributed income of prior years	한 옷을 가 많아요.		그는 것을 수 없는	
	(Election required - see instructions)	and the state of the			
С	Treated as distributions out of corpus (Election				
	required - see instructions)				
d	Applied to 2020 distributable amount				
e	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2020				
	(If an amount appears in column (d), the same				
275	amount must be shown in column (a).)				
6	Enter the net total of each column as				전 영상 이 것이.
	indicated below:			김 양일 그는 것 같	
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b	Prior years' undistributed income. Subtract			이 같은 것 같은 것을 했다.	
	line 4b from line 2b		8		
C	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable				
	amount - see instructions				
е	Undistributed income for 2019. Subtract line				
	4a from line 2a. Taxable amount - see				
	instructions				
f	Undistributed income for 2020. Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2021				15
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				나라는 말 수 없는
	required - see instructions)				
8	Excess distributions carryover from 2015 not			and the second se	
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2021.				
	Subtract lines 7 and 8 from line 6a				nga kata salahi
10	Analysis of line 9:				
a	Excess from 2016		한 감독한 강화했다.		
b	Excess from 2017				
c	Excess from 2017				
d					것이는 그 작품에
1.2221					
е	Excess from 2020	enables (1994년) 1월 - 1월 - 1월 2월		전화면 다 여성 것 않는 것이 좋아하는 것	

	990-PF (2020) JB FOUNDATION	ions (see instruc	ctions and Part \	/II-A, guestion 9)	83-290162	5 Page 10
1a	If the foundation has received a ruling or deter		the second s		[
	foundation, and the ruling is effective for 2020.					
b	Check box to indicate whether the foundation		•		4942(j)(3) or	1942(j)(5)
2a	Enter the lesser of the adjusted net					1942(J)(3)
20	income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for	(a) 2020	(b) 2019	(c) 2018	(d) 2017	(0)
	each year listed	0				0
b	85% of line 2a			19		
	Qualifying distributions from Dad VII					and the second constraints of the black of the second second second second second second second second second s
С	Qualifying distributions from Part XII, line 4, for each year listed					0
d	Amounts included in line 2c not used directly for active conduct of exempt activities		up se atra			
e	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:				, 8	
а	"Assets" alternative test - enter: (1) Value of all assets		8			
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)			9 - 0		
b	"Endowment" alternative test - enter 2/3					
	of minimum investment return shown in		4			
	Part X, line 6, for each year listed	10				10
~	"Cumpatil alternative test					±
c	"Support" alternative test - enter:					
	 Total support other than gross 					
	investment income (interest, dividends, rents, payments on					
	securities loans (section 512(a)(5)), or royalties)	a 1				
	(2) Support from general public	Υ.			a i se sta anna an an an an an an	· · · · · · · · · · · · · · · · · · ·
	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	enter enterter entert				
Part		(Complete this	a nart only if the	a foundation ha	d \$5.000 or mor	o in accate at
	any time during the year - s	• • • • • • • • • • • • • • • • • • •	E	e roundation na	u \$5,000 01 mor	e ill assels al
1	Information Regarding Foundation Manage		-/		and a second second second second second	
а	List any managers of the foundation who hav before the close of any tax year (but only if th	e contributed more th	an 2% of the total co nore than \$5,000). (S	ntributions received b see section 507(d)(2).)	y the foundation	
-						
b	List any managers of the foundation who owr ownership of a partnership or other entity) of	10% or more of the which the foundation	stock of a corporation has a 10% or greater	n (or an equally large p r interest.	portion of the	
2	Information Regarding Contribution, Gran	it, Gift, Loan, Schola	arship, etc., Program	ns:		
	Check here I if the foundation only mal		10 C C C C		on not assest	
	uppolicited requests for funds. If the foundation		reselected chantable	organizations and do	es not accept	
	unsolicited requests for funds. If the foundation		, etc., to individuals c	organizations under	other conditions,	
·	complete items 2a, b, c, and d. See instructio					
а	The name, address, and telephone number of	r email address of the	e person to whom ap	plications should be a	ddressed:	
b	The form in which applications should be sub	mitted and informatio	n and materials they	should include:		
c	Any submission deadlines:			5		
d		an by goographical		la liada af in u		
u	Any restrictions or limitations on awards, such factors:	as by geographical	areas, charitable field	is, kinds of institutions	s, or other	

-

XV Supplementary Information (contin	ued)		83-29016	
Grants and Contributions Paid During th	ne Year or Approved	for Future P	ayment	
Recipient				
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amou
	or substantial contributor			
Paid during the year				
ic.	- X			
Total				a
Approved for future payment		<u></u>		

er gros:	s amounts unless otherwise indicated.	Unrelated bu	siness income	Excluded by section	on 512, 513, or 514	(e)
		(a)	(b)	(c)	(d)	Related or exemp function income
Proc	gram service revenue:	Business code	Amount	Exclusion code	Amount	(See instructions
1.0						
~ -						
d						
e			e de la companya de El companya de la comp			
f						
g F	ees and contracts from government agencies					
Men	nbership dues and assessments					
Inter	est on savings and temporary cash investments					
	dends and interest from securities					
	rental income or (loss) from real estate:					
	Debt-financed property					
	lot debt-financed property					
	rental income or (loss) from personal property					
	n or (loss) from sales of assets other than inventory					
	income or (loss) from special events					
1.0	er revenue: a					
~ -						
C						
с_ d						
d e Subt	total. Add columns (b), (d), and (e)				. 13	
d e Subt Tota works rt XV	total. Add columns (b), (d), and (e) al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations.) /I-B Relationship of Activities to the Activity for which income is Explain below how each activity for which income is	complishmen	t of Exempt I nn (e) of Part XVI-,	Purposes	ortantly to the	
d e Subt Tota works	total. Add columns (b), (d), and (e) al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations.) //-B Relationship of Activities to the Activit	complishmen	t of Exempt I nn (e) of Part XVI-,	Purposes	ortantly to the	
d e Subt Tota e works int XV	total. Add columns (b), (d), and (e) al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations.) /I-B Relationship of Activities to the Activity for which income is	complishmen	t of Exempt I nn (e) of Part XVI-,	Purposes	ortantly to the	
d e Subt Tota e works int XV	total. Add columns (b), (d), and (e) al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations.) /I-B Relationship of Activities to the Activity for which income is	complishmen	t of Exempt I nn (e) of Part XVI-,	Purposes	ortantly to the	
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d e Subt Tota works rt XV	total. Add columns (b), (d), and (e) al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations.) /I-B Relationship of Activities to the Activity for which income is	complishmen	t of Exempt I nn (e) of Part XVI-,	Purposes	ortantly to the	
d e Subt Tota works rt XV	total. Add columns (b), (d), and (e) al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations.) /I-B Relationship of Activities to the Activity for which income is	complishmen	t of Exempt I nn (e) of Part XVI-,	Purposes	ortantly to the	
d e Subt Tota works rt XV	total. Add columns (b), (d), and (e) al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations.) /I-B Relationship of Activities to the Activity for which income is	complishmen	t of Exempt I nn (e) of Part XVI-,	Purposes	ortantly to the	
d e Subt Tota works rt XV	total. Add columns (b), (d), and (e) al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations.) /I-B Relationship of Activities to the Activity for which income is	complishmen	t of Exempt I nn (e) of Part XVI-,	Purposes	ortantly to the	
d e Subt Tota works rt XV	total. Add columns (b), (d), and (e) al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations.) /I-B Relationship of Activities to the Activity for which income is	complishmen	t of Exempt I nn (e) of Part XVI-,	Purposes	ortantly to the	
d e Subt Tota works rt XV	total. Add columns (b), (d), and (e) al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations.) /I-B Relationship of Activities to the Activity for which income is	complishmen	t of Exempt I nn (e) of Part XVI-,	Purposes	ortantly to the	
d e Subt Tota works rt XV	total. Add columns (b), (d), and (e) al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations.) /I-B Relationship of Activities to the Activity for which income is	complishmen	t of Exempt I nn (e) of Part XVI-,	Purposes	ortantly to the	
d e Subt Tota works rt XV	total. Add columns (b), (d), and (e) al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations.) /I-B Relationship of Activities to the Activity for which income is Explain below how each activity for which income is	complishmen	t of Exempt I nn (e) of Part XVI	Purposes	ortantly to the	

	PF (2020) JB /II Information I	FOUNDATION Regarding Transfe	ers to and Trans	actions and	8 Relationships With Nonch	3-2901625	P
	Organization	IS	is to and mans	actions and	Relationships with Nonch	aritable Exempt	
1 Die			ae in any of the follow	wing with any of	her organization described		1
in	section 501(c) (other t	han section 501(c)(3)	organizations) or in	section 527 rel	ating to political		Yes
org	anizations?			0001011 027, 101	ating to political		
a Tra	ansfers from the report	ting foundation to a no	oncharitable exempt	organization of			
(1)	Cash		• • • • • • • • • • •	organization of.			
(2)	Other assets				************	· · · · · · · <u>1a(1)</u>	
	ner transactions:					· · · · · · 1a(2)	
(1)	Sales of assets to a n	oncharitable exempt o	manization				
(2)	Purchases of assets f	from a noncharitable ex	rempt organization			••••••• 1b(1)	
(3)	Rental of facilities, equ	uipment, or other asse		,	• • • • • • • • • • • • • • • • •	••••••• 1b(2)	
(4)	Reimbursement arrar					•••••• 1b(3)	
	Loans or loan guarant			• • • • • • • •		· · · · · · 1b(4)	
		ces or membership or f	• • • • • • • • • • • • • •			· · · · · . 1b(5)	
c Sha	aring of facilities, equir	mont mailing lists at	undraising solicitation	ns	**************	•••••• 1b(6)	
d If th	e answer to any of the	oment, mailing lists, ot	ner assets, or paid e	mployees		1c	
valu	e of the goods other	above is "res," compl	ete the following sche	edule. Column (b) should always show the fair ma	rket	
· an	to of the goods, other	assets, or services gr	ven by the reporting	foundation If th	e foundation received loss them f		
- Circ	T	snaring arrangement,	show in column (d)	the value of the	goods, other assets, or services re	eceived.	
) Line no.	(b) Amount involved	(c) Name of nor	ncharitable exempt orga	anization	(d) Description of transfers, trans		nement
						and bhanny arran	gemen
							244
						the second s	
2							
•••••		alananda ana ang kanalaka ang kanala panang				n a su an anna an anna an anna an anna an an a	
					0		
						an a	
						9	
		r indirectly affiliated wi	th, or related to, one	or more tax-ex	empt organizations		
a Is the	e foundation directly or		01(0)(2)) as is a still	er more tax ex	empt organizations	-	
a Is the desc	e foundation directly of ribed in section 501(c)	(other than section 5	VIICION OF ID SECTIO	n 5272			
uesu	inced in section 501(c)) (other than section 5	or (c)(3)) or in sectic	on 527?		· · · · · · L Yes	X
uesu	s," complete the follow) (other than section 5 wing schedule.				···· Yes	X
uesu	inced in section 501(c)) (other than section 5 wing schedule.	(b) Type of or		(c) Descript	on of relationship	X
uesu	s," complete the follow) (other than section 5 wing schedule.			(c) Descript		X
uesu	s," complete the follow) (other than section 5 wing schedule.			(c) Descript		X
uesu	s," complete the follow) (other than section 5 wing schedule.			(c) Descript		X
uesu	s," complete the follow) (other than section 5 wing schedule.			(c) Descript		X
uesu	s," complete the follow) (other than section 5 wing schedule.			(c) Descript		X
Unde	(a) Name of organiza) (other than section 5 wing schedule. ation	(b) Type of or	ganization		ion of relationship	X
Unde	(a) Name of organiza) (other than section 5 wing schedule. ation	(b) Type of or	ganization		ion of relationship	X
b If "Ye	r penalties of perjury, I declaration) (other than section 5 wing schedule. ation	(b) Type of or	ganization		ion of relationship	
In Unde	r penalties of perjury, I declaration UDITH A BOHLE1) (other than section 5 wing schedule. ation	(b) Type of or	ganization	Id statements, and to the best of my knowle aparer has any knowledge.	ion of relationship adge and belief, it is true, May the IRS discuss th	s return
Jn re	r penalties of perjury, I decla ct, and complete. Declaration UDITH A BOHLEI) (other than section 5 wing schedule. ation	(b) Type of or	ganization anying schedules an	Id statements, and to the best of my knowle aparer has any knowledge.	ion of relationship edge and belief, it is true. May the IRS discuss th with the preparer shown	s return
Jn re	r penalties of perjury, I declaration UDITH A BOHLE1) (other than section 5 wing schedule. ation	(b) Type of or the second seco	ganization	Id statements, and to the best of my knowle sparer has any knowledge.	ion of relationship adge and belief, it is true, May the IRS discuss th with the preparer show See instructions. Y	s return
Jn re	r penalties of perjury, I decla ct, and complete. Declaration UDITH A BOHLEI) (other than section 5 wing schedule. ation the schedule. ation t	(b) Type of or return, including accompa payer) is based on all info	ganization	ad statements, and to the best of my knowle apparer has any knowledge. STEE Date Date 1	ion of relationship edge and belief, it is true, May the IRS discuss th with the preparer show See instructions. X Y neck if PTIN	s return
Jn Parket and the second secon	complete the follow (a) Name of organiza (a) Name of organiza (a) Name of organiza (a) Name of organiza (b) Name of organiza (c) Name of organ) (other than section 5 wing schedule. ation ation are that I have examined this in of preparer (other than tax R ine EA	(b) Type of org	ganization	ad statements, and to the best of my knowle apparer has any knowledge. STEE Date Date 1	ion of relationship adge and belief, it is true, May the IRS discuss th with the preparer show See instructions. Y	s return n below? es
In Under Stranger Str	r penalties of perjury, I decla r penalties of perjury, I decla t, and complete. Declaration UDITH A BOHLEI ignature of officer or trustee Print/Type preparer's name JAMES C DUM, Firm's name	e EA DUM ACCOUNTINC (other than section 5 wing schedule. ation	(b) Type of or return, including accompa payer) is based on all info Date Date	ganization	ad statements, and to the best of my knowle apparer has any knowledge. STEE Date Date 1	ion of relationship edge and belief, it is true, May the IRS discuss th with the preparer shown See instructions. X Y heck if PTIN if-employed P003477	s return n below? es
In Unde	r penalties of perjury, I decla ct, and complete. Declaration UDITH A BOHLEJ ignature of officer or trustee Print/Type preparer's name JAMES C DUM, Firm's name Firm's address) (other than section 5 wing schedule. ation ation are that I have examined this in of preparer (other than tax R ine EA	(b) Type of or return, including accompa payer) is based on all info Date Date Date Address signature GSERVICE	ganization	ad statements, and to the best of my knowle sparer has any knowledge. STEE Date 2-12-21 se	ion of relationship edge and belief, it is true, May the IRS discuss th with the preparer shown See instructions. X Y heck if PTIN if-employed P003477	s return n below? es

		Federal Su	Federal Supporting Statements	ments		2020 PG01
Name(s) as shown on return	a se	and the second secon			T	Tax ID Number
UD ECONDELLON		1				C201067_C0
	FORM 990PF - РАКТ I	- PART I - LINE 23	ı Q	SCHEDULE		STATEMENT #103~
DESCRIPTION	AND EXPENSES	INVESTMENT	ADJUSTED	CHARITABLE PURPOSE		
MARKETING/ADVERTISING/WEB SERV	294	0	0	0		
TELEPHONE	658	0	0	0		
COMMUNITY PROGRAM EXPENSES	3,274	0	0	0		
	483	0	0	0		
TOTALS	4,890	0	0	0		
*						