All Copy

Form	990
Departm	ent of the Treasur

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter Social Security numbers on this form as it may be made public.

Open to Public

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OMB No. 1545-0047

		t of the Tre renue Servi		► Infor	mation a	bout Form 990 and	its instruction	ons is a	at www.irs	s.gov/fo	rm990.		Inspection
				dar year, or tax ye					nd endin	<u> </u>			, 20
				of organization		-					D Employer id	entifi	cation number
Bc	heck if a	applicable:	PRI	NCETON AREA C	OMMUN	TY FOUNDATIC	ON INC.						
	Addi char		Doing	Business As							52-1746	523	4
	Nam	e change	Numb	er and street (or P.O. bo	x if mail is	not delivered to street ac	ldress)	Ro	om/suite	1	E Telephone n	umbe	er
	Initia	al return	15	PRINCESS ROAD							(609) 21	9 – 2	1800
	Tern	ninated	City o	r town, state or province	, country, a	nd ZIP or foreign postal	code						
	Ame retu	nded	LAW	RENCEVILLE, N	J 0864	18-2301					G Gross receip	ts \$	29,490,018.
		lication	F Name	and address of principal	officer:	JEFFREY VE	GA			I	H(a) Is this a group		urn for Yes X No
		ling	15	PRINCESS ROAD	LAWRI	ENCEVILLE, NJ	08648			i	subordinates H(b) Are all subord		included? Yes No
I	Tax-e	xempt sta	atus:	X 501(c)(3)	501(c) () ┥ (insert no.)	4947(a)(1) or	52	7	If "No," attac	ch a li	st. (see instructions)
J	Webs	site: 🕨		ACF.ORG			· · · · · ·	,,,,		I	H(c) Group exem	ption	number 🕨
к	Form	of organ	ization:	X Corporation T	rust	Association Othe	er 🕨		L Year o				e of legal domicile: NJ
	art I		nmary										
	1		-	e the organization's r	nission o	r most significant activ	vities: THE	PRI	NCETON	AREA	COMMUNI	ΤY	FOUNDATION
ė	_			PHILANTHROPY									
anc				K OF DONORS,									
ern	2			x ▶ if the organ							of its net asset	· S	
Governance	3			ing members of the g								3	20.
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	4			ependent voting men								4	20.
ies	5			of individuals employed								5	8.
Activities &	6			of volunteers (estimate								6	44.
Act	-	Totalı	inrelate	d business revenue fro	m Part V	III. column (C) line 1'	••••• >					7a	
				business taxable inco								7b	-24,115
		i Net ui	liciateu			onn 330-1, ine 34					Prior Year	10	Current Year
	8	Contri	hutions	and grants (Part VIII, li	no 1h)						8,652,92	27	18,198,027
Revenue	9	Brogra	on convi	and grants (Fart VIII, I			··  0	COPY F	OR		0,052,52	0	
vel	10	Invest	ment in	ce revenue (Part VIII, li come (Part VIII, colum	n(A) line	$a \in 3$ (1) and $7d$	• • PUBLI	IC INSF	PECTION		959,53		6,417,370
Å	11			e (Part VIII, column (A							14,38		20,055
	12			- add lines 8 through							9,626,84		24,635,452
	13			nilar amounts paid (Pa			. ,	,			8,170,30		9,845,667
	14			o or for members (Pa							0/1/0/30	0	
	4.5			compensation, empl							773,96		825,310
Expenses	163			undraising fees (Part I							113,50	0	
ben	h	Total f	undraie	ng expenses (Part IX,	column (I	$(\Lambda)$ , line $(\Lambda)$	118 0	070				0	
щ	17	Athor	avnence	es (Part IX, column (A)		-,, iiii 20, ►					410,47	79	444,387
	18			s. Add lines 13-17 (m							9,354,74		11,115,364
	19			expenses. Subtract lir							272,10		13,520,088
es es		Reven	ue less	expenses. Subtract in						Beginn	ing of Current		End of Year
Net Assets or Fund Balances	20	Total	ecote (E	Part X, line 16)							98,639,54		107,653,706
Asse	21	Total	iabilitios	Part X, line 16) (Part X, line 26)	• • • •						2,171,42		1,260,854
und /	22			fund balances. Subtra							96,468,11		106,392,852
	rt II		nature				<u></u>				, 100, 11		100,372,032
					amined thi	s return including acc	omnanving sc	hedules	and stater	nents an	d to the best of	fmv	knowledge and belief, it is
true	e, corr	ect, and	complete	Declaration of preparer	(other than	officer) is based on all	information of	f which	preparer ha	is any kno	wledge.	y	intermedge and bener, it is
Sig	In		Signatur	e of officer							Date		
He							CEO						
				EY VEGA			CEO						
			<u>, , , , , , , , , , , , , , , , , , , </u>	parer's name		Preparer's signature			Date				PTIN
Paic	d					· · · · · · · · · · · · · · · · · · ·			2010		Check	if	
_		CAT	HERIN	E BENDALL							self-employ	eu	P00521196

For Paperwork Reduction Act Notice, see the separate instructions.

PRINCETON	AREA	COMMUNITY	FOUNDATION	INC.

	art III Statement of Program Service Accomplishments	<b>—</b>
	Check if Schedule O contains a response or note to any line in this Part III	<u> </u>
	Briefly describe the organization's mission:	
	THE COMMUNITY FOUNDATION PROMOTES PHILANTHROPY TO ADVANCE THE	
	WELL-BEING OF OUR COMMUNITIES FOREVER.	
I	Did the organization undertake any significant program services during the year which were not lis prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.	
;   ;	Did the organization cease conducting, or make significant changes in how it conducts, an services?	
 	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program service. Section $501(c)(3)$ and $501(c)(4)$ organizations are required to report the amount of gram the total expenses, and revenue, if any, for each program service reported.	
:	(Code:) (Expenses \$including grants of \$, (Revenue THE COMMUNITY FOUNDATION IS AN ACTIVE GRANTMAKER THROUGH TWO	\$)
	COMPETITIVE GRANT PROGRAMS AND ALSO FROM DONOR-ADVISED, DESIGNATED, FIELD-OF-INTEREST, AND NONPROFIT FUNDS. THE COMMUNITY	
-	FOUNDATION ENCOURAGES PHILANTHROPY IN THE REGION BY ENGAGING WITH	
I	DONORS, NONPROFITS, AND PROFESSIONAL ADVISORS ONE-ON-ONE AND IN	
(	GROUPS. (SEE SCHEDULE O FOR MORE DETAIL.)	
-		
b	(Code: ) (Expenses \$ including grants of \$ ) (Revenue	\$)
		·,
-		
-		
		-
С	(Code:) (Expenses \$including grants of \$) (Revenue	\$)
-		
•		
- - - - - - - -		
	Other program services (Describe in Schedule O )	
	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$	)
	Other program services (Describe in Schedule O.)         (Expenses \$ including grants of \$ ) (Revenue \$         Total program service expenses ▶ 10,339,899.	)

PRINCETON AREA COMMUNITY FOUNDATION INC.

-	90 (2014)		F	Page 3
Part	IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6	X	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9	X	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	Х	
b	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"			
	complete Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
/ <del>-</del>	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Х	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			37
~ ~	If "Yes," complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Form **990** (2014)

JSA

View         Ne           21         Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 17 /f "Yes," complete Schedule J. Parts I and II.         21         22         2         2           22         Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 27 /f "Yes," complete Schedule J. Parts I and III.         22         2         2           23         Did the organization naveer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of organization's current and former offices, directors, trustees, key employees, and highest compensate employees? If "Yes," complete Schedule J. May go to line 256.         24         24           24         Did the organization navee ta tax-awampt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002 If "Yes," answer lines 240 through 24 and complete Schedule J. May go to line 256.         24         24           25         Section Solid(G), Solid(G), and Solid(G) and go and ther than a rolunding excrew at any time during the year?         244         24           26         Did the organization aware that it engaged in an axcess brenefit transaction with a disqualified person in a print year, and that the transaction has not been reported on any of the organization system of the assistance to an officer, director, trustee, key employees, or disqualified person? If "was," complete Schedule L, Part II         25         2		90 (2014)		F	Page <b>4</b>
21       Did the organization report more than \$5.000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A). Ine 17 II Yes," complete Schedule I, Parts I and II.       21       X         22       Did the organization report more than \$5.000 of grants or other assistance to a for domestic individuals on part IX, column (A). Ine 21 If Yes," complete Schedule I, Parts I and II.       22       X         23       Did the organization answer Yes' to Part VII, Section A, Ine 3, 4, or 5 about compensation of the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100.000 as of the last day of the year. Intak was issue dater December 31. 2002? If Yes," answer files 24       24         24       Did the organization makes a tax-exempt bonds buy on the temporary period acception?.       24       24         25       Section Soft(c)(3), Soft(c)(4), and Soft(c)(2) organization investion bonds beyond a temporary period acception?.       24       24         26       Section Soft(c)(3), Soft(c)(4), and Soft(c)(2) organization. Neuroper tool souts and in a success benefit transaction with a disgualified person in any of the organization report any anount on Part X, line 5, 6, or 22 for receivables from or parybubes to any current or former officers, directors, trustees, key employees, Nighest compensated employees, or disqualified person? If Yes," complete Schedule L, Part II.       25       X         27       Did the organization provide a grant or other assistance to an officer, director, trustee, key employees, or disqualified person? If Yes," complete Schedule L, Part IV.       26 <th>Part</th> <th>V Checklist of Required Schedules (continued)</th> <th></th> <th></th> <th></th>	Part	V Checklist of Required Schedules (continued)			
21       21       X       21       X         22       Did the organization some more than S5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Part I AI, line 3, 4, or 5 about compensation of the organization answer "Yes," to Part VII, Section A, line 3, 4, or 5 about compensation of the organization answer "Yes," to Part VII, Section A, line 3, 4, or 5 about compensation of the organization answer "Yes," to Part VII, Section A, line 3, 4, or 5 about compensation of the organization area tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24 d and complete Schedule I, Was," go to line 25a,				Yes	No
22       Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part X, column (A), line 21 M 'vs." complete Schedule I, Part I and III.       22       X         23       Did the organization answer 'Vs." to Part VII, Section A, line 3, 4, or 5 about compensation of the organization answer 'Vs." to Part VII. Section A, line 3, 4, or 5 about compensation of the organization answer 'Vs." to Part VII.       23       X         240       Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after Docember 31, 2002 If Vs." answer lines 24       24       X         240       Did the organization maintain an escrow account other than a refunding escrow at any time during the year?       24a       X         241       Did the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not bene reported on any of the organization's prior Forms 990 or 990.272       24b       X         242       Did the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not bene reported on any of the organization's prior Forms 990 or 990.272       25b       X         243       Did the organization aware that it engaged in an excess benefit transaction with a disqualified person? If ''ses' complete Schedule L, Part I       25a       X         245       Did the organization report any of these prior Forms 990 or 990.2	21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
Part IX, column (A), line 2? If "Yes," complete Schedule (Parts I and III.       22       X         23       Did the organization answer "Yes" to Part VI, Saction A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I, Two", go to Ine 265.       23       X         24       Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100.000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer line 2 4b       24a       X         24       Did the organization nationian an escrew account other than a refunding escrew at any time during the year?       24d       X         25       Section 501(c)(2), 501(c)(4), and 501(c)(2) organizations. Did the organization actos as no "on behalt of issuer for bonds outstanding at any time during the year?       24d       X         26       Did the organization aware that it engaged in an excess benefit transaction with a disqualified person has no theen reported on any of the organizations in a prior year, and that the transaction has no them reported on any of the organization spore FS 990 or 990-E27       11 'Yes," complete Scheduke L, Part I         27       Did the organization avere that it engages of the organization site of any of these persons? If 'Yes," complete Scheduke L, Part IV       26       X         27       Did the organization avere than or their assistance to any fite person in a prior year, and that the complexescheduke L, Part IV       27       X<		domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
23       Did the organization answer "Yes" to Part VII. Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J, Ant that was issued after December 31, 2002 If V'es," answer lines 24         24       Did the organization have a tax-exempt bord issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002 If V'es," answer lines 24       Z4         24       Did the organization mixet any proceeded tax-exempt bonds beyond a temporary period exception?       Z4b         25       Did the organization mixet any proceeded tax-exempt bonds beyond a temporary period exception?       Z4c         24       Did the organization maintain an escrow account other than a refunding escrow at any time during the year?       Z4c         24       Z4d       Z4d         25       Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization in a prior year, and that the transaction has not been reported on any of the organizations prior Forms 990 or 980-c77       Z6         25       Did the organization aware that it engaged in an excess benefit transaction with a disqualified persons of the ''s, "complete Schedule L, Part I       Z6         26       X       Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, trustee, we perployee, trustee, we perployee, trustee, we perployee, trustee, we perployee, they employeed transaction with o disqueplicable fling thresholds, c	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
23       Did the organization answer "Yes" to Part VII. Section A, line 3, 4, or 5 about compensation of the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24 tax       23       X         24       Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24 tax       24a       X         25       Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?.       24d       24d         25       Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization regage in an excess benefit transaction with a disqualified person 1" res." complete Schedule L, Part I       25a       X         26       Did the organization in prior       19a ("Yes," complete Schedule L, Part I       25a       X         27       Was the organization avare that it engaged in an excess benefit transaction with a disqualified person 1" res." complete Schedule L, Part I       25a       X         27       Did the organization in port any amount on Part X, line 5, 6, or 22 for receivables from or payables to any or disqualified person 1" res." complete Schedule L, Part II       25a       X         27       Did the organization in port any amount on Part X, line 5, 6, or 22 for receivables from or payables to any or disqualified person 2" res." complete Schedule L, Part II       26		Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'ves, 'complete Schedule J .         23         X           24a         Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'ves,' answer lines 24b through 24d and complete Schedule K 1 Wo,''go to line 25a.         24a         X           24b         Did the organization minest any proceeds of tax-exempt bonds beyond a temporary period exception?         24a           24b         Did the organization anisthian an escrow account other than a refunding escrow at any time during the year?         24d           25a         Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization axes that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2?         25b           26         Did the organization are that it engaged in an excess benefit transaction with a disqualified person? If "yes," complete Schedule L, Part I.         26           27         Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereol, a grant belecitin committee member, or to a 35% controlled antily or family member of any of these persons? If "yes," complete Schedule L, Part IV.         26a         X           27         Was the organization assit stransaction with one of the following parties (see Sche	23				
employees? If "Yes," complete Schedule J.       23       X         24a       Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than 5100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If No." go to line 25a.       24a       X         24b       Did the organization invest any proceeds of tax-exempt bonds.       24d       X         24c       Did the organization west any proceeds of tax-exempt bonds.       24d       X         25a       Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization areas the net transaction with a disqualified person during the year?       24d       Z4d         25a       Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization prior Forms 990 or 900-E27       Z5b       X         25a       Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not the organization's prior Forms 990 or 900-E27       Z5b       X         25a       X       Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II       Z6       X         27       Did the organization reporve the arganization engage in an extentend of anor othera sastres to an officer, director, trustee, or ke	-	-			
24a       Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$10,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a,,,,,,,, .			23	х	
\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b       24         bid the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?       24b         c       Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?       24d         c       Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?       24d         c       Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?       24d         25a       Section 501(c)(3), softmizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction harsot been reported on any of the organization spore Forms 990 or 90-E72       25b         26       Did the organization provide a grant or other assistance to an officer, director, trustee, key employees, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entily or family member of any of these persons? If "Yes," complete Schedule L, Part II       28a       X         27       X       Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part III)       28a       X         28       Vas the organization receive more three officer, director, trustee, or key employee? II "Yes," complete Schedule L, Part III       28a       X         29       Did the organization receive more than \$25,000 in n	212				
through 24d and complete Schedule K If "No," go to ime 25a,	240				
b       Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?       24b         c       Did the organization invest any proceeds of tax-exempt bonds outstanding at any time during the year?       24c         d       Did the organization act as an 'on behalf of 'issuer for bonds outstanding at any time during the year?       24d         25a       Section 501(c)(3), 501(c)(4), and 501(c)(2) or organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organizations prof Forms 990 or 990-E27       25b         26       Did the organization complete Schedule L, Part I       25b         27       Did the organization provide a grant or other assistance to an officer, director, trustee, services and the transaction provide a grant or other assistance to an officer, director, trustee, or key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any othese persons? If "Yes," complete Schedule L, Part II.       28         27       X         28       Did the organization a party to a business transaction with one of the following parties (see Schedule L, Part II.       28         29       A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.       28a         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV.       28c			242		x
<ul> <li>c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?.</li> <li>24d</li> <li>25a</li> <li>25b</li> <li>25a</li> <li>25a</li></ul>					
to defease any tax-exempt bonds?       24c         d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?       24d         25a       Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person? If "Yes," complete Schedule L, Part I       25a       X         26       Did the organization oreport any amount on Part X, line 5, 6, or 22 for receivables from or payables to any disqualified persons? If "Yes," complete Schedule L, Part II       26a       X         27       Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, in tax-exe property of raminy member of any of these persons? If "Yes," complete Schedule L, Part IV       26a       X         28       Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV       27a       X         29       A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28a       X         29       Did the organization receive more than 525,000 in on-cash contributions? If "Yes," complete Schedule M, and So an other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M, and So an ot			240		
d       Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?       24d         25a       Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E7?       1///>       1///>       25b       X         26       Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II       26       X         27       Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or disqualified persons? If 'Yes,' complete Schedule L, Part III.       26       X         27       Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV.       28a       X         28       A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.       28a       X         29       Did the organization receive more than 525.000 in one-cash contributions? If 'Yes," complete Schedule L, Part IV.       28a       X         28       X       Oid the organization receive more than 525.000 in one-cash contributions? If 'Yes," complete Schedule N, Part I.       28a       X         29       Did the	С				
25a       Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L Part I       25a       X         b       Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organizations prior Forms 990 or 990-EZ?       25b       X         26       Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employee, substantial contributor or emplote Schedule L. Part II       26       X         27       Did the organization a party to a business transaction with one of the following parties (see Schedule L, Part II)       27       X         28       Was the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV)       28a       X         29       A family member of any of these persons? If "Yes," complete Schedule L, Part IV       28a       X         4       A family member of any of the norganization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV       28a       X         29       Did the organization eclive contributions of a thistorical treasures, or other similar assets, or qualified conservation contributions? II "Yes," complete Schedule N, Part I, Part					
transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I       25a       X         b       Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-572       25b       X         26       Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II       26b       X         27       Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II       27       X         28       Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV       28a       X         29       A current or former officer, director, trustee, or key employee (ra family member thereot) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV       28b       X         29       X       Did the organization receive contributions of ant, historical treasures, or other similar asset, or qualified conservation contributions? If "Yes," complete Schedule L, Part IV       28c       X         21       Did the	d		24d		
b       Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2?       25         26       Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employee, substantial contributor or employee thereof, a grant selection committee member, or to a 38% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV.       26       X         27       Did the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV.       27       X         28       Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV.       28a       X         4       A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.       28a       X         29       Did the organization receive contributions of ant, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule L, Part IV.       28a       X         29       Did the organization receive contributions of ant, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule L, Part IV.       28c       X         20       Did the organization receive contributions of ant, historical treasures, or other similar asse	25a				
year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?       If "Yes," complete Schedule L, Part I         26       Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II       Z6       X         27       Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee threeof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II.       Z7       X         28       Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV.       Z8a       X         29       A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.       Z8a       X         29       Did the organization receive contributions of ant, historical treasures, or other similar assets, or qualified conservation contributions 21 ff "Yes," complete Schedule L, Part IV.       28a       X         29       Did the organization receive contributions of ant, historical treasures, or other similar assets, or qualified conservation contributions 21 ff "Yes," complete Schedule M.       29       X         30       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I.			25a		X
If "Yes," complete Schedule L, Part I       25b       X         26       Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II       26       X         27       Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III.       27       X         28       Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV.       28a       X         b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.       28a       X         c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.       28c       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV.       29a       X         30       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets, or qualified conservation contributions? If "Yes," complete Schedule R, Part I.       30       X         31       Did the organization nealing dispose of, or transfer more than 25% of its net assets? If "Yes,	b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
26       Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II       26       X         27       Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II.       26       X         28       Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV.       28a       X         28       A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.       28a       X         29       A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.       28b       X         29       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.       29       X         30       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I.       31       X         32       Did the organization on 100% of an entity disregarded as separate from the organization nucle reganization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," com		year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II       26       X         27       Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III.       27       X         28       Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV       28       X         29       Mait by a function, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28       X         29       A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.       29       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.       31       X         31       X       31       X       31       X         32       Did the organization neeive controlled exchedule M. Part I       31       X         33       Did the organization neliquidate, terminate, or dissolve and cease operations? If "Yes," c		If "Yes," complete Schedule L, Part I	25b		Х
disqualified persons? If "Yes," complete Schedule L, Part II       26       X         27       Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III.       26       X         28       Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV.       28a       X         28       A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.       28a       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV.       28c       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule L, Part IV.       30       X         31       Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.       31       X         32       Did the organization neating of which a current or former of the singlar dasset? If "Yes," complete Schedule R, Part II.       33       X         33       Did the organization neative dispose of, or transfer more than 25% of its net asset? If "Yes,"       32       X         34       Was the organization nea	26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
<ul> <li>27 Did the organization provide a grant or other assistance to an officer, furstee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "yes," complete Schedule L, Part II.</li> <li>28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):</li> <li>a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV</li> <li>c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or wner? If "Yes," complete Schedule L, Part IV.</li> <li>28 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV.</li> <li>29 X</li> <li>20 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation onnolinoutions? If "Yes," complete Schedule M.</li> <li>31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I.</li> <li>32 Did the organization comelted to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1.</li> <li>33 Did the organization neteted to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part IV, III and III and III and III and IIII and IIIIIIIIII</li></ul>		current or former officers, directors, trustees, key employees, highest compensated employees, or			
<ul> <li>27 Did the organization provide a grant or other assistance to an officer, furstee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "yes," complete Schedule L, Part II.</li> <li>28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):</li> <li>a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV</li> <li>c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or wner? If "Yes," complete Schedule L, Part IV.</li> <li>28 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV.</li> <li>29 X</li> <li>20 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation onnolinoutions? If "Yes," complete Schedule M.</li> <li>31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I.</li> <li>32 Did the organization comelted to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1.</li> <li>33 Did the organization neteted to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part IV, III and III and III and III and IIII and IIIIIIIIII</li></ul>		disqualified persons? If "Yes," complete Schedule L, Part II	26		Х
substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III.       27       x         28       Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):       a       a       current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28a       x         b       A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28a       x         c       An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IX       28c       x         29       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.       30       x         31       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"       31       x         32       Xid the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, <i>nor IV, and Part V, Iine 1</i> 34       x         33       Did the organization netated to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, <i>or IV,</i>	27				
entity or family member of any of these persons? If "Yes," complete Schedule L, Part III.       27       X         28       Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):       a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28a       X         b       A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28b       X         c       An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director trustee, or direct or word? If "Yes," complete Schedule L, Part N.       28c       X         29       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.       29       X         31       Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.       31       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," and Part I, III, or II and 301.7701-3? If "Yes," complete Schedule R, Part I       33       X         33       Did the organization neated to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, Iine 1       34       X         34 <td></td> <td></td> <td></td> <td></td> <td></td>					
28       Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filling thresholds, conditions, and exceptions):       a       a       a       a       a       current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28a       X         b       A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28b       X         c       An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director indirect owner? If "Yes," complete Schedule L, Part IV.       28c       X         29       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M, Part I.       30       X         31       Did the organization ilquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.       31       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," and bart V, line 1       32       X         33       Did the organization neclete to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       33       X         34       Was the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X<			27		Х
Part IV instructions for applicable filling thresholds, conditions, and exceptions):       a       A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28a       X         b       A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28b       X         c       An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IX       28b       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.       28c       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.       30       X         31       Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.       31       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," and the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       33       X         33       Did the organization nelated to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         34	28				
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28a       X         b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28b       X         c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or indirect owner? If "Yes," complete Schedule L, Part IX       28b       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.       29       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.       30       X         31       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II       31       X         32       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1       33       X         34       Was the organization neated to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       35a       X         35a       Did the organization. Sold the organization make any transfers to an exempt non-charitable related organizations. Did the organization make any transfers t					
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28b       X         c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or undirect owner? If "Yes," complete Schedule L, Part IV       28c       X         29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV       29       X         30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.       30       X         31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II       31       X         32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I, II, II, or IV, and Part V, line 1       31       X         34 Was the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         35a Did the organizations. Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?       35b       35b         36a X       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes	а		28a		х
Schedule L, Part IV       28b       X         c       An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV.       28c       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.       29       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.       30       X         31       Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.       31       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"       32       X         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.       33       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organizations. Did the organization make any transaction self.       35a       X         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	_				
c       An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV,	D		28h		x
<ul> <li>was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV.</li> <li>Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.</li> <li>Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.</li> <li>Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.</li> <li>Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II.</li> <li>Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2? If "Yes," complete Schedule R, Part I</li> <li>Was the organization related to any tax-exempt or taxable entity? If "Ses," complete Schedule R, Part II, III, or IV, and Part V, line 1</li> <li>Mas the organization such ac a controlled entity within the meaning of section 512(b)(13)?</li> <li>If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?</li> <li>If "Yes," complete Schedule R, Part V, line 2</li> <li>Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI, lines 11b and</li> <li>Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and</li> </ul>	•		200		
<ul> <li>29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M</li></ul>	C		200		v
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and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,       37       X         Part VI       37       X         38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and       Image: Complete Schedule C and provide explanations in Schedule O for Part VI, lines 11b and       Image: Complete Schedule C and provide explanations in Schedule C and provide	37				
Part VI       37       X         38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and       Image: Complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and       Image: Complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and       Image: Complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and       Image: Complete Schedule O for Part VI, lines 11b and       Image: Complete Schedule O for Part VI, lines 11b and       Image: Complete Schedule O for Part VI, lines 11b and       Image: Complete Schedule O for Part VI, lines 11b and       Image: Complete Schedule O for Part VI, lines 11b and       Image: Complete Schedule O for Part VI, lines 11b and       Image: Complete Schedule O for Part VI, lines 11b and       Image: Complete Schedule O for Part VI, lines 11b and       Image: Complete Schedule O for Part VI, lines 11b and       Image: Complete Schedule O for Part VI, lines 11b and       Image: Complete Schedule O for Part VI, lines 11b and       Image: Complete Schedule O for Part VI, lines 11b and       Image: Complete Schedule O for Part VI, lines 11b and       Image: Complete Schedule O for Part VI, lines 11b and       Image: Complete Schedule O for Part VI, lines 11b and       Image: Complete Schedule O for Part VI, lines 11b and       Image: Complete Schedule O for Part VI, lines 11b and       Image: Complete Schedule O for Part VI, lines 11b and       Image: Complete Schedule O for Part VI, lines 11b and       Image: Complete Schedule O for Part VI, lines 11b and       Image: Complete Schedule O for Part VI, lines 11b and       Image: Complete Schedule	5.				
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			37		x
	20				
19? Note. All Form 990 filers are required to complete Schedule O	50	19? Note. All Form 990 filers are required to complete Schedule O		Х	

Form **990** (2014)

Form 990 (2014)

Page 5

Check # Schedule C contains a response or note to any line in this Part V.       Image: Control of Control V Control Contrecontrol Control Control Control Control Con	Par				
1a       Enter the number oported in Box 3 of Form 1096. Enter -0- if not applicable.       11       14       14         b       Enter the number of corners W-26 included in the 1a. Enter -0- if not applicable.       10       0         2       Enter the number of corners W-26 included in the 1a. Enter -0- if not applicable.       10       0         2       Enter the number of corners W-26 includes inter 3. Enter -0- if not applicable.       10       0         3       Enter the number of corners W-26 includes inter 3. Enter -0- if not applicable instructions.       8       2         3       D the organization have on line 2. A differ 0- form 30.00 or more differ 10 and organization have on line 2. A differ 3. A dif		Check if Schedule O contains a response of note to any line in this Part V	<u>•••</u>		No
b Enter the number of Forms W-26 included in line 1a. Enter -0 if not applicable,       10       10       0         c Did the organization comply with backing withholding rules for reportable payments to vendors and reportable gaming (gambing) winnings to prize winners?       1c       x         2a Enter the number of emplyees reported on Form W-3, Transmital of Wage and Tax       a       a         3b If at least one is reported on line 2a, difference on one of 3,000 or more during the year?       3a         3a Did the organization have unrelated business gross income of 3,000 or more during the year?       3a       3a         3b If ''s as lift field a Form 9400 To this year?       3b       x       x         4a At any time during the calendar year, did the organization have an inferst in, or a signature or other intancial account, or other financial account is country.       b       3b       x         5a Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year?       5a       x         5a Was the organization nake annual gross crepits that are normally greater than \$100,000, and did the organization nellew with y solicitation an express statement that yeah contributions?       5a       x         5a Was the organization nellew organization have an intergenelly as a contribution and partly for goods and service statement tha year?       5a       x <td>1a</td> <td>Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable</td> <td></td> <td>100</td> <td>110</td>	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		100	110
c Did the organization comply with backup withholding rules for reportable payments to vendors and the reportable payments of employees reported on Form W-3, Transmittal of Waga and Tax tax is statements field of the capanization file all required faderal employment tax returns?       to       X         2a Enter the number of employees reported on Form W-3, Transmittal of Waga and Tax tax is statements filed on the capanization file all required faderal employment tax returns?       B       b       the test of the state of the state of the second of t					
reportable gaming (gambling) winnings to prize winners?       It       It <td< th=""><td></td><td></td><td></td><td></td><td></td></td<>					
2a Enter the number of employees reported on Form W-3. Transmital of Wage and Tax       Za       8         b If at least one is reported on line 2a, did the organization file all required fedral employment tax returne?       2b       X         3a Did the organization have unrolated business gross income of \$1.000 or more during the year?       3a       X         3b If Yas? has if lided 5 Form 90-75 trib type 271 If 'No' to lide 3b, provide a neghanation in Schodula 0       3b       X         4a At any time during the calendar year did the organization have an interest in, or a signature or other authority over, a financial account?       3a       X         b If 'Yes,' enter the name of the foreign country.       >			1c	Х	
b if at least one is reported on line 2a, did the organization file all required federal employment tax returns?       2b       X         Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-//e (see instructions).       3a       X         b If "Yes," has if field a Form 990-T for this yea? // If "No" to line 3b, provide an explanation in Schedule 0       3b       X         b If "Yes," has if field a Form 990-T for this yea? // If "No" to line 3b, provide an explanation in Schedule 0       3b       X         b If "Yes," has if field a Form 990-T for this yea? // If "No" to line 3b, provide an explanation in Schedule 0       3b       A         a At any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country. ►       Se       Se       X         Sa was the organization have annuel goes receipts that are normally greater than \$100,000, and did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       Sa       X         7 Organization shat may receive a payment in excess of \$75 made parity as a contribution and parity for goods and services provided to the payor?       Ta       X         10 the organization netwere was function, directly or indirectly, to a prohibited tax sheller transaction 74(c)       Ba       X         10 'Yes, 'I did the organization feeder with every solicitation an express statement that such contributions or gifts were not tax deductible?       To the orga	2a				
Note, If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).       Image: Section 2000 and 20000 and 20000 and 20000 and 2000 and 2000 and 2000 and 2000 and 200		Statements, filed for the calendar year ending with or within the year covered by this return . 2a 8			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?       3a       X         b If "Ves," has it filed 3 come and year? If Wo'c files 32, provide an explanation in Schedule 0       3b         4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bark account, securities account, or other financial account)?         See instructions for filling requirements for FinCEN Form 114, Report of Foreign Bark and Financial Accounts (FBAR).         Sa Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?       5a       X         b If "ves," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?       5b       X         b If "ves," to line 5a or 5b, did the organization in tax were not tax deductible?       6a       X         b If "ves," did the organization include with every solicitation an oppress statement that such contributions or gifts were not tax deductible?       6b       7a       X         b If "ves," did the organization nature section 170(c).       10 the organization sective a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor?       7a       X         b If "ves," indicate the number of Forms 2822 field during the year?       7d       7d       7d       X         f If "ves," din the organization nealyee subiness holdings at any time during t	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule 0       3b         4a At any time during the calendar year, did the organization have an interest in, or a signature or other authonity over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts (FBAR).       4a       X         b II "Yes," enter the name of the foreign country: ►       5a       X       5a       X         country: ►       5a was the organization a party to a prohibited tax shelter transaction at any time during the tax year?       5a       X         5a Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions statu were not tax deductible accharitable contributions?       5a       X         6a Does the organization neaver solicitation contributions and were not tax deductible accharitable contributions?       6a       X         f Tyes," did the organization neaver solicitation an express statement that such contributions and partly for goods and services provided to the payor?       7a       X         7b If "Yes," did the organization neaver, size statement that such contributions and regulated to file form 8282?       7a       X         7b If "Yes," did the organization neaver of tax deductible accharitable contributions and partly for goods and services provided to the payor?       7a       X         7b If the organization neaver of tax deductible accharitable contributions?       7b       7c		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?       4a       X         b If "Yes," enter the name of the foreign country: >					Х
over, a financial account in a foreign country (such as a bank account, securities account, or other financial account?)       4a       x         b If "Yes," enter the name of the foreign country: >       See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).       5a       Xa         5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?       5a       X         5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       5c       Xa         c If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       6a       X         7 Organization solicit any contributions that were not tax deductible?       7b       C       7a       X         8 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       7a       X         7 Organization solicit any contributions that were not tax deductible?       7a       X       7b       C         8 If "Yes," did the organization notify the donor of the value of the goods or services provided?       7b       C       X         9 If the organization receive any pyremiums, directly or indirectly, to ap premiums, directly or apprentive, free more that deductible?       7a       X         9 If the organization receive any trunds, dire			3b		
accountl?       4a       x         b If "Yes," enter the name of the foreign country: b       5e       x         See instructions for filling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).       5a       x         5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?       5a       x         b Did any taxable party notify the organization file Form 8886-17       5c       5c       x         6a Dees the organization have annual gross receipts that are normally greater than \$100,000, and did the organization include with every solication an express statement that such contributions or gifts were not tax deductible?       5c       5c         7 Organizations that may receive deductible contributions under section 170(c).       a       Did the organization notify the donor of the value of the goods or services provided?       7a       x         c Did the organization notify the donor of the value of the goods or services provided?       7a       x         c Did the organization notify the donor of the value of the goods or services provided?       7a       x         c Did the organization notify the donor of the value of the goods or services provided?       7a       x         c Did the organization notify the donor of the value of the goods or services provide?       7a       x         c Did the organization notify the donor of the value of the goods or services provide?       7a	4a				
b ff "Yes," enter the name of the foreign country: b         See instructions for filing requirements for FINCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).         5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?       5a         5a Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization nict are write wear on tax deductible acharitable contributions?       5a         6a Dees the organization nave annual gross receipts that are normally greater than \$100,000, and did the organization nickude with every solicitation an express statement that such contributions of the organization nectuble?       5a         7 Organizations that may receive deductible contributions under section 170(c).       a) did the organization neceive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?       7b         7 Did the organization neceive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?       7d         7 Did the organization neceive any tunck, directly or indirectly, on a personal benefit contract?       7t         7 Did the organization neceive any tunck, directly or indirectly, on a personal benefit contract?       7t         7 Did the organization neceive any tunck, directly or indirectly, on a personal benefit contract?       7t         7 Bit the organization services more and sources provided to the accuration. Maring the way may travel wides tany tune during the year?       7d					
See instructions for filing requirements for FINCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).         5a       Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?       5a       X         5b       Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions at were not tax deductibles acharitable contributions?       6a         7       Organizations that any receive deductible contributions and express statement that such contributions or gifts were not tax deductible?       6b         7       Organizations that any receive deductible contributions under section 170(c).       0b       6b         9       If "Yes," did the organization notify the donor of the value of the goods or services provided to the payor?       7a       X         7       Did the organization suble any change, or otherwise dispose of tangible personal property for which it was required to file Form \$282?       7c       X         9       Did the organization receive a pyment, directly or indirectly, to pay premiums on a personal benefit contract?       7f       X         9       Did the organization receive any trunk, directly or indirectly, and parization file Form 8899 as required?       7i       X         9       Did the organization make any taxable distributions under section 4966?       9a       X       9a<		account)?	4a		X
(FBAR),       5a       Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?       5a       X         5a       Did any taxable party notify the organization file Form 8886-17.       5a       X         5b       Did any taxable party notify the organization file Form 8886-17.       5c       5c         5a       Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization notude with every solicitation an express statement that such contributions or glits were not tax deductible contributions and party for goods and services provided to the payor?       6b         7       Organizations sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 82827.       7d       7d       7d         8       If 'Yes,' did the organization neceive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided?       7d       7d       7d         9       If 'Yes,'' did the organization neceive any funds, directly or indirectly, no a personal property for which it was required to file Form 82827.       7d	b				
5a       Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?       5a       X         b       Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       5b       X         cli 11 'ves' to line 5a or 5b, did the organization file Form 8886-17?       5c       X       5c         cli 12 'ves', did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible contributions and scharitable contributions?       6a       X         cli 11 'ves', 'did the organization neceive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?       7a       X         cli 11 'ves', 'did the organization notify the donor of the value of the goods or services provided?       7a       X         cli 11 'ves', 'did the organization notify the donor of the value of the goods or services provided?       7a       X         cli 11 'ves', 'indicate the number of Forms 8282 filed during the year.       7d       7a       X         dl 11 'ves', 'indicate the number of Forms 8282 filed during the year.       7d       7d       X         fl 12 the organization neceive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7f       X         gl 11 the organization neceive a contribution of qualified intellectual propery, did the organization fil					
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       Sb       X         c If 'Yes' to line 5a or 5b, did the organization file Form 8886-1?       Sc       Sc         6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?       Sc       Sc         b If 'Yes'' did the organization include with every solicitation an express statement that such contributions or glits were not tax deductible contributions under section 170(c).       Bo       Sc         a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided 7       To       To         c Did the organization receive any payment in excess of \$75 made partly as a contribution and partly for goods and services provided 7       To       To         c Did the organization receive any function, directly or indirectly, to pay premiums on a personal benefit contract?       To       X         c Did the organization receive any function of qualified intellectual property, did the organization fiele moreaves any tonic dives of tunds. Did a doon advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?       To       Sa         s Sponsoring organization make any taxable distributions under section 4966?       Sa       X       Sa       X         9b       X       Sa       Sa       <	5		50		v
c If "Yes" to line 5a or 5b, did the organization file Form 8886-77       5c         6a Does the organization solicit any contributions that were not tax deductible as charitable contributions?       6a       X         b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       6b       6b         7 Organization state may receive deductible contributions under section 170(c).       and services provided to the payor?       7a       X         b If "Yes," did the organization netify the donor of the value of the goods or services provided?       7b       7b       7b         c Did the organization outify the donor of the value of the goods or services provided?       7c       X       X         b If "Yes," indicate the number of Forms 8282 filed during the year       7d       7d       X         f Did the organization receive any funds, directly or indirectly, to ap premiums on a personal benefit contract?       7t       X         f If the organization receive a contribution of cas. boats, airplanes, or other vehices, did the organization the Form 8289       7g       7d       X         g If the organization receive any funds, directly or indirectly, to ap premiums on a personal benefit contract?       7t       X         g If the organization receive a contribution of qualified intellectual property, did the organization take are at astation failed ontributions under section 4966?       9a       X       9					
Ga Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?       Ga       X         B If "Yes," did the organization include with every solicitation an express statement that such contributions or grifts were not tax deductible?       Ga       X         7 Organization stat may receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?       Gb       7a       X         7 Did the organization neceive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?       7d       7c       X         0 Did the organization neceive any funds, directly or indirectly, or pay premiums on a personal benefit contract?       7d       7c       X         9 Did the organization receive a contribution of qualified intellectual property, did the organization file form 8089 as required?       7d       7d         10 the organization receive a contribution of qualified intellectual property, did the organization file a Form 1098-CC       7d       7d         2 Byonsoring organization mate any taxable distributions under section 4966?       9a       X         9 Sponsoring organizations maintaining door advised funds.       10a       10a       10a         10 Section 501(c)(7) organizations. Enter:       11a       10a       10b       12a         12 Section 501(c)(7) org					
organization solicit any contributions that were not tax deductible as charitable contributions?       6a       X         b If "Yes," did the organization include with every solicitation an express statement that such contributions or glifts were not tax deductible?       6b       6b         7 Organization stat may receive deductible contributions under section 170(c).       a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?       7a       X         b If "Yes," did the organization notify the donor of the value of the goods or services provided?       7b       7a       X         c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c       X         d If "Yes," indicate the number of Forms 8282 filed during the year       7d       7e       X         g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7h       X         h If the sponsoring organizations maintaining door advised funds.       Did a donor advised funds.       8       X         9 Sponsoring organization make any taxable distributions under section 4966?       9a       X         9 bid the sponsoring organization make any taxable distributions under section 4966?       9a       X         10 section 501(c)(12) organizations. Enter:       10a       10b       10b					
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       6b         a Did the organizations that may receive deductible contributions under section 170(c).       a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?       7a       X         b If "Yes," idid the organization notify the donor of the value of the goods or services provided?       7b       C         c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c       X         d If "Yes," indicate the number of Forms 8282 filed during the year       7d       7c       X         g If the organization receive a contribution of qualified intellectual property, did the organization files Form 889 as required?       7f       X         g If the organization received a contribution of qualified intellectual property, did the organization files Form 1080-C?       7h       X         8 Sponsoring organization make any taxable distributions under section 4966?       9a       X         9 Did the sponsoring organizations. Enter:       10a       10b       10b       10b         11 Bection 501(c)(12) organizations. Enter:       10a       10b       10b       12a         12 Section 501(c)(12) organizations. Enter:       11a       10b       12a       12a <td>va</td> <td></td> <td>6a</td> <td></td> <td>х</td>	va		6a		х
gifts were not tax deductible?       6b         7       Organizations that may receive deductible contributions under section 170(c).       6b         a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?       7a       X         b If "Yes," did the organization notify the donor of the value of the goods or services provided?       7b       7c       X         b If "Yes," did the organization notify the donor of the value of the goods or services provided?       7c       X         d If "Yes," indicate the number of Forms 282?       7c       X       7c       X         g If the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7f       X         g If the organization received a contribution of qualified intellectual property, did the organization file a Form 1080-C?       7h       X         g Sponsoring organizations maintaining door advised funds.       1d a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?       9a       X         g Did the sponsoring organization make any taxable distributions under section 4966?       9a       X         g Sponsoring organizations maintaining door advised funds.       10b       1a       1a         10 Section 501(c)(7) organizations. Enter:       10a       1a       1a       1a	b				
7       Organizations that may receive deductible contributions under section 170(c).       a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?       7a       X         b If "Yes," did the organization notify the donor of the value of the goods or services provided?       7b       7c       X         c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c       X         d If "Yes," indicate the number of Forms 8282 filed during the year       Td       7c       X         f Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7f       X         g If the organization received a contribution of qualified intellectual property, did the organization file Form 8999 as required?       7h       X         h the organization maximaning donor advised funds.       Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?       9a       X         9 Did the sponsoring organizations. Enter:       10a       10b       10b       10b       10b         11 Section 501(c)(7) organizations. Enter:       10a       10b       10b       11c       11c         12 Section 501(c)(7) organizations. Enter:       11a       11b       11c       12a       12a       12a			6b		
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?       7a       X         7a       X       X         7b       C       X         7c       Did the organization notify the donor of the value of the goods or services provided?       7c       X         7b       C       X       7c       X         7c       X       7c       X         7d       Fold the organization notify the donor of the value of the goods or services provided?       7c       X         7c       X       7d       X       7c       X         7d       Fold the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7t       X         7d       If the organization received a contribution of qualified intellectual property, did the organization file Form 9899 as required?       7d       X         7d       If the organization matining donor advised funds.       Did the sponsoring organization make any taxable distributions under section 4966?       9a       X         9b       X       Sponsoring organizations. Enter:       10a       10b       10b       10b         10 section 501(c)(7) organizations. Enter:       a forss income from members or shareholders       11a       11b       12a	7				
and services provided to the payor?       7a       X         b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?       7b         c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c       X         d If 'Yes,' indicate the number of Forms 8282 filed during the year       7d       7e       X         d Id 'Yes,' indicate the number of Forms 8282 filed during the year       7d       7e       X         g Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       7t       X         g If the organization received a contribution of qualified intellectual property, did the organization file a Form 1089-0?       7f       X         8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?       9a       X         9 Donsoring organization make any taxable distributions under section 4966?       9a       X         9 Socion 501(c)(7) organizations. Enter:       10a       10a       10a         11 Section 501(c)(12) organizations. Enter:       10b       11a       12a         12 Section 501(c)(29) qualified nonprofit health insurance issuers.       11a       12a       12a         13 Section 501(c)(29) qualified nonprofit health insuran					
b If "Yes," did the organization notify the donor of the value of the goods or services provided?       7b         c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c       X         d If Yes," indicate the number of Forms 8282 filed during the year       7d       7d       7e         e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7f       X         f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7h       X         g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?       7h       X         8 Sponsoring organizations maintaining donor advised funds.       a Did the sponsoring organization make any taxable distributions under section 4966?       9a       X         9 Did the sponsoring organizations. Enter:       a lobe       10a       10a       10a         11 Section 501(c)(12) organizations. Enter:       10a       10b       10b       12a         12 Section 501(c)(12) organizations. Enter:       11a       10a       11a       12a         13 Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.).       11a       12a       12a         14 Secti			7a		Х
required to file Form 8282?       7c       X         d If "Yes," indicate the number of Forms 8282 filed during the year       7d       7d         e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7f       X         f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       7f       X         g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7g       7g         h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 108e-C?       7n       7n         8 Sponsoring organizations maintaining donor advised funds.       a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?       9a       X         9 Did the sponsoring organizations. Enter:       a linitiation fees and capital contributions included on Part VIII, line 12       10a       10b       10b         11 Section 501(c)(12) organizations. Enter:       a Gross income from members or shareholders       11a       11b       12a         12 Section 501(c)(12) organizations. Enter:       a Gross income from them.       11b       10b       11b       12a         13 Section 501(c)(12) organizations there:       11a       11b       12a       11b       12a <td>b</td> <td></td> <td>7b</td> <td></td> <td></td>	b		7b		
d If "Yes," indicate the number of Forms 8282 filed during the year	c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e       X         f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       7f       X         f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7g       7h       X         f the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?       7h       X         8 Sponsoring organizations maintaining donor advised funds.       Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?       9a       X         9 Did the sponsoring organizations maintaining donor advised funds.       9a       X         10 the sponsoring organization make a distribution to a donor, donor advisor, or related person?       9b       X         10 Section 501(c)(7) organizations. Enter:       10a       10a       10b       10b         11 Section 501(c)(12) organizations. Enter:       11a       10a       10b       11b       12a         12 Section 501(c)(12) organizations. Enter:       11b       11b       12a       12a       12a         13 Section 501(c)(12) organizations. Enter:       11b       12a       12b       12a       12b       13a <t< th=""><td></td><td></td><td>7c</td><td></td><td>Х</td></t<>			7c		Х
f       Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       7f       X         g       If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7g       7g         h       If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1089-C?       7h       8         8       Sponsoring organizations maintaining donor advised funds.       Did the sponsoring organization make any taxable distributions under section 4966?       9a       X         9       Did the sponsoring organizations maintaining donor advised funds.       9b       X         10       Section 501(c)(7) organizations. Enter:       10a       9b       X         11       Section 501(c)(12) organizations. Enter:       10a       10b       11a         12       Gross income from members or shareholders       11a       11b       11a         12       Section 501(c)(21) organizations. Enter:       11b       12a       12a         12       Section 501(c)(21) organizations. Enter:       11b       11b       11b       11c         12       Section 501(c)(21) organization them.)       11b       11b       11c       12a       12a         13       Section 501(c)(29) qual					
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7g         h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?       7h         8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?       8         9 Sponsoring organizations maintaining donor advised funds.       9         a Did the sponsoring organization make any taxable distributions under section 4966?       9a         x       9         b Did the sponsoring organizations. Enter:       10a         a Initiation fees and capital contributions included on Part VIII, line 12       10a         10 Section 501(c)(7) organizations. Enter:       10a         a Gross income from members or shareholders       11a         b Gross income from members or shareholders       11a         12 Section 501(c)(2) organizations. Enter:       11b         a Gross income from members or shareholders       11b         12 Section 501(c)(2) organizations. Enter:       11b         a Gross income from members or shareholders       11b         12 Section 501(c)(2) qualified nonprofit thealth insurance issuers.       11a         13 Section 501(c)(2) gualified nonprofit health insurance issuers.       12b <td></td> <td></td> <td></td> <td></td> <td></td>					
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?       7h         8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?       8       X         9 Sponsoring organization make any taxable distributions under section 4966?       9a       X         9b Did the sponsoring organization make any taxable distributions under section 4966?       9a       X         9b Cross receipts, included on Form 990, Part VIII, line 12       10a       10a       10b         10 Section 501(c)(12) organizations. Enter:       10a       10b       10b       10b         11 Section 501(c)(12) organizations. Enter:       11a       10b       11b       12a         12 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a       12a         13 Section 501(c)(29 qualified nonprofit health insurance issuers.       12b       13a       13a         13 Section 501(c)(29 qualified nonprofit health plans in more than one state?       13a       13a         14a       13b       13a       14a       14a					Х
8       Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?       8       X         9       Sponsoring organization make any taxable distributions under section 4966?       9a       X         9       Did the sponsoring organization make any taxable distributions under section 4966?       9a       X         9       Did the sponsoring organization make any taxable distributions under section 4966?       9a       X         10       Section 501(c)(7) organizations. Enter:       10a       9b       X         11       Section 501(c)(12) organizations. Enter:       10b       10b       10b       10b         11       Section 501(c)(12) organizations. Enter:       11a       10b       10b       11b       12a         12       Section 501(c)(12) organizations. Enter:       11b       11b       12a       12b         13       Section 501(c)(2) organizations. Enter:       11b       12a       12b       12a         14       Section 501(c)(2) organizations. Enter:       11b       12a       12b       12a	-				
sponsoring organization have excess business holdings at any time during the year?       8       X         9       Sponsoring organizations maintaining donor advised funds.       9       9         a       Did the sponsoring organization make any taxable distributions under section 4966?       9a       X         b       Did the sponsoring organization make any taxable distributions under section 4966?       9a       X         10       Section 501(c)(7) organizations. Enter:       10a       10a       9b       X         11       Section 501(c)(12) organizations. Enter:       10a       10b       10b       11a       10b       10b       11b       12a       12a       11b       12a       12a       12b       12a       13a       13a<	h		7h		
9       Sponsoring organizations maintaining door advised funds.       9a       X         a Did the sponsoring organization make any taxable distributions under section 4966?       9a       X         b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?       9b       X         10       Section 501(c)(7) organizations. Enter:       10a       10a       10b         11       Section 501(c)(12) organizations. Enter:       10a       10b       10b       10b         11       Section 501(c)(12) organizations. Enter:       10b       11a       10b       10b       11a       10b       10b       11a       10b       11a       11b       11a       11b       11a       11b       11a       11b       11a       11b       11a       11b       11b       11b       11b       11a       11b       11b       11a       11b       11a       11b       11b       11b       11b       11c       11c <t< th=""><td>8</td><td></td><td>•</td><td></td><td>v</td></t<>	8		•		v
a Did the sponsoring organization make any taxable distributions under section 4966?       9a       X         b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?       9b       X         10 Section 501(c)(7) organizations. Enter:       10a       9b       X         a Initiation fees and capital contributions included on Part VIII, line 12       10a       10b       10b         11 Section 501(c)(12) organizations. Enter:       10a       10b       10b <td>•</td> <td></td> <td>8</td> <td></td> <td></td>	•		8		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?       9b       X         10 Section 501(c)(7) organizations. Enter:       a Initiation fees and capital contributions included on Part VIII, line 12       10a       10b       10c       10b <td>-</td> <td></td> <td>02</td> <td></td> <td>x</td>	-		02		x
10       Section 501(c)(7) organizations. Enter:         a Initiation fees and capital contributions included on Part VIII, line 12       10a         b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities       10b         11       Section 501(c)(12) organizations. Enter:       10a         a Gross income from members or shareholders       11a       11b         b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b       12a         12a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         b If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b       13a         13 Section 501(c)(29) qualified nonprofit health insurance issuers.       13a       13a         a Is the organization licensed to issue qualified health plans in more than one state?       13a       13a         Note. See the instructions for additional information the organization must report on Schedule O.       13a       13a         c Enter the amount of reserves on hand       13c       13a       13a         14a       Did the organization receive any payments for indoor tanning services during the tax year?       14a       X         14b       If "Yes," has it filed a Form 720 to report these payments? If "No," provide an expl					
a Initiation fees and capital contributions included on Part VIII, line 12       10a         b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities       10b         11 Section 501(c)(12) organizations. Enter:       a Gross income from members or shareholders       11a         b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b       12a         12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         13 Section 501(c)(29) qualified nonprofit health insurance issuers.       12b       13a         13 Section 501(c)(29) qualified nonprofit health plans in more than one state?       13a         13 Section 501(c)(29) qualified health plans in more than one state?       13a         14a Did the organization is licensed to issue qualified health plans       13b       13c         14a Did the organization receive any payments for indoor tanning services during the tax year?       14a       X         14a Did the organization receive any payments for indoor tanning services during the tax year?       14a       X			55		
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Form 9	990 (2014) PRINCETON AREA COMMUNITY FOUNDATION INC. 52-1746	5234	F	Page <b>6</b>
Part				
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.			
	Check if Schedule O contains a response or note to any line in this Part VI		• • •	X
Sect	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 20			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 20			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			37
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			v
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4 5		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5 6		X
6	Did the organization have members or stockholders?	0		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	7a		х
	one or more members of the governing body?	1 a		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	7b		х
0	stockholders, or persons other than the governing body?	10		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
-	the year by the following:	8a	Х	
a h	The governing body?	8b	X	
ь 9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
3	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		x
Sect	on B. Policies (This Section B requests information about policies not required by the Internal Revenue		ə.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
~	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		Х
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	Х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Sect	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	501(0	c)(3)s	only)
	available for public inspection. Indicate how you made these available. Check all that apply.			
	X       Own website       Another's website       X       Upon request       Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int	erest	policy	v, and
	financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and record	s: 🕨		
	JEFFREY VEGA 15 PRINCESS ROAD LAWRENCEVILLE, NJ 08648 609-219-1800		000	<u> </u>
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PRINCETON AREA COMMUNITY FOUNDATION INC.

52-1746234

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Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors
	Check if Schedule O contains a response or note to any line in this Part VII
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

___ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A)         (B)         Position         Reportable compensation from trained and conclusions of the and the trained trained to the trained to trained to the trained to traine trained to the traine trained to the trained to th					(0	C)					
Number of the set of		(B)									
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Name and tille       Average hour period       Provide hour period       Reportable contensation is compensation from and tille or and difficultable or and anticolated is the or and tille or and anticolated is the or anticolated is an or anticolated in the organization or anticolated is an organization or and the organization or and the organization or andinvitual is an organization or andividual is an organization or a	orm 990 (2014) Part VII Section A. Officers, Directors, Tru	ustees, Ke	ey En	nplo	yee	es, a	and H	ligl	hest Compensat	ed Employ	ees (c	Pag ontinued)
15) JOHN D., WALLACE       1.00       x       0       0         TRUSTER       0       x       0       0         (6) ELEANOR V., HORNE       3.00       x       0       0         (7) CAROLIN P. SANDERSON, CFP       3.00       x       0       0         (7) CAROLIN P. SANDERSON, CFP       3.00       x       0       0         (7) CAROLIN P. SANDERSON, CFP       3.00       x       0       0         (7) CAROLIN P. SANDERSON, CFP       3.00       x       0       0         (7) CAROLIN P. SANDERSON, CFP       3.00       x       0       0         (7) CAROLIN P. SANDERSON, CFP       0       x       0       0         (8) LISA SKEPTE TATUM       1.00       x       0       0         (7) TRUSTEE       0       x       0       0       0         (7) TRUSTEE       0       x       182,331       0       20         (2) LAURA LONMAN       40.00       x       118,439       0       14         (7) Corolation continuation sheets to Part VI, Section A       >       300,770       0       34         (7) Corolation continuation sheets to Part VI, Section A       >       300,770       0       34 <th></th> <th>Average hours per week (list any</th> <th>box,</th> <th>unles er and</th> <th>Pos heck ss pe d a d</th> <th>ition more rson lirecto</th> <th>is both a or/truste</th> <th>an ee)</th> <th>Reportable compensation from</th> <th>Reportal compensation related</th> <th>on from</th> <th><b>(F)</b> Estimated amount of other compensation</th>		Average hours per week (list any	box,	unles er and	Pos heck ss pe d a d	ition more rson lirecto	is both a or/truste	an ee)	Reportable compensation from	Reportal compensation related	on from	<b>(F)</b> Estimated amount of other compensation
TRUSTEE       0       0         6)       ELEANOR V. HORNE       3.00         TRUSTEE       0       0         7.0       CAROLYN P. SANDERSON, CFP       3.00         7.1       CAROLYN P. SANDERSON, CFP       3.00         7.1       CAROLYN P. SANDERSON, CFP       3.00         7.1       CAROLYN P. SANDERSON, CFP       3.00         8.1       LISA SKRETE TATUM       1.00         TRUSTEE       0       x       0         9.1       MEREDITH C. MOORE       1.00         TRUSTEE       0       x       0         10       THOMAS P. WEIDNER, ESQ.       1.00         TRUSTEE       0       x       0         11       ANN W. KIELING       45.00         PRESIDENT       0       x       182,331.       0         20       LAURA LONGAN       40.00       x       118,439.       0         12       LAURA LONGAN       40.00       x       1300,770.       0       34         4       Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization > 2       30       30       3         3       Did the organization l		organizations below dotted	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former		(W-2/1099-	MISC)	from the organization and related organizations
(6)       ELEANOR V. HORNE       3.00       0       0       0         TRUSTEE       0       x       0       0       0         (7)       CAROLYN P. SANDERSON, CFP       3.00       x       0       0         (8)       LISA SKEETE TATUM       1.00       0       0       0         TRUSTEE       0       x       0       0       0         (9)       MEREDITH C. MORE       1.00       0       0       0         TRUSTEE       0       x       0       0       0         (10)       TRUSTEE       0       x       0       0         (21)       ANN W. KIELING       45.00       x       182,331.       0       20         (22)       LAURA LONGMAN       40.00       x       118,439.       0       14         (22)       LAURA LONGMAN       40.00       x       118,439.       0       14         (23)       ANN W. KIELING       40.00       x       118,439.       0       14         (24)       AURA LONGMAN       40.00       x       118,439.       0       14         (25)       Catal rumber of individuals (including but not limited to those listed above) who r		+	-						C		0	
7.) CAROLYN P. SANDERSON, CFP       3.00       x       0       0         TRUSTEE       0       x       0       0         8.) LISA SKEETE TATUM       1.00       x       0       0         TRUSTEE       0       x       0       0         9.) MEREDITH C. MOORE       1.00       x       0       0         TRUSTEE       0       x       0       0         10.100       TRUSTEE       0       x       0       0         11.201       1.00       x       0       0       0         12.1 ANN W. KIELING       45.00       x       182,331.       20         12.1 AURA LONGMAN       40.00       x       118,439.       0       14	6) ELEANOR V. HORNE	3.00	-									
8) LISA SKEETE TATUM       1.00       x       0       0         TRUSTEE       0       x       0       0       0         9) MEREDITH C. MOORE       1.00       x       0       0       0         TRUSTEE       0       x       0       0       0         01) THOMAS P. WEIDNER, ESQ.       1.00       x       0       0         TRUSTEE       0       x       0       0       0         TRUSTEE       0       x       182,331.       0       20         PRESIDENT       0       x       182,331.       0       20         (2) LAURA LONGMAN       40.00       x       118,439.       0       14	7) CAROLYN P. SANDERSON, CFP	3.00	-									
9)       MEREDITH C. MOORE       1.00       x       0       0         TRUSTEE       0       x       0       0       0         01)       THOMAS P. WEIDNER, ESQ.       1.00       x       0       0         TRUSTEE       0       x       0       0       0         11)       ANN W. KIELING       45.00       x       182,331.       0       20         21)       LAURA LONGMAN       40.00       x       118,439.       0       14         CFO       0       x       118,439.       0       14         Ib Sub-total       0       0       300,770.       0       34         d Total (add lines 1b and 1c)       300,770.       0       34         2       Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization >       2       74         3       Did the organization list any former officer, director, or trustee, key employee, or highest compensation from the organization >       2       74         3       Did the organization list any former officer, director, or trustee, key employee, or highest compensation from the organization and related organization?       3       3         5       Did any person listed on line		+							C		0	
20) THOMAS P. WEIDNER, ESQ.       1.00       x       0       0         TRUSTEE       0       x       0       0         21) ANN W. KIELING       45.00       x       182,331.       0       20         PRESIDENT       0       x       118,439.       0       14         22) LAURA LONGMAN       40.00       x       118,439.       0       14         CFO       0       x       118,439.       0       14	9) MEREDITH C. MOORE	+	-						C		0	
PRESIDENT       0       x       182,331.       0       20         22) LAURA LONGMAN       40.00       x       118,439.       0       14         CFO       0       x       118,439.       0       14	0) THOMAS P. WEIDNER, ESQ.	+	-						C		0	
22)       LAURA LONGMAN       40.00       x       118,439.0       14         CFO       0       x       118,439.0       14		+	-		x				182,331.		0	20,08
c Total from continuation sheets to Part VII, Section A       > 300,770.       0       34         d Total (add lines 1b and 1c)       > 300,770.       0       34         2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization       2         3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual       3         4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organizations greater than \$150,000? If "Yes," complete Schedule J for such individual       3         5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person       5         Section B. Independent Contractors       1       Complete this table for your five highest compensation for the calendar year ending with or within the organization's tax year.		+	-		х				118,439.		0	14,16
c Total from continuation sheets to Part VII, Section A       > 300,770.       0       34         d Total (add lines 1b and 1c)       > 300,770.       0       34         2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization       2         3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual       3         4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organizations greater than \$150,000? If "Yes," complete Schedule J for such individual       3         5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person       5         Section B. Independent Contractors       1       Complete this table for your five highest compensation for the calendar year ending with or within the organization's tax year.												
c Total from continuation sheets to Part VII, Section A       > 300,770.       0       34         d Total (add lines 1b and 1c)       > 300,770.       0       34         2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization       2         3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual       3         4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organizations greater than \$150,000? If "Yes," complete Schedule J for such individual       3         5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person       5         Section B. Independent Contractors       1       Complete this table for your five highest compensation for the calendar year ending with or within the organization's tax year.			_									
c Total from continuation sheets to Part VII, Section A       > 300,770.       0       34         d Total (add lines 1b and 1c)       > 300,770.       0       34         2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization       2         3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual       3         4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organizations greater than \$150,000? If "Yes," complete Schedule J for such individual       3         5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person       5         Section B. Independent Contractors       1       Complete this table for your five highest compensation for the calendar year ending with or within the organization's tax year.												
reportable compensation from the organization       2         3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual       3         4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual.       4         5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person       5         Section B. Independent Contractors       1       Complete this table for your five highest compensation for the calendar year ending with or within the organization's tax year.	c Total from continuation sheets to Part VII, Se	ection A		• •		 	•••		300,770.		0	34,24 34,24
<ul> <li>3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>.</li> <li>4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>.</li> <li>5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>.</li> <li>6 Section B. Independent Contractors</li> <li>1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.</li> </ul>					d al	bove	e) who	o re	ceived more than	\$100,000 c	ıf	
organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual.       4         5       Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person       5         5       Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person       5         5       Section B. Independent Contractors       5         1       Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.												Yes M
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person       5         5 Section B. Independent Contractors       5         1 Complete this table for your five highest compensation for the calendar year ending with or within the organization's tax year.	organization and related organizations gre	eater than	<b>\$15</b>	50,0	00?	lf	"Yes	," (	complete Schedu	le J for s	such	4 X
<ul> <li>Section B. Independent Contractors</li> <li>Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.</li> </ul>	5 Did any person listed on line 1a receive or	accrue con	mpen	sati	on f	from	any	uni	related organization	on or individ	dual	5
compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.						-						-
(A) (B) (C)	compensation from the organization. Report c											
	(A) Name and business add	dress							<b>(B)</b> Description of se	ervices	C	<b>(C)</b> ompensation
ATTACHMENT 1	ATTACHMENT 1											
2 Total number of independent contractors (including but not limited to those listed above) who received	2 Total number of independent contractors (in			- 11	, it a	4 4 4	thes		inted above) when	received		

Form	990	(201)	4
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Par	't VII			an ar nata ta ar	vilian in this Dort V			X
		Check if Schedule O contain	is a respor	ise or note to ar	iy line in this Part V (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d f g	Federated campaigns Membership dues Fundraising events	1b 1c 1d ). 1e , , , , , , , , , , , , , , , , , , ,	18,198,027. 4,464,654.				
	h	Total. Add lines 1a-1f	<u></u>	Business Code	18,198,027.			
Program Service Revenue	2a b c d e							
rogr	f	All other program service revenue						
<u> </u>	<u>g</u> 3	Total. Add lines 2a-2f Investment income (includin and other similar amounts) ATT	g divider	nds, interest,	0 6,140,987.			6,140,987.
	4 5	Income from investment of tax-e. Royalties	•	•	0			
	6a b	Gross rents						
	c d	Net rental income or (loss)			0			
	7a		Securities	(ii) Other				
	b	Less: cost or other basis and sales expenses	5,130,949. 4,854,566.					
	c d	Gain or (loss)	276,383.	• • • • • • • •	276,383.			276,383.
Other Revenue	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1 See Part IV, line 18	c).					
the	b	Less: direct expenses						
0	с 9а	Net income or (loss) from fundrai Gross income from gaming activ See Part IV, line 19	ities.		0			
	b c	Less: direct expenses Net income or (loss) from gamin	b		0			
	10a	Gross sales of inventory, returns and allowances	less					
	b	Less: cost of goods sold	b					
	C	Net income or (loss) from sales of Miscellaneous Revenue	inventory_	► Business Code	0			
	11a			900099	20,055.	20,055.		
	b							
	c							
	d	All other revenue			20,055.			
	е 12	Total revenue. See instructions			24,635,452.	20,055.		6,417,370.

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<b>Part IX</b> Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations mu	st complete all column			
Check if Schedule O contains a respo	onse or note to any line	in this Part IX		
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1 Grants and other assistance to domestic organizations				
and domestic governments. See Part IV, line 21	8,892,894.	8,892,894.		
2 Grants and other assistance to domestic				
individuals. See Part IV, line 22	262,051.	262,051.		
3 Grants and other assistance to foreign				
organizations, foreign governments, and foreign	COO 700	600 700		
individuals. See Part IV, lines 15 and 16	690,722.	690,722.		
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	331,109.	154,755.	145,624.	30,730
6 Compensation not included above, to disqualified				
persons (as defined under section 4958(f)(1)) and				
persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	382,968.	169,580.	177,727.	35,66
8 Pension plan accruals and contributions (include		0 -10		
section 401(k) and 403(b) employer contributions)	18,314.	8,518.	7,991.	1,80
9 Other employee benefits	42,732.	20,335.	18,891.	3,50
0 Payroll taxes	50,187.	22,868.	22,676.	4,64
1 Fees for services (non-employees):				
a Management	0	1.5. 0.0.6		
b Legal	15,936.	15,936.		
c Accounting	48,000.		48,000.	
d Lobbying	0			
e Professional fundraising services. See Part IV, line 17.	0		- 101	
f Investment management fees	5,431.		5,431.	
g Other. (If line 11g amount exceeds 10% of line 25, column		0.000		
(A) amount, list line 11g expenses on Schedule O.)	107,567.	2,000.	105,567.	04 15
2 Advertising and promotion	70,361.	7,738.	38,465.	24,158
3 Office expenses	46,891.	20,096.	22,978.	3,81
4 Information technology	29,506.	14,436.	12,329.	2,743
5 Royalties	3	4.4 0.00	20.000	0 27
6 Occupancy	92,340.	44,098.	39,868.	8,37
7 Travel	6,002.	2,936.	2,508.	55
8 Payments of travel or entertainment expenses	0			
for any federal, state, or local public officials	7,599.	2 710	2 175	70
9 Conferences, conventions, and meetings	, 599.	3,718.	3,175.	700
20 Interest	0			
Payments to affiliates	7,438.	3,639.	3,108.	693
2 Depreciation, depletion, and amortization	7,438.	3,639.	3,108.	68
13 Insurance	7,510.	5,579.	5,057.	00
4 Other expenses. Itemize expenses not covered				
above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column				
(A) amount, list line 24e expenses on Schedule O.)				
a				
b				
c				
d				
e All other expenses	11,115,364.	10,339,899.	657,395.	118,070
25 Total functional expenses. Add lines 1 through 24e           26 Joint costs. Complete this line only if the	···, ···, ››› ···	±0,000,0000.		110,070
organization reported in column (B) joint costs from a combined educational campaign and				
fundraising solicitation. Check here ► if				

0

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Form 990 (2014)

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following SOP 98-2 (ASC 958-720)

Form 990 (2014)

Page	1	1
Page		

					Page II
Pa	rt X				
		Check if Schedule O contains a response or note to any line in this Pa		· · ·	
			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing	3,850.		3,312.
	2	Savings and temporary cash investments	16,707,936.		21,899,174.
	3	Pledges and grants receivable, net	49,096.		682,336.
	4	Accounts receivable, net	0	4	0
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
	•	Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section	0	5	0
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0	6	0
ets	7	Notes and loans receivable, net	0	-	0
Assets	8	Inventories for sale or use	0	8	0
۹	9	Inventories for sale or use Prepaid expenses and deferred charges	21,302.	-	24,884.
	10 a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 119,874.			
	b	Less: accumulated depreciation <b>10b</b> 93,876.	32,156.	10c	25,998.
	11	Investments - publicly traded securities ATCH 4	37,711,854.		40,420,489.
	12	Investments - other securities. See Part IV, line 11	43,450,809.		44,385,001.
	13	Investments - program-related. See Part IV, line 11	0	-	0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	662,540.	15	212,512.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	98,639,543.	16	107,653,706.
	17	Accounts payable and accrued expenses	52,393.	17	36,582.
	18	Grants payable	533,445.	18	527,800.
	19	Deferred revenue ATCH 5	49,282.	19	41,554.
	20	Tax-exempt bond liabilities	0	20	0
es	21	Escrow or custodial account liability. Complete Part IV of Schedule D	1,536,304.	21	654,918.
Liabilities	22	Loans and other payables to current and former officers, directors,			
iabi		trustees, key employees, highest compensated employees, and			
		disqualified persons. Complete Part II of Schedule L	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	0		0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	0	25	0
	26	Total liabilities. Add lines 17 through 25	2,171,424.	26	1,260,854.
ses		Organizations that follow SFAS 117 (ASC 958), check here $\blacktriangleright$ X and complete lines 27 through 29, and lines 33 and 34.			
lan	27	Unrestricted net assets	95,815,704.	27	105,734,874.
Ba	28	Temporarily restricted net assets	652,415.	28	657,978.
pu	29	Permanently restricted net assets	0	29	0
or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here  and complete lines 30 through 34.			
ts	30	Capital stock or trust principal, or current funds		30	
sse	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ne	33	Total net assets or fund balances	96,468,119.	33	106,392,852.
	34	Total liabilities and net assets/fund balances	98,639,543.	34	107,653,706.
					Form <b>990</b> (2014)

PRINCETON	AREA	COMMUNITY	FOUNDATION	INC.

	014)				гa	ge <b>12</b>
Part XI	Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					Х
<b>1</b> To	al revenue (must equal Part VIII, column (A), line 12)	1	2	24,6	35,4	.52.
	al expenses (must equal Part IX, column (A), line 25)	2	-	11,1	15,3	64.
	venue less expenses. Subtract line 2 from line 1	3	-	13,5	20,0	188.
	t assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	9	96,4	68,1	.19.
5 Ne	t unrealized gains (losses) on investments	5	-	-3,5	95,4	87.
	nated services and use of facilities	6				0
	estment expenses	7			-5,4	ł31.
	or period adjustments	8				0
	ner changes in net assets or fund balances (explain in Schedule O)	9			5,5	563.
<b>10</b> Ne	t assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
33	column (B))	10	10	)6,3	92,8	52.
Part XII	Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1 Ac	counting method used to prepare the Form 990: Cash X Accrual Other					
lf	he organization changed its method of accounting from a prior year or checked "Other," e	xplain	in			
Sc	hedule O.					
2a W	ere the organization's financial statements compiled or reviewed by an independent accountant?			2a		Х
lf	Yes," check a box below to indicate whether the financial statements for the year were con	npiled	or			
rev	iewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b W	ere the organization's financial statements audited by an independent accountant?			2b	Х	
	Yes," check a box below to indicate whether the financial statements for the year were audi					
	parate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
c lf '	Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for	oversi	aht			
	the audit, review, or compilation of its financial statements and selection of an independent acc		-	2c	Х	
	he organization changed either its oversight process or selection process during the tax year, e					
	nedule O.					
	a result of a federal award, was the organization required to undergo an audit or audits as se	t forth	in			
	Single Audit Act and OMB Circular A-133?			3a		Х
	Yes," did the organization undergo the required audit or audits? If the organization did not und	erao	the			
	juired audit or audits, explain why in Schedule O and describe any steps taken to undergo such au	0		3b		

Form **990** (2014)

**SCHEDULE A** (Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-F7

	artment of the Treasury nal Revenue Service		(Form 990 or 990-EZ) a			is at www.irs.gov/form9	990. Inspection
	ne of the organization					Employer iden	tification number
PRI	INCETON AREA COMMUNITY						-1746234
	rt I Reason for Public Cha	- ,	-			,	i
	organization is not a private fou			-	-		
1	A church, convention of ch				ection 1	70(b)(1)(A)(i).	
2	A school described in sect						
3	A hospital or a cooperative	-	-				
4	A medical research organi	-	conjunction with a not	spital de	scribed li	n section 170(b)(1)(A)	(III). Enter the
E	hospital's name, city, and s					rotod by a gavarama	ntal unit described in
5	section 170(b)(1)(A)(iv). (		a college of universit	ly owned	u or ope	erated by a governme	antai unit described in
6	A federal, state, or local ge	• •	rnmental unit describe	d in sect	ion 170(	(h)(1)(Δ)(y)	
7	An organization that norm	-					om the general public
•	described in section 170(b	-		ippont in	om a go		sin the general public
8	X A community trust describe			e Part II.)			
9	An organization that norm				ort from	contributions, memb	ership fees, and gross
	receipts from activities re	lated to its exemp	t functions - subject	to certa	in excep	otions, and (2) no mo	re than 331/3% of its
	support from gross inves	stment income an	d unrelated business	taxable	income	e (less section 511	tax) from businesses
	acquired by the organization	on after June 30, 19	975. See section 509	(a)(2). (C	Complete	e Part III.)	
10	An organization organized	and operated excl	usively to test for publi	ic safety.	See sec	tion 509(a)(4).	
11	An organization organized	-	-	-			
	one or more publicly suppo	-			-		
	the box in lines 11a throug						
а	, II 0 0	-	-				
	the supported organization			elect a m	ajority o	of the directors or trus	tees of the supporting
L	organization. You must o	-					
b	, II 0 0						
	control or management or control or management or control or control or control of the control o		-	the sam	e persor	is that control of man	lage the supported
с		-		ated in cu	onnectio	n with and functional	lly integrated with
Ū	its supported organizatio						ny mogratoa with,
d							ted organization(s)
	that is not functionally int						
	requirement (see instruc			-			
е	Check this box if the org	anization received	a written determinatio	on from t	he IRS t	hat it is a Type I, Type I	II, Type III
	functionally integrated, o		ionally integrated sup	porting o	organizat	tion.	
f	Enter the number of supported	-					
g	Provide the following informati		<b>e</b> ()	T			
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9		organization ur governing	(v) Amount of monetary support (see	(vi) Amount of other support (see
			above or IRC section	-	ment?	instructions)	instructions)
			(see instructions))	Yes	No		
				103			
(A)							
(D)							
(B)							
(C)							
(D)							
(E)							
Tota	al						

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

OMB No. 1545-0047

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Schedule A (Form 990 or 990-EZ) 2014

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Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2010	<b>(b)</b> 2011	(c) 2012	<b>(d)</b> 2013	<b>(e)</b> 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	8,480,227.	11,089,691.	13,202,997.	9,153,790.	18,198,027.	60,124,732.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0
4	Total. Add lines 1 through 3	8,480,227.	11,089,691.	13,202,997.	9,153,790.	18,198,027.	60,124,732.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						
e	shown on line 11, column (f)						6,569,486.
<u>6</u> Soc	Public support. Subtract line 5 from line 4. tion B. Total Support						53,555,246.
	endar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4	8,480,227.	11,089,691.	13,202,997.	9,153,790.	18,198,027.	60,124,732.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,347,576.	1,877,319.	1,431,714.	3,378,689.	6,140,987.	14,176,285.
9	Net income from unrelated business activities, whether or not the business is regularly carried on	1,547,576.	1,077,319.	1,451,714.	3,370,002.	0,140,907.	0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) ATCH 1	6,190.	6,915.	5,755.	14,380.	20,055.	53,295.
11	Total support. Add lines 7 through 10						74,354,312.
12	Gross receipts from related activities, etc. (s	ee instructions) .				12	
13	First five years. If the Form 990 is for organization, check this box and stop here						
Sec	tion C. Computation of Public Sup	port Percenta	ge			I	
14	Public support percentage for 2014 (li		•			14	72.03%
15	Public support percentage from 2013					15	72.89%
16a	331/3% support test - 2014. If the o	-					
	this box and stop here. The organization	•		•			
b	331/3% support test - 2013. If the c	•					
	check this box and stop here. The orga						
17a	10%-facts-and-circumstances test - 2						
	10% or more, and if the organization					-	
	Part VI how the organization meets to organization						►
b	10%-facts-and-circumstances test - 2						
	15 is 10% or more, and if the orga						-
	Explain in Part VI how the organization				•	•	
40	supported organization		hav an line 40	100 100 17-	and The sheet	4 his how and a	► 🗆
18	Private foundation. If the organization						
	instructions						

Schedule A (Form 990 or 990-EZ) 2014

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#### Schedule A (Form 990 or 990-EZ) 2014

Support Schedule for Organizations Described in Section 509(a)(2) Part III (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

	tion A. Public Support					-		<i>in</i> =	
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e	)2014	(f) Tota	<u> </u>
1	Gifts, grants, contributions, and membership fees								
	received. (Do not include any "unusual grants.")								
2	Gross receipts from admissions, merchandise								
	sold or services performed, or facilities								
	furnished in any activity that is related to the								
	organization's tax-exempt purpose								
3	Gross receipts from activities that are not an								
	unrelated trade or business under section 513								
4	Tax revenues levied for the								
	organization's benefit and either paid								
-	to or expended on its behalf								
5	The value of services or facilities								
	furnished by a governmental unit to the								
~	organization without charge								
6	Total. Add lines 1 through 5								
<i>i</i> a	Amounts included on lines 1, 2, and 3								
b	received from disqualified persons Amounts included on lines 2 and 3								
	received from other than disqualified								
	persons that exceed the greater of \$5,000								
	or 1% of the amount on line 13 for the year								
с 8	Add lines 7a and 7b.								
Ũ	line 6.)								
Sec	tion B. Total Support								
	ndar year (or fiscal year beginning in) <b>&gt;</b>	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e	)2014	(f) Tota	ıl
	Amounts from line 6								
	Gross income from interest, dividends,								
	payments received on securities loans,								
	rents, royalties and income from similar sources								
b	Unrelated business taxable income (less								
	section 511 taxes) from businesses								
	acquired after June 30, 1975								
с	Add lines 10a and 10b								
11	Net income from unrelated business								
	activities not included in line 10b,								
	whether or not the business is regularly carried on								
12	Other income. Do not include gain or								
12	loss from the sale of capital assets								
	(Explain in Part VI.)								
13	Total support. (Add lines 9, 10c, 11,								
	and 12.)								
14	First five years. If the Form 990 is for		n's first, second,	third, fourth, or	fifth tax year a	s a se	ection 501	(c)(3)	
	organization, check this box and stop here	-			•				
Sec	tion C. Computation of Public Sup								
15	Public support percentage for 2014 (line 8	, column (f) divid	ed by line 13, colur	mn (f))		15			%
16	Public support percentage from 2013 Sche					16			%
		nt Income Per	centage						
Sec	tion D. Computation of Investme					17			%
	Investment income percentage for 2014 (li	ne 10c, column (	(f) divided by line 1	13, column (f))		17			
17	Investment income percentage for 2014 (li					17			
17 18		Schedule A, Part	III, line 17			18	331/3%,	and line	
17 18	Investment income percentage for 2014 (li Investment income percentage from 2013	Schedule A, Part ganization did n	III, line 17 ot check the bo>	c on line 14, and	d line 15 is more	<b>18</b> e than			
17 18 19 a	Investment income percentage for 2014 (li Investment income percentage from 2013 331/3% support tests - 2014. If the or	Schedule A, Part ganization did n is box and <b>sto</b>	III, line 17 ot check the boy <b>p here.</b> The orga	< on line 14, and anization qualifie	d line 15 is more s as a publicly s	<b>18</b> e than suppo	rted organ	ization 🕨	
17 18 19 a	Investment income percentage for 2014 (li Investment income percentage from 2013 331/3% support tests - 2014. If the or 17 is not more than 331/3%, check th	Schedule A, Part ganization did n is box and <b>sto</b> anization did not	III, line 17 ot check the box <b>p here.</b> The org check a box on	c on line 14, and anization qualifie line 14 or line 19	d line 15 is more s as a publicly s 9a, and line 16 is	18 e than suppo more	rted organ than 331/	ization 3 %, and	%
17 18 19 a	Investment income percentage for 2014 (li Investment income percentage from 2013 331/3% support tests - 2014. If the or 17 is not more than 331/3%, check th 331/3% support tests - 2013. If the organ	Schedule A, Part ganization did m nis box and <b>sto</b> anization did not t this box and <b>s</b>	III, line 17 ot check the box <b>p here.</b> The org check a box on <b>top here.</b> The or	c on line 14, and anization qualifie line 14 or line 19 ganization qualifi	d line 15 is more s as a publicly 9a, and line 16 is es as a publicly o, check this bo	18 suppor more suppo x and	rted organ than 331/ rted organ I see instr	ization ► 3 %, and ization ►	%

#### Page 4

Yes No

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

#### Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

## Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- **c** Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If* "Yes," *provide detail in Part VI.*
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? *If* "Yes," *complete Part I of Schedule L (Form 990)*.
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in Part VI.*
- **c** Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If* "Yes," *provide detail in Part VI.*
- **10a** Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer (b) below.* 
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

JSA 4E1229 2.000 Schedule A (Form 990 or 990-EZ) 2014

	PRINCETON AREA COMMUNITY FOUNDATION INC. 52-174	6234		
-	le A (Form 990 or 990-EZ) 2014			Page <b>5</b>
Part	V Supporting Organizations (continued)		Vaa	No
11	Has the organization accepted a gift or contribution from any of the following persons?		res	NO
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
a	below, the governing body of a supported organization?	11a		
h	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in <b>Part VI.</b>	11c		
	on B. Type I Supporting Organizations	1110		
<u></u>			Yes	No
4	Did the directory tructure, or membership of one or more supported experimetions have the neuror to			
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
-	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part</b>			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior			
	tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of			
	the organization's governing documents in effect on the date of notification, to the extent not previously			
	provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's			
	supported organizations played in this regard.	3		
Secti	on E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in	structi	ons):	
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instru	ctions).		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		

**b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard. JSA

4E1230 2.000

Schedule A	(Form	990 or	990-EZ)	2014
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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
<b>b</b> Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
<b>4</b> Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
	•		

7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).

Schedule A (Form 990 or 990-EZ) 2014

n D - Distributions Amounts paid to supported organizations to accomplish e Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purp Amounts paid to acquire exempt-use assets	empt purposes of support	ed	Current Year					
Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purp Amounts paid to acquire exempt-use assets	empt purposes of support	ed						
organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purp Amounts paid to acquire exempt-use assets		ed						
Administrative expenses paid to accomplish exempt purp Amounts paid to acquire exempt-use assets								
Amounts paid to acquire exempt-use assets								
	oses of supported organiz	zations						
Qualified set-aside amounts (prior IRS approval required)								
Other distributions (describe in Part VI). See instructions.								
<b>Total annual distributions.</b> Add lines 1 through 6.								
Distributions to attentive supported organizations to which	h the organization is resp	onsive						
provide details in <b>Part VI</b> ). See instructions.								
Distributable amount for 2014 from Section C, line 6								
ine 8 amount divided by Line 9 amount								
ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014					
Distributable amount for 2014 from Section C, line 6								
Underdistributions, if any, for years prior to 2014								
reasonable cause required-see instructions)								
Excess distributions carryover, if any, to 2014:								
From 2013								
Total of lines 3a through e								
Applied to underdistributions of prior years								
Applied to 2014 distributable amount								
Carryover from 2009 not applied (see instructions)								
Remainder. Subtract lines 3g, 3h, and 3i from 3f.								
Distributions for 2014 from Section								
D, line 7: \$								
Applied to underdistributions of prior years								
Applied to 2014 distributable amount								
Remainder. Subtract lines 4a and 4b from 4.								
Remaining underdistributions for years prior to 2014, if								
any. Subtract lines 3g and 4a from line 2 (if amount								
greater than zero, see instructions).								
Remaining underdistributions for 2014. Subtract lines 3h								
and 4b from line 1 (if amount greater than zero, see								
nstructions).								
Excess distributions carryover to 2015. Add lines 3j								
Excess distributions carryover to 2015. Add lines 3j and 4c.								
and 4c.								
and 4c.								
and 4c.								
and 4c.								

Page 8

Schedule A (Form 990 or 990-EZ) 2014

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

SCHEDULE A, PART II - OTHER INCOME							
DESCRIPTION	2010	2011	2012	2013	2014	TOTAL	
MISCELLANEOUS REVENUE	6,190.	6,915.	5,755.	14,380.	20,055.	53,295.	
TOTALS	6,190.	6,915.	5,755.	14,380.	20,055	53,295.	

## Schedule B

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

# Schedule of Contributors

OMB No. 1545-0047

2014

Attach to Form 990, Form 990-EZ, or Form 990-PF.
Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

Employer identification number

Name of the organization

PRINCETON AREA COMMUNITY FOUNDATION INC.

52-1746234

## Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	X 501(c)( ³ ) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

### **General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

### **Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1_ 		\$1,400,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2		\$ 1,103,833.	Person X Payroll X Noncash X (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
3		\$ 1,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
- 4		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
- 5		\$ 1,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
	· · · · · · · · · · · · · · · · · · ·	\$991,394.	Person X Payroll X Noncash X (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
- 7		\$1,001,070.	Person X Payroll X Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
- 8		\$ <u>550,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
- 9 		\$462,256.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
_10		\$495,613.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
<u></u>		\$1,999,160.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$1,764,900.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

JSA 4E1253 1.000

art I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$749,006.	Person X Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
··		 \$	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)		

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

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52-1746234

Employer identification number

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	10,858 SHARES OF JOHNSON & JOHNSON	  \$\$1,103,833.	_12/31/2014
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
6	20,562 SHARES OF BRISTOL-MYERS SQUIBB	  \$991,294.	_07/07/2014
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
7	18,000 SHARES OF HEARTLAND PAYMENT SYSTEMS	\$\$	_12/08/2014
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		  \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		  \$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

ame of organ	m 990, 990-EZ, or 990-PF) (2014) nization PRINCETON AREA COMMUNI	TY FOUNDATION INC	Pa
<b>.</b>		52-1746234	
th fo cc	at total more than \$1,000 for the y	<b>/ear from any one contrib</b> s completing Part III, enter the year. (Enter this informated by the second sec	ations described in section 501(c)(7), (8), or ( putor. Complete columns (a) through (e) and the the total of <i>exclusively</i> religious, charitable, etc ion once. See instructions.) ► \$
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
			·
		(e) Transfer of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
			·
		(e) Transfer of gift	
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
-			·
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

 Transferee's name, address, and ZIP + 4
 Relationship of transferor to transferee

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

JSA 4E1255 1.000

SCHEE	DULE	D
(Form	990)	

Department of the Treasury

# Supplemental Financial Statements Complete if the organization answered "Yes" to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990. ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

**Open to Public** Inspection

2

OMB No. 1545-0047

4

Name of ergenization         Engloye identification number           PENINCETCO AREA COMMINITY FOUNDATION INC.         52-1746234           PENINCETCO AREA COMMINITY FOUNDATION INC.         60           PENINCETCO AREA COMMINITY FOUNDATION INC.         (a) Donor advised funds or Accounts.           Complete if the organization answered "Yes' to Form 900. Part IV, line 6.         (b) Funds and other accounts           1         Total number at end of year         10.353, 537.         8, 681, 722.           Aggregate value of contributions to (during year)         27, 463, 797.         75, 133, 602.           5         Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all grantees, donors, and donor advisors, nor any other purpose conforring impermissible private benefit?         Yes         No           6         Did the organization answered "Yes' to Form 990. Part IV, line 7.         Yes         No           70411         Consorvation Easements.         Yes         No           Complete lift he organization answered "Yes' to Form 990. Part IV, line 7.         Yes         No           1         Purpose(5) of conservation easements held by the organization or elucation)         Preservation of a historically important land area           Preservation of land for public use (e.g., recreation or education)         Preservation of a historically important land area      <		nal Revenue Service	Information about Schedule	D (Form 990) and its instructions is at www.irs	0	Inspection
Partial       Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' to Form 990, Part IV, line 6.         1       Total number at ond of year       (a) Danor advised funds       (b) Funds and other accounts         2       Aggregate value of contributions to (during year)       1, 0, 353, 537.       8, 681, 722.         3       Aggregate value of contributions to (during year)       27, 483, 799.       75, 133, 602.         5       Did the organization inform all donors and donor advisors in writing that the assets held in donor advisor, or tor any other purpose only for christable purposes and not for the benefit of the donor advisor, or for any other purpose conferring impermissible private benefit?       Yes       No         6       Did the organization answered 'Yes' to Form 990, Part IV, line 7.       Yes       No         7       Purpose(s) of conservation easements held the organization or education or education, of the any other purpose on protein advisor in writing that grant funds can be used only tor christable purposes and not for the benefit of the donor advisor or any other purpose on not matural habitat       Proservation of answered 'Yes' to Form 990, Part IV, line 7.         7       Purpose(s) of conservation easements held by the organization or education)       Preservation of a historically important land area pprotection on the last adv of the taxyeer       2a         2       Complete lift he organization answered 'Yes' to Form 990, Part IV, line 7.       2a	Nam	e of the organization			Employer identific	ation number
Complete if the organization answered 'Yes' to Form 990, Part IV, line 6.           1         Total number at end of year ,	PR.					234
I       Total number at end of year       179; 179; 166; 173; 179; 166; 179; 166; 179; 166; 179; 179; 179; 179; 179; 179; 179; 179	Pa				Accounts.	
1       Total number at end of year		Complete	e if the organization answered			
Aggregate value of contributions to (during year)       10.353.537.       8.681.7722.         Aggregate value of contributions to (during year)       4.984.730.       4.802.295.         Aggregate value at end of year.       2.7.483.797.       7.0.37.131.602.         Did the organization inform all donors and door advisors in writing that the assets held in door advisod truds are the organization inform all grantees, donors, and door advisor, in writing that grant funds can be used only for charatble purposes and not for the benefit of the donor advisor, or for any other purpose conferring impermissible private benefit?         PartII       Complete if the organization answered "Yes" to Form 990. Part IV, line 7.         1       Purpose(s) of conservation easements.         Complete if the organization answered "Yes" to Form 990. Part IV, line 7.         1       Purpose(s) of conservation assements held by the organization (check all that apply).         Preservation of a dor for public use (a, creceation or education)       Preservation of a certified historic structure         Preservation of a conservation easements.       Preservation conservation assements.       2a         2       Complete if the organization held a qualified conservation contribution in the form of a conservation easements.       2a         2       Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year       2a         3       Number of conservation easements modified, trans					(b) Funds and	
Aggregate value of grants from (during year)       4.984,730.       4.982,795.         Aggregate value at end of year	1	Total number at e	end of year			
Aggregate value at end of year       27,483,797.       75,131,602.         Did the organization inform all donors and donor advisors in writing that the assets held in donor advised trutes are the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose.       X ves       No         PartII       Conservation Easements.       Conservation Easements.       X ves       No         Complete if the organization answered "Yes" to Form 990, Part IV, line 7.       Y ves       No         PartII       Conservation Basements.       Complete if the organization check all that apply.       Preservation of and for public use (e.g., recreation or education)       Preservation of a structure hastat         Protection of natural habitat       Preservation of an esaments.       2a         2       Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easements.       2a         3       Total anreage restricted by conservation easements.       2a         4       Number of conservation easements.       2a         4       Number of conservation easements.       2a         4       Number of conservation easements.       2a         3       Number of conservation easements.       2a         4       Number of conservation easem	2	Aggregate value	of contributions to (during year)			
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization is property, subject to the organization is exclusive legal contro?	3	Aggregate value	of grants from (during year)			
funds are the organization's property, subject to the organization's exclusive legal control?       X       Yes       No         6       Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit?       No         7       Complete if the organization answered "Yes" to Form 990, Part IV, line 7.       Yes       No         7       Purpose(s) of conservation easements held by the organization (check at linet apply).       Preservation of a historically important land area Preservation of a cartified historic structure         8       Preservation of natural habitat       Preservation of a conservation easements held by the organization (check at linet apply).         2       Complete lines 2 a through 2d if the organization held a qualified conservation contribution in the form of a conservation easements in cluded in (a).       2a         2       Complete lines 2 a through 2d if the organization held a qualified conservation contribution in the form of a conservation easements in cluded in (a).       2a         9       Number of conservation easements in cluded in (a) caquired after 8/17/06, and not on a listori circuture listed in the National Register.       2a         3       Number of states where property subject to conservation easements in locks?       yes       No         6       Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforement of the conservation easements.	4	Aggregate value	at end of year	27,483,797.		75,131,602.
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <b>28rtIU</b> Conservation Easements. <b>28rtIU</b> conservation flast organization answered "Yes" to Form 990, Part IV, line 7. <b>1</b> Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a certified historic structure Preservation of a certified bistoric structure Preservation of a certified bistoric structure Preservation of a certified bistoric structure Preservation of conservation easements need by conservation easements. <b>2</b> Complete inthe add by conservation easements. <b>2</b> total number of conservation easements on a certified bistoric structure included in (a). <b>2</b> total acceage restricted by conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register. <b>3</b> Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year begranetic on the law a writem policy regaring the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements is located begranetic monitoring, inspecting, and enforcing conservation easements that describes the organization feed on servation easements. <b>3</b> Does the organization easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) <b>4</b> Yes <b>1</b> No <b>6</b> Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements that describes the organization easements. <b>1</b> Organization eacted, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and	5	Did the organizat	tion inform all donors and donor	advisors in writing that the assets held	in donor advised	
only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?       No         PartIII       Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 7.       No         Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of a historically important land area Preservation of a historically important land area Preservation of a conservation easement on the last day of the tax year.         2       Complete lines 2 a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.         3       Total arceage restricted by conservation easements		funds are the orga	anization's property, subject to the	e organization's exclusive legal control?		X Yes No
conferring impermissible private benefit?       Image: Second Seco	6	Did the organizat	tion inform all grantees, donors, a	nd donor advisors in writing that grant fu	inds can be used	ł
Part U       Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.         Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education)       Preservation of a historically important land area Preservation of open space         2       Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.       Image: Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easements on the last day of the tax year.         3       Total acreage restricted by conservation easements       2a         2d		only for charitable	e purposes and not for the benef	fit of the donor or donor advisor, or for a	ny other purpose	,
PartII       Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.         Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of and for public use (e.g., recreation or education)       Preservation of a historically important land area Preservation of a certified historic structure Preservation of open space         2       Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.       Image: Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easements on the last day of the tax year.         3       Total acreage restricted by conservation easements       2a         2       Mumber of conservation easements on a certified historic structure included in (a).       2c         3       Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶         3       Number of states where property subject to conservation easements in loda?         4       Number of states where property subject to conservation easements in lod?         5       Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements in hold?         6       Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(f)         and sucture din monitoring, inspecti		conferring impern	nissible private benefit?			X Yes No
1       Purpose(s) of conservation easements held by the organization (check all that apply).         ☐       Preservation of land for public use (e.g., recreation or education)       ☐       Preservation of a historic structure         2       Preservation of on atural habitat       ☐       Preservation of a certified historic structure         2       Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation         3       Total number of conservation easements	Pa					
Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area   Protection of natural habitat Preservation of a certified historic structure   Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation   a total number of conservation easements. 2a   b Total acreage restricted by conservation easements included in (c) acquired after 8/17/06, and not on a   c Number of conservation easements included in (c) acquired after 8/17/06, and not on a   d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year b   3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year b   g total acreage response incurred in monitoring, inspecting, and enforcing conservation easements during the year   b S		Complete	e if the organization answered	"Yes" to Form 990, Part IV, line 7.		
Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Total acreage restricted by conservation easements Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Total acreage restricted by conservation easements Complete do yoonservation easements on a certified historic structure included in (a) 2a Journal acreage restricted by conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed to the National Register,	1	Purpose(s) of cor	nservation easements held by the	organization (check all that apply).		
Preservation of open space   2   Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.   a   Total arcrage restricted by conservation easements.   b   c   Number of conservation easements on a certified historic structure included in (a)		Preservatio	on of land for public use (e.g., reci	reation or education) 📃 Preservation of	of a historically in	nportant land area
<ul> <li>Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.</li> <li>Total anceage restricted by conservation easements</li></ul>		Protection	of natural habitat	Preservation	of a certified histo	oric structure
easement on the last day of the tax year. a Total number of conservation easements		Preservatio	on of open space			
a Total number of conservation easements	2	Complete lines 2a	a through 2d if the organization he	eld a qualified conservation contribution in	the form of a con	nservation
b Total acreage restricted by conservation easements 2b   c Number of conservation easements on a certified historic structure included in (a) 2c   d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d   3 Number of conservation easements moldified, transferred, released, extinguished, or terminated by the organization during the tax year 2d   4 Number of states where property subject to conservation easement is located >		easement on the	last day of the tax year.		Held at the	e End of the Tax Year
b Total acreage restricted by conservation easements 2b   c Number of conservation easements on a certified historic structure included in (a) 2c   d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d   3 Number of conservation easements moldified, transferred, released, extinguished, or terminated by the organization during the tax year 2d   4 Number of states where property subject to conservation easement is located >	а	Total number of c	conservation easements		2a	
<ul> <li>c Number of conservation easements on a certified historic structure included in (a)</li></ul>	b				2b	
d       Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	с				2c	
historic structure listed in the National Register	d					
<ul> <li>Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶</li></ul>					2d	
<ul> <li>tax year ▶</li></ul>	3		-		ated by the orga	inization during the
<ul> <li>5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?</li></ul>					, ,	Ū
<ul> <li>5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?</li></ul>	4	Number of states	where property subject to conse	rvation easement is located ►		
<ul> <li>violations, and enforcement of the conservation easements it holds?</li></ul>	5				tion, handling of	
<ul> <li>6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year <ul> <li>▲</li></ul></li></ul>		-			-	
<ul> <li>Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year  \$</li></ul>	6					
<ul> <li>\$</li></ul>		►	5.		5	,
<ul> <li>\$</li></ul>	7	Amount of expense	ses incurred in monitoring, inspec	ting, and enforcing conservation easemer	nts during the vea	r
<ul> <li>Boes each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) Yes No</li> <li>In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.</li> <li>Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.</li> <li>Ia If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.</li> <li>If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: <ul> <li>(i) Revenue included in Form 990, Part X.</li> <li>2 If the organization received or held works of art, historical treasures, or other similar treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:</li> <li>a Revenue included in Form 990, Part X.</li> <li>b Assets included in Form 990, Part X.</li> </ul> </li> </ul>				<i></i>	0,	
<ul> <li>and section 170(h)(4)(B)(ii)?</li></ul>	8			e 2(d) above satisfy the requirements of se	ction 170(h)(4)(B)	(i)
<ul> <li>9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.</li> <li>Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.</li> <li>1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.</li> <li>b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: <ul> <li>(i) Revenue included in Form 990, Part VIII, line 1</li> <li>(ii) Assets included in Form 990, Part X</li> <li>2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:</li> <li>a Revenue included in Form 990, Part X</li> <li>b Assets included in Form 990, Part X</li> </ul></li></ul>						
<ul> <li>balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.</li> <li>Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.</li> <li>1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.</li> <li>b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: <ul> <li>(i) Revenue included in Form 990, Part VIII, line 1</li> <li>(ii) Assets included in Form 990, Part X</li> <li>2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:</li> <li>a Revenue included in Form 990, Part VIII, line 1</li> <li>b Assets included in Form 990, Part X</li> </ul></li></ul>	9					
Part III       Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.         1a       If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheed works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.         b       If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheed works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: <ul> <li>(i) Revenue included in Form 990, Part VIII, line 1</li> <li>(ii) Assets included in Form 990, Part X</li> <li>2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:       <ul> <li>a Revenue included in Form 990, Part VIII, line 1</li> <li>b Assets included in Form 990, Part X</li> <li>c Assets included in Form 990, Part X</li></ul></li></ul>			<b>u</b> .		•	
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<ul> <li>1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.</li> <li>b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: <ul> <li>(i) Revenue included in Form 990, Part VIII, line 1</li> <li>(ii) Assets included in Form 990, Part X</li> <li>2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:</li> <li>a Revenue included in Form 990, Part X</li> <li>b Assets included in Form 990, Part X</li> </ul> </li> </ul>	Pa	art III Organiza	ations Maintaining Collections	of Art, Historical Treasures, or Other	Similar Assets	j.
<ul> <li>b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: <ul> <li>(i) Revenue included in Form 990, Part VIII, line 1</li> <li>(ii) Assets included in Form 990, Part X</li> </ul> </li> <li>2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: <ul> <li>a Revenue included in Form 990, Part X</li> <li>b Assets included in Form 990, Part X</li> </ul> </li> </ul>		Complete	e if the organization answered	"Yes" to Form 990, Part IV, line 8.		
<ul> <li>b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: <ul> <li>(i) Revenue included in Form 990, Part VIII, line 1</li> <li>(ii) Assets included in Form 990, Part X</li> </ul> </li> <li>2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: <ul> <li>a Revenue included in Form 990, Part X</li> <li>b Assets included in Form 990, Part X</li> </ul> </li> </ul>	1a	If the organizatio	n elected, as permitted under SE	AS 116 (ASC 958), not to report in its r	evenue stateme	nt and balance sheet
<ul> <li>b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: <ul> <li>(i) Revenue included in Form 990, Part VIII, line 1</li> <li>(ii) Assets included in Form 990, Part X</li> </ul> </li> <li>2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: <ul> <li>a Revenue included in Form 990, Part X</li> <li>b Assets included in Form 990, Part X</li> </ul> </li> </ul>		works of art, his	torical treasures, or other simila	ar assets held for public exhibition, educ	cation, or resear	ch in furtherance of
<ul> <li>works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: <ul> <li>(i) Revenue included in Form 990, Part VIII, line 1</li> <li>(ii) Assets included in Form 990, Part X</li> </ul> </li> <li>If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: <ul> <li>a Revenue included in Form 990, Part X</li> <li>b Assets included in Form 990, Part X</li> </ul> </li> </ul>	_					
<ul> <li>public service, provide the following amounts relating to these items:</li> <li>(i) Revenue included in Form 990, Part VIII, line 1</li> <li>(ii) Assets included in Form 990, Part X</li> <li>If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:</li> <li>a Revenue included in Form 990, Part VIII, line 1</li> <li>b Assets included in Form 990, Part X</li> </ul>	b					
<ul> <li>(i) Revenue included in Form 990, Part VIII, line 1</li></ul>					cation, or resear	on in furtherance of
<ul> <li>(ii) Assets included in Form 990, Part X.</li> <li>2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:</li> <li>a Revenue included in Form 990, Part VIII, line 1.</li> <li>b Assets included in Form 990, Part X.</li> </ul>			5	•		6
<ul> <li>2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:</li> <li>a Revenue included in Form 990, Part VIII, line 1.</li> <li>b Assets included in Form 990, Part X.</li> </ul>						
following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: <ul> <li>a Revenue included in Form 990, Part VIII, line 1</li> <li>b Assets included in Form 990, Part X</li> </ul>	r					
a Revenue included in Form 990, Part VIII, line 1	2	-				ai gain, provide the
b Assets included in Form 990, Part X	~					2
	-					

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PRINCETON AREA COMMUNITY FOUNDATION INC. 52-1746234

Sche	dule D (Form 990) 2014												Page <b>2</b>
Par	t III Organizations Maintaini	ng Colle	ctions of	Art, H	listorical	Treasur	es, o	or Oth	ner Sin	nilar Ass	ets (co	ontinue	əd)
3	Using the organization's acquisition	on. acces	sion. and (	other re	cords. che	eck anv o	f the	follow	ina tha	t are a sid	nificant	use o	of its
-	collection items (check all that app		,		,								
а	Public exhibition	.,,.		d		n or excha	ange	program	ns				
b	Scholarly research			e			-						
C	Preservation for future gene	rations		-									
4	Provide a description of the organ		collections	and e	xolain how	v they fur	ther	the ord	nanizati	on's exem	nt nurn	nse in	Part
-	XIII.	inzation 5	concetion			v they ful	liner		janizati		pt puipt	550 m	ran
5	During the year, did the organization	on solicit o	or receive of	donation	is of art, hi	storical tr	easu	es, or o	other sir	milar			
	assets to be sold to raise funds rath										Ye	s	No
Par	rt IV Escrow and Custodial Ar or reported an amount or					anization	ans	vered	"Yes" t	o Form 9	90, Par	t IV, lii	ne 9,
	· · · ·												
1a	Is the organization an agent, truste											_	-
	included on Form 990, Part X?										X Ye	s	No
b	If "Yes," explain the arrangement i	n Part XII	I and com	plete the	e following	table:							
										Amount			
С	Beginning balance						1c					536,3	
d	Additions during the year						1d				-	391,3	
е	Distributions during the year						1e					272,7	
f	Ending balance						1f					554,9	_
	Did the organization include an am										X Ye		No
	If "Yes," explain the arrangement i											Х	
Par	rt V Endowment Funds. Com	· ·											
			rrent year		Prior year	(c) Tw				ee years back		ur years	
	Beginning of year balance		83,125.		198,973			580.		38,912			,749.
	Contributions	1,0	99,925.	1,	007,446	. 2,	910,	794.	1,0	)25,385	•	751,	,115.
С	Net investment earnings, gains,												
	and losses		64,968.	3,	947,338		022,	848.	5	544,205			,106.
d	Grants or scholarships	7	65,565.		31,910	••	25,	125.		37,203	•	20,	,160.
е	Other expenditures for facilities												
	and programs		41,229.	1,	290,392	. 1,	046,	895.	1,0	18,860		685	,618.
f	Administrative expenses	3	78,251.		348,330		315,	229.	2	299,859	•	268	,280.
g	End of year balance	40,5	62,973.	39,	483,125	. 36,	198,	973.	31,6	52,580	. 31	,438,	,912.
2	Provide the estimated percentage	of the cur	rent year e	nd bala	nce (line 1	g, column	(a))	held as	:				
а	Board designated or quasi-endown	nent 🕨 1	100.0000	) %									
b	Permanent endowment 🕨	%		-									
с	Temporarily restricted endowment	▶	%										
	The percentages in lines 2a, 2b, a	nd 2c sho	uld equal 1	00%.									
3a	Are there endowment funds not in	the posse	ession of tl	ne orgar	nization the	at are hel	d anc	ladmin	istered	for the			
	organization by:											Yes	No
	(i) unrelated organizations										3a(i)		Х
	(ii) related organizations											)	Х
b	If "Yes" to 3a(ii), are the related or	ganizatior	ns listed as	required	l on Sched	ule R?					3b		
4	Describe in Part XIII the intended u												
Par	t VI Land, Buildings, and Equ Complete if the organiza	ipment.	wered "Ye	es" to Fo	orm 990,	Part IV, I	ine 1	1a. Se	e Forn	n 990, Pa	rt X, lin	e 10.	
	Description of property		(a) Cost or	other basi		st or other ba		(c) Acc	umulated		(d) Book		
1a	Land		(inves	tment)		(other)		depr	eciation				
b	Land Buildings												
0	Leasehold improvements					63,31			20 52	6		<u> </u>	700
ט א									39,53				782.
d	Equipment					56,55			54,34	••		۷,۷	216.
	Other II. Add lines 1a through 1e. <i>(Column</i>	(d) much	oqual Ear	n 000 0	lart V coli	mn (D) 1:						25 0	998.
1018	. Aud intes la through le. (Column	i (u) must	equal FUII	11 990, P	an 1, colu	יוויו ( <i>ם</i> ), וווי	10(				dude D (E		

Schedule D (Form 990) 2014

#### Schedule D (Form 990) 2014 Page 3 Part VII **Investments - Other Securities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12. (a) Description of security or category (b) Book value (c) Method of valuation: (including name of security) Cost or end-of-year market value (1) Financial derivatives 69,400 ATTACHMENT 1 (2) Closely-held equity interests (3) Other (A) LIMITED PARTNERSHIPS 36,170,512 FMV (B) REAL ASSETS 8,145,089 FMV (C) (D) (E) (F) (G) (H) 44,385,001 Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) Investments - Program Related. Part VIII Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1)(2) (3)(4) (5)(6)(7)(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ► Part IX Other Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (1)(2) (3)(4)(5)(6) (7)(8)(9)Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ► Part X Other Liabilities. Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2)(3) (4) (5) (6)(7)

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ► 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

(8)(9)

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Schedu	le D (Form 990) 2014		Page <b>4</b>
Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	n.	
1	Total revenue, gains, and other support per audited financial statements	1	14,074,997.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	_	
а	Net unrealized gains (losses) on investments 2a -3, 595, 487.		
b	Donated services and use of facilities 2b		
с	Recoveries of prior year grants 2c		
d	Other (Describe in Part XIII.) 2d 5,563.		
е	Add lines 2a through 2d	2e	-3,589,924.
3	Subtract line 2e from line 1	3	17,664,921.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 5, 431.		
b	Other (Describe in Part XIII.) 4b 6,965,100.		
C	Add lines <b>4a</b> and <b>4b</b>	4c	6,970,531.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	24,635,452.
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Retu Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	ırn.	
4	Total expenses and losses per audited financial statements		9,099,730.
1 2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1	9,099,730.
a b			
b			
c d	Other losses     2c       Other (Describe in Part XIII.)     2d		
e u	Add lines 2a through 2d	20	
3	Add lines 2a through 2d Subtract line 2e from line 1	2e 3	9,099,730.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	3	5,055,750.
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a 5, 431.		
b			
c	Add lines 4a and 4b	4c	2,015,634.
5	Total expenses. Add lines <b>3</b> and <b>4c</b> . ( <i>This must equal Form 990, Part I, line 18.</i> )	5	11,115,364.
Part		5	11/110/0011
Provid	le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Patt XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform		
	PAGE 5		
	PAGE 5		

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SCHEDULE D, PART V, LINE 4

THE COMMUNITY FOUNDATION'S OUASI-ENDOWMENT FUNDS ARE INVESTED AND MANAGED TO SUPPORT GRANTMAKING TO NONPROFIT ORGANIZATIONS; TO FUND SPECIAL INITIATIVES SUCH AS PERIODIC RESEARCH TO EXPAND ITS UNDERSTANDING OF LOCAL ISSUES AND TO SUPPORT ITS EDUCATIONAL OUTREACH WORK TO PROMOTE PHILANTHROPY IN CENTRAL NJ.

#### SCHEDULE D, PART X, LINE 2

THE COMMUNITY FOUNDATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. ACCORDINGLY THE FINANCIAL STATEMENTS DO NOT REFLECT A PROVISION FOR FEDERAL INCOME TAXES. THE COMMUNITY FOUNDATION FOLLOWS THE PRONOUNCEMENT RELATED TO ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES AND THERE WERE NO UNCERTAIN TAX POSITIONS AT DECEMBER 31, 2014 AND 2013. IN ADDITION, NO INCOME TAX RELATED PENALTIES OR INTEREST HAVE BEEN RECORDED FOR THE YEARS ENDED DECEMBER 31, 2014 AND 2013.

### SCHEDULE D, PART XI, LINE 2D & 4B

NET CONTRIBUTIONS AND GRANTS FROM NON-PROFIT ORGANIZATION FUNDS AND INVESTMENT EXPENSES. THE COMMUNITY FOUNDATION FOLLOWS THE ACCOUNTING GUIDANCE FOR NON-PROFIT ORGANIZATION FUNDS WHICH ARE SUBJECT TO VARIANCE POWER. THESE FUNDS ARE SHOWN AS CUSTODIAL FUNDS ON THE FINANCIAL STATEMENTS IN ACCORDANCE WITH GENERALLY ACCEPTED ACCOUNTING PRINCIPLES IN THE UNITED STATES, BUT HAVE BEEN INCLUDED IN CHANGES IN NET ASSETS FOR THE PREPARATION OF THE FORM 990 AS DETAILED IN THE AUTHORITATIVE LITERATURE. THE OVERALL NET ADJUSTMENT FOR THESE FUNDS IS \$6,965,100 ON LINE 4B INCLUDING CONTRIBUTIONS AND ALLOCABLE SHARE OF INVESTMENT

Schedule D (Form 990) 2014

Schedule D (Form 990) 2014

EARNINGS. ADDITIONALLY, THE CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS OF \$5,563 HAS BEEN SHOWN AS A RECONCILING ITEM IN THE FORM 990 ON LINE 2D.

SCHEDULE D, PART XIII, LINE 4B

GRANTS FROM NON-PROFIT ORGANIZATION FUNDS. THE COMMUNITY FOUNDATION FOLLOWS THE ACCOUNTING GUIDANCE FOR NON-PROFIT ORGANIZATION FUNDS WHICH ARE SUBJECT TO VARIANCE POWER. THESE FUNDS ARE SHOWN AS CUSTODIAL FUNDS ON THE FINANCIAL STATEMENTS IN ACCORDANCE WITH GENERALLY ACCEPTED ACCOUNTING PRINCIPLES IN THE UNITED STATES, BUT HAVE BEEN INCLUDED IN CHANGES IN NET ASSETS FOR THE PREPARATION OF THE FORM 990 AS DETAILED IN THE AUTHORITATIVE LITERATURE. ACCORDINGLY, GRANTS AND EXPENSES OF \$2,010,203 ARE INCLUDED IN PART IX AND ARE SHOWN IN THE RECONCILIATION OF EXPENSES ON LINE 4B.

#### SCHEDULE D, PART IV, LINE 2B

THE COMMUNITY FOUNDATION IS A FISCAL AGENT FOR FUNDS THAT ARE UNDER THE DIRECTION OF OUTSIDE PARTIES. THE COMMUNITY FOUNDATION RECEIVES A FEE FOR THE PROCESSING OF THE PAYMENTS UNDER THESE GRANTS FUNDS.

	ATTACHMENT 1	
SCHEDULE D, PART VII - INVESTMENTS - CLOSELY HELD EQUITY INTER	RESTS	
		COST
DESCRIPTION	BOOK VALUE	OR FMV
PRIVATELY HELD STOCK	69,400.	FMV
	-	
TOTALS	69,400.	

Schedule D (Form 990) 2014

SCHEDULE F	Staten	nent of A	ctivities	Outside the Uni	ted States	OMB No. 1545-0047
(Form 990)	Complete	e if the organiza	tion answered	"Yes" on Form 990, Part IV,	, line 14b, 15, or 16.	. 2014
Department of the Treasury	Information	on about Sched		to Form 990. )) and its instructions is at <i>w</i> i	ww.irs.aov/form990	Open to Public
Internal Revenue Service Name of the organization				,		er identification number
PRINCETON AREA C	OMMIINITY F	NOTTADATION	TNC			1746234
Part I General I		on Activities		Jnited States. Complete		
			in records to s	substantiate the amount o	f its grants and o	ther
assistance, the gra	antees' eligibilit	y for the gran	ts or assistance	e, and the selection criter	ia used to award	
2 For grantmakers. assistance outside			ganization's pi	rocedures for monitoring	the use of its	grants and other
3 Activities per Regi	on. (The follow	ing Part I, line	3 table can be	e duplicated if additional sp	bace is needed.)	
(a) Region		(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed a program ser describe specific service(s) in re	rvice, expenditures for c type of and investments
(1) CENTRAL AMERICA/C	ARIBBEAN			GRANTMAKING		
(2) SUB-SAHARAN AFRIC	A			GRANTMAKING		
(3) EUROPE				GRANTMAKING		5,000.
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
(11)						
(12)						
(13)						
(14)						
(15)						
(13)						
(16)						
(17)						
3a Sub-total						5,000.
	continuation					
c Totals (add lines						5,000.

Part II	Grants and Other Assista Part IV, line 15, for any re							d "Yes" on F	orm 990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	<b>(g)</b> Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)				CENERAL GUDD	100,000				
(1)				GENERAL SUPP	100,000.				FMV
(2)			CENT. AMERICA/CARIBBEAN	COMMUNITY DE	149,633.				FMV
(3)			CENT. AMERICA/CARIBBEAN	CONSTRUCTION	21,758.				FMV
(4)			CENT. AMERICA/CARIBBEAN	EDUCATION	170,677.				FMV
(5)			SUB-SAHARAN AFRICA	HEALTH	10,000.				FMV
(6)			SUB-SAHARAN AFRICA	MEDICAL	17,400.				FMV
(7)				ENTREPRENEUR	25,000.				FMV
(8)				COMMUNITY DE	6,950.				FMV
(9)			EUROPE/ICELAND/GREENLAND	CIVIL RIGHTS	8,000.				FMV
(10)				GENERAL SUPP	50,000.				FMV
(11)			CENT. AMERICA/CARIBBEAN	EMERGENCY RE	42,999.				FMV
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 17.

3 Enter total number of other organizations or entities.

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Page 2

Part III can be duplicated if add (a) Type of grant or assistance	(b) Region	(c) Number of recipients	<b>(d)</b> Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	<b>(h)</b> Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
5)							
(6)							
7)							
8)							
9)							
0)							
1)							
2)							
3)							
4)							
5)							
6)							
7)							
8)							

Schedule F (Form 990) 2014

Part III

52-1746234

Page 3

Schedu	le F (Form 990) 2014		Page <b>4</b>
Part	IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	X Yes	No No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? <i>If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)</i>	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)</i>	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	Yes	X No

Schedule F (Form 990) 2014

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Schedule F (Form 990) 2014

#### Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

SCHEDULE F, PART I, LINE 1

GRANTS FROM DONOR-ADVISED AND DESIGNATED FUNDS ARE AWARDED AFTER A THOROUGH REVIEW OF THEIR IRS 990 TAX RETURNS, AND IN MANY CASES, A REVIEW OF THEIR AUDITED FINANCIAL STATEMENTS. STAFF ALSO REVIEW WEB SITES, ANNUAL REPORTS AND NEWSLETTERS TO CONFIRM THE TAX-EXEMPT STATUS AND EFFICACY OF EACH ORGANIZATION. THE COMMUNITY FOUNDATION GRANTS SCHOLARSHIPS AND AWARDS THROUGH COMPETITIVE PROCESSES TO SUPPORT COLLEGE STUDY AND TO HONOR ACHIEVEMENT IN THE ARTS, MUSIC, GRAPHIC DESIGN, AND COMMUNITY SERVICE.

### SCHEDULE F, PART I, LINE 2

ALL FOREIGN GRANTS MADE BY THE COMMUNITY FOUNDATION ARE PAID THROUGH ORGANIZATIONS BASED IN THE UNITED STATES WITH 501(C)(3) TAX-EXEMPT STATUS AND FORWARDED TO FOREIGN GRANTEES. ALL MONITORING OF GRANTS AND DUE DILIGENCE AFTER THE GRANT IS MADE IS ADMINISTERED BY THE GRANTEE ORGANIZATION BASED IN THE UNITED STATES. SCHOLARSHIPS MADE TO FOREIGN EDUCATIONAL INSTITUTIONS IN SUPPORT OF SCHOLARSHIP RECIPIENTS ARE MONITORED EACH YEAR TO DETERMINE THAT AWARDEES ARE ENROLLED AND MAINTAIN COMPLIANCE WITH SCHOLARSHIP GUIDELINES.

JSA

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service	Form 990)       Governments, and Individuals in the United States         repartment of the Treasury Iternal Revenue Service       Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.         Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.							
Name of the organization Employer identification								
PRINCETON AREA	COMMUNITY FOUNDATION INC.	52-1746234						
Part I General In	nformation on Grants and Assistance							
<ol> <li>Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?</li> <li>Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.</li> </ol>								
Part II Grants an	d Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization	on answered "Yes" to Form 990,						

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) ALTERNATIVES, INC.							
600 FIRST AVENUE RARITAN, NJ 08869	22-2318999	501(C)(3)	25,000.		FMV		GENERAL SUPPORT
(2) AMERICAN ACADEMY OF NURSING							
1000 VERMONT AVENUE NW - SUITE 910	52-2213870	501(C)(3)	50,000.		FMV		GENERAL SUPPORT
(3) AMERICAN CAMP ASSOCIATION							
5000 STATE ROAD 67 NORTH	35-0962419	501(C)(3)	6,000.		FMV		GENERAL SUPPORT
(4) AMERICAN RED CROSS OF CENTRAL NEW JERSEY							
707 ALEXANDER ROAD, SUITE 101	53-0196605	501(C)(3)	15,000.		FMV		GENERAL SUPPORT
(5) AMERICAN REPERTORY BALLET/PRINCETON BALLET							
PO BOX 250 NEW BRUNSWICK, NJ 08903	21-0732575	501(C)(3)	51,000.		FMV		GENERAL SUPPORT
(6) AMERICAN SOCIETY FOR CLINICAL INVESTIGATION							
2015 MANCHESTER ROAD ANN ARBOR, MI 48104	52-0847477	501(C)(3)	25,000.		FMV		GENERAL SUPPORT
(7) SOUND WATERS INC.							
1281 COVE ROAD STAMFORD, CT 06902	06-1263947	501(C)(3)	50,000.		FMV		GENERAL SUPPORT
(8) ANNA JULIA COOPER EPISCOPAL SCHOOL							
2124 NORTH 29TH STREET RICHMOND, VA 23223	27-0407231	501(C)(3)	15,000.		FMV		GENERAL SUPPORT
(9) ARTS COUNCIL OF PRINCETON							
102 WITHERSPOON STREET PRINCETON, NJ 08542	22-6108090	501(C)(3)	10,000.		FMV		GENERAL SUPPORT
(10) ARTWORKS							
19 EVERETT ALLEY TRENTON, NJ 08611	22-1803117	501(C)(3)	40,000.		FMV		GENERAL SUPPORT
(11) BIG BROTHERS BIG SISTERS OF MERCER COUNTY							
535 EAST FRANKLIN STREET TRENTON, NJ 08610	06-1653897	501(C)(3)	25,000.		FMV		GENERAL SUPPORT
(12) THE ADVERTISING COUNCIL							
815 SECOND AVENUE - 9TH FLOOR	13-0417693	501(C)(3)	25,000.		FMV		GENERAL SUPPORT

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2014)

JSA

SCHEDULE I (Form 990)       Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. <ul> <li>Attach to Form 990.</li> <li>Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.</li> </ul>						-	OMB No. 1545-0047 2014 Open to Public Inspection	
Name of the organization						<u> </u>	Employer identif	ication number
PRINCETON AREA	COMMUNITY FOUNDATION	N INC.					52-17462	234
Part I General I	nformation on Grants and	Assistance	e				•	
the selection crit	zation maintain records to su eria used to award the grants IV the organization's proced	or assistanc	e?					nd X Yes No
Part II Grants an Part IV, lir	d Other Assistance to Done 21, for any recipient th	omestic Org at received	ganizations ar more than \$5	<b>d Domestic Gov</b> ,000. Part II can b	vernments. Com be duplicated if a	plete if the organiza additional space is ne	tion answered eeded.	I "Yes" to Form 990,
1 (a) Name and a	address of organization	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation	(a) Description o	of (h) Purpose of grant

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	<b>(d)</b> Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) BOROUGH OF HIGHTSTOWN							
156 BANK STREET HIGHTSTOWN, NJ 08520	99-9999999	501(C)(3)	19,346.		FMV		GENERAL SUPPORT
(2) BOYS & GIRLS CLUB OF MERCER COUNTY							
212 CENTRE STREET TRENTON, NJ 08611	21-0634556	501(C)(3)	35,000.		FMV		GENERAL SUPPORT
(3) BOYS OF DISTINCTION AND GIRLS OF GRACE							
DBA BUILDING OUR YOUTH'S DEVELOPMENT 119 SO	20-3655694	501(C)(3)	19,219.		FMV		GENERAL SUPPORT
(4) BREASTCANCER.ORG							
7 EAST LANCASTER AVENUE - 3RD FLOOR	23-3082851	501(C)(3)	50,000.		FMV		GENERAL SUPPORT
(5) UNITED HOSPITAL FUND OF NEW YORK							
1411 BROADWAY - 12TH FLOOR	13-1562656	501(C)(3)	25,000.		FMV		GENERAL SUPPORT
(6) BROWN UNIVERSITY							
MOLECULAR BIOLOGY, CELL BIOLOGY, AND BIOCHE	05-0258809	501(C)(3)	25,000.		FMV		GENERAL SUPPORT
(7) CAMDEN AREA HEALTH EDUCATION CENTER							
514 COOPER STREET CAMDEN, NJ 08102	22-2358827	501(C)(3)	10,000.		FMV		GENERAL SUPPORT
(8) CAPPELLA ROMANA							
1017 SW MORRISON STREET, SUITE 315	93-1124501	501(C)(3)	25,000.		FMV		GENERAL SUPPORT
(9) CARDIGAN MOUNTAIN SCHOOL							
62 ALUMNI DRIVE CANAAN, NH 03741	02-0223580	501(C)(3)	10,000.		FMV		GENERAL SUPPORT
(10) CASA FOR CHILDREN OF MERCER & BURLINGTON CO							
1450 PARKSIDE AVENUE - SUITE 22	22-3770968	501(C)(3)	25,000.		FMV		GENERAL SUPPORT
(11) CATHOLIC CENTRAL SCHOOL FOUNDATION							
1200 EAST HIGH STREET SPRINGFIELD, OH 45505	23-7252047	501(C)(3)	5,900.		FMV		GENERAL SUPPORT
(12) CATHOLIC CHARITIES- DIOCESE OF TRENTON							
383 WEST STATE STREET PO BOX 1423	21-0634494		24,998.		FMV		GENERAL SUPPORT
<ul> <li>2 Enter total number of section 501(c)(3) and</li> <li>3 Enter total number of other organizations</li> </ul>							

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service	Form 990) Governments, and Individuals in the United States Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ► Attach to Form 990.									
Name of the organization		Employer identi	fication number							
PRINCETON AREA	COMMUNITY FOUNDATION INC.	52-1746	234							
Part I General Information on Grants and Assistance										
the selection crit	<ul> <li>Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?</li> <li>2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.</li> </ul>									

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) CENTER FOR SUPPORTIVE SCHOOLS							
911 COMMONS WAY PRINCETON, NJ 08540	22-2962532	501(C)(3)	35,000.		FMV		GENERAL SUPPORT
(2) CENTURION MINISTRIES							
1000 HERRONTOWN ROAD PRINCETON, NJ 08540	22-2563979	501(C)(3)	20,000.		FMV		GENERAL SUPPORT
(3) CHAPEL OF TRANSFIGURATION							
109 ROLLINGMEAD PRINCETON, NJ 08540	99-9999999	501(C)(3)	8,000.		FMV		GENERAL SUPPORT
(4) CHILDREN'S HOME SOCIETY OF NJ							
635 SOUTH CLINTON AVENUE	21-0634966	501(C)(3)	30,000.		FMV		GENERAL SUPPORT
(5) CHILDREN'S LITERACY INITIATIVE							
2314 MARKET STREET - 3RD FLOOR	23-2515768	501(C)(3)	20,000.		FMV		GENERAL SUPPORT
(6) COMMUNITIES IN SCHOOLS OF DURHAM							
3412 WESTGATE DRIVE SUITE 301	56-1791366	501(C)(3)	50,000.		FMV		GENERAL SUPPORT
(7) COMMUNITY FOUNDATION OF NEW JERSEY							
P.O. BOX 338 KNOX HILL ROAD	22-2281783	501(C)(3)	20,000.		FMV		GENERAL SUPPORT
(8) COMMUNITY JUSTICE CENTER							
310 WEST STATE STREET - 3RD FLOOR	26-3396694	501(C)(3)	15,000.		FMV		GENERAL SUPPORT
(9) COMMUNITY LOAN FUND OF NEW JERSEY, INC.							
108 CHURCH STREET, 3RD FLOOR	22-2872262	501(C)(3)	20,000.		FMV		GENERAL SUPPORT
(10) CONSERVANCY OF SOUTHWEST FLORIDA							
1450 MERRIHUE DRIVE NAPLES, FL 34102-3449	59-1157084	501(C)(3)	10,000.		FMV		GENERAL SUPPORT
(11) CORNER HOUSE FOUNDATION							
ONE MONUMENT DRIVE PRINCETON, NJ 08542	22-2359490	501(C)(3)	25,000.		FMV		GENERAL SUPPORT
(12) CRISIS MINISTRY OF MERCER COUNTY							
123 E HANOVER STREET TRENTON, NJ 08608	22-3198464	501(C)(3)	10,000.		FMV		GENERAL SUPPORT

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

SCHEDULE I	(	Grants a	nd Other A	Assistance t	o Organiz	ations,		OMB No. 1545-0047
(Form 990) Governments, and Individuals in the United States Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.							2014	
	Com	plete if the o	-		orm 990, Part I\	/, line 21 or 22.		
Department of the Treasury Internal Revenue Service Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.								Open to Public
Internal Revenue Service	Informa	tion about Se	chedule I (Form	n 990) and its instr	ructions is at ww	w.irs.gov/form990.		Inspection
Name of the organization							Employer identificat	
	OMMUNITY FOUNDATIO						52-174623	4
Part I General Inf	ormation on Grants and	d Assistanc	e					
	tion maintain records to su							
the selection criter	ria used to award the grant	s or assistanc	xe?					X Yes N
	/ the organization's proced							
1 (a) Name and ad	e 21, for any recipient the dress of organization vernment	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gram or assistance
(1) SPONSORS FOR EDUCAT	TIONAL OPPORTUNITY							
55 EXCHANGE PLACE -		13-2578670	501(C)(3)	25,000.		FMV		GENERAL SUPPORT
(2) EASTERN UNIVERSITY								
PRESIDENT'S OFFICE	1300 EAGLE ROAD	23-1409675	501(C)(3)	10,000.		FMV		GENERAL SUPPORT
(3) ELIJAH'S PROMISE								
211 LIVINGSTON AVEN	JUE	22-3055539	501(C)(3)	7,500.		FMV		GENERAL SUPPORT
(4) FAMILY GUIDANCE CEN	TER/FAMILY & CHILDREN'S							
1931 NOTTINGHAM WAY	Y HAMILTON, NJ 08619-3554	22-3237254	501(C)(3)	50,000.		FMV		GENERAL SUPPORT
(5) FRIENDS OF HOPEWELI	DUBLIC LIBRARY							
13 EAST BROAD ST HO	PEWELL N.T 08525	22-3224040	501 (C) (3)	10,000.		FMV		GENERAL SUPPORT

13 EAST BROAD ST HOPEWELL, NJ 08525	22-3224040	501(C)(3)	10,000.	FMV	GENERAL SUPPORT
(6) FRIENDS OF THE PRINCETON PUBLIC LIBRARY					
65 WITHERSPOON STREET PRINCETON, NJ 08542	22-3494366	501(C)(3)	10,000.	FMV	GENERAL SUPPORT
(7) BROOKLYN BRIDGE PARK CONSERVANCY					
334 FURMAN STREET BROOKLYN, NY 11201	13-3277651	501(C)(3)	25,000.	FMV	GENERAL SUPPORT
(8) PARTNERSHIP FOR A DRUG FREE AMERICA, INC.					
352 PARK AVENUE SOUTH - 9TH FLOOR	13-3413627	501(C)(3)	16,500.	FMV	GENERAL SUPPORT
(9) YOUNG SURVIVAL COALITION	_				
80 BROAD STREET - SUITE 1700	13-4057685	501(C)(3)	40,000.	FMV	GENERAL SUPPORT
(10) HABITAT FOR HUMANITY - TRENTON AREA	_				
601 NORTH CLINTON AVENUE	22-2736214	501(C)(3)	25,000.	FMV	GENERAL SUPPORT
(11) GRACE INITIATIVES					
509 NORTH MAIN STREET - UNIT 4	20-0806940	501(C)(3)	50,000.	FMV	GENERAL SUPPORT
(12) HITOPS					
21 WIGGINS STREET PRINCETON, NJ 08540	22-3486441	501(C)(3)	30,000.	FMV	GENERAL SUPPORT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table
3 Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) (2014)

►

SCHEDULE I	Grants and Other Assistance to Organizations,	l	OMB No. 1545-0047					
(Form 990)	Governments, and Individuals in the United States		2014					
Department of the Treasury	Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ► Attach to Form 990.		Open to Public					
Internal Revenue Service	Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.		Inspection					
Name of the organization		Employer identi	fication number					
PRINCETON AREA COMMUNITY FOUNDATION INC. 52-1746								
Part I General Information on Grants and Assistance								
	ation maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants o eria used to award the grants or assistance?		and X Yes No					

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(2) HOPEWELL VOLUNTEER FIRE DEPARTMENT AND EMER 4 COLUMBIA AVENUE HOPEWELL, NJ 08525 (3) HOUSING AND COMMUNITY DEVELOPMENT NETWORK O	6090528	501(C)(3) 501(C)(3)	105,000.	FMV	GENERAL SUPPORT
(2) HOPEWELL VOLUNTEER FIRE DEPARTMENT AND EMER         4 COLUMBIA AVENUE HOPEWELL, NJ 08525         (3) HOUSING AND COMMUNITY DEVELOPMENT NETWORK O         145 WEST HANOVER STREET TRENTON, NJ 08618         22	6090528			FMV	GENERAL SUPPORT
4 COLUMBIA AVENUE HOPEWELL, NJ 08525     22-1       (3) HOUSING AND COMMUNITY DEVELOPMENT NETWORK O     145 WEST HANOVER STREET TRENTON, NJ 08618     22-1		501(C)(3)	10,000.		
(3) HOUSING AND COMMUNITY DEVELOPMENT NETWORK O 145 WEST HANOVER STREET TRENTON, NJ 08618 22-:		501(C)(3)	10,000.	1	
145 WEST HANOVER STREET TRENTON, NJ 08618 22-	2982197			FMV	GENERAL SUPPORT
	2982197				
(4) HUMANE SOCIETY OF NAPLES		501(C)(3)	25,000.	FMV	GENERAL SUPPORT
370 AIRPORT-PULLING ROAD NORTH 59-	1033966	501(C)(3)	6,000.	FMV	GENERAL SUPPORT
(5) PHILADELPHIA CHILDREN'S FOUNDATION					
8618 GERMANTOWN AVENUE 2ND FLOOR, REAR BUIL 20-	5356792	501(C)(3)	20,000.	FMV	GENERAL SUPPORT
(6) INDEPENDENT SECTOR					
1602 L STREET, NW - SUITE 900 52-	1081024	501(C)(3)	10,000.	FMV	GENERAL SUPPORT
(7) INDIAN RIVER HOSPITAL FOUNDATION					
1000 36TH STREET VERO BEACH, FL 32960 59-	0760215	501(C)(3)	30,000.	FMV	GENERAL SUPPORT
(8) INSTITUTE FOR ADVANCED STUDY					
EINSTEIN DRIVE PRINCETON, NJ 08540 21-	0634988	501(C)(3)	10,000.	FMV	GENERAL SUPPORT
(9) INTERFAITH CAREGIVERS OF GREATER MERCER COU					
3635 QUAKERBRIDGE ROAD - SUITE 16 22-	3312846	501(C)(3)	25,000.	FMV	GENERAL SUPPORT
(10) INTERSECT FUND					
109 CHURCH STREET NEW BRUNSWICK, NJ 08901 36-	4636828	501(C)(3)	25,000.	FMV	GENERAL SUPPORT
(11) ISLES, INC.					
10 WOOD STREET TRENTON, NJ 08618 22-	2350832	501(C)(3)	46,000.	FMV	GENERAL SUPPORT
(12) PRINCETON MONTESSORI SOCIETY					
C/O         TADS         1201         HAWTHORNE         AVENUE         -         SUITE         100         22-3           2         Enter total number of section         501(c)(3) and gov		501(C)(3)	8,915.	 FMV	GENERAL SUPPORT

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2014)

4E1288 1.000

JSA

SCHEDULE I (Form 990)	vernme	nts, and Ir	Assistance t ndividuals in	n the Unite	d States	F	OMB No. 1545-0047	
Department of the Treasury	plete if the o	•	swered "Yes" to F tach to Form 990.	orm 990, Part IV	, line 21 or 22.		Open to Public	
Internal Revenue Service	Informa	ation about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.						Inspection
Name of the organization							Employer identifi	cation number
PRINCETON AREA	COMMUNITY FOUNDATIO	ON INC.					52-17462	34
Part I General I	nformation on Grants and	d Assistanc	e					
the selection crit	zation maintain records to su eria used to award the grant IV the organization's proced	s or assistanc	æ?			0,0		nd X Yes No
Part II Grants an Part IV, lin	nd Other Assistance to D ne 21, for any recipient th	omestic Org nat received	<b>ganizations ar</b> more than \$5	n <b>d Domestic Gov</b> ,000. Part II can b	vernments. Con be duplicated if	nplete if the organiza additional space is n	ation answered eeded.	"Yes" to Form 990,
	address of organization povernment	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistanc	
(1) JARED ALLEN'S HOM	ES FOR WOUNDED WARRIORS	_						
7890 E. MCCLAIN D	RIVE, UNIT 2	27-1361341	501(C)(3)	12,326.		FMV		GENERAL SUPPORT
(2) THERAPY DOGS INTE	RNATIONAL							

25,000.

6,000.

15,000.

15,000.

40,000.

90,000.

45,000.

10,000.

15,000.

10,000.

25,000

FMV

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table

22-2486689 501(C)(3)

22-3600348 501(C)(3)

01-0211532 501(C)(3)

24-0795686 501(C)(3)

20-2484231 501(C)(3)

93-0386858 501(C)(3)

26-3079474 501(C)(3)

52-1146384 501(C)(3)

22-3626846 501(C)(3)

22-2858673 501(C)(3)

501(C)(3)

52-1170830

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

88 BARTLEY ROAD FLANDERS, NJ 07836

(3) JOHN WITHERSPOON MIDDLE SCHOOL PTO 217 WALNUT LANE PRINCETON, NJ 08540

P.O. BOX 257 1614 MAIN STREET

730 HIGH STREET EASTON, PA 18042

0615 SW PALATINE HILL ROAD, MSC 57

PO BOX 5299 SOMERSET, NJ 08875

121 CHESTNUT STREET - SUITE 203

P.O. BOX 3624 TRENTON, NJ 08629

812 HAMILTON STREET SOMERSET, NJ 08873

(6) LATIN AMERICAN LEGAL DEFENSE AND EDUCATIONA 669 CHAMBERS STREET TRENTON, NJ 08611

PO BOX 411502 SAN FRANCISCO, CA 94141-1502

(4) KENTS HILL SCHOOL

(5) LAFAYETTE COLLEGE

(7) LEWIS AND CLARK COLLEGE

(8) LIBERATION INSTITUTE

(9) LINKS FOUNDATION, INC.

(10) LITERACY NEW JERSEY, INC.

(11) LIVING HOPE CHURCH

(12) THE NEW JERSEY ORATORS

►

GENERAL SUPPORT

JSA

2

3

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service	Form 990) epartment of the Treasury tternal Revenue Service Governments, and Individuals in the United States Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ► Attach to Form 990. ► Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.							OMB No. 1545-0047 20 <b>14</b> Open to Public Inspection
Name of the organization							Employer identificati	on number
PRINCETON AREA COMMUNITY FOUNDATION INC. 52-174623								ł
Part I General I	nformation on Grants and	Assistance	9				·	
the selection crit	zation maintain records to su eria used to award the grants IV the organization's proced	s or assistanc	e?	-				X Yes No
	nd Other Assistance to Dene 21, for any recipient th							es" to Form 990,
	address of organization government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance

15,000.

25,000.

10,000.

35,000.

FMV

FMV

FMV

FMV

824 SILVIA STREET EWING, NJ 08628	21-0733990	501(C)(3)	20,000.	FMV	
(6) JEREMY FUND					
234 SULLIVAN WAY EWING, NJ 08628	22-3533272	501(C)(3)	25,000.	FMV	
(7) MILLHILL CHILD & FAMILY DEVELOPMENT CORPORA					
101 OAKLAND STREET TRENTON, NJ 08618	22-2123700	501(C)(3)	67,700.	FMV	
(8) MINDING OUR BUSINESS, INC.					
2083 LAWRENCEVILLE ROAD	46-1076647	501(C)(3)	10,000.	FMV	
(9) MORNING STAR BAPTIST CHURCH					
2385 GALENA STREET AURORA, CO 80011	99-9999999	501(C)(3)	10,000.	FMV	
(10) MOUNT CARMEL GUILD					
73 NORTH CLINTON AVENUE TRENTON, NJ 08609	21-0675183	501(C)(3)	25,000.	FMV	
(11) MOUNT VERNON LADIES' ASSOCIATION					
PO BOX 110 MOUNT VERNON, VA 22121	54-0564701	501(C)(3)	25,000.	FMV	
(12) PLEASE TOUCH MUSEUM					
4231 AVENUE OF THE REPUBLIC	23-2109376	501(C)(3)	15,000.	FMV	
2 Enter total number of section 501(c)(3) ar	nd governmer	nt organizations I	isted in the line 1 table		
3 Enter total number of other organizations	listed in the li	ne 1 table		<u> </u>	<u></u>
For Denemicarly Deduction Act Nation and the Instruct	ione for Form (	200			0.1

22-1990231 501(C)(3)

22-2133029 501(C)(3)

501(C)(3)

501(C)(3)

20-1594569

21-0733990

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

(1) MEALS ON WHEELS OF TRENTON/EWING

(4) MERCER STREET FRIENDS CENTER

(5) MERCER STREET FRIENDS FOOD BANK

(2) MERCER ALLIANCE TO END HOMELESSNESS

320 HOLLOWBROOK DRIVE TRENTON, NJ 08638

(3) MERCER COUNTY COMMUNITY COLLEGE FOUNDATION 1200 OLD TRENTON ROAD - ROOM A115 PO BOX B

151 MERCER STREET TRENTON, NJ 08611

CROSSROADS CORPORATE CENTER 3150 BRUNSWICK

GENERAL SUPPORT

4E1288 1.000

JSA

SCHEDULE I	Grants and Other Assistance to Organizations,	ļ	OMB No. 1545-0047	
(Form 990)	Governments, and Individuals in the United States		2014	
Department of the Treasury	Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ► Attach to Form 990.		Open to Public	
Internal Revenue Service	Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.		Inspection	
Name of the organization		Employer identi	ification number	
PRINCETON AREA	COMMUNITY FOUNDATION INC.	52-1746	234	
Part I General II	nformation on Grants and Assistance			
	zation maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants o eria used to award the grants or assistance?		and X Yes No	

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) NAMI MERCER NJ							
LAWRENCE COMMONS 3371 BRUNSWICK PIKE, SUITE	22-2587453	501(C)(3)	20,000.		FMV		GENERAL SUPPORT
(2) NASSAU PRESBYTERIAN CHURCH							
61 NASSAU STREET PRINCETON, NJ 08540	21-0634470	501(C)(3)	10,000.		FMV		GENERAL SUPPORT
(3) GEORGE STREET PLAYHOUSE							
9 LIVINGSTON AVENUE	23-7361588	501(C)(3)	10,000.		FMV		GENERAL SUPPORT
(4) NATIONAL JUNIOR TENNIS & LEARNING OF TRENTO							
949 WEST STATE STREET TRENTON, NJ 08618	52-1260470	501(C)(3)	25,000.		FMV		GENERAL SUPPORT
(5) NATIONAL MEDICAL FELLOWSHIPS							
347 FIFTH AVENUE - SUITE 510	01-0963657	501(C)(3)	50,000.		FMV		GENERAL SUPPORT
(6) NATIONAL TRUST FOR HISTORIC PRESERVATION							
THE WATERGATE OFFICE BUILDING 2600 VIRGINIA	53-0210807	501(C)(3)	10,000.		FMV		GENERAL SUPPORT
(7) NATURAL RESOURCES DEFENSE COUNCIL							
40 WEST 20TH STREET NEW YORK, NY 10011	13-2654926	501(C)(3)	6,000.		FMV		GENERAL SUPPORT
(8) NEW JERSEY CONSERVATION FOUNDATION							
BAMBOO BROOK 170 LONGVIEW ROAD	22-6065456	501(C)(3)	306,000.		FMV		GENERAL SUPPORT
(9) NEW JERSEY PERFORMING ARTS CENTER							
1 CENTER STREET NEWARK, NJ 07102	22-2889703	501(C)(3)	15,000.		FMV		GENERAL SUPPORT
(10) NEW JERSEY POLICY PERSPECTIVE							
137 WEST HANOVER STREET	22-3492715	501(C)(3)	10,000.		FMV		GENERAL SUPPORT
(11) NJ SEEDS							
494 BROAD STREET, SUITE 105	22-3181507	501(C)(3)	15,000.		FMV		GENERAL SUPPORT
(12) NORTHEAST ORGANIC FARMING ASSOCIATION							
334 RIVER ROAD HILLSBOROUGH, NJ 08844	22-3043823	501(C)(3)	20,000.		FMV		GENERAL SUPPORT

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2014)

4E1288 1.000

JSA

SCHEDULE I (Form 990)	orm 990) Governments, and Individuals in the United States							омв №. 1545-0047 20 <b>14</b>
Department of the Treasury	Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ► Attach to Form 990.							Open to Public
Internal Revenue Service Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.								Inspection
Name of the organization							Employer identifi	cation number
PRINCETON AREA COMMUNITY FOUNDATION INC. 52-17462								234
Part I General I	nformation on Grants and	d Assistanc	e				·	
the selection crit	zation maintain records to su eria used to award the grant IV the organization's proced	s or assistanc	e?			0,00		nd X Yes No
Part II Grants an Part IV, lin	nd Other Assistance to D ne 21, for any recipient th	omestic Org nat received	ganizations ar more than \$5	n <b>d Domestic Gov</b> ,000. Part II can b	vernments. Con be duplicated if	nplete if the organiza additional space is n	ation answered eeded.	"Yes" to Form 990,
	address of organization government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistanc	
(1) PAN-MASSACHUSETTS	CHALLENGE							
PO BOX 415590 BOS	TON, MA 02241-5590	04-2746912	501(C)(3)	6,400.		FMV		GENERAL SUPPORT
(2) DUQUESNE UNIVERSI	TY OF THE HOLY SPIRIT							

10,000.

10,000.

10,000.

47,500.

8,000.

10,000.

25,000.

34,500.

15,000.

47,563

6,000

FMV

Enter total number of other organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990.

25-1035663 501(C)(3)

95-3258661 501(C)(3)

22-2594219 501(C)(3)

26-0640050 501(C)(3)

52-2258463 501(C)(3)

99-9999999 501(C)(3)

22-3623112 501(C)(3)

501(C)(3)

501(C)(3)

501(C)(3)

501(C)(3)

22-2402577

30-0573525

22-1643997

35-2422620

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

Schedule I (Form 990) (2014)

►

GENERAL SUPPORT

2

3

4E1288 1.000

600 FORBES AVENUE 4TH FLOOR ADMINISTRATION

40 WITHERSPOON STREET PRINCETON, NJ 08540

231 LAWRENCE ROAD LAWRENCEVILLE, NJ 08648

(7) PHS COMMISSIONED OFFICERS FOUNDATION FOR TH 8201 CORPORATE DRIVE - SUITE 200

575 DUTTON AVE. SAN LEANDRO, CA 94577

PO BOX 651 PINE GROVE MILLS, PA 16868

(12) PRINCETON ACADEMY OF THE SACRED HEART 1128 GREAT ROAD PRINCETON, NJ 08540

400 WITHERSPOON STREET PRINCETON, NJ 08540

(9) PLANNED PARENTHOOD OF CENTRAL & GREATER NOR 196 SPEEDWELL AVENUE MORRISTOWN, NJ 07960

3325 WILSHIRE BLVD., SUITE 1100

150 WEST 55TH STREET - SUITE 8A

(8) PIEDMONT YOGA COMMUNITY (PYC)

(4) PEACE ACTION EDUCATION FUND

(6) TRIDENT SWIM FOUNDATION

(10) JANA MARIE FOUNDATION

(11) PRINCETON

(3) PATHWAYS LA

(5) PEI KIDS

JSA

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service								20 <b>14</b> Dpen to Public Inspection	
Name of the organization							Employer identificati	on number	
PRINCETON AREA COMMUNITY FOUNDATION INC. 52-1746234									
Part I General I	nformation on Grants and	Assistance	)				•		
the selection crite	zation maintain records to su eria used to award the grants IV the organization's proced	s or assistanc	e?					X Yes No	
Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.									
	address of organization government	<b>(b)</b> EIN	(c) IRC section if applicable	<b>(d)</b> Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) PRINCETON ELKS CHARITABLE TRUST							
PO BOX 217 BLAWENBURG, NJ 08504	45-2029696	501(C)(3)	7,500.		FMV		GENERAL SUPPORT
(2) PRINCETON FRIENDS SCHOOL							
470 QUAKER ROAD PRINCETON, NJ 08540	22-2790041	501(C)(3)	30,000.		FMV		GENERAL SUPPORT
(3) PRINCETON HEALTHCARE SYSTEM FOUNDATION							
3626 US HIGHWAY 1 PRINCETON, NJ 08540	22-2225911	501(C)(3)	45,000.		FMV		GENERAL SUPPORT
(4) MARTIN LUTHER KING JR. COMMUNITY HEALTH FOU							
515 SOUTH FLOWER STREET - SUITE 1610	45-4433505	501(C)(3)	25,000.		FMV		GENERAL SUPPORT
(5) PRINCETON PUBLIC LIBRARY FOUNDATION							
65 WITHERSPOON STREET PRINCETON, NJ 08542	22-3494366	501(C)(3)	10,000.		FMV		GENERAL SUPPORT
(6) PRINCETON RECREATION DEPARTMENT							
380 WITHERSPOON STREET PRINCETON, NJ 08540	21-6001037	501(C)(3)	14,700.		FMV		GENERAL SUPPORT
(7) PRINCETON SENIOR RESOURCE CENTER							
SUZANNE PATTERSON CENTER 45 STOCKTON STREET	22-2228083	501(C)(3)	35,000.		FMV		GENERAL SUPPORT
(8) PRINCETON SYMPHONY ORCHESTRA							
PO BOX 250 PRINCETON, NJ 08542	22-2327766	501(C)(3)	25,000.		FMV		GENERAL SUPPORT
(9) PRINCETON UNIVERSITY OFFICE OF ALUMNI AND D							
PO BOX 5357 PRINCETON, NJ 08543-5357	21-0634501	501(C)(3)	10,000.		FMV		GENERAL SUPPORT
(10) PRINCETON-BLAIRSTOWN CENTER							
13 ROSZEL ROAD, SUITE C204A	22-6075831	501(C)(3)	10,000.		FMV		GENERAL SUPPORT
(11) PROJECT HEALING WATERS							
P.O. BOX 695 LA PLATA, MD 20646	61-1518154	501(C)(3)	22,400.		FMV		GENERAL SUPPORT
(12) PROJECT HOME							
1515 FAIRMOUNT AVENUE	23-2555950		11,200.		FMV		GENERAL SUPPORT
<ul><li>2 Enter total number of section 501(c)(3) an</li><li>3 Enter total number of other organizations I</li></ul>	d governmen isted in the lir	t organizations ne 1 table	listed in the line 1 t	able		▶ ►	

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

SCHEDULE I (Form 990)	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.									
Department of the Treasury	Complete if the o	-	swered "Yes" to F ttach to Form 990.	orm 990, Part IV	, line 21 or 22.		Open to Public			
Name of the organization						Employer identifica	tion number			
PRINCETON AREA COMMUNITY FOUNDA	ATION INC.					52-174623	4			
Part I General Information on Grants	s and Assistanc	e				•				
the selection criteria used to award the Describe in Part IV the organization's pr Part II Grants and Other Assistance Part IV, line 21, for any recipie	to Domestic Or	nitoring the use	of grant funds in the nd Domestic Gov	e United States. vernments. Cor	nplete if the organiz	ation answered "	X Yes No			
<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
(1) GENERAL CONFERENCE OF SEVENTH-DAY ADVENT	rist									
12501 OLD COLUMBIA PIKE	52-0643036	501(C)(3)	30,000.		FMV		GENERAL SUPPORT			
(2) QUANTUM LEAP FARM										
10401 WOODSTOCK ROAD ODESSA, FL 33556-50	59-3469464	501(C)(3)	10,648.		FMV		GENERAL SUPPORT			
(3) RACHEL'S NETWORK										
1200 18TH STREET, NW WASHINGTON, DC 2003	36 31-1644905	501(C)(3)	20,000.		FMV		GENERAL SUPPORT			

(3) RACHEL'S NETWORK					
1200 18TH STREET, NW WASHINGTON, DC 20036	31-1644905	501(C)(3)	20,000.	FMV	GENERAL SUPPORT
(4) RAINFOREST ALLIANCE					
233 BROADWAY - 28TH FLOOR	13-3377893	501(C)(3)	10,000.	FMV	GENERAL SUPPORT
(5) RESCUE MISSION OF TRENTON					
98 CARROLL STREET PO BOX 790	21-0656182	501(C)(3)	80,000.	FMV	GENERAL SUPPORT
(6) RISE/A COMMUNITY SERVICE PARTNERSHIP					
116 NORTH MAIN STREET PO BOX 88	22-2405087	501(C)(3)	20,685.	FMV	GENERAL SUPPORT
(7) BLACK WOMEN'S AGENDA					
5335 WISCONSIN AVENUE NW - SUITE 440	52-1139558	501(C)(3)	10,000.	FMV	GENERAL SUPPORT
(8) RUTGERS UNIVERSITY FOUNDATION					
WINANTS HALL 7 COLLEGE AVENUE	23-7318742	501(C)(3)	20,000.	FMV	GENERAL SUPPORT
(9) SAVE					
900 HERRONTOWN ROAD PRINCETON, NJ 08540	22-6082741	501(C)(3)	30,000.	FMV	GENERAL SUPPORT
(10) SHILOH COMMUNITY DEVELOPMENT CORPORATION					
416 BELLEVUE AVENUE, SUITE 201	12-3799161	501(C)(3)	25,000.	FMV	GENERAL SUPPORT
(11) SOLOMON R. GUGGENHEIM FOUNDATION					
GUGGENHEIM MUSEUM 1071 FIFTH AVENUE	13-5562233	501(C)(3)	10,000.	FMV	GENERAL SUPPORT
(12) SOMERVILLE ELKS #1068 CHARITABLE TRUST					
375 UNION AVENUE (ROUTE 28)	45-1715479		11,000.	FMV	GENERAL SUPPORT
2 Enter total number of section 501(c)(3) a	nd governmen	t organizations	listed in the line 1 table		· · · · · · · · · · · · · · · · · · ·
3 Enter total number of other organizations	listed in the lir	ne 1 table			

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2014)

4E1288 1.000

JSA

SCHEDULE I				Assistance t				OMB No. 1545-0047
(Form 990)			•	ndividuals in				2014
	Com	plete if the o	-	swered "Yes" to F tach to Form 990.	orm 990, Part I\	/, line 21 or 22.		Open to Public
Department of the Treasury Internal Revenue Service	Informa	tion about So	,		uctions is at ww	w.irs.gov/form990.		Inspection
Name of the organization			<b>`</b>				Employer identificat	tion number
PRINCETON AREA COMMUNITY FOUNDATION INC. 52-1746								4
Part I General In	formation on Grants an	d Assistanc	е				•	
1 Does the organiz	ation maintain records to s	ubstantiate th	e amount of the	e grants or assista	nce, the grantee	s' eligibility for the grant	s or assistance, and	
-	eria used to award the gran			-	-			X Yes No
	V the organization's proce							
1 (a) Name and a	e 21, for any recipient t	(b) EIN	(c) IRC section if applicable	6,000. Part II can k	(e) Amount of non- cash assistance	additional space is n (f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) HEARING LOSS ASSOC	TATION OF AMERICA							
7910 WOODMONT AVEN		52-1177011	501(C)(3)	25,000.		FMV		GENERAL SUPPORT
(2) SOUTHERN POVERTY I	AW CENTER							
400 WASHINGTON AVE	NUE MONTGOMERY, AL 36104	63-0598743	501(C)(3)	10,000.		FMV		GENERAL SUPPORT
(3) NATIONAL ACADEMY (	F SOCIAL INSURANCE							
1776 MASSACHUSETTS	AVENUE NW SUITE 400	52-1451753	501(C)(3)	50,000.		FMV		GENERAL SUPPORT
(4) ST. CATHERINE'S CH	IURCH							
215 ESSEX AVENUE S	SPRING LAKE, NJ 07762	99-9999999	501(C)(3)	10,000.		FMV		GENERAL SUPPORT

(4) ST. CATHERINE'S CHURCH					
215 ESSEX AVENUE SPRING LAKE, NJ 07762	99-9999999	501(C)(3)	10,000.	FMV	GENERAL SUPPORT
(5) ST. JOHN'S EPISCOPAL CHURCH					
8992 KULA HIGHWAY KULA, HI 96790-7420	99-9999999	501(C)(3)	10,000.	FMV	GENERAL SUPPORT
(6) ST. LAWRENCE REHABILITATION CENTER					
2381 LAWRENCEVILLE ROAD	52-2250044	501(C)(3)	7,406.	FMV	GENERAL SUPPORT
(7) ST. MATTHEW'S EPISCOPAL CHURCH					
300 SOUTH MAIN STREET PENNINGTON, NJ 08534	22-1898482	501(C)(3)	10,000.	FMV	GENERAL SUPPORT
(8) STATE YMCA OF PENNSYLVANIA					
224 PINE STREET - SUITE 203	23-1365990	501(C)(3)	9,000.	FMV	GENERAL SUPPORT
(9) STONY BROOK-MILLSTONE WATERSHED ASSOCIATION					
31 TITUS MILL ROAD	21-0649717	501(C)(3)	277,000.	FMV	GENERAL SUPPORT
(10) STORYTELLING ARTS					
PO BOX 995 PRINCETON JUNCTION, NJ 08550	22-3473712	501(C)(3)	22,945.	FMV	GENERAL SUPPORT
(11) SUSTAINABLE JERSEY					
PO BOX 6855 LAWRENCEVILLE, NJ 08648	45-3848336	501(C)(3)	40,000.	FMV	GENERAL SUPPORT

(12) SWARTHMORE COLLEGE 500 COLLEGE ROAD SWARTHMORE, PA 19081 23-1352683 501(C)(3) 15,000. FMV GENERAL SUPPORT 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ► Enter total number of other organizations listed in the line 1 table 3 

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2014)

JSA

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service	ОМВ No. 1545- 20 <b>1</b> Ореп to Pu Inspectio	4 Iblic	
Name of the organization		Employer identification number	
PRINCETON AREA	COMMUNITY FOUNDATION INC.	52-1746234	
Part I General I	nformation on Grants and Assistance		
the selection crite	zation maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants o eria used to award the grants or assistance? IV the organization's procedures for monitoring the use of grant funds in the United States.		No
Part II Grants an	d Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization	tion answered "Yes" to Form	ı 990,

Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	<b>(d)</b> Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) THE CITIZENS CAMPAIGN							
450 MAIN STREET METUCHEN, NJ 08840	22-3511801	501(C)(3)	40,000.		FMV		GENERAL SUPPORT
(2) THE COLLEGE OF NEW JERSEY FOUNDATION							
PO BOX 7718 2000 PENNINGTON ROAD	22-2448189	501(C)(3)	25,000.		FMV		GENERAL SUPPORT
(3) THE NATIONAL CENTER ON ADDICTION AND SUBSTA							
633 THIRD AVENUE - 19TH FLOOR	52-1736502	501(C)(3)	25,000.		FMV		GENERAL SUPPORT
(4) IC FOUNDATION							
200 N. MANGUM STREET, SUITE 203	74-3034115	501(C)(3)	12,500.		FMV		GENERAL SUPPORT
(5) THE V FOUNDATION							
106 TOWERVIEW COURT CARY, NC 27513	13-3705951	501(C)(3)	10,000.		FMV		GENERAL SUPPORT
(6) TRENTON AREA SOUP KITCHEN							
72 1/2 ESCHER STREET PO BOX 872	22-2392881	501(C)(3)	100,000.		FMV		GENERAL SUPPORT
(7) TRENTON CENTRAL HIGH SCHOOL							
400 CHAMBER STREET TRENTON, NJ 08609	99-9999999	501(C)(3)	15,000.		FMV		GENERAL SUPPORT
(8) TRENTON CHILDREN'S CHORUS							
471 PARKWAY AVENUE TRENTON, NJ 08618	45-2633120	501(C)(3)	50,000.		FMV		GENERAL SUPPORT
(9) GROUP HEALTH COOPERATIVE							
1730 MINOR AVENUE, SUITE 1600	91-0511770	501(C)(3)	50,000.		FMV		GENERAL SUPPORT
(10) TRINITY CHURCH							
33 MERCER STREET PRINCETON, NJ 08540	21-0647707	501(C)(3)	183,000.		FMV		GENERAL SUPPORT
(11) TRINITY COUNSELING SERVICE							
22 STOCKTON STREET PRINCETON, NJ 08540	22-2185298	501(C)(3)	35,000.		FMV		GENERAL SUPPORT
(12) TRISOLDIER PROJECT							
27472 PORTOLA PKWY #205-225	27-2329978	501(C)(3)	8,666.		FMV		GENERAL SUPPORT

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

JSA

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SCHEDULE I	Grants a	nd Other /	Assistance f	o Organiza	ations,		OMB No. 1545-0047
		•	ndividuals in swered "Yes" to F				2014
Con	ipiete il the o	-	tach to Form 990.	orm 990, Fart IV	, inte 21 of 22.		Open to Public
Department of the Treasury Internal Revenue Service	ation about S	,		ructions is at ww	w.irs.gov/form990.		Inspection
Name of the organization					<b></b>	Employer identification	
PRINCETON AREA COMMUNITY FOUNDATI	ON TNC					52-174623	
Part   General Information on Grants an		<u>e</u>				52 1/1025	1
1 Does the organization maintain records to s		-	o grante or accieta	nco the grantee	e' oligibility for the grants	or assistance, and	1
the selection criteria used to award the grar							X Yes No
<ol> <li>Describe in Part IV the organization's proce</li> </ol>	dures for mo	pitoring the use	of grant funds in th	o Unitod Statos			
Part II Grants and Other Assistance to I							
Part IV, line 21, for any recipient to <b>1 (a)</b> Name and address of organization or government	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) UNITARIAN UNIVERSALIST CONGREGATION OF SOME			-		onloy		
123 EAST CLIFF STREET SOMERVILLE, NJ 08876	22-3532354	501(C)(3)	11,000.		FMV		GENERAL SUPPORT
(2) UNITARIAN UNIVERSALIST SERVICE COMMITTEE (U							
689 MASSACHUSETTS AVENUE	04-6186012	501(C)(3)	6,000.		FMV		GENERAL SUPPORT
(3) PUBLIC HEALTH INSTITUTE							
555 12TH STREET, 10TH FLOOR	94-1646278	501(C)(3)	50,000.		FMV		GENERAL SUPPORT
(4) UNITED NEGRO COLLEGE FUND							
1805 7TH STREET NW WASHINGTON, DC 20001	13-1624241	501(C)(3)	10,000.		FMV		GENERAL SUPPORT
(5) UNIVERSITY OF PENNSYLVANIA							
3451 WALNUT STREET - ROOM 433	23-1352685	501(C)(3)	55,000.		FMV		GENERAL SUPPORT
(6) UNIVERSITY OF PITTSBURGH							
DEPARTMENT OF ATHLETICS PO BOX 7436	25-0965591	501(C)(3)	25,000.		FMV		GENERAL SUPPORT
(7) URBANPROMISE TRENTON, LLC							
801 WEST STATE STREET TRENTON, NJ 08618	26-3389429	501(C)(3)	25,000.		FMV		GENERAL SUPPORT

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P	.O. BOX 243 MAKAWAO, HI 96768	91-2144632	501(C)(3)	20,000.		FMV	GENERAL SUPPORT
<b>(12)</b> w	ORK ENVIRONMENT COUNCIL OF NEW JERSEY						
7	DUNMORE AVENUE FIRST FLOOR EAST	22-2751863	501(C)(3)	43,000.		FMV	GENERAL SUPPORT
2	Enter total number of section 501(c)(3) and	d governmen	t organizations I	isted in the line 1 t	able		
	Enter total number of other organizations li						

20,000.

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25,000.

501(C)(3)

501(C)(3)

94-2292868

22-3595586

04-3622534 501(C)(3)

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

12 STOCKTON STREET PRINCETON, NJ 08540

(8) AMERICAN SOCIETY ON AGING

(10) VOLUNTEERCONNECT

(11) WHALE TRUST

575 MARKET STREET - SUITE 2100

(9) VILLAGE CHARTER SCHOOL FUND, INC. 101 SULLIVAN WAY TRENTON, NJ 08628

Schedule I (Form 990) (2014)

GENERAL SUPPORT

GENERAL SUPPORT

GENERAL SUPPORT

JSA

SCHEDULE I (Form 990)       Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.							-	OMB No. 1545-0047	
► Attach to Form 990.						Open to Public			
Department of the Treasury Internal Revenue Service Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.							Inspection		
Name of the organization Employer ident								cation number	
PRINCETON AREA COMMUNITY FOUNDATION INC. 52-1746234								34	
Part I General I	nformation on Grants an	d Assistanc	e				·		
the selection crit	ation maintain records to s eria used to award the gran IV the organization's proce	s or assistanc	e?			0,0		nd X Yes No	
	d Other Assistance to D the 21, for any recipient t							"Yes" to Form 990,	
	address of organization overnment	(b) EIN	(c) IRC section if applicable	<b>(d)</b> Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistanc	e (h) Purpose of grant or assistance	
(1) YMCA OF BURLINGTO	N COUNTY								
59 CENTERTON ROAD	MT LAUREL N.T 08054	21-0634482	501(C)(3)	20 300		EMV		GENERAL SUPPORT	

7,200.

34,425.

25,000.

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50,000.

26,604.

13,600.

500,000

12,500.

95,000

1,159,619

FMV

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

(11) PRINCETON NURSERY SCHOOL

(12) NEW JERSEY PRESS FOUNDATION

(2) YMCA OF METROPOLITAN WASHINGTON
1112 16TH STREET, NW - SUITE 720

(7) FRIENDS OF THE NJ STATE MUSEUM PO BOX 530 TRENTON, NJ 08625-0530

(9) CRISIS MINISTRY OF MERCER COUNTY

59 PAUL ROBESON PLACE PRINCETON, NJ 08540

431 PENNINGTON AVENUE TRENTON, NJ 08618

(5) YOUNG AUDIENCES OF NEW JERSEY & EASTERN PA 200 FORRESTAL ROAD PRINCETON, NJ 08540

1250 FOURTH STREET SANTA MONICA, CA 90401

(8) PLANNED PARENTHOOD OF CENTRAL & GREATER NOR

123 E HANOVER STREET TRENTON, NJ 08608

180 EWINGVILLE ROAD EWING, NJ 08638

78 LEIGH AVENUE PRINCETON, NJ 08540

810 BEAR TAVERN ROAD, SUITE 307

196 SPEEDWELL AVENUE MORRISTOWN, NJ 07960

(3) YMCA OF PRINCETON

(4) YMCA OF TRENTON

(6) MILKEN INSTITUTE

(10) ARC MERCER

GENERAL SUPPORT

2

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4E1288 1.000

Enter total number of other organizations listed in the line 1 table

53-0207403

21-0635052

22-1643997

22-3198464

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

21-0639890 501(C)(3)

23-7384991 501(C)(3)

95-4240775 501(C)(3)

22-6098724 501(C)(3)

21-0726335 501(C)(3)

21-0643024 501(C)(3)

22-6071765 501(C)(3)

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501(C)(3)

501(C)(3)

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service	(Form 990)       Governments, and Individuals in the United States         Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.         Department of the Treasury Internal Revenue Service         Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.				
Name of the organization		Employer identi	ification number		
PRINCETON AREA	COMMUNITY FOUNDATION INC.	52-1746	234		
Part I General Ir	nformation on Grants and Assistance				
the selection crite	ation maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or eria used to award the grants or assistance? IV the organization's procedures for monitoring the use of grant funds in the United States.		and X Yes No		
Part II Grants an	d Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization	on answered	d "Yes" to Form 990,		

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

22-6108090 21-0634966	501(C)(3)	22,850.				
_	501(C)(3)	22.850.				
21-0634966		/****		FMV		GENERAL SUPPORT
21-0634966	1					
	501(C)(3)	60,000.		FMV		GENERAL SUPPORT
22-2327766	501(C)(3)	93,750.		FMV		GENERAL SUPPORT
52-1641512	501(C)(3)	20,000.		FMV		GENERAL SUPPORT
22-6108090	501(C)(3)	7,850.		FMV		GENERAL SUPPORT
21-6001037	501(C)(3)	510,000.		FMV		GENERAL SUPPORT
22-2317363	501(C)(3)	12,400.		FMV		GENERAL SUPPORT
99-9999999	501(C)(3)	104,100.		FMV		COMMUNITY BUILDING
_						
_						
-						
_						
d governmen	t organizations	listed in the line 1 ta	able		►	188.
	52-1641512 22-6108090 21-6001037 22-2317363 99-9999999 	22-2317363 501(C)(3) 99-9999999 501(C)(3)	52-1641512       501(C) (3)       20,000.         22-6108090       501(C) (3)       7,850.         21-6001037       501(C) (3)       510,000.         22-2317363       501(C) (3)       12,400.         99-9999999       501(C) (3)       104,100.         90-99999999       501(C) (3)       104,100.         90-9999999       501(C) (3)       104,100.         90-9999999       501(C) (3)       104,100.	52-1641512       501(C)(3)       20,000.         22-6108090       501(C)(3)       7,850.         21-6001037       501(C)(3)       510,000.         22-2317363       501(C)(3)       12,400.         99-9999999       501(C)(3)       104,100.         91-99999999       501(C)(3)       104,100.         92-000000000000000000000000000000000000	52-1641512       501(C)(3)       20,000.       FMV         22-6108090       501(C)(3)       7,850.       FMV         21-6001037       501(C)(3)       510,000.       FMV         22-2317363       501(C)(3)       12,400.       FMV         99-9999999       501(C)(3)       104,100.       FMV         99-9999999       501(C)(3)       104,100.       FMV         0       0       0       0       0         0       0       0       0       0         0       0       0       0       0         0       0       0       0       0         0       0       0       0       0         0       0       0       0       0         0       0       0       0       0         0       0       0       0       0         0       0       0       0       0       0         0       0       0       0       0       0         0       0       0       0       0       0         0       0       0       0       0       0         0       0	52-1641512       501(C)(3)       20,000.       FMV         22-6108090       501(C)(3)       7,850.       FMV         21-6001037       501(C)(3)       510,000.       FMV         22-2317363       501(C)(3)       12,400.       FMV

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2014)

JSA

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 EDUCATION SCHOLARSHIPS	61.	266,613.			
2					
3					
4					
5					
6					
7					
Part IV Supplemental Information. Compleinformation.	ete this part to pro-	vide the informa	tion required in	Part I, line 2, Part III, c	olumn (b), and any other additional
IONITORING OF GRANTS					

AND FINANCIAL UPDATES SIX MONTHS AND TWELVE MONTHS AFTER THE AWARD IS

MADE. ALL GRANTEES SIGN A CONTRACT WHICH OUTLINES ALL REQUIREMENTS BEFORE

THEIR GRANT CHECK IS DELIVERED. GRANTS FROM DONOR-ADVISED AND DESIGNATED

FUNDS ARE AWARDED AFTER A THOROUGH REVIEW OF THEIR IRS 990 TAX RETURNS,

AND IN MANY CASES, A REVIEW OF THEIR AUDITED FINANCIAL STATEMENTS. STAFF

ALSO REVIEW WEB SITES, ANNUAL REPORTS AND NEWSLETTERS TO CONFIRM THE

TAX-EXEMPT STATUS AND EFFICACY OF EACH ORGANIZATION. THE COMMUNITY

4

5

6

7

#### Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III Part III can be duplicated if additional space is needed. (a) Type of grant or assistance (b) Number of (c) Amount of (d) Amount of (e) Method of valuation (book, (f) Description of non-cash assistance recipients , cash grant non-cash assistance FMV, appraisal, other) 1 2 3

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

FOUNDATION ALSO VISITS MANY LOCAL GRANTEES EACH YEAR FOR FACE-TO-FACE

MEETINGS AND FIRST-HAND EXPERIENCE OF FUNDED PROGRAMS. AS A LOCAL

GRANTMAKER, THE COMMUNITY FOUNDATION ALSO HAS ACCESS TO MANY INFORMAL

SOURCES OF INFORMATION FROM THE LOCAL NEWSPAPERS, TO PROFESSIONAL STAFF

AND BOARD RELATIONSHIPS WITH MANY ORGANIZATIONS.

	EDULE J	•	sation Information	0	/IB No.	1545-0	047
(For	m <b>990)</b>		ctors, Trustees, Key Employees, and Highest mpensated Employees		20	14	
		Complete if the organization	n answered "Yes" on Form 990, Part IV, line 2	3.			
	nent of the Treasury Revenue Service	► A Information about Schedule J (Fo	Attach to Form 990. rm 990) and its instructions is at <i>www.irs.gov/</i>		pen to Inspo		
	of the organization			Employer identification			
PRII	NCETON ARE	A COMMUNITY FOUNDATION INC.		52-174623	4		
Part	Question	s Regarding Compensation	I				
						Yes	No
1a			ovided any of the following to or for a per				
	990, Part VII,	Section A, line 1a. Complete Part III to p	provide any relevant information regarding	g these items.			
	First-cla	ss or charter travel	Housing allowance or residence for	personal use			
	Travel fo	or companions	Payments for business use of perso	nal residence			
	Tax inde	emnification and gross-up payments	Health or social club dues or initiation	on fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)						
b	or reimburse	ment or provision of all of the ex	e organization follow a written policy represented above? If "No," com	plete Part III to			
	explain				1b		
2	-		to reimbursing or allowing expenses				
			D/Executive Director, regarding the item	s checked in line			
					2		
3			nization used to establish the compensation				
			at apply. Do not check any boxes for metho e CEO/Executive Director, but explain in P				
	· ·	sation committee	Written employment contract				
	·	dent compensation consultant	X Compensation survey or study				
	X Form 99	00 of other organizations	X Approval by the board or compensation	tion committee			
4		ar, did any person listed in Form 990, F or a related organization:	Part VII, Section A, line 1a, with respect to	the filing			
а	Receive a sev	verance payment or change-of-control pa	ayment?		4a		Х
b	Participate in	or receive payment from, a suppleme	ntal nonqualified retirement plan?		4b		X
С	•		used compensation arrangement?		4c		X
	If "Yes" to an	y of lines 4a-c, list the persons and pr	rovide the applicable amounts for each it	em in Part III.			
_			ganizations must complete lines 5–9.				
5	•		line 1a, did the organization pay or accrue a	any			
_		n contingent on the revenues of:			5		v
					5a		X X
b		e 5a or 5b, describe in Part III.			5b		
6			line 1a, did the organization pay or accrue a				
0	-	n contingent on the net earnings of:	inte ra, did the organization pay of accide a	arry			
а					6a		x
b					6b		X
2	•	e 6a or 6b, describe in Part III.					
7			n A, line 1a, did the organization provi	de any non-fixed			
-	•		escribe in Part III	•	7	x	
8			paid or accrued pursuant to a contract the		<u> </u>		
-			Regulations section 53.4958-4(a)(3)?	-			
		-			8		x
9			ow the rebuttable presumption proced				
					9		
						-	

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2014

Schedule J (Form 990) 2014

### Page **2**

## Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of	W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	<b>(iii)</b> Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred in prior Form 990
ANN W. KIELING	(i)	172,331.	10,000.		9,924.	10,156.	202,411.	
1 PRESIDENT	(ii)	0	C		0 0	0	0	
	(i)							
2	(ii)							
	(i)							
3	(ii)							
	(i)							
4	(ii)							
	(i)							
5	(ii)							
	(i)							
6	(ii)							
	(i)							
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
11	<b>(ii)</b>							
	(i)							
12	(ii)							
	(i)							
13	(ii)							
	(i)							
14	(ii)							
4.5	(i)							
15	(ii)							
	(i)							

Schedule J (Form 990) 2014

### Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SCHEDULE J, PART I, LINE 7

THE ORGANIZATION PROVIDED INCENTIVE PAY TO A PERSON LISTED IN FORM 990,

PART VII, SECTION A, LINE 1A DURING THE YEAR ENDED DECEMBER 31, 2014.

THE FOUNDATION'S COMPENSATION PROGRAM WILL BE: FOCUSED ON A COMBINATION

OF BASE SALARY AND INCENTIVE PAY WHICH, WHEN COMBINED, WILL PROVIDE

COMPENSATION ABOVE THE MARKET MEDIAN.

THE INCENTIVE PAY COMPONENT WILL NOT BE ADDED TO BASE PAY AND WILL BE TARGETED ABOVE MARKET MEDIAN AT OR AROUND THE 65TH TO 85TH PERCENTILE. UNDER NO CIRCUMSTANCES WILL COMPENSATION BE CALCULATED AS A PERCENTAGE OF

CONTRIBUTIONS

Page 3

## SCHEDULE M (Form 990)

# **Noncash Contributions**

Contributions

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service Name of the organization

Part I Types of Property

### PRINCETON AREA COMMUNITY FOUNDATION INC.

Employer	identification	number

OMB No. 1545-0047

2014

**Open To Public** 

Inspection

52-1746234

		<b>(a)</b> Check if applicable	<b>(b)</b> Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method o noncash cont			
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household							
	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	Х	. 84.	4,464,654.	FMV			
10	Securities - Closely held stock							
11	Securities - Partnership, LLC,							
	or trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation							
	contribution - Historic							
	structures							
14	Qualified conservation							
	contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ►()							
26	Other ►()							
27	Other ►()							
28	Other ►()							
29	Number of Forms 8283 received	by the org	anization during the tax ye	ear for contributions for				
	which the organization completed F	orm 8283,	Part IV, Donee Acknowledg	ement	29			
							Yes	No
30a	During the year, did the organizat							
	28, that it must hold for at least th							
	to be used for exempt purposes for	the entire h	olding period?			30a		X
b	If "Yes," describe the arrangement in							
31	Does the organization have a			-				
	contributions?					31	X	
32a	Does the organization hire or use		-					
	contributions?					32a		X
b	If "Yes," describe in Part II.							
33	If the organization did not report ar	n amount in	column (c) for a type of pro	perty for which column (a	) is checked,			
	describe in Part II.							
For Pa	aperwork Reduction Act Notice, see the Inst	ructions for Fo	rm 990.		Schedule	M (For	m 990)	(2014)

Page 2

Schedule M (Form 990) (2014)

**Part II Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, LINE 31

FOR UNUSUAL GIFTS, THE COMMUNITY FOUNDATION SHALL SEEK LEGAL ADVICE IN MATTERS RELATING TO THE ACCEPTANCE OF GIFTS WHERE APPROPRIATE. THE COMMUNITY FOUNDATION'S COUNSEL WILL:

A. REVIEW CLOSELY-HELD BUSINESS TRANSFERS THAT ARE SUBJECT TO RESTRICTIONS OR BUY-SELL AGREEMENTS.

B. REVIEW ALL GIFTS INVOLVING CONTRACTS, SUCH AS BARGAIN SALES OR OTHER DOCUMENTS REQUIRING THE COMMUNITY FOUNDATION TO ASSUME AN OBLIGATION.

C. REVIEW ALL TRANSACTIONS WITH POTENTIAL CONFLICTS OF INTEREST THAT MAY INVOKE IRS SANCTIONS IN WHICH THE COMMUNITY FOUNDATION'S EXECUTIVE COMMITTEE OR BOARD DEEMS REVIEW BY COUNSEL APPROPRIATE.

D. REVIEW ANY OTHER GIFT OR TRANSACTION WHEN REQUESTED BY THE COMMUNITY FOUNDATION BOARD, THE EXECUTIVE COMMITTEE, OR A STAFF MEMBER.

THE COMMUNITY FOUNDATION WILL ACCEPT UNRESTRICTED GIFTS, AND GIFTS FOR SPECIFIC PROGRAMS AND PURPOSES, PROVIDED THAT SUCH GIFTS ARE CONSISTENT WITH THE COMMUNITY FOUNDATION'S MISSION, PURPOSES, AND PRIORITIES. THE COMMUNITY FOUNDATION WILL NOT ACCEPT A GIFT THAT IS TOO RESTRICTIVE IN PURPOSE OR DESIGN. GIFTS THAT ARE TOO RESTRICTIVE ARE THOSE THAT VIOLATE THE TERMS OF THE CORPORATE CHARTER, GIFTS THAT ARE TOO DIFFICULT TO ADMINISTER, OR GIFTS THAT ARE FOR PURPOSES OUTSIDE THE MISSION OF THE

JSA 4E1508 1.000

Page 2

**Part II Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

COMMUNITY FOUNDATION.

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

## Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ.



Internal Revenue Service

PRINCETON AREA COMMUNITY FOUNDATION INC.

Employer identification number

FORM 990, PART VI, SECTION A, LINE 1A

THE COMMUNITY FOUNDATION'S EXECUTIVE COMMITTEE IS MADE UP OF THE OFFICERS OF THE FOUNDATION, MEMBERS OF VARIOUS STANDING COMMITTEES OF THE BOARD AND OTHER TRUSTEES WHO SERVE AT THE CHAIR'S INVITATION AND LEGAL COUNSEL WHO IS NOT A TRUSTEE. THE PRESIDENT SERVES AS AN EX OFFICIO MEMBER. THE EXECUTIVE COMMITTEE IS AUTHORIZED TO ACT ON BEHALF OF THE BOARD BETWEEN MEETINGS. ITS ACTIONS ARE RECORDED IN THE MINUTES OF THE COMMITTEE, AND PROMPTLY REPORTED TO THE FULL BOARD.

FORM 990, PART V, LINE 1C

THE COMMUNITY FOUNDATION COMPLIED WITH BACKUP WITHHOLDING RULES FOR REPORTABLE PAYMENTS TO VENDORS AS THE ORGANIZATION DID NOT HAVE ANY VENDORS THAT FAILED TO FURNISH HIS OR HER TAXPAYER IDENTIFICATION NUMBER (TIN) TO US, AND WE WERE NOT NOTIFIED BY THE IRS TO IMPOSE BACKUP WITHHOLDING BECAUSE A PAYEE FURNISHED AN INCORRECT TIN.

FORM 990, PART V, LINE 7G THE COMMUNITY FOUNDATION WAS NOT REQUIRED TO FILE FORM 8899 AS THE ORGANIZATION DID NOT RECEIVE ANY CONTRIBUTIONS OF QUALIFIED INTELLECTUAL PROPERTY.

FORM 990, PART VI, SECTION A, LINE 7H THE COMMUNITY FOUNDATION WAS NOT REQUIRED TO FILE FORM 1098-C AS THE ORGANIZATION DID NOT RECEIVE ANY CONTRIBUTIONS OF CARS, BOATS, AIRPLANES PRINCETON AREA COMMUNITY FOUNDATION INC.

Page 2

OR OTHER VEHICLES.

Name of the organization

### FORM 990, PART VI, SECTION A, LINE 11B

THE COMMUNITY FOUNDATION'S FORM 990 IS PREPARED BY AN INDEPENDENT CPA FIRM AND REVIEWED BY THE CHIEF FINANCIAL OFFICER AND THE PRESIDENT WHO SUGGEST NECESSARY REVISIONS. THE FORM 990, WITH NAMES REDACTED FROM SCHEDULE B TO HONOR THE WISHES OF ANONYMOUS DONORS, IS SUBSEQUENTLY DISTRIBUTED TO THE FOUNDATION'S AUDIT COMMITTEE FOR FURTHER REVIEW AND APPROVAL. IT IS THEN DISTRIBUTED TO ALL TRUSTEES PRIOR TO BEING FILED WITH THE IRS.

### FORM 990, PART VI, SECTION B, LINE 12C

THE COMMUNITY FOUNDATION HAS A WRITTEN CONFLICT OF INTEREST POLICY WHICH HAS BEEN APPROVED BY THE BOARD AND REQUIRES ALL EMPLOYEES, OFFICERS, TRUSTEES AND VOLUNTEERS TO COMPLETE AND SIGN A CONFLICT OF INTEREST DISCLOSURE FORM ANNUALLY. ALL COMPLETED FORMS ARE REVIEWED BY THE PRESIDENT FOR ACCURACY AND REASONABLENESS. THE PRESIDENT RETAINS A SUMMARY OF FINDINGS. ALL EMPLOYEES, OFFICERS, TRUSTEES AND VOLUNTEERS ARE REQUIRED TO DISCLOSE ANY ADDITIONAL CONFLICTS WHICH ARISE DURING THE YEAR AND A WRITTEN RECORD OF ANY SUCH CHANGES ARE ADDED TO THE ACTIVE FILE. IDENTIFIED CONFLICTS ARE NOTED AT ALL MEETINGS OF THE BOARD AND ITS COMMITTEES AND IN THE MINUTES. ANY OFFICER, TRUSTEE, STAFF MEMBER, OR VOLUNTEER WITH A CONFLICT LEAVES THE ROOM FOR THE DURATION OF THE RELEVANT DISCUSSION AND RECUSES HIM/HERSELF FROM ANY VOTE IN WHICH THEY HAVE A CONFLICT OF INTEREST IN ACCORDANCE WITH THE CONFLICT OF INTEREST POLICY.

JSA 4E1228 1.000

Schedule O (Form 990 or 990-EZ) 2014					
Name of the organization Employer identification number					
PRINCETON AREA COMMUNITY FOUNDATION INC.	52-1746234				

FORM 990, PART VI, SECTION B, LINE 15A-B THE COMMUNITY FOUNDATION HAS A BOARD-APPROVED COMPENSATION POLICY WHICH GUIDES ITS DECISIONS. THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES, WHICH IS COMPRISED OF INDEPENDENT BOARD MEMBERS WHO DO NOT HAVE A CONFLICT OF INTEREST, ACTS AS A PERSONNEL AND COMPENSATION COMMITTEE AND SETS ANNUAL COMPENSATION FOR THE PRESIDENT. THE EXECUTIVE COMMITTEE PERFORMS AN ANNUAL REVIEW OF THE PRESIDENT'S PERFORMANCE AGAINST OBJECTIVES AND METRICS AGREED TO AT THE BEGINNING OF THE FISCAL YEAR AND SOLICITS FEEDBACK FROM ALL TRUSTEES. THE PRESIDENT REVIEWS THE PERFORMANCE OF ALL OTHER STAFF, AND RECOMMENDS A SALARY POOL FOR THE NEXT YEAR TO THE EXECUTIVE COMMITTEE AS PART OF THE BUDGET PROCESS. COMMITTEE MINUTES DOCUMENT THE ACTIONS OF THE EXECUTIVE COMMITTEE IN ALL PERSONNEL AND COMPENSATION MATTERS; AND THE COMMITTEE'S DECISIONS ARE REPORTED TO THE FULL BOARD. IN SETTING COMPENSATION, THE EXECUTIVE COMMITTEE ANNUALLY REVIEWS COMPARABILITY DATA FROM THE COUNCIL ON FOUNDATIONS FOR COMMUNITY FOUNDATIONS OF SIMILAR SIZE; AND COMPENSATION FOR SIMILAR POSITIONS IN THE LOCAL CENTRAL NEW JERSEY MARKETPLACE, THE FORM 990'S OF OTHER NONPROFIT ORGANIZATIONS AND FORM 990-PF FOR PRIVATE FOUNDATIONS ARE ALSO CONSULTED FOR INFORMATION.

### FORM 990, PART VI, SECTION C, LINE 19

THE COMMUNITY FOUNDATION MAKES ITS CONFLICT OF INTEREST POLICY, AUDITED FINANCIAL STATEMENTS, AND IRS FORM 990 AVAILABLE TO THE PUBLIC VIA ITS WEBSITE AND UPON REQUEST. ITS GOVERNING DOCUMENTS AND FORM 1023 ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

Schedule O (Form 990 or 990-EZ) 2014	Page 2
Name of the organization	Employer identification number
PRINCETON AREA COMMUNITY FOUNDATION INC.	52-1746234

FORM 990, PART III, LINE 4A

GRANTS: THE COMMUNITY FOUNDATION IS AN ACTIVE GRANTMAKER THROUGH TWO COMPETITIVE GRANT PROGRAMS (GREATER MERCER GRANTS AND THE FUND FOR WOMEN & GIRLS), AND GRANTMAKING FROM DONOR-ADVISED, DESIGNATED, NONPROFIT, AND FIELD-OF-INTEREST FUNDS. ITS PRIMARY FOCUS IS CENTRAL NEW JERSEY, BUT GRANTS FROM DONOR-ADVISED FUNDS ARE MADE REGIONALLY AND NATIONALLY AS WELL. COMPETITIVE GRANTS ADDRESS THE NEEDS OF LOW-INCOME PEOPLE IN GREATER MERCER COUNTY, PROVIDE OPERATING SUPPORT FOR NONPROFITS WORKING WITH LOW-INCOME PEOPLE, AND PROVIDE SUPPORT FOR WORK TO BUILD THE SOCIAL CAPITAL OF THE REGION. A SOCIAL CAPITAL BENCHMARK SURVEY CONDUCTED IN 2007 PROVIDES DATA TO SUPPORT THIS WORK AND POINTS TO THE NEED TO BUILD BETTER RELATIONSHIPS AMONG THE COMMUNITIES AND PEOPLE IN THE REGION. A STUDY BY ANGELWORKS CONSULTING IN 2011 IS NOW BEING USED TO LEARN WHAT CHALLENGES LOCAL NONPROFITS ARE FACING, THE BARRIERS THEY ENCOUNTER AND HOW THE COMMUNITY FOUNDATION CAN BEST SERVE THEIR NEEDS. THE NEXT PHASE OF WORK IS PROVIDING MORE EDUCATION AND TRAINING FOR AREA NONPROFITS THROUGH FORMAL SEMINARS, AND REGULAR OUTREACH BY STAFF. THE FUND FOR WOMEN AND GIRLS COMMISSIONED RESEARCH IN 2011 TO BETTER UNDERSTAND THE NEEDS OF WOMEN AND GIRLS IN MERCER COUNTY AND TO SHAPE FUTURE WORK AND GRANTMAKING. THE RESULTS OF THE SHAPING THE FUTURE ARE AVAILABLE ON OUR WEBSITE, AND ARE INCORPORATED IN THE FUND'S GRANT GUIDELINES. THE COMMUNITY FOUNDATION'S GRANTMAKING TOUCHES MANY PROGRAMMATIC AREAS INCLUDING EDUCATION, BASIC SERVICES, HEALTH, ARTS & CULTURE, HOUSING, THE ENVIRONMENT, HISTORIC PRESERVATION, CIVIL RIGHTS, AND ANIMAL WELFARE. PROMOTING PHILANTHROPY AND PROVIDING EDUCATION: THE COMMUNITY FOUNDATION ACTIVELY ENGAGES ITS DONORS, GRANTEES, AND THE PROFESSIONAL ADVISORS IN

JSA

Schedule O (Form 990 or 990-EZ) 2014	
Name of the organization	Employer identification number
PRINCETON AREA COMMUNITY FOUNDATION INC.	52-1746234

THE REGION TO ENCOURAGE CHARITABLE GIVING BROADLY, AND TO BUILD OVER TIME A COMMUNITY-WIDE COMMITMENT TO PHILANTHROPY. IT SPONSORS SEMINARS AND WORKSHOPS ON TOPICS SUCH AS ENDOWMENT-BUILDING, GOOD GOVERNANCE, GRANT-SEEKING BEST PRACTICES, RISK MANAGEMENT, AND PLANNED GIVING. THE COMMUNITY FOUNDATION POSITIONS ITSELF AS A RESOURCE TO THE REGION AND REGULARLY RESPONDS TO REQUESTS FOR INFORMATION AND GUIDANCE. A ROBUST RESOURCE LIBRARY ON ITS WEB SITE IS A 24/7 SOURCE OF INFORMATION TO ITS THREE MAJOR CONSTITUENTS - DONORS, NONPROFITS AND PROFESSIONAL ADVISORS. IN ADDITION, THE COMMUNITY FOUNDATION PARTNERS WITH OTHER ORGANIZATIONS SUCH AS THE COUNCIL OF NJ GRANTMAKERS, THE GIFT PLANNING COUNCIL OF NJ, AND THE SUPPORT CENTER FOR NONPROFIT MANAGEMENT TO EXPAND ITS EDUCATIONAL OFFERINGS. OUTSIDE GROUPS CONDUCT RELATED WORKSHOPS ON ITS PREMISES. STAFF ARE AVAILABLE TO CONSULT WITH DONORS, NONPROFITS, PROFESSIONAL ADVISORS, AND COMMUNITY LEADERS ON ISSUES RELATED TO GIFTS, GRANTS, PARTNERSHIPS AND COLLABORATIONS, AND EFFECTIVE PHILANTHROPY AND NONPROFIT MANAGEMENT. IT SHARES ITS EXPERTISE WIDELY AS IT WORKS TO MEET ITS MISSION TO "PROMOTE PHILANTHROPY TO ADVANCE THE WELL-BEING OF OUR COMMUNITIES FOREVER." GRANTS TO INDIVIDUALS: THE COMMUNITY FOUNDATION INCLUDES OVER A DOZEN SCHOLARSHIP FUNDS. IT GRANTS SCHOLARSHIPS AND AWARDS THROUGH COMPETITIVE PROCESSES TO SUPPORT COLLEGE STUDY AND TO HONOR ACHIEVEMENT IN THE ARTS, MUSIC, GRAPHIC DESIGN, AND COMMUNITY SERVICE.

FORM 990, PART VII, SECTION A THE FOUNDATION'S LONG-TIME PRESIDENT, NANCY KIELING, RETIRED FROM THE FOUNDATION ON DECEMBER 31, 2015. HER SUCCESSOR, JEFFREY VEGA, STARTED IN

Schedule O (Form 990 or 990-EZ) 2014		Page <b>2</b>
Name of the organization	Employer identification number	
PRINCETON AREA COMMUNITY FOUNDATION INC.	52-1746234	

JANUARY 2015.

ATTACHN		NT 1
990, PART VII- COMPENSATION OF THE FIVE HIGHEST	PAID IND. CONTRACTORS	
NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
SCOTT LAUER 149 WEST 12TH STREET NEW YORK, NY 10011	PROJECT MANAGEMENT	124,000.
WIMBLETON PROPERTIES 500 ALCOA TRAIL KNOXVILLE, TN 37804	GENERAL CONTRACTOR	840,855.

FORM 990, PART VIII - INVESTMENT INCOME	_			
	(A)	(B)	(C)	(D)
	TOTAL	RELATED OR	UNRELATED	EXCLUDED
DESCRIPTION	REVENUE	EXEMPT REVENUE	BUSINESS REV.	REVENUE
INTEREST AND DIVIDEND INCOME	6,140,98	7.		6,140,987.
TOTALS	6,140,98	7.	_	6,140,987.

	-	ATTACHMENT 3
FORM 990, PART X - PREPAID EXPENSES	AND DEFERRED CHARGES	
DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE
PREPAID EXPENSES	21,302.	24,884.
TOTALS	21,302.	24,884.

ATTACHMENT 4

ATTACHMENT 2

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Schedule O (Form 990 or 990-EZ) 2014			Page <b>2</b>
Name of the organization		Employer identificatio	n number
PRINCETON AREA COMMUNITY FOUNDATION INC	2.	52-1746234	4
		ATTACHMENT 4 (CON	JT ' D )
FORM 990, PART X - INVESTMENTS - PUBLIC	CLY TRADED SECURITIES		
	BEGINNING	ENDING	COST
DESCRIPTION	BOOK VALUE	BOOK VALUE	OR FMV
DOMESTIC EQUITY	22,650,501.	25,444,953.	FMV
INTERNATIONAL EQUITY	15,061,353.	14,975,536.	FMV
TOTALS	37,711,854.	40,420,489.	
FORM 990, PART X - DEFERRED REVENUE		ATTACHMENT 5	

		BEGINNING	ENDING
DESCRIPTION		BOOK VALUE	BOOK VALUE
DEFERRED REVENUE		49,282.	41,554.
	TOTALS	49,282.	41,554.