Return of Organization Exempt From Income Tax

Form **990**

Department of the Treasury Internal Revenue Service

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

2021

OMB No. 1545-0047

Open to Public Inspection

▶ Do not enter Social Security numbers on this form as it may be made public.
 ▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

A F	or th	e 202	1 calendar year, or tax year begin	ning		and e	ending						
$\overline{}$			C Name of organization					D	Employer ide	entifica	ation num	ber	
Вс	heck if ap	oplicable:	PRINCETON AREA COMMUNI	TY FOUNDATION I	INC.								
	Addre		Doing Business As					1	52-1746	234			
	Name	change	Number and street (or P.O. box if mail is	not delivered to street address	5)	Room/s	uite	E	Telephone n	umber			
	Initial	return	15 PRINCESS ROAD						(609)23	19-1	L800		
	Term	inated	City or town, state or province, country, a	nd ZIP or foreign postal code									
	Amer		LAWRENCEVILLE, NJ 0864	18				G	Gross receip	ts \$	31,	010	,542.
		cation	F Name and address of principal officer:	JEFFREY M. VE	EGA			H(a	l) Is this a grou		n for	Yes	X No
		9	15 PRINCESS ROAD, LAWRE	NCEVILLE, NJ 08	3648			H(b	Are all subord		cluded?	Yes	No
ī	Tax-ex	empt st) ◀ (insert no.)	4947(a)(1)	or	527		If "No," attac	h a list.	(see instruc	tions)	
J	Websi	te: 🕨	WWW.PACF.ORG					H(c) Group exemp	otion nu	mber >		
K	Form	of organ	nization: X Corporation Trust	Association Other		LY	ear of form	ation:	1991 M	State	of legal do	micile:	NJ
	art I		mmary										
	1	Briefly	y describe the organization's mission or	most significant activities:	: THE E	PRINCE	ETON A	REA	COMMUN	ITY	FOUND.	ATIC	N
ø			MOTES PHILANTHROPY THROU										
and			ETWORK OF DONORS, ADVISO										
ern	2		k this box ▶ if the organization di					 % of i	its net assets	: s.			
Governance	3		per of voting members of the governing	•						3			20
	4		per of independent voting members of the							4			20
ties	5		number of individuals employed in cale							5			 17
ctivities &			number of volunteers (estimate if necess							6			 60
Ac	7a	Total	unrelated business revenue from Part VI	III. column (C) line 12						7a			
			nrelated business taxable income from I							7b			
			The state of the s						ior Year	1.4	Curre	ent Ye	ar
_	8	Contri	ibutions and grants (Part VIII, line 1h)				$\neg\vdash$	19	707,55	2.	15.	797	,513.
nue	9		am service revenue (Part VIII, line 2g)			Y FOR				ONE		,	NONE
Revenue	10		tment income (Part VIII, column (A), line		PUBLIC II	NSPECT	ION	2	2,945,33		4.	642	,280.
ď	11		revenue (Part VIII, column (A), lines 5,						259,65	_	- ,		,172.
	12		revenue - add lines 8 through 11 (must					2.2	2,912,54		20.		,965.
	13		s and similar amounts paid (Part IX, colu	•					3,561,66				,610.
	14		its paid to or for members (Part IX, colu							ONE			NONE
w	4-		es, other compensation, employee bene					1	,917,43		2.	048	,002.
JSe	16a		ssional fundraising fees (Part IX, column		_					ONE			NONE
Expenses	b		fundraising expenses (Part IX, column (I										
ũ	17		expenses (Part IX, column (A), lines 11						527,60)1.		729	,432.
			expenses. Add lines 13-17 (must equal					21	,006,69				,044.
	19		nue less expenses. Subtract line 18 from						.,905,84				,079.
or			The rest experience dustract line re-re-						of Current Y	_		of Yea	
ets	20	Total	assets (Part X, line 16)					231	,468,80	12	266	456	,755.
Ass Ba	21		liabilities (Part X, line 26)				• •		2,780,00	_			716.
Net Assets or Fund Balances	22		ssets or fund balances. Subtract line 21						3,688,79	_			,039.
	rt II		gnature Block						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Un	der pei	nalties d	of perjury, I declare that I have examined thi							my k	nowledge	and be	lief, it is
true	e, corre	ct, and	complete. Declaration of preparer (other than	officer) is based on all inform	nation of whi	ich prepa	rer has any	knowl	edge.				
Sig			Signature of officer						Date				
He	re												
			Type or print name and title										
_		Print/	Type preparer's name	Preparer's signature		Date	1		Check	if P	TIN		
Paid		BRAI	D CARUSO	BRAD CARUSO		11	/11/20	22	self-employe	٠. ا	01249	134	
	parer	Firm's	s name WITHUMSMITH+BROW			1	,, _0	\neg	m's EIN ▶		2-2027		
Use	Only			D 14TH FL EAST BRUNSWI	ICK, NJ 08	8816			one no.		32-828		4
May	the I		cuss this return with the preparer shown								X Ye		No
			Reduction Act Notice, see the separate					1					(2021)

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Pa	Part III Statement of Program Service Accomplishme	
		te to any line in this Part IIIX
1	1 Briefly describe the organization's mission:	
	THE COMMUNITY FOUNDATION PROMOTES PHIL	ANTHROPY TO ADVANCE THE
	WELL-BEING OF OUR COMMUNITIES. THE CO	MMUNITY FOUNDATION HAS SEVERAL
	GRANTMAKING INITIATIVES IN THE AREAS C	F EDUCATION, ARTS, BASIC HUMAN
	NEEDS, CAPACITY BUILDING, AND MORE.	
2	2 Did the organization undertake any significant program prior Form 990 or 990-EZ?	
_	If "Yes," describe these new services on Schedule O.	
3	3 Did the organization cease conducting, or make sig services?	
4	4 Describe the organization's program service accomplis	chments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organization the total expenses, and revenue, if any, for each program	is are required to report the amount of grants and allocations to others, service reported.
4a		ng grants of \$18,268,610) (Revenue \$357,172)
	THE COMMUNITY FOUNDATION IS AN ACTIVE	GRANTMAKER THROUGH SEVERAL
	COMPETITIVE GRANT PROGRAMS; ALL KIDS T	
	RATES OF CHRONIC ABSENTEEISM IN LOCAL	PUBLIC SCHOOLS, AND
	COMMUNITY IMPACT GRANTS SUPPORT NONPRO	FITS WORKING TO IMPROVE THE
	QUALITY OF LIFE FOR CHILDREN, FAMILIES,	AND COMMUNITIES. THE
	COMMUNITY FOUNDATION ALSO MAKES GRANTS	FROM DONOR
	ADVISED, DESIGNATED, NONPROFIT AND FIELD	OF INTEREST FUNDS AND
	SUPPORTS GIVING CIRCLES INCLUDING THE	FUND FOR WOMEN AND GIRLS AND
	THE NEXTGEN GIVING CIRCLE (SEE SCHEDUL	E O FOR MORE DETAILS).
4b	4b (Code:) (Expenses \$includi	ng grants of \$) (Revenue \$)
4c	4c (Code:) (Expenses \$includi	ng grants of \$) (Revenue \$)
4d	4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Payonua \$
4e	(Expenses \$ Including grants or \$ 4e Total program service expenses ▶ 19,394,896) (Revenue \$

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Part	V 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 Rev. Proc. 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		37	
7	"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? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	7		v
0	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes,"			X
8	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	-		
3	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		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			21
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
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	Х	
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		Х
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		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII.	12a	Х	
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)? If "Yes," complete Schedule E	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			
4.0	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	46	v	
17	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		v
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	''		X
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			Λ
	If "Yes," complete Schedule G, Part III	19		Х
20 a	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i>	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		- 22
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 1? If "Yes." complete Schedule I. Parts I and II	21	x	

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Par	t IV Checklist of Required Schedules (continued)		V	N _a
00	Did the consciention were there OF 000 of weeks on other posistance to be for demostic individuals and		Yes	No
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 2? If "Yes," complete Schedule I, Parts I and III	22		37
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the	22		X
23	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	Х	
24.5	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23		
24 a	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
		24a		Х
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		
·	to defease any tax-exempt bonds?	24c		
Ч	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	-		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	244		
2 5 a	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	200		
~	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	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L,			
	Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? 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	Χ	
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,"			
	complete Schedule N, Part II	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
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	olf "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)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		_X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	27		3.5
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note : All Form 990 filers are required to complete Schedule O	38	Х	
Part		30	Λ	
ાલા	Check if Schedule O contains a response or note to any line in this Part V			
	Shook in Conducto C Contains a response of note to dry line in the fact v		Yes	No
1 a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and			
J	reportable gaming (gambling) winnings to prize winners?	1c	Х	

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Par	Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
			103	140
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 17	٥.		
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 <i>e-file</i> . See instructions.			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	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 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	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
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?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
_	required to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
a	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		Х
9	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		Х
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		Х
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule</i> O · · · · · ·	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		Х
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any			
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes." complete Form 6069.			

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Form 990 (2021) PRINCETON AREA COMMUNITY FOUNDATION INC. Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No 1a 2.0 1a Enter the number of voting members of the governing body at the end of the tax year 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 on Schedule O. 2.0 Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 Χ 3 Did the organization delegate control over management duties customarily performed by or under the direct 3 Χ supervision of officers, directors, trustees, or key employees to a management company or other person?.... 4 Χ 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Χ 5 Did the organization become aware during the year of a significant diversion of the organization's assets?.... 6 Χ 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Χ Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Χ Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a Х Χ Each committee with authority to act on behalf of the governing body?................. Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at Χ Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No Χ 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Х Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . b Describe on Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give 12b Χ rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c X 13 Χ 13 14 Χ 14 Did the organization have a written document retention and destruction policy?........... 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? 15a Χ 15b Χ If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement Х 16a 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? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ► CA, DC, FL, NJ, NY, PA, RI, SC, WV, 17

- Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 - X Upon request Another's website Other (explain on Schedule O)
- 19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- State the name, address, and telephone number of the person who possesses the organization's books and records > 20 JEFFREY VEGA 15 PRINCESS ROAD LAWRENCEVILLE, NJ 08648

Form **990** (2021)

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, **Independent Contractors**

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 the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.s
- 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. See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box, office or direct	Position not check more than one at unless person is both an operand a director/trustee) The interpretation of the compensation from the organization (W-2/1099-MISC/1099-MISC/1099-NEC) The interpretation of the compensation from the organization (W-2/1099-MISC/1099-MISC/1099-NEC)		Reportable compensation from the organization (W-2/ 1099-MISC/	Reportable compensation from the rganization (W-2/ 1099-MISC/ Reportable compensation from related organizations (W-2/ 1099-MISC/				
(1) JEFFREY M. VEGA	40.00									
PRESIDENT & CEO	NONE			х				253,670.	NONE	33,141.
(2) LAURA LONGMAN	40.00									33,232
COO/CFO	NONE			Х				198,958.	NONE	23,768.
(3) MARCIA W. SHACKELFORD	40.00									
CHIEF PHILANTHROPY OFFICER	NONE					Х		180,603.	NONE	30,510.
(4) NELIDA VALENTIN	40.00									
VP, GRANTS AND PROGRAMS	NONE					Х		143,848.	NONE	23,209.
(5) MICHAEL R NUNO	40.00									
SR. DIR. OF PHILANTHROPY	NONE					X		133,645.	NONE	14,434.
(6) SUZANNE DE GROUCHY	40.00									
VICE PRESIDENT, ACCOUNTING	NONE					X		116,768.	NONE	19,734.
(7) ANTHONY J. CIMINO	5.00									
CHAIR - TRUSTEE	NONE	X		Χ				NONE	NONE	NONE
(8) ANDREW LIEU, CFP	5.00									
SECRETARY - TRUSTEE	NONE	X		X				NONE	NONE	NONE
(9) MICHELLE EVERMAN, CPA, CGMA,	5.00									
TREASURER - TRUSTEE	NONE	X		X				NONE	NONE	NONE
(10) ANDREW K. GOLDEN, CFA	5.00									
TRUSTEE	NONE	X						NONE	NONE	NONE
(11) WILLIAM P. BURKS, MD	1.00									
TRUSTEE	NONE	X						NONE	NONE	NONE
(12) WILLIAM HARLA	1.00							370375	11011	
TRUSTEE	NONE	X						NONE	NONE	NONE
(13) ELIZABETH MCNEILLY, CFP	1.00	٦,						ATOATH	NTCNTT	NT () TT
TRUSTEE	NONE	X						NONE	NONE	NONE
(14) JAMIE KYTE SAPOCH TRUSTEE	5.00 NONE	X						NONE	NONE	NONE
IKOOIEE	INOINE	Λ			<u> </u>			INOINE	NOINE	Form 990 (2021)

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Part VII Section A. Officers, Directors, Tr	ustees, Ke	y En	nplo	oye	es,	and F	lig	hest Compensat	ed Employees (c	ontinue	ed)	
(A)	(B)			(C)			(D)	(E)		(F)	
Name and title	Average				sition			Reportable	Reportable	Es	timated	
	hours per	,				e than o is both		compensation	compensation from		ount of	f
	week (list any hours for	office				tor/trust		from the	related organizations		other pensati	on
	related	Individual trustee or director					_	organization	(W-2/1099-MISC)		om the	···
	organizations	dire	i ii	Officer	Key employee	ploy	Forme	(W-2/1099-MISC)	(** =, *************************		anizatio	
	below dotted line)	ual	tion	'	olqn	t co/ee	_				d related anization	
	line)	trust	E E		yee	mpe				orge	inzatio	10
		e	Institutional trustee			Highest compensated employee						
			"			ted						
(15) CALVIN B. THOMAS, JR.	1.00											
TRUSTEE	NONE	Х						NONE	NONE			NONE
(16) MICHAEL H. ULLMANN	1.00											
TRUSTEE	NONE	X						NONE	NONE			NONE
(17) VERNON BRAMBLE, MBA, CAE	5.00											
TRUSTEE	NONE	Х						NONE	NONE			NONE
(18) SHAWN W. ELLSWORTH	5.00											
TRUSTEE	NONE	Х						NONE	NONE			NONE
(19) RAKIA REYNOLDS	1.00											
TRUSTEE	NONE	X						NONE	NONE			NONE
(20) ANNE M. VANLENT	1.00											
TRUSTEE	NONE	Х						NONE	NONE			NONE
(21) NICOLE BRONZAN	1.00											
TRUSTEE	NONE	Х						NONE	NONE			NONE
(22) ANA BERDECIA	1.00											
TRUSTEE	NONE	Х						NONE	NONE			NONE
(23) JEANNE BESSER	1.00											
TRUSTEE	NONE	Х						NONE	NONE			NONE
(24) SONIA DELGADO, MGA	5.00											
TRUSTEE	NONE	X						NONE	NONE			NONE
(25) DR. SHANNON MASON	1.00											
TRUSTEE	NONE	X						NONE	NONE			NONE
1b Sub-total							\blacktriangleright	1,027,492.	NONE		144,	796.
c Total from continuation sheets to Part VII,	Section A						\blacktriangleright	NONE	NONE			NONE
d Total (add lines 1b and 1c)							>	1,027,492.	NONE		144,	796.
2 Total number of individuals (including but not		hose	liste	ed a	bov	e) who	re	ceived more than	\$100,000 of			
reportable compensation from the organization	on ►					6						
											Yes	No
3 Did the organization list any former offi												
employee on line 1a? If "Yes," complete Schee	dule J for su	ch ina	livid	lual						3		
4 For any individual listed on line 1a, is the	sum of rep	oortab	ole d	com	per	nsatior	n ai	nd other compens	sation from the			
organization and related organizations g	reater than	\$15	50,0	000?	! It	f "Yes	,"	complete Schedu	le J for such			
individual										4		
5 Did any person listed on line 1a receive o												
for services rendered to the organization? If "	res," comple	te Scl	hedu	ule J	J for	r such	per	son		5		

Section B. Independent Contractors

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.

(A) Name and business address	(B) Description of services	(C) Compensation

² Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶

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Part VII	Section A. Officers, Directors, Tru	ustees, Ke	y En	nplo	ye	es, a	and F	lig	hest Compensat	ed Employ	yees (c	ontinued)
	(A) Name and title	(B) Average hours per week (list any hours for	box,	Pos heck ss pe	rson	than o is both or/truste	an	(D) Reportable compensation from the	Reporta compensation relate organizati	on from d	(F) Estimated amount of other compensation	
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099		from the organization and related organizations
26) TO	ONYA WOODLAND, M.H.R.M., M.S EE	1.00 NONE	Х						NONE	1	NONE	NON
1h Sub	total											
c Tota	total I from continuation sheets to Part VII, S I (add lines 1b and 1c)	-		-				>				
	I number of individuals (including but not rtable compensation from the organization		hose	liste	d al	bove	e) who	re	eceived more than	\$100,000	of	
	the organization list any former officional loyee on line 1a? If "Yes," complete Schedu											Yes No
orga	any individual listed on line 1a, is the s nization and related organizations gre ridual	eater than	\$15	50,0	00?	ⁱ If	"Yes	,"	complete Schedu	le J for	such	4 X
5 Did for s	any person listed on line 1a receive or ervices rendered to the organization? If "Yo	accrue co	mper	sati	on f	from	any	un	related organizati	on or indivi	idual	5 X
1 Com	B. Independent Contractors uplete this table for your five highest compensation from the organization. Report of											
	(A) Name and business add	dress							(B) Description of se	ervices	С	(C) ompensation
2 Tota	I number of independent contractors (in	ncluding b	ut no	t lin	nite	d to	thos	e li	isted above) who	received		

NONE

more than \$100,000 in compensation from the organization ▶

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Part VIII Statement of Revenue

ıaı	t VIII	Check if Schedule O co	ntains a resi	nons	se or note to an	v line in this Part \	/III		
		Official in Confedence Co.	mains a res	poric	Se of flote to aff	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts ts	1a	Federated campaigns	1	1					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues		,					
֝֞֞֝֝֓֞֝֝֟֝֟֝֟֝֝֟֝֟֝֟֝֟֝֟֝֟֝ <u>֚֚</u>	С	Fundraising events		;	3,309.				
r A	d	Related organizations							
פַּֿ		Government grants (contribu							
ns,	f	All other contributions, gifts,	,						
을	' '	and similar amounts not include	-		15,794,204.				
₹ Ş	_	Noncash contributions include			20,172,2001				
50	g	lines 1a-1f		3 \$	6,076,736.				
a C	h	Total. Add lines 1a-1f	· ·			15,797,513.			
	"	Total. Add lilles 1a-11			Business Code	13,737,313.			
ġ.	_			H	Dusiness Code				
≥ ″	2a	-		-					
Se Se	b			-					
<u>ē</u> <u>ē</u>	С			-					
gra Re	d			-					
Program Service Revenue	е			-					
_	f	All other program service rev				MONT			
	g	Total. Add lines 2a-2f				NONE			
	3	Investment income (included	•			2,040,805.			2,040,805.
	_	other similar amounts)							2,040,803.
	4	Income from investment of	•			NONE			
	5	Royalties	(i) Real		(ii) Personal	NONE			
	_		(i) Real	_	(II) I elsoliai				
	6a	Gross rents 6a							
	b	Less: rental expenses 6b							
	С	Rental income or (loss) 6c		ONE	NONE				
	d _d	Net rental income or (loss)			(i) Others	NONE			
	7a	Gross amount from	(i) Securities	1	(ii) Other				
		sales of assets							
		other than inventory 7a	12,815,0	52.					
ne	b	Less: cost or other basis							
evenue		and sales expenses 7b	10,213,5						
	С	Gain or (loss)	2,601,4	75.					
er	d	Net gain or (loss)			<u> ▶</u>	2,601,475.			2,601,475.
Other R	8a	Gross income from f	undraising						
J		events (not including \$							
		of contributions reported	on line						
		1c). See Part IV, line 18	8	Ba	NONE				
	b	Less: direct expenses		b	NONE				
	С	Net income or (loss) from fu	ndraising ever	nts	<u> ▶</u>	NONE			
	9a	Gross income from	gaming						
		activities. See Part IV, line 19) <u> 9</u>)a	NONE				
	b	Less: direct expenses	<u> </u>	b	NONE				
	С	Net income or (loss) from g	aming acti <u>viti</u>	es .	<u> ▶</u>	NONE			
	10a	Gross sales of invent	ory, less						
		returns and allowances	<u>1</u>	0a	NONE				
	b	Less: cost of goods sold		0b	NONE				
	С	Net income or (loss) from sa	les of inventory	<u>'</u>		NONE			
<u>n</u>				-	Business Code				
e g	11a	ADMINISTRATIVE FEES		_	900099	357,172.	357,172.		
llar /en	b			_					
Miscellaneous Revenue	С			_					
Ĭ	d	All other revenue		_					
	e_	Total. Add lines 11a-11d				357,172.			
	12	Total revenue. See instruction	ns		🕨	20,796,965.	357,172.		4,642,280.

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Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a resp	onse or note to any line	e in this Part IX		
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	18,268,610.	18,268,610.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	NONE	NONE		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16	NONE			
4	Benefits paid to or for members	NONE			
5	Compensation of current officers, directors,				
	trustees, and key employees	519,074.	119,204.	280,666.	119,204.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	NONE			
7	Other salaries and wages	1,202,263.	549,638.	122,471.	530,154.
8	Pension plan accruals and contributions (include	69,264.	31,590.	7,201.	30,473.
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	129,804.	55,912.	19,860.	54,032
10	Payroll taxes	127,597.	50,254.	28,583.	48,760
11	Fees for services (nonemployees):				
а	Management	NONE			
b	Legal	2,800.	1,693.	1,107.	
c	Accounting	NONE			
d	Lobbying	NONE			
е	Professional fundraising services. See Part IV, line 17.	NONE			
f	Investment management fees	3,829.	3,829.		
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A), amount, list line 11g expenses on Schedule O.)	232,386.	140,499.	91,887.	
12	Advertising and promotion	43,889.	4,695.	650.	38,544
13	Office expenses	141,921.	48,888.	77,564.	15,469
14	Information technology	158,304.	62,348.	35,462.	60,494
15	Royalties	NONE			
16	Occupancy	108,884.	43,765.	24,066.	41,053
17		3,354.	1,320.	752.	1,282
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	NONE			
19	Conferences, conventions, and meetings	9,625.	3,791.	2,156.	3,678
	Interest	NONE			
21	Payments to affiliates	NONE			
22		8,815.	3,471.	1,975.	3,369
	Insurance	15,625.	5,389.	4,701.	5,535
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A), amount, list line 24e expenses on Schedule O.)				
а					
	·				
C	:				
d					
	All other expenses				
	Total functional expenses. Add lines 1 through 24e	21,046,044.	19,394,896.	699,101.	952,047.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here				
	following SOP 98-2 (ASC 958-720)				

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Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Pa	art X		х х
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	200.	1	200.
	2	Savings and temporary cash investments	29,185,514.	2	26,886,526.
	3	Pledges and grants receivable, net	3,175,650.	3	489,713.
	4	Accounts receivable, net	NONE	4	29,695.
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons	NONE	5	NONE
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	NONE	6	NONE
ţ	7	Notes and loans receivable, net	NONE	7	NONE
Assets	8	Inventories for sale or use	NONE	8	NONE
Ą	9	Prepaid expenses and deferred charges SEE SCHEDULE .Q	90,347.	9	92,528.
	_	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 168,659.			
	b	Less: accumulated depreciation	20,685.	10c	14,397.
	11	Investments - publicly traded securities SEE SCHEDULE Q	46,159,846.	11	68,003,081.
	12	Investments - other securities. See Part IV, line 11	152,533,757.	12	170,591,070.
	13	Investments - program-related. See Part IV, line 11.	NONE		NONE
	14	Intangible assets	NONE		NONE
	15	Other assets. See Part IV, line 11	302,803.	15	349,545.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	231,468,802.	16	266,456,755.
_	17	Accounts payable and accrued expenses	88,676.	17	166,123.
	18	Grants payable	2,796,613.	18	919,190.
	19	Deferred revenue	NONE		NONE
	20	Tax-exempt bond liabilities	NONE		NONE
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	NONE		NONE
G	22	Loans and other payables to any current or former officer, director,	NONE	41	IVOIVE
ţį		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		controlled entity or family member of any of these persons	NONE	22	NONE
Ë	23	Secured mortgages and notes payable to unrelated third parties	NONE		NONE
	24	Unsecured notes and loans payable to unrelated third parties	NONE		NONE
	25	Other liabilities (including federal income tax, payables to related third	NONE	24	IVOIVE
	23	parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	49,894,714.	25	77,373,403.
	26	Total liabilities. Add lines 17 through 25	52,780,003.		78,458,716.
	20	Organizations that follow FASB ASC 958, check here ► X	32,700,003.	20	70,430,710.
ces		and complete lines 27, 28, 32, and 33.			
<u>a</u>	27	Net assets without donor restrictions	175,220,471.	27	187,168,906.
Ba	28	Net assets with donor restrictions.	3,468,328.	28	829,133.
Б		Organizations that do not follow FASB ASC 958, check here ▶	3,100,320.	20	025,155.
ß		and complete lines 29 through 33.			
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
SS	31	Retained earnings, endowment, accumulated income, or other funds		31	
ž.	32	Total net assets or fund balances	178,688,799.	32	187,998,039.
Š	33	Total liabilities and net assets/fund balances	231,468,802.	33	266,456,755.
_	100		ZJI, TUU, UUZ.		Form 990 (2021)

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Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					. X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2	0,7	96,	<u>965</u> .
2	Total expenses (must equal Part IX, column (A), line 25)	2	2	1,0	46,	044.
3	Revenue less expenses. Subtract line 2 from line 1	3		-2	49,	<u>079</u> .
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	17	8,6	88,	<u>799</u> .
5	Net unrealized gains (losses) on investments	5		9,4	81,	<u>710</u> .
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9			76,	<u>609</u> .
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10	18	7,9	<u>98,</u>	<u>039</u> .
Part	·					
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain	on			
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?.			2a		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were com-	piled	or			
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed or	n a			
	separate basis, consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	_		_		
	the audit, review, or compilation of its financial statements and selection of an independent accounta			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, ex	plain	on			
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set for	th in	the			
	Single Audit Act and OMB Circular A-133?			3a		_X_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und					
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such au	ıdits .		3b		

SCHEDULE A (Form 990)

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-EZ.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

► Go to www.irs.gov/Form990 for instructions and the latest information.

Employer identification number

PR.	INC	ETON AREA COMMUNITY	FOUNDATION I	INC.			52-1	746234
Pa	rt I	Reason for Public Cha	rity Status. (All o	organizations must	comple	te this p	art.) See instruction	S.
The	orga	anization is not a private fou	ndation because it	is: (For lines 1 through	gh 12, ch	eck only	one box.)	
1		A church, convention of chu	urches, or associat	tion of churches desci	ibed in s	ection 1	70(b)(1)(A)(i).	
2		A school described in secti	on 170(b)(1)(A)(ii)	. (Attach Schedule E	Form 99	90).)		
3		A hospital or a cooperative	hospital service o	rganization described	n sectio	n 170(b)	(1)(A)(iii).	
4		A medical research organiz		-				(iii). Enter the
		hospital's name, city, and st	•	•	•			
5		An organization operated f		a college or universit	v owne	d or ope	rated by a governme	ental unit described in
		section 170(b)(1)(A)(iv). (C		J	,	•	, 0	
6		A federal, state, or local go		rnmental unit describe	d in sect	ion 170(b)(1)(A)(v).	
7		An organization that norma	_			-		om the general public
		described in section 170(b)	=			3		3
8	x	A community trust describe		·	Part II.)			
9	25	An agricultural research org	-		-		I in conjunction with a	land-grant college
•		or university or a non-land-	=			-	-	
		university:	g.a cocgc c. ag	, (555	.0		inao, ony, and orate o	· u.o oo.logo o.
10		An organization that norma	lly receives (1) mo	ore than 331/3 % of its	sunnort	from cor	ntributions membersh	nin fees, and gross
. •		receipts from activities rela	ted to its exempt f	unctions, subject to c	ertain ex	ceptions	s; and (2) no more that	n 331/3 % of its
		support from gross investmacquired by the organizatio	ent income and ui	nrelated business tax	able inco	ome (less	s section 511 tax) from	businesses
11		An organization organized						
 12	\vdash	An organization organized a	•	•	-			rry out the nurnoses of
		one or more publicly support		•	-			
		the box on lines 12a through	•					
_							•	=
а		_ Type I. A supporting organization	· · · · · · · · · · · · · · · · · · ·	· · · · ·	-		= ::	
		the supported organization	` '	• • • •		ajority of	the directors of truste	es of the
h		supporting organization.	-			with ito	ounnarted organizati	on(a) by baying
b		Type II. A supporting org	· · · · · · · · · · · · · · · · · · ·					· · · · -
		control or management of		-	the sam	e persor	is that control of mar	age the supported
_		organization(s). You must	•					Ili. into mate alitle
С	L	Type III functionally integ						ily integrated with,
		its supported organization						.td
d	L	Type III non-functionally			-			
		that is not functionally inte	-	= -	-		· ·	d an attentiveness
		requirement (see instruct		-				U T III
е		_ Check this box if the orga					•••	II, Type III
f	En	functionally integrated, or			_	_		
		ter the number of supported ovide the following information						
9		ame of supported organization	(ii) EIN	(iii) Type of organization	(iv) Is the	organization	(v) Amount of monetary	(vi) Amount of
	(.,	ame of oupported organization	(,	(described on lines 1-10	listed in yo	ur governing	support (see	other support (see
				above (see instructions))	Yes	ment?	instructions)	instructions)
					163	NO		
(A)								
(B)								
(C)								
(
(D)								
(E)								
	al.							
Tota	di							

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.)

360	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	33,824,088.	19,835,641.	16,991,618.	19,707,552.	15,797,513.	106,156,412.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						NONE
3	The value of services or facilities furnished by a governmental unit to the organization without charge						NONE
4 5	Total. Add lines 1 through 3 The portion of total contributions by	33,824,088.	19,835,641.	16,991,618.	19,707,552.	15,797,513.	106,156,412.
	each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						35,882,450.
6	Public support. Subtract line 5 from line 4						70,273,962.
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 8	Amounts from line 4	33,824,088. 1,764,951.	19,835,641. 2,104,557.	16,991,618.	19,707,552. 1,263,406.	15,797,513. 2,040,805.	106,156,412. 8,928,941.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						NONE
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	10,683.	225,732.	312,705.	259,651.	357,172.	1,165,943.
11	Total support. Add lines 7 through 10						116,251,296.
12	Gross receipts from related activities, etc. (s	see instructions) .				12	
13	First 5 years. If the Form 990 is for organization, check this box and stop here	<u> </u>		l, third, fourth,	or fifth tax yea	ar as a section	501(c)(3) ►
Sec	tion C. Computation of Public Sup						
14	Public support percentage for 2021 (li		-			14	60.45 %
15	Public support percentage from 2020					15	57.94 %
16a	331/3% support test - 2021. If the org						
	box and stop here. The organization q						
D	331/3% support test - 2020. If the organization						
172	this box and stop here . The organization 10%-facts-and-circumstances test - 2	•		_			
114	10% or more, and if the organization						
	Part VI how the organization meets					-	•
	organization			-			▶ □
h	10%-facts-and-circumstances test - 2						and line
	15 is 10% or more, and if the organization	-					
	in Part VI how the organization meets					-	-
	organization			•	•		
18	Private foundation. If the organization						
	instructions						

(Complete only if you checked the box on line 10 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.)

Sec	tion A. Public Support						
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
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						
7 a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
b	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	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
<u></u>	line 6.)						
	tion B. Total Support	(a) 2017	(b) 2019	(a) 2010	(4) 2020	(a) 2021	(f) Total
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 10 a	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 loss from the sale of capital assets						
12	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
14	and 12.)	the organizat	ion's first secon	d third fourth	or fifth tax v	ar as a section	501(c)(3)
14	organization, check this box and stop here .	-					
Sec	tion C. Computation of Public Supp						
15	Public support percentage for 2021 (line 8,		_	mn (f))		15	%
16	Public support percentage from 2020 Sche		•			16	<u> </u>
	tion D. Computation of Investment						/0
<u> </u>	Investment income percentage for 2021 (lin			13. column (f))		17	%
18	Investment income percentage from 2020 S						// 0
	331/3% support tests - 2021. If the or						
. J u	17 is not more than 331/3%, check this	-					
h	331/3% support tests - 2020. If the orga	-	-	•			
IJ	line 18 is not more than 331/3 %, check						. \square
20	Private foundation. If the organization of		•	•			. —

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Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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 lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c 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 (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) 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 (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% 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 on 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 on line 9a) 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 on line 9a) 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.**
- 10 a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b 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.)

		Yes	No
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Part	Supporting Organizations (continued)			- 0 -
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,	44.		
Secti	provide detail in Part VI. on B. Type I Supporting Organizations	11c		
30011	on billypo i cupporting organizations		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
•	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI 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 officers, 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 Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.			
Sacti	on C. Type II Supporting Organizations	2		
) C C (1	on o. Type ii oupporting 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			
_	Did the consideration of the transfer of the constant of the c		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, (i) a written notice describing the type and amount of support provided during the prior			
	tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) 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 Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
2	By reason of the relationship described on line 2, above, did the organization's supported organizations have			
3	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 Part VI 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. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (se	e instr		r –
2	Activities Test. Answer lines 2a and 2b 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 Part VI identify			
	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		
h	·			
b	Did the activities described on line 2a, above, 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 lines 3a and 3b 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? If "Yes" or "No," 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.	3h	I	ı

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Schedule A (Form 990) 2021

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nization	s					
1	1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See							
	instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.							
Se	ction 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						
Se	ction 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):							
а	Average monthly value of securities	1a						
b	Average monthly cash balances	1b						
С	Fair market value of other non-exempt-use assets	1c						
d	Total (add lines 1a, 1b, and 1c)	1d						
е	Discount claimed for blockage or other factors (explain in detail in Part VI):							
_	Acquisition indebtedness applicable to non-exempt-use assets	2						
	Subtract line 2 from line 1d.	3						
_		- 3						
4	Cash deemed held for exempt use. Enter 0.015 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 0.035.	6						
7	Recoveries of prior-year distributions	7						
8	Minimum Asset Amount (add line 7 to line 6)	8						
Se	ction C - Distributable Amount			Current Year				
1	Adjusted net income for prior year (from Section A, line 8, column A)	1						
2		2						
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3						
4		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-functional	lly integra	ited Type III supporting	g organization				

Schedule A (Form 990) 2021

(see instructions).

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Schedule A (Form 990) 2021

Part	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)						
Sect	ion D - Distributions				Current Year		
1	Amounts paid to supported organizations to accomplish e	xempt purposes		1			
2	Amounts paid to perform activity that directly furthers exe	mpt purposes of support	ed				
	organizations, in excess of income from activity			2			
3	Administrative expenses paid to accomplish exempt purpo	oses of supported organia	zations	3			
4	4 Amounts paid to acquire exempt-use assets 4						
5	Qualified set-aside amounts (prior IRS approval required - p	5					
6	Other distributions (describe in Part VI). See instructions.			6			
7	Total annual distributions. Add lines 1 through 6.						
8	Distributions to attentive supported organizations to which						
	(provide details in Part VI). See instructions.						
9	9 Distributable amount for 2021 from Section C, line 6 9						
10	10 Line 8 amount divided by line 9 amount						
				$\neg \neg$			

Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2021			
	(reasonable cause required - explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2021			
а	From 2016			
b	From 2017			
С	From 2018			
d	From 2019			
е	From 2020			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2021 distributable amount			
i	Carryover from 2016 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2021 from			
	Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2021 distributable amount			
C	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2021, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2021. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2022. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
a	Excess from 2017			
b	Excess from 2018			
c	Excess from 2019			
d	Excess from 2020			
<u>e</u>	Excess from 2021			

Schedule A (Form 990) 2021

Schedule A (Form 990 or 990-EZ) 2021 Page **8**

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE A, PART II - OTHER INC	OME					
DESCRIPTION	2017	2018	2019	2020	2021	TOTAL
MISCELLANEOUS REVENUE	10,683.	225,732.	312,705.	259,651.	357,172.	1,165,943.
TOTALS	10,683.	225,732.	312,705.	259,651.	357,172.	1,165,943.
	========	=========	=========	=========	=========	=========

Schedule B (Form 990)

Schedule of Contributors

OMB No. 1545-0047

2021

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-PF.
► Go to www.irs.gov/Form990 for the latest information.

Employer identification number Name of the organization PRINCETON AREA COMMUNITY FOUNDATION INC. 52-1746234 Organization type (check one): Filers of: Section: X Form 990 or 990-EZ 501(c)(3) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or 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), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), 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 doesn't meet the filing requirements of Schedule B (Form 990).

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

Schedule B (Form 990) (2021)

Name of organization

PRINCETON AREA COMMUNITY FOUNDATION INC.

Employer identification number

	PRINCEION AREA COMMUNITY FOUNDATIO	ON INC.	52-1/46234
Part I	Contributors (see instructions). Use duplicate copies	of Part I if additional space is ne	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	N/A	\$3,513,750	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	N/A	\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	N/A	\$1,017,323	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4_	N/A	\$525,000	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5_	N/A	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	N/A	\$	Person Payroll Noncash (Complete Part II for

noncash contributions.)

Name of organization PRINCETON AREA COMMUNITY FOUNDATION INC.

Employer identification number

52-1746234 Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 7 Χ N/APerson **Payroll** 500,000. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution 8 N/APerson **Payroll** 430,704. Noncash (Complete Part II for noncash contributions.) (d) (a) (b) (c) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 Person **Payroll** Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** \$ Noncash (Complete Part II for noncash contributions.)

PRINCETON AREA COMMUNITY FOUNDATION INC.

Name of organization

Employer identification number 52-1746234

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

	Trondant reports (600 mouracione). God auphoute deplee		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
3_	3,950 SHARES OF MICROSOFT		
		\$\$\$	06/11/2021
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
2	6,700 SHARES OF JOHNSON & JOHNSON COMPA	_	
		\$1,194,175.	08/23/2021
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
2	3,130 SHARES OF JOHNSON & JOHNSON COMPA		
		\$503,241.	01/13/2021
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
2	2,940 SHARES OF JOHNSON & JOHNSON		
		\$\$	01/28/2021
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	3,750 SHARES OF NEXTERA ENERGY	_	
8	500 SHARES OF APPLE 400 SHARES OF EXXON MOBIL		
	500 SHARES OF PFIZER	\$380,213.	06/09/2021
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	50 SHARES OF TELEFLEX	_	
8_	250 SHARES OF TJX COMPANIES		
	400 SHARES OF AT&T 186 SHARES OF VIATRIS	\$50,490	06/09/2021
	TOO DIVINED OF ATTIVITY	\$\psi	
	•	•	

SCHEDULE D (Form 990)

Supplemental Financial Statements ► Complete if the organization answered "Yes" on Form 990,

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

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

IValli	e of the organization		Employer identification number
PR.	INCETON AREA COMMUNITY FOUNDATION IN		52-1746234
Pa	art I Organizations Maintaining Donor Advi	sed Funds or Other Similar Funds or	Accounts.
	Complete if the organization answered		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	240	192
2	Aggregate value of contributions to (during year)	11,777,293.	27,805,273.
3	Aggregate value of grants from (during year)	12,249,814.	9,632,574.
4	Aggregate value at end of year	122,625,754.	134,717,509.
5	Did the organization inform all donors and donor	advisors in writing that the assets held	
	funds are the organization's property, subject to the	organization's exclusive legal control?	
6	Did the organization inform all grantees, donors, a		
	only for charitable purposes and not for the benef	fit of the donor or donor advisor, or for a	
	conferring impermissible private benefit?		X Yes No
Pa	art I Conservation Easements.		
	Complete if the organization answered		
1	Purpose(s) of conservation easements held by the		
	Preservation of land for public use (for example		of a historically important land area
	Protection of natural habitat	Preservation	of a certified historic structure
_	Preservation of open space		
2	Complete lines 2a through 2d if the organization he	eld a qualified conservation contribution in	
	easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
C C	Number of conservation easements on a certified l	* *	2c
d	Number of conservation easements included in (c historic structure listed in the National Register	•	2d
3	Number of conservation easements modified, trai		
3	tax year ▶	insterred, released, extinguished, or term	mated by the organization during the
4	Number of states where property subject to conse	rvation easement is located	
5	Does the organization have a written policy reg		ion handling of
•	violations, and enforcement of the conservation eas		-
6	Staff and volunteer hours devoted to monitoring, inspe		
	>	3,	, , , , , , , , , , , , , , , , , , ,
7	Amount of expenses incurred in monitoring, inspect	ting, handling of violations, and enforcing c	onservation easements during the year
	> \$		· .
8	Does each conservation easement reported on line 2	2(d) above satisfy the requirements of secti	on 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	in Part XIII, describe now the organization reports	conservation easements in its revenue and	a expense statement and
	balance sheet, and include, if applicable, the text of		ial statements that describes the
	organization's accounting for conservation easement		
Pa	Organizations Maintaining Collections		r Similar Assets.
	Complete if the organization answered		
1a	If the organization elected, as permitted under FA of art, historical treasures, or other similar asset	SB ASC 958, not to report in its revenu	e statement and balance sheet works
	service, provide in Part XIII the text of the footnote	to its financial statements that describes the	nese items.
b	If the organization elected, as permitted under FA	ASB ASC 958, to report in its revenue s	tatement and balance sheet works of
	art, historical treasures, or other similar assets hel		earch in furtherance of public service,
	provide the following amounts relating to these iter		> ¢
	(i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X		
2	· ·		
2	If the organization received or held works of an		assets for illiancial gain, provide the
9	following amounts required to be reported under F. Revenue included on Form 990, Part VIII, line 1.	ADD ADC 900 relating to these items:	> \$
a h	Assets included in Form 990 Part X		• • • • • • • • • • • • • • • • • • •

Schedule D (Form 990) 2021

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)	Sche		NCETON AREA C								746234		ge 2
collection tems (check all that apply): a Poulic achibition d Cotter b Scholarly research Cotter Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No Part IV Excrew and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X a beginning balance 16	Pa	rt III Organizations Maintaini	ng Collections of	Art, Histo	rical Tre	easures	s, or (Other S	Similar As	ssets (d	continue	d)	
a Public exhibition de	3	Using the organization's acquisition	n, accession, and	other recor	ds, check	k any o	f the	following	ng that ma	ake sigr	nificant u	se of	its
b Scholarly research Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No Part IV IE Scrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X XIII and complete the following table: ■ Beginning balance ■ Amount ■ Amount ■ Amount ■ Amount ■ Amount ■ Beginning balance ■ It I I I I I I I I I I I I I I I I I I		collection items (check all that appl	y):										
c	а	a Public exhibition d Loan or exchange program											
c	b	Scholarly research		е	Other								
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	С		rations		_								
XIII.	4			s and expla	ain how t	thev fur	ther t	the ora	anization's	exempt	t purpose	e in F	Part
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No Part IV line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 10. C Beginning balance 1 1d	-	-		o and onpi					aa	ожор.	. рапроос		٠٠
assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	5		n solicit or receive	donations o	of art histo	orical tre	eaci ir	es oro	ther simila	r			
Part IV	•									_	Ves		No
Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b if "Yes," explain the arrangement in Part XIII and complete the following table: c Beginning balance d Additions during the year f Ending balance 1c I	Da			anca as po	ar or the t	organiza	1110111	CONCOL		· · · · L	103		110
990, Part X, line 2f. 1 Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?. Yes No	ı a		•	es" on For	m 99∩ F	Part I\/	line (O or re	norted an	amour	nt on For	m	
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? No If Yes, well with the arrangement in Part XIII and complete the following table: C Beginning balance			dion answered Te	C3 OIII OII	111 550, 1	art iv,	11110	J, OI 10	ported ar	amoui	it oil i oi		
Included on Form 990, Part X?	10		too custodian or s	thor intorn	andiary fo	or contr	ibutio	nc or o	other acce	to not			
b If "Yes," explain the arrangement in Part XIII and complete the following table: C Beginning balance 1c 1d	ıa				-						Vac		NI.
C Beginning balance										· · · L	res		NO
C Beginning balance 1c d d d d d d d d d	b	if "Yes," explain the arrangement if	n Part XIII and com	piete the to	llowing tar	oie:				• •			
d Additions during the year. E Distributions during the year E Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 2b Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 2rV ■ Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. 2 Beginning of year balance 5 0, 326, 767. 46, 214, 614. 38, 770, 792. 44, 136, 533. 39, 911, 124. 5 Contributions 5 0, 326, 767. 46, 229. 6, 097, 568. 8, 729, 7041, 988, 779. 6, 099, 920. d Grants or scholarships 8 89, 824. 1, 292, 767. 866, 813. 2, 947, 919. 962, 600. d Grants or scholarships 8 89, 824. 1, 1292, 787. 866, 813. 2, 947, 919. 962, 600. d Other expenditures for facilities and programs 7 47, 475. 738, 125. 719, 100. 912, 258. f Administrative expenses g End of year balance 57, 662, 612. 50, 326, 767. 46, 214, 634. 38, 770, 702. 44, 361, 653. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ► 100, 0000 % b Permanent endowment ► NONE 7 Term endowment ► NONE 8 NONE % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations 1 If "Yes" on line 3a(ii), are the related organization's endowment funds. Part VI And, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Describe in Part XIII the intended uses of the organization's endowment funds. b Buildings c Leasehold improvements 6 G3, 318, 63, 318, NONE 6 Coher — NONE						•				Amount			
Expression Extributions during the year Forming balance Straining balance S	С					- t	1c						
Finding balance 11 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No bif 'Yes', explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII 1. No bif 'Yes', explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII 1. No bif 'Yes' on Form 990, Part IV, line 10. Part VIV Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Part VIV	d					, t	1d						
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b I* Yes,** explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Yes No Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (d) Three years back (e) Four years back (e) Four years back 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance (a) Carrent year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance (a) Carrent year (a) Tree years back (d) Three years back (e) Four years back 1b Contributions (a) Carrent year (b) Prior years (a) Carrent year (a)	е					- t	1e						
Part V Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.	f												
Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.		=										Щ	No
Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.	b		n Part XIII. Check h	ere if the e	xplanation	has be	en pro	ovided o	n Part XIII				
(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (d) Three years back (d) Factor (d)	Pa												
1a Beginning of year balance 50,326,767. 46,214,634. 38,770,702. 44,361,653. 39,931,124. b Contributions 579,340. 54,827. 319,171. 64,847. 214,467. c Net investment earnings, gains, and losses 7,646,329. 6,097,568. 8,729,704. -1,988,779. 6,090,920. d Grants or scholarships 889,824. 1,292,787. 866,818. 2,947,919. 962,600. e Other expenditures for facilities and programs 747,475. 738,125. 719,100. 912,258. f Administrative expenses 77,662,612. 50,326,767. 46,214,634. 38,770,702. 44,361,653. g End of year balance 57,662,612. 50,326,767. 46,214,634. 38,770,702. 44,361,653. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ NONE % NONE % T Ferm endowment ▶ NONE % NONE % NONE % Yes No. (i) Unrelated organizations 3a(i) X 3a(ii) X (ii) Related organizations 3a(ii) X 3a(ii) X 3a(ii) Related organizations 3a(ii) X 3a(ii) X 4 Describe in Part		Complete if the organiza	tion answered "Ye	es" on For	m 990, F	Part IV,	line '	10.					
b Contributions			(a) Current year	(b) Prio	r year	(c) Two	o years	back	(d) Three ye	ars back	(e) Four y	ears b	ack
b Contributions	1a	Beginning of year balance	50,326,767.	46,2	14,634.	38,7	770,70	02.	44,361	L,653.	39,9	31,12	4.
c Net investment earnings, gains, and losses	_		579,340.		54,827.	3	319,17	71.	64	64,847.		214,467	
and losses													
d Grants or scholarships	·		7,646,329.	6,09	97,568.	8.7	729.70	04.	-1.988.779.		6,090,		0.
e Other expenditures for facilities and programs													
and programs					,		,		_,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,	
f Administrative expenses .	е	·		7.	17 175		720 12		710	100	۵	12 25	0
g End of year balance		-		,	17,173.	,	730,12	719,100.		,,100.		12,23	
2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ 100.0000 % b Permanent endowment ▶ NONE % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations . 3a(ii) x (ii) Related organizations . 3a(ii) x b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? . 3b □ Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (other) (other) (other) (other) (other) (other) (other) (a) Book value (d) Book value (d) Book value (d) Buildings . (e) Leasehold improvements . (finvestment) (105,341. 90,944. 14,397. e) Other . (other in None)	f	-	55.660.610	50.0		4.5.6		+	20.55				
a Board designated or quasi-endowment ▶ 100.0000 % b Permanent endowment ▶ NONE % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations. (ii) Related organizations. b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?. 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation 1a Land. b Buildings c Leasehold improvements. 63,318. 63,318. NONE d Equipment. 105,341. 90,944. 14,397. e Other	g			-					38,770	J,702.	44,3	01,05	
b Permanent endowment ► NONE % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations. (ii) Related organizations. 3a(ii) X 3a(ii) X 3a(ii) X 3a(ii) X 3a(ii) X 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation (d) Book value depreciation b Buildings c Leasehold improvements. 63,318. 63,318. NONE d Equipment. 105,341. 90,944. 14,397. e Other	2				e (line 1g,	column	(a)) h	neld as:					
Term endowment ▶ NONE % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations	а			%									
The percentages on lines 2a, 2b, and 2c should equal 100%. Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations. (ii) Related organizations. (iii) Related organizations. (iii) Related organizations listed as required on Schedule R?. (iv) Tyes" on line 3a(ii), are the related organizations listed as required on Schedule R?. 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation (a) Cost or other basis (other) (b) Cost or other basis (c) Accumulated depreciation (c) Accumulated depreciation (d) Book value (a) Buildings C Leasehold improvements C Leasehold improvements (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation (b) Cost or other basis (c) Accumulated depreciation (c) Accumulated depreciation (d) Book value	b												
Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations. (ii) Related organizations. (iii) Related organizations. (i	С												
organization by: (i) Unrelated organizations. (ii) Related organizations. (iii) Related organ													
(i) Unrelated organizations	3a		the possession of t	he organiza	ation that	are held	d and	adminis	stered for t	he			
(ii) Related organizations . 3a(ii) x b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? . 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (investment) (other) (other) (other) (other) (d) Book value (d) B											-	es	No
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?		(i) Unrelated organizations											Χ
Describe in Part XIII the intended uses of the organization's endowment funds. Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value b Buildings c Leasehold improvements. 63,318. 63,318. NONE d Equipment. 105,341. 90,944. 14,397. e Other NONE		(ii) Related organizations									3a(ii)		X
Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (d) Book valu	b	If "Yes" on line 3a(ii), are the relate	ed organizations liste	ed as require	ed on Sch	edule R	?				3b		
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation	4	Describe in Part XIII the intended u	ises of the organiza	ation's endo	wment fur	nds.							
Calcolor of property	Pa	rt VI Land, Buildings, and Equ	ıipment.	/ II		D () (44 . 0		000 D	(V P	40	
1a Land													
b Buildings 63,318 63,318 NONE c Leasehold improvements 105,341 90,944 14,397 e Other NONE	_	Description of property					1515			(d	, book valu	ie.	_
b Buildings 63,318 63,318 NONE c Leasehold improvements 105,341 90,944 14,397 e Other NONE	1a	Land			<u> </u>								
c Leasehold improvements 63,318 63,318 NONE d Equipment 105,341 90,944 14,397 e Other NONE	b												
d Equipment		_				63,31	8.	б	3,318.			NC	ONE
e Other NONE	_	-			1						1 4		
									~ , <i>></i> 1 1 .			-, 57	· ·
	_			m 990. Part	X. colum			. .)	•		1 2	1 30	7

Schedule D (Form 990) 2021

Part VII Investments - Other Securities. Complete if the organization answered	d "Yes" on Form 990). Part IV. line 11b. See Form 990	. Part X. line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuar Cost or end-of-year mark	tion:
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A) ALTERNATIVE - MULTI-STRATEGY	50,357,419.	FMV	
(B) ALTERNATIVE - L/S STRATEGY	3,157,274.	FMV	
(C) ALTERNATIVE - EQUITY FUNDS	63,157,255.	FMV	
(D) ALTERNATIVE - REAL ASSETS	10,370,108.	FMV	
(E) ALTERNATIVE - NAV INVESTMENTS	26,764,635.	FMV	
(F) ALTERNATIVE - VENTURE CAPITAL	16,784,379.	FMV	
(G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	170,591,070.		
Part VIII Investments - Program Related. Complete if the organization answered	d "Yes" on Form 990), Part IV, line 11c. See Form 990	, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valua Cost or end-of-year mark	
(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	d "Yes" on Form 990), Part IV, line 11d. See Form 990	, Part X, line 15.
(a) De	escription		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)

1.	(a) Description of liability	(b) Book value
(1) Federal income taxes		
(2)FUNDS HELD FOR OTHERS		77,373,403.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col	l. (B) line 25.).	77,373,403.

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII .

(9)

Part	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	n.	2710201
1	Total revenue, gains, and other support per audited financial statements	1	30,321,588.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
– a	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
	Bollated convices and doe of identities 1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,		
C	the developed of prior your granter, i.e.,		
d	, , , , , , , , , , , , , , , , , , , ,	20	0 500 450
е	Add lines 2a through 2d	2e	9,528,452.
3	Subtract line 2e from line 1	3	20,793,136.
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		
b	Other (Describe in Part XIII.)		
_ C	Add lines 4a and 4b	4c	3,829.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	20,796,965.
Part	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	1	
1	Total expenses and losses per audited financial statements	1	21,012,348.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	21,012,348.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 3,829.		
b	Other (Describe in Part XIII.) 4b 29,867.		
C	Add lines 4a and 4b	4c	33,696.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	21,046,044.
Part	XIII Supplemental Information.	_	,,
Provid	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; F XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform	Part V, nation	line 4; Part X, line
SEE	SUPPLEMENTAL PAGE		

Part XIII Supplemental Information (continued)

SCHEDULE D, PART V, LINE 4

THE COMMUNITY FOUNDATION'S QUASI-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 OR STATE INCOME TAXES. HOWEVER, REVENUE EARNED ON ACTIVITIES WHICH ARE UNRELATED TO THE COMMUNITY FOUNDATION'S EXEMPT PURPOSE IS TAXABLE. THE COMMUNITY FOUNDATION'S UNRELATED BUSINESS INCOME IS GENERATED FROM INVESTMENT INCOME FROM CERTAIN OF ITS INVESTMENTS IN ALTERNATIVE ASSETS. THE COMMUNITY FOUNDATION HAD NO INCOME TAXES ASSESSED FOR THE YEARS ENDING DECEMBER 31, 2021 AND 2020.

THE COMMUNITY FOUNDATION FOLLOWS THE PRONOUNCEMENT RELATED TO ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES AND THERE WERE NO UNCERTAIN TAX POSITIONS AT DECEMBER 31, 2021 AND 2020. IN ADDITION, NO INCOME TAX RELATED PENALTIES OR INTEREST HAVE BEEN RECORDED FOR THE YEARS ENDED DECEMBER 31, 2021 AND 2020.

Schedule D (Form 990) 2021

Part XIII Supplemental Information (continued)

SCHEDULE D, PART XI, LINE 2D

CHANGE IN VALUE OF SPLIT INTEREST AGREEMENT \$46,742.

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. ► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

52-1746234

PRI	NCETON AREA COMMUNITY I	FOUNDATION	INC.		52-174623	34
Part	General Information o Form 990, Part IV, line 14l		Outside the	United States. Comple	ete if the organization a	answered "Yes" on
	For grantmakers. Does the org					
	other assistance, the grantees'					
	award the grants or assistance?					X Yes No
	For grantmakers. Describe in I	Part V the org	anization's pro	ocedures for monitoring t	the use of its grants and	d other assistance
	outside the United States.					
3	Activities per Region. (The follow	ving Part I, line	3 table can be	e duplicated if additional sp	ace is needed.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1)	CENTRAL AMERICA/CARIBBEAN	NONE	NONE	INVESTMENTS	NONE	16,548,096.
(')	CENTRED TWENTERIN, CHREDDENIA	NONE	NONE	INVESTMENTS	NONE	10,310,030.
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
(11)						
(12)						
(13)						
(14)						
(15)						
(16)						
(17)	Subtotal	MONTE	NONE			16 549 006
3a b	Subtotal Total from continuation	NONE	NONE			16,548,096.
~	sheets to Part I					
С	Totals (add lines 3a and 3b)	NONE	NONE			16,548,096.

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

Schedule F (Form 990) 2021

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	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
<u>(11)</u>									
(12)									
(13)									
(14)									
(15)									
(16)									

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
<u>(10)</u>							
<u>(11)</u>							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
<u>(18)</u>							

Part	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) No	
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately 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; don't file with Form 990) Yes X No	
3	Did the organization have an ownership interest in a foreign corporation during the tax year? 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)	
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," 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) 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)	
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If	

Instructions for Form 5713; don't file with Form 990)

Schedule F (Form 990) 2021

Yes

Part V

Supplemental Information

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 THE GRANTEE'S IRS 990 TAX RETURNS, AND IN MANY CASES,
A REVIEW OF THE GRANTEE'S AUDITED FINANCIAL STATEMENTS. STAFF ALSO REVIEW
WEBSITES, 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

Part V

Supplemental Information

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).

EDUCATIONAL INSTITUTIONS IN SUPPORT OF SCHOLARSHIP RECIPIENTS ARE

MONITORED EACH YEAR TO DETERMINE THAT RECIPIENTS ARE ENROLLED AND

MAINTAIN COMPLIANCE WITH SCHOLARSHIP GUIDELINES.

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Schedule I (Form 990) 2021

Name of the organization						Employer identificat	ion number
PRINCETON AREA COMMUNITY FOUNDAT	ION INC.					52-1746234	
Part I General Information on Grants a	nd Assistanc	е					
 Does the organization maintain records to the selection criteria used to award the gratical describes in Part IV the organization's process. Part II Grants and Other Assistance to Part IV, line 21, for any recipient. 	ants or assistance edures for mor Domestic Or	ee? nitoring the use ganizations ar	of grant funds in th	e United States.	nplete if the organiz	ation answered "Y	x Yes No
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 noncash assistance	(h) Purpose of grant or assistance
(1) ABILITIES OF NORTHWEST JERSEY, INC.							
264 RT. 31 NORTH WASHINGTON, NJ 07882	22-2053518	501(C)(3)	12,500.				GENERAL OPERATING
(2) ABLE FORCE EMPLOYMENT INC.							
53 BLINKER DRIVE DOYLESTOWN, PA 18901	83-1264728	501(C)(3)	10,000.				GENERAL OPERATING S
(3) ABQ CHARTER ACADEMY							
405 DR. MARTIN LUTHER KING JR. AVE. NE	80-0107700	501(C)(3)	25,000.				GENERAL OPERATING S
(4) ACCESS PHILANTHROPY CHARITIES							
2100 STEVENS AVENUE MINNEAPOLIS, MN 55404	38-3777419	501(C)(3)	33,333.				SUPPORT FOR THE CHA
(5) ACTORSNET							
635 N. DELMORR AVE MORRISVILLE, PA 19067	20-3349308	501(C)(3)	5,750.				BUILDING FOR THE FU
(6) ADELPHI CHAMBER ORCHESTRA							
PO BOX 262 RIVER EDGE, NJ 07661	23-7328670	501(C)(3)	7,700.				NEW JERSEY ARTS AND
(7) ADVENTURE CYCLING ASSOCIATION							
150 E. PINE STREET MISSOULA, MT 59802	23-7427629	501(C)(3)	10,000.				GENERAL SUPPORT
(8) AFGHAN GIRLS FINANCIAL ASSISTANCE FUND							
1378 ROUTE 206, SUITE 6-279	47-5527310	501(C)(3)	25,000.				GENERAL SUPPORT
(9) ALGONQUIN ARTS THEATRE							
60 ABE VOORHEES DRIVE MANASQUAN, NJ 08736	22-3195260	501(C)(3)	18,413.				NEW JERSEY ARTS AND
(10) ALICE PAUL INSTITUTE							
P.O. BOX 1376 MT. LAUREL, NJ 08054	22-2545683	501(C)(3)	10,000.				NEW JERSEY ARTS AND
(11) ALL CHILDREN?S ART CENTER OF NJ							
15 JOHN STREET BOUND BROOK, NJ 08805	27-1480174	501(C)(3)	8,800.				NEW JERSEY ARTS AND
(12) ALLAIRE VILLAGE INC.							
4263 ATLANTIC AVE FARMINGDALE, NJ 07727	21-0745896	501(C)(3)	15,600.				NEW JERSEY ARTS AND
2 Enter total number of section 501(c)(3) an	d government	organizations lis	sted in the line 1 tal	ble			546
3 Enter total number of other organizations I	listed in the line	1 table					

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Name of the organization						Employer identificat	ion number	
PRINCETON AREA COMMUNITY FOUNDATION INC.						52-1746234		
Part I General Information on Grants and	d Assistanc	e						
 Does the organization maintain records to so the selection criteria used to award the grant Describe in Part IV the organization's proced 	s or assistand dures for mor	e? nitoring the use	of grant funds in the	e United States.			Yes No	
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the		_					'es" on Form 990,	
(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 noncash assistance	(h) Purpose of grant or assistance	
(1) ALLIED ARTS FOUNDATION								
3518 FREMONT AVE N #521 SEATTLE, WA 98103	91-0829974	501(C)(3)	10,000.				OPEN SPACE	
(2) ALOHA DIAPER BANK								
333 WARD AVE SUITE 3, PMB 119	85-2359096	501(C)(3)	20,000.				GENERAL OPERATING SU	
(3) AMERICAN ASSOCIATION FOR THE ADVANCEMENT OF								
1200 NEW YORK AVE NW WASHINGTON, DC 20005	53-0196568	501(C)(3)	14,786.				GENERAL SUPPORT	
(4) AMERICAN CIVIL LIBERTIES NJ								
POST OFFICE BOX 32159 NEWARK, NJ 07102	22-2010593	501(C)(3)	16,750.				GENERAL SUPPORT	
(5) AMERICAN CIVIL LIBERTIES UNION FOUNDATION N								
125 BROAD STREET, 18TH FLOOR	13-6213516	501(C)(3)	10,200.				GENERAL SUPPORT	
(6) AMERICAN RED CROSS OF CENTRAL NEW JERSEY								
209 FAIRFIELD RD FAIRFIELD, NJ 07004-2420	53-0196605	501(C)(3)	12,600.				GENERAL SUPPORT	
(7) AMERICAN REPERTORY BALLET/PRINCETON BALLET								
301 N. HARRISON PRINCETON, NJ 08540	21-0732575	501(C)(3)	88,200.				GENERAL SUPPORT	
(8) AMERICAN THEATER GROUP								
57 FARMS ROAD CIRCLE	27-1141524	501(C)(3)	7,500.				NEW JERSEY ARTS AND	
(9) ANCHOR HOUSE FOUNDATION								
PO BOX 2357 TRENTON, NJ 08607	22-2898173	501(C)(3)	51,000.				TO SUPPORT THE ANCHO	
(10) ANCHOR HOUSE, INC.								
482 CENTRE STREET TRENTON, NJ 08611	22-2229995	501(C)(3)	6,500.				\$1,000.00 TO ANCHOR	
(11) ANDREW J. YOUNG FOUNDATION INC								
260 14TH STREET NW ATLANTA, GA 30318	58-2591049	501(C)(3)	7,500.				GENERAL OPERATING SU	
(12) ARIEL RIVKA DANCE								
341 MONMOUTH STREET, 408D	47-4452473	501(C)(3)	21,250.				NEW JERSEY ARTS AND	
2 Enter total number of section 501(c)(3) and	government (organizations lis	sted in the line 1 tal	ole				
3 Enter total number of other organizations lis-	ted in the line	1 table						

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

► Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Name of the organization Employer identification number PRINCETON AREA COMMUNITY FOUNDATION INC. 52-1746234 **General Information on Grants and Assistance** 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Yes No 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on 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. (f) Method of valuation (book, FMV, appraisal, other) (c) IRC section 1 (a) Name and address of organization (b) EIN (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant (if applicable) or government grant cash assistance noncash assistance or assistance (1) ARM IN ARM 1 NORTH JOHNSTON AVE STE A 230 22-3198464 501(C)(3) 306,600 MOBILE FOOD DELIVERY (2) ART HOUSE PRODUCTIONS 14-1993156 30,000. 100 SHEARWATER CT E #84 501(C)(3) NEW JERSEY ARTS AND (3) ARTISTIC REALIZATION TECH 11 WHIPPOORWILL WAY BELLE MEAD, NJ 08502 22-3421254 501(C)(3) 10,000. SUPPORTING THE 2021 (4) ARTPRIDE NEW JERSEY FOUNDATION, INC. 22-3460723 501(C)(3) 27,734. 432 HIGH STREET BURLINGTON, NJ 08016 NEW JERSEY ARTS AND (5) ARTS BY THE PEOPLE 14 ELM STREET MORRISTOWN, NJ 07960 27-1256226 501(C)(3) 15,000. NEW JERSEY ARTS AND (6) ARTS COUNCIL OF PRINCETON 118,200 102 WITHERSPOON STREET PRINCETON, NJ 08542 22-6108090 501(C)(3) GENERAL SUPPORT (7) ARTS COUNCIL OF THE MORRIS AREA DBA MORRIS 501(C)(3) 67,500. 14 MAPLE AVENUE SUITE 301 22-2012936 NEW JERSEY ARTS AND (8) ARTS ED NJ INC 432 HIGH STREET BURLINGTON, NJ 08016 47-3402518 501(C)(3) 12,500. NEW JERSEY ARTS AND (9) ARTS FOR KIDS INC 49 RIDGEHURST RD WEST ORANGE, NJ 07052 22-3764489 501(C)(3) 16,000. NEW JERSEY ARTS AND (10) ARTS HORIZONS 1 GRAND AVE, SUITE 7 ENGLEWOOD, NJ 07631 22-2418718 501(C)(3) 26,250. NEW JERSEY ARTS AND (11) ARTSPOWER, INC. 9 SAND PARK ROAD CEDAR GROVE, NJ 07009 59-2292246 501(C)(3) 14,000. NEW JERSEY ARTS AND (12) ARTWORKS TRENTON INC 22-1803117 | 501(C)(3) 19 EVERETT ALLEY TRENTON, NJ 08611 113,500 NEW JERSEY ARTS AND

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Schedule I (Form 990) 2021

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047

Schedule I (Form 990) 2021

Department of the Treasury Internal Revenue Service Name of the organization Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Employer identification number

PRINCETON AREA COMMUNITY FOUNDATION INC.						52-1746234	
Part I General Information on Grants and	d Assistanc	е					
 Does the organization maintain records to so the selection criteria used to award the grant Describe in Part IV the organization's proced 	s or assistand	e?					Yes No
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the		_					es" on Form 990,
(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 noncash assistance	(h) Purpose of grant or assistance
(1) ASBURY PARK ARTS COUNCIL							
810 FOURTH AVENUE ASBURY PARK, NE 07712	83-3954011	501(C)(3)	17,500.				NEW JERSEY ARTS AND
(2) ASBURY PARK MUSIC FOUNDATION							
621 LAKE AVENUE, UNIT 1C	45-2675974	501(C)(3)	12,500.				NEW JERSEY ARTS AND
(3) ASSOCIATION OF LOS ANGELES PHYSICIANS OF IN							
3148 FOND DRIVE ENCINO, CA 91436	46-3341779	501(C)(3)	10,000.				GENERAL OPERATING SU
(4) ATLANTIC CITY ARTS FOUNDATION							
PO BOX 3 ATLANTIC CITY, NJ 08404	45-2409043	501(C)(3)	37,500.				NEW JERSEY ARTS AND
(5) ATLANTIC CITY BALLET							
BOARDWALK HALL 2301 BOARDWALK	22-2411345	501(C)(3)	22,500.				NEW JERSEY ARTS AND
(6) AXELROD PERFORMING ARTS CENTER							
100 GRANT AVENUE DEAL, NJ 07723	27-2362887	501(C)(3)	25,000.				NEW JERSEY ARTS AND
(7) BARAT FOUNDATION							
2 CENTER STREET NEWARK, NJ 07102	22-3509869	501(C)(3)	22,500.				NEW JERSEY ARTS AND
(8) BARD COLLEGE							
PO BOX 5000 ANNANDALE-ON-HUDSON, NY 12504	14-1713034	501(C)(3)	25,000.				BARD PRISON INITIATI
(9) BARNEGAT BAY DECOY & BAYMEN'S MUSEUM							
120 WEST MAIN STREEET TUCKERTON, NJ 08087	22-3063346	501(C)(3)	10,000.				NEW JERSEY ARTS AND
(10) BAY ATLANTIC SYMPHONY							
1616 PACIFIC AVE, SUITE 308	22-2668832	501(C)(3)	7,500.				NEW JERSEY ARTS AND
(11) BAYSHORE CENTER AT BIVALVE							
2800 HIGH STREET PORT NORRIS, NJ 08349	22-3019683	501(C)(3)	37,500.				NEW JERSEY ARTS AND
(12) BIG BROTHERS BIG SISTERS OF MERCER COUNTY							
535 EAST FRANKLIN STREET TRENTON, NJ 08610	06-1653897	501(C)(3)	60,250.				GENERAL SUPPORT
2 Enter total number of section 501(c)(3) and3 Enter total number of other organizations lis	•	•					

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

2021

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Schedule I (Form 990) 2021

Name of the organization						Employer identificat	ion number
PRINCETON AREA COMMUNITY FOUNDATION INC.						52-1746234	
Part I General Information on Grants ar	nd Assistanc	е				1	
 Does the organization maintain records to set the selection criteria used to award the grant Describe in Part IV the organization's process Part II Grants and Other Assistance to I 	nts or assistand edures for mor	e?nitoring the use	of grant funds in th	e United States.			Yes No
Part IV, line 21, for any recipient		_			. •		,
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 noncash assistance	(h) Purpose of grant or assistance
(1) BLACK FAIRY GODMOTHER FOUNDATION							
472 BEARDSLEY AVENUE BLOOMFIELD, NJ 07003	86-1228717	501(C)(3)	25,000.				GENERAL OPERATING SU
(2) BLACK LILY INC. AKA BLACKSTAR PROJECTS							
1901 SOUTH 9TH STREET, BOK 314	75-3129761	501(C)(3)	25,000.				GENERAL OPERATING SU
(3) BLAIRSTOWN LIVE-ARTS, INC.							
PO BOX 548 BLAIRSTOWN, NJ 07825-0548	47-5522668	501(C)(3)	7,500.				NEW JERSEY ARTS AND
(4) BLUE BEARS SPECIAL MEALS							
31 RANDALL ROAD PRINCETON, NJ 08540	82-4116000	501(C)(3)	125,926.				GENERAL SUPPORT
(5) BONEFISH & TARPON TRUST							
2937 SW 27TH AVENUE SUITE 203	65-0988321	501(C)(3)	25,000.				THE MARTIN COUNTY FU
(6) BORDENTOWN HISTORICAL SOCIETY							
302 FARNSWORTH AVENUE BORDENTOWN, NJ 08505	23-7209711	501(C)(3)	42,500.				SUPPORTING THE RESTO
(7) BOROUGH OF HOPEWELL							
88 EAST BROAD STREET HOPEWELL, NJ 08525	11-1111111	501(C)(3)	80,000.				REPAIRS TO THE VOLUN
(8) BOTTO HOUSE AMERICAN LABOR MUSEUM, INC.							
83 NORWOOD STREET HALEDON, NJ 07508	22-2377255	501(C)(3)	10,000.				NEW JERSEY ARTS AND
(9) BOYS & GIRLS CLUBS OF MERCER COUNTY, INC.							
212 CENTRE STREET TRENTON, NJ 08611	21-0634556	501(C)(3)	150,687.				COVID-19 RELIEF AND
(10) BOYS & GIRLS CLUBS OF MARTIN COUNTY							
PO BOX 910 HOBE SOUND, FL 33475	65-0253002	501(C)(3)	30,000.				GENERAL SUPPORT
(11) BRENNAN CENTER FOR JUSTICE							
120 BROADWAY - SUITE 1750	13-3839293	501(C)(3)	14,000.				THE DEVELOPMENT DEPA
(12) BRICK CHILDREN'S COMMUNITY THEATRE (BCCT)							
270 CHAMBERS BRIDGE ROAD BRICK, NJ 08723	22-3209685	501(C)(3)	7,500.				NEW JERSEY ARTS AND
2 Enter total number of section 501(c)(3) and3 Enter total number of other organizations list	•	•					

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047
2021

Department of the Treasury Internal Revenue Service Name of the organization Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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Schedule I (Form 990) 2021

Employer identification number

PRINCETON AREA COMMUNITY FOUNDATION INC.						52-1746234	
Part I General Information on Grants and	d Assistanc	е					
 Does the organization maintain records to so the selection criteria used to award the grant Describe in Part IV the organization's proced 	s or assistand	e?					Yes No
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the		•					es" on Form 990,
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 noncash assistance	(h) Purpose of grant or assistance
(1) BRIDGETON AREA POLICE ATHLETIC LEAGUE							
330 FAYETTE STREET BRIDGETON, NJ 08302	20-5693785	501(C)(3)	10,000.				GENERAL OPERATING SU
(2) BROOKLYN CHILDREN'S MUSEUM CORP.							
145 BROOKLYN AVENUE BROOKLYN, NY 11213	11-2495664	501(C)(3)	50,000.				CONTRIBUTION TO THE
(3) CALVARY BAPTIST CHURCH							
3 EAST BROAD STREET HOPEWELL, NJ 08525	21-0632116	501(C)(3)	5,700.				THE CHUBBY'S PROJECT
(4) CAMDEN AREA HEALTH EDUCATION CENTER							
514 COOPER STREET CAMDEN, NJ 08102	22-2358827	501(C)(3)	10,000.				GENERAL SUPPORT
(5) CAMDEN COUNTY HISTORICAL SOCIETY							
1900 PARK BOULEVARD CAMDEN, NJ 08103	21-6008076	501(C)(3)	7,500.				NEW JERSEY ARTS AND
(6) CAMDEN FIREWORKS INCORPORATED							
1813 SOUTH BROADWAY CAMDEN, NJ 08104	47-3674290	501(C)(3)	8,750.				NEW JERSEY ARTS AND
(7) CAMDEN REPERTORY THEATER COMMUNITY DEVELOPM							
445 MECHANIC STREET CAMDEN, NJ 08104	26-2729699	501(C)(3)	37,500.				NEW JERSEY ARTS AND
(8) CAPE COD HEALTHCARE FOUNDATION							
POST OFFICE BOX 370 HYANNIS, MA 02601	04-3475950	501(C)(3)	10,000.				THE LIGHTKEEPERS PRO
(9) CAPE MAY STAGE							
31 PERRY STREET CAPE MAY, NJ 08204	22-2937929	501(C)(3)	15,000.				NEW JERSEY ARTS AND
(10) CAPITAL AREA YMCA							
431 PENNINGTON AVENUE TRENTON, NJ 08618	21-0635052	501(C)(3)	20,000.				COVID-19 RELIEF AND
(11) CAPITAL CITY COMMUNITY FOUNDATION D/B/A I A							
P.O. BOX 1743 TRENTON, NJ 08607-1743	61-1529153	501(C)(3)	50,000.				GENERAL SUPPORT
(12) CAPITAL HARMONY WORKS							
PO BOX 5206 TRENTON, NJ 08638	22-3559611	501(C)(3)	93,400.				GENERAL SUPPORT
2 Enter total number of section 501(c)(3) and3 Enter total number of other organizations list	-	•					

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047
2021

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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Name of the organization						Employer identificat	ion number		
PRINCETON AREA COMMUNITY FOUNDATION INC.						52-1746234			
Part I General Information on Grants and	d Assistanc	е							
 Does the organization maintain records to so the selection criteria used to award the grant Describe in Part IV the organization's proced 	s or assistand	e?					Yes No		
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the		_					es" on Form 990,		
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 noncash assistance	(h) Purpose of grant or assistance		
(1) CAPITAL HEALTH SYSTEM FOUNDATION									
TWO CAPITAL WAY PENNINGTON, NJ 08534	22-2230681	501(C)(3)	10,000.				THE HOPEWELL CAMPUS		
(2) CAPITAL SINGERS OF TRENTON									
P.O. BOX 5297 TRENTON, NJ 08638	20-5167648	501(C)(3)	8,660.				NEW JERSEY ARTS AND		
(3) CAROLYN DORFMAN DANCE COMPANY									
2780 MORRIS AVENUE, SUITE 2C	22-2433530	501(C)(3)	29,475.				NEW JERSEY ARTS AND		
(4) CASA FOR CHILDREN OF MERCER & BURLINGTON CO									
1450 PARKSIDE AVENUE - SUITE 22	22-3770968	501(C)(3)	60,250.				GENERAL SUPPORT		
(5) CATHOLIC YOUTH ORGANIZATION OF MERCER COUNT									
920 SOUTH BROAD STREET TRENTON, NJ 08611	22-2054324	501(C)(3)	8,000.				COVID-19 RELIEF AND		
(6) CAVANKERRY PRESS									
303 MAIN ST FORT LEE, NJ 07024	22-3686265	501(C)(3)	16,875.				NEW JERSEY ARTS AND		
(7) CENTER FOR FAMILY REPRESENTATION									
40 WORTH STREET, SUITE 605	51-0419496	501(C)(3)	10,000.				GENERAL OPERATING SU		
(8) CENTER FOR LARGE LANDSCAPE CONSERVATION DBA									
P.O. BOX 1587 BOZEMAN, MT 59771	27-1226829	501(C)(3)	6,000.				IN HONOR OF CYNTHIA		
(9) CENTER FOR MODERN DANCE EDUCATION									
84 EUCLID AVENUE HACKENSACK, NJ 07601	22-1699375	501(C)(3)	14,000.				NEW JERSEY ARTS AND		
(10) CENTRASTATE HEALTHCARE FOUNDATION									
225 WILLOW BROOK ROAD, SUITE 5	22-2383065	501(C)(3)	10,000.				GENERAL OPERATING SU		
(11) CENTURION MINISTRIES									
1000 HERRONTOWN ROAD PRINCETON, NJ 08540	22-2563979	501(C)(3)	32,000.				TO AID IN CENTURION		
(12) CHAPIN SCHOOL, PRINCETON									
4101 PRINCETON PIKE PRINCETON, NJ 08540	21-0688891	501(C)(3)	5,250.				GENERAL SUPPORT		

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

2021

OMB No. 1545-0047

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PRINCETON AREA COMMUNITY FOUNDATION INC.						52-1746234	
Part I General Information on Grants and	d Assistanc	е					
 Does the organization maintain records to s the selection criteria used to award the grant Describe in Part IV the organization's proced Part II Grants and Other Assistance to D 	ts or assistand dures for mor comestic Or	ee? nitoring the use ganizations a i	of grant funds in the	e United States.	nplete if the organiz	ation answered "Y	Yes No
Part IV, line 21, for any recipient the 1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	,000. Part II can I	(e) Amount of non- cash assistance	additional space is r (f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) CHEF LOU'S ARMY							
152 MAIN STREET MANASQUAN, NJ 08736	85-0764940	501(C)(3)	25,000.				GENERAL OPERATING SU
(2) CHILDREN'S INN AT NIH							
7 WEST DRIVE BETHESDA, MD 20814-1509	52-1638207	501(C)(3)	10,000.				ANNUAL GIVING SUPPOR
(3) CHILDREN'S LAW CENTER INCORPORATED							
501 THIRD STREET, NW 8TH FLOOR	52-1961588	501(C)(3)	15,000.				GENERAL OPERATING SU
(4) CHIMP HAVEN							
13600 CHIMPANZEE PLACE KEITHVILLE, LA 71047	74-2766663	501(C)(3)	10,000.				GENERAL OPERATING SU
(5) CITY HARVEST							
6 EAST 32ND STREET - 5TH FLOOR	13-3170676	501(C)(3)	55,500.				COVID-19 IN MEMORY O
(6) COALITION FOR THE HOMELESS							
129 FULTON STREET NEW YORK, NY 10038	13-3072967	501(C)(3)	20,500.				GENERAL SUPPORT
(7) COLAB ARTS, INC.							
P.O. BOX 887 NEW BRUNSWICK, NJ 08903	27-2611798	501(C)(3)	28,125.				NEW JERSEY ARTS AND
(8) COLLEGE OF THE ATLANTIC							
105 EDEN STREET BAR HARBOR, ME 04609	23-7032625	501(C)(3)	10,000.				GENERAL SUPPORT
(9) COLORADO HEALING FUND							
1245 CHAMPA STREET DENVER, CO 80204	82-4598761	501(C)(3)	25,000.				GENERAL SUPPORT ON E
(10) COMITE DE APOYO A LOS TRABAJADORES AGRICOLA							
4 DELSEA DR. SOUTH GLASSBORO, NJ 08028	22-2588350	501(C)(3)	10,000.				GENERAL OPERATING SU
(11) COMMUNITY HEALTH NFP							
2611 W. CHICAGO AVENUE CHICAGO, IL 60622	36-3831793	501(C)(3)	30,000.				GENERAL OPERATING SU
(12) COMMUNITY IN CRISIS INC.							
9 CHURCH ST. BERNARDSVILLE, NJ 07924	81-3303136	501(C)(3)	20,000.				GENERAL OPERATING SU

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047

Schedule I (Form 990) 2021

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PRINCETON AREA COMMUNITY FOUNDATION INC.						52-1746234		
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 Does the organization maintain records to so the selection criteria used to award the grant Describe in Part IV the organization's proced 	s or assistand lures for mor	e? nitoring the use	of grant funds in the	e United States.			Yes No	
Part IV, line 21, for any recipient the		_					es on Form 990,	
(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 noncash assistance	(h) Purpose of grant or assistance	
(1) COMMUNITY LOAN FUND OF NEW JERSEY, INC. (DB								
108 CHURCH STREET, 3RD FLOOR	22-2872262	501(C)(3)	25,000.				THE EAST TRENTON COL	
(2) CONGREGATION KEHILAT SHALOM								
SYNAGOGUE OFFICE BELLE MEAD, NJ 08502	22-2549253	501(C)(3)	5,687.				GENERAL SUPPORT - FR	
(3) CONSERVANCY OF SOUTHWEST FLORIDA								
1495 SMITH PRESERVE WAY	59-1157084	501(C)(3)	100,000.				UNRESTRICTED	
(4) CONSERVATORY OF MUSIC AND PERFORMING ARTS S								
540 EAST STATE STREET TRENTON, NJ 08609	47-2726603	501(C)(3)	50,000.				NEW JERSEY ARTS AND	
(5) CORNER HOUSE FOUNDATION								
ONE MONUMENT DRIVE PRINCETON, NJ 08542	22-2359490	501(C)(3)	27,600.				GENERAL SUPPORT	
(6) CROSSROADS COMMUNITY CHURCH								
147 E. MAIN STREET SOMMERVILLE, NJ 08876	22-3693332	501(C)(3)	8,807.				TO GO TO THEIR BUILD	
(7) CROSSROADS INCORPORATED AKA CROSSROADS THEA								
7 LIVINGSTON AVENUE NEW BRUNSWICK, NJ 08901	22-2345520	501(C)(3)	50,000.				NEW JERSEY ARTS AND	
(8) D&R GREENWAY LAND TRUST								
ONE PRESERVATION PLACE PRINCETON, NJ 08540	22-3035836	501(C)(3)	27,000.				SUPPORTING THE 2021	
(9) DANCE NEW JERSEY, INC.								
PO BOX 205 VERONA, NJ 07044	22-3613725	501(C)(3)	18,500.				NEW JERSEY ARTS AND	
(10) DC JUSTICE LAB							GENERAL OPERATING SU	
1200 U STREET, NW WASHINGTON, DC 20009	84-3479025	501(C)(3)	12,500.				SUPPORT	
(11) DEFENDER MOBILITY							A PROJECT FOCUSED ON	
27056 JOY ROAD REDFORD, MI 48239	47-4543354	501(C)(3)	5,555.				SUPPORT	
(12) DENVER CENTER FOR PERFORMING ARTS								
1101 13TH STREET DENVER, CO 80238	84-0407760	501(C)(3)	9,952.				DIRECTORS SOCIETY -	
2 Enter total number of section 501(c)(3) and 3 Enter total number of other organizations list	_	•						

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047
2021

Department of the Treasury Internal Revenue Service Name of the organization Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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PRINCETON AREA COMMUNITY FOUNDATION INC.						52-1746234	
Part I General Information on Grants and	d Assistanc	е					
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Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the		•					es" on Form 990,
(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 noncash assistance	(h) Purpose of grant or assistance
(1) DICKINSON COLLEGE							
OFFICE OF ADVANCEMENT	23-1365954	501(C)(3)	10,000.				FOR THE CONNOLLY TAF
(2) DIFFERENCE MAKERS, INC.							
9295 MAXWELL COURT LAUREL, MD 20723	27-1514420	501(C)(3)	15,000.				TO SUPPORT THE CHARI
(3) DOANE ACADEMY							
350 RIVERBANK BURLINGTON, NJ 08016	21-0634575	501(C)(3)	10,000.				THE NEW BUILDING PRO
(4) DOCTORS WITHOUT BORDERS/MEDECINS SANS FRONT							
DEVELOPMENT OPERATIONS	13-3433452	501(C)(3)	40,200.				GENERAL SUPPORT
(5) DOE FUND INC.							
345 E 102ND ST #305 NEW YORK, NY 10029	13-3412540	501(C)(3)	20,000.				GENERAL OPERATING SU
(6) DRAKE UNIVERSITY -THE HARKIN INSTITUTE FOR							
2507 UNIVERSITY AVENUE DES MOINES, IA 50311	42-0680460	501(C)(3)	45,000.				HARKIN INTERNATIONAL
(7) DUCRETSCHOOL OF ART							
1030 CENTRAL AVENUE PLAINFIELD, NJ 07060	22-1890880	501(C)(3)	22,500.				NEW JERSEY ARTS AND
(8) DURGA MANDIR AKA CENTRAL JERSEY HINDU ASSOC							
4240 ROUTE 27 PRINCETON, NJ 08540	22-3030025	501(C)(3)	25,000.				THE TEMPLE CONSTRUCT
(9) EAGLE THEATRE							
208 VINE STREET HAMMONTON, NJ 08037	30-0554729	501(C)(3)	11,484.				NEW JERSEY ARTS AND
(10) EASTERN ENVIRONMENTAL LAW CENTER							
50 PARK PLACE - SUITE 1025 NEWARK, NJ 07102	22-3353036	501(C)(3)	10,000.				GENERAL SUPPORT
(11) EDEN AUTISM SERVICES FOUNDATION							
2 MEWRICK ROAD PRINCETON, NJ 08540	22-4215005	501(C)(3)	8,100.				GENERAL SUPPORT
(12) EDUCATIONAL ARTS TEAM							
300 MORRIS PESIN DR. JERSEY CITY, NJ 07305	22-2382747	501(C)(3)	22,950.				NEW JERSEY ARTS AND
2 Enter total number of section 501(c)(3) and3 Enter total number of other organizations list	•	•					

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047

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PRINCETON AREA COMMUNITY FOUNDATION INC.						52-1746234	
Part I General Information on Grants a	and Assistanc	е					
 Does the organization maintain records to the selection criteria used to award the gra Describe in Part IV the organization's prod 	ants or assistand cedures for mor	e? nitoring the use	of grant funds in th	e United States.			Yes No
Part IV, line 21, for any recipient		_					es" on Form 990,
(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 noncash assistance	(h) Purpose of grant or assistance
(1) ELIZABETH YOUTH THEATER ENSEMBLE							
229 EAST 5TH AVENUE ROSELLE, NJ 07203	80-0948665	501(C)(3)	7,500.				NEW JERSEY ARTS AND
(2) ELON UNIVERSITY							
JOHNSTON HALL 205A ELON, NC 27244	56-0532303	501(C)(3)	125,000.				THE ELLSWORTH SCHOL
(3) EMORY UNIVERSITY							
OFFICE OF GIFT ACCOUNTING ATLANTA, GA 30322	58-0566256	501(C)(3)	10,200.				IN HONOR OF DR. JEF
(4) ENDURING HEARTS							
3600 DALLAS HIGHWAY SUITE 230-350	46-2665745	501(C)(3)	20,000.				GENERAL OPERATING S
(5) ENVIRONMENTAL DEFENSE FUND							
257 PARK AVENUE SOUTH NEW YORK, NY 10010	11-6107128	501(C)(3)	17,200.				GENERAL SUPPORT
(6) EPITOME OF SOUL							
50 EAST RIDGEWOOD AVENUE	45-5496564	501(C)(3)	20,780.				NEW JERSEY ARTS AND
(7) EQUAL JUSTICE INITIATIVE							
122 COMMERCE STREET MONTGOMERY, AL 36104	63-1135091	501(C)(3)	7,000.				GENERAL SUPPORT
(8) EVERY CHILD VALUED							
175 JOHNSON AVENUE LAWRENCEVILLE, NJ 08648	26-4654078	501(C)(3)	119,400.				GENERAL SUPPORT
(9) EXIT 82: A TOMS RIVER THEATRE COMPANY							
34 MAIN STREET TOMS RIVER, NJ 08753	26-4298755	501(C)(3)	15,000.				NEW JERSEY ARTS AND
(10) FAIR CHANCE							
8705 COLESVILLE RD SUITE #156	74-3091832	501(C)(3)	12,500.				GENERAL OPERATING S
(11) FAIR SHARE HOUSING CENTER							
510 PARK BOULEVARD CHERRY HILL, NJ 08002	22-2111275	501(C)(3)	80,000.				UNITED BLACK AGENDA
(12) FAITH IN NEW JERSEY							
P.O. BOX 1317 CAMDEN, NJ 08105	47-2456034	501(C)(3)	25,000.				TO PROMOTE PUBLIC E
2 Enter total number of section 501(c)(3) ar	•	•				▶	
3 Enter total number of other organizations	listed in the line	1 table	 			>	

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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Part I General Information on Grants and	d Assistanc	е				'	
 Does the organization maintain records to so the selection criteria used to award the grant Describe in Part IV the organization's proced Part II Grants and Other Assistance to D 	s or assistand dures for mor	e? nitoring the use	of grant funds in th	e United States.			Yes No Yes" on Form 990,
Part IV, line 21, for any recipient the	nat received	more than \$5	,000. Part II can I	oe duplicated if a	additional space is r	needed.	
(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 noncash assistance	(h) Purpose of grant or assistance
(1) FISH HOSPITALITY PROGRAM INC.							
456 NEW MARKET ROAD PISCATAWAY, NJ 08854	22-3174032	501(C)(3)	25,000.				GENERAL OPERATING SU
(2) FISHERMAN'S MARK							
37 SOUTH MAIN STREET LAMBERTVILLE, NJ 08530	22-2302255	501(C)(3)	117,500.				THE LAMBERTVILLE ACA
(3) FLEMINGTON AREA FOOD PANTRY INC.							
PO BOX 783 FLEMINGTON, NJ 08822	22-3061060	501(C)(3)	6,000.				GENERAL OPERATING SU
(4) FOOD BANK OF SOUTH JERSEY							
1501 JOHN TIPTON BOULEVARD	22-2623089	501(C)(3)	60,000.				GENERAL OPERATING SU
(5) FOUNDATION ACADEMY CHARTER SCHOOL							
363 WEST STATE STREET TRENTON, NJ 08618	20-4406909	501(C)(3)	10,000.				GENERAL SUPPORT
(6) FOUNDATION AT NJIT AKA NJIT							
EBERHARDT HALL 224 - UNIVERSITY HEIGHTS	22-1714037	501(C)(3)	10,000.				THE HISPANIC LATINX
(7) FOUNDATION FIGHTING BLINDNESS-NJ CHAPTER							
7168 COLUMBIA GATEWAY DRIVE	23-7135845	501(C)(3)	10,000.				GENERAL SUPPORT
(8) FOUNDATION FOR EDUCATIONAL ADMINISTRATION							
12 CENTRE DRIVE MONROE TOWNSHIP, NJ 08831	22-2757694	501(C)(3)	450,000.				HEALING CENTERED ENG
(9) FRANKLIN TOWNSHIP FOOD BANK							
224 CHURCHILL AVENUE SOMERSET, NJ 08875	22-2406472	501(C)(3)	10,000.				GENERAL OPERATING SU
(10) FRIENDS & FOUNDATION OF THE PRINCETON PUBL							
65 WITHERSPOON STREET PRINCETON, NJ 08542	22-3494366	501(C)(3)	15,700.				GENERAL SUPPORT
(11) FRIENDS OF HOPEWELL QUARRY							
791 ALEXANDER ROAD PRINCETON, NJ 08540	82-2143830	501(C)(3)	50,000.				PURPOSE OF PURCHASE
(12) FRIENDS OF HOPEWELL VALLEY OPEN SPACE							
PO BOX 395 PENNINGTON, NJ 08534	22-2810757	501(C)(3)	50,500.				IN HONOR OF MIMI TUR
2 Enter total number of section 501(c)(3) and3 Enter total number of other organizations lis	•	•					

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Schedule I (Form 990) 2021

Name of the organization						Employer identificat	ion number
PRINCETON AREA COMMUNITY FOUNDATION INC.						52-1746234	
Part I General Information on Grants and	d Assistanc	e					
 Does the organization maintain records to so the selection criteria used to award the grant Describe in Part IV the organization's process 	s or assistand dures for mor	e? nitoring the use	of grant funds in the	e United States.			Yes No
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the		_					'es" on Form 990,
(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 noncash assistance	(h) Purpose of grant or assistance
(1) FRIENDS OF PRINCETON OPEN SPACE							
57 MOUNTAIN AVENUE PRINCETON, NJ 08540	23-7259355	501(C)(3)	11,700.				GENERAL SUPPORT
(2) FRIENDS OF YOGI, INC./DBA THE YOGI BERRA MU							
8 YOGI BERRA DR LITTLE FALLS, NJ 07424	22-3548871	501(C)(3)	28,125.				NEW JERSEY ARTS AND
(3) FRIST ART MUSEUM							
919 BROADWAY NASHVILLE, TN 37203	62-1731492	501(C)(3)	10,000.				DONATION IN HONOR OF
(4) FROM THE HEART PRODUCTIONS INC.							
145 MANDALAY BEACH ROAD OXNARD, CA 93035	95-4445418	501(C)(3)	10,000.				ARE WE SAFER TODAY?
(5) FRONTLINE ARTS, A NEW JERSEY NON-PROFIT COR							
440 RIVER ROAD BRANCHBURG, NJ 08876	23-7425516	501(C)(3)	37,650.				NEW JERSEY ARTS AND
(6) GALLERY AFERRO, INC.							
73 MARKET ST NEWARK, NJ 07102	26-3863419	501(C)(3)	27,098.				NEW JERSEY ARTS AND
(7) GARDEN STATE EQUALITY EDUCATION FUND INC.							
1408 MAIN STREET ASBURY PARK, NJ 07712	20-2588166	501(C)(3)	10,250.				GARDEN STATE EQUALIT
(8) GARDEN STATE FILM FESTIVAL, THE							
711 BOSTON BLVD. SEA GIRT, NJ 08750	48-1280505	501(C)(3)	15,000.				NEW JERSEY ARTS AND
(9) GEORGE STREET PLAYHOUSE							
9 LIVINGSTON AVENUE	23-7361588	501(C)(3)	40,600.				GENERAL SUPPORT
(10) GEORGETOWN UNIVERSITY							
GIFT PROCESSING WASHINGTON, DC 20057-1252	53-0196603	501(C)(3)	10,000.				CLASS 1967 (IN MEMOR
(11) GLOUCESTER COUNTY HISTORICAL SOCIETY							
17 HUNTER ST.REET WOODBURY, NJ 08096	23-7061170	501(C)(3)	15,000.				NEW JERSEY ARTS AND
(12) GREATER HOUSTON COMMUNITY FOUNDATION							
515 POST OAK BOULEVARD - SUITE 1000	23-7160400	501(C)(3)	357,820.				NRG CHAIRMAN'S SCHOL
2 Enter total number of section 501(c)(3) and3 Enter total number of other organizations list	-	•					

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

2021

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service
Name of the organization

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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Schedule I (Form 990) 2021

Employer identification number

PRINCETON AREA COMMUNITY FOUNDATION INC.						52-1746234	
Part I General Information on Grants and	d Assistanc	е					
 Does the organization maintain records to su the selection criteria used to award the grant Describe in Part IV the organization's proced 	s or assistand	e?					Yes No
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the		•					'es" on Form 990,
(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 noncash assistance	(h) Purpose of grant or assistance
_(1) GREATER PHILADELPHIA COALITION AGAINST HUNG							
123 CHESTNUT STREET, SUITE 401	26-2727680	501(C)(3)	10,000.				GENERAL SUPPORT
(2) GREATER SOMERSET COUNTY YMCA/PRINCETON YMCA							
59 PAUL ROBESON PLACE PRINCETON, NJ 08540	22-1559439	501(C)(3)	115,850.				SUPPORT OF THE ORGAN
(3) GREEN VISION INC.							
8 EMERY AVENUE RANDOLPH, NJ 07869	27-3128654	501(C)(3)	10,000.				GENERAL OPERATING SU
(4) GREENPEACE FUND, INC.							
702 H STREET NW - SUITE 300	95-3313195	501(C)(3)	15,750.				GENERAL SUPPORT
(5) GROTON SCHOOL							
282 FARMERS ROW GROTON, MA 01450	04-2104265	501(C)(3)	10,000.				GENERAL CHARITABLE P
(6) GROUNDS FOR SCULPTURE							
80 SCULPTORS WAY HAMILTON, NJ 08619	22-3694371	501(C)(3)	133,450.				TANGIBLE CAPACITY BU
(7) GROWING STAGE THEATRE FOR YOUNG AUDIENCES I							
7 LEDGEWOOD AVENUE NETCONG, NJ 07857	22-2599258	501(C)(3)	20,000.				NEW JERSEY ARTS AND
(8) GULFSHORE PLAYHOUSE							
2640 GOLDEN GATE PARKWAY - SUITE 211	90-0178566	501(C)(3)	250,000.				GENERAL SUPPORT
(9) HABITAT FOR HUMANITY OF BURLINGTON AND MERC							
530 ROUTE 38 EAST MAPLE SHADE, NJ 08052	22-2905055	501(C)(3)	50,100.				GENERAL SUPPORT
(10) HABITAT FOR HUMANITY OF CAPE COD							
411 MAIN ST STE 6 YARMOUTHPORT, MA 02675	22-2900430	501(C)(3)	10,000.				DONATION TO HABITAT
(11) HACKENSACK MERIDIAN HEALTH INC. A.K.A. OCEA							
1340 CAMPUS PARKWAY, SUITE C4	01-0649794	501(C)(3)	15,000.				IN MEMORY OF RWJF TR
(12) HADPRE, INC.							
490 WESTFIELD RD SUITE A	82-1121832	501(C)(3)	18,900.				FOOD FOR THOUGHT FO
2 Enter total number of section 501(c)(3) and3 Enter total number of other organizations list	-	•					

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047
2021

Schedule I (Form 990) 2021

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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Name of the organization						Employer identificat	ion number
PRINCETON AREA COMMUNITY FOUNDATION INC.						52-1746234	
Part I General Information on Grants and	d Assistanc	e					
 Does the organization maintain records to so the selection criteria used to award the grant Describe in Part IV the organization's process 	s or assistand dures for mor	e? nitoring the use	of grant funds in th	e United States.			Yes No
Part IV, line 21, for any recipient to		_					'es" on Form 990,
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 noncash assistance	(h) Purpose of grant or assistance
(1) HAMILTON PARK MONTESSORI SCHOOL							
1 MCWILLIAMS PLACE JERSEY CITY, NJ 07302	82-2344092	501(C)(3)	10,000.				GENERAL SUPPORT
(2) HAMILTON PARTNERSHIP FOR PATERSON INC.							
72 MCBRIDE AVENUE - 2ND FLOOR	27-0826275	501(C)(3)	18,750.				NEW JERSEY ARTS AND
(3) HCSV FOUNDATION							
720 ROUTE 9 CAPE MAY, NJ 08204	22-3204964	501(C)(3)	18,750.				NEW JERSEY ARTS AND
(4) HEALTHY NEWSWORKS							
PO BOX 431 DREXEL HILL, PA 19026	81-4668072	501(C)(3)	26,000.				GENERAL OPERATING SU
(5) HELP FOUNDATION (HEALTH AND EDUCATION FOR L							
185 SCARBOROUGH WAY MARLBORO, NJ 07746	22-3309963	501(C)(3)	10,000.				GENERAL OPERATING SU
(6) HELP SELF COMMUNITY DEVELOPMENT CORPORATION							
215 N. MONTGOMERY STREET TRENTON, NJ 08608	22-3849068	501(C)(3)	8,000.				COVID-19 RELIEF AND
(7) HENRY J. AUSTIN HEALTH CENTER, INC.							
321 NORTH WARREN STREET TRENTON, NJ 08618	22-2682708	501(C)(3)	52,500.				GENERAL OPERATING SU
(8) HIGH FIVES FOUNDATION							
10775 PIONEER TRAIL - SUITE 108	26-4275773	501(C)(3)	18,000.				MILITARY2MOUNTAIN PR
(9) HISTORIC MORVEN, INC AKA MORVEN MUSEUM &							
55 STOCKTON STREET PRINCETON, NJ 08540-6912	22-2817982	501(C)(3)	23,400.				GENERAL SUPPORT
(10) HISTORICAL SOCIETY OF PRINCETON							
UPDIKE FARMSTEAD PRINCETON, NJ 08540	22-6074979	501(C)(3)	21,160.				GENERAL SUPPORT
(11) HOBOKEN HISTORICAL MUSEUM							
1301 HUDSON STREET HOBOKEN, NJ 07030-7427	22-2700679	501(C)(3)	22,500.				NEW JERSEY ARTS AND
(12) HOLIDAY EXPRESS INC.							
151 INDUSTRIAL WAY EAST BUILDING A SUITE A4	22-3470019	501(C)(3)	12,250.				NEW JERSEY ARTS AND
2 Enter total number of section 501(c)(3) and3 Enter total number of other organizations lis	•	•					

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047

Schedule I (Form 990) 2021

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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Open to Public Inspection

	the use of grant funds tions and Domestic than \$5,000. Part II C section or plicable) (d) Amount of grant (3) 36,	s in the United States. c Governments. Co	omplete if the organize	zation answered "Y	Yes No Yes" on Form 990, (h) Purpose of grant or assistance
1 Does the organization maintain records to substantiate the amount the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring Part II Grants and Other Assistance to Domestic Organization Part IV, line 21, for any recipient that received more 1 (a) Name and address of organization Organization Orgovernment (b) EIN (c) IRC (if application or government) (1) HOLMDEL THEATRE COMPANY 36 CRAWFORDS CORNER RD HOLMDEL, NJ 07733 22-2881735 501(C) (2) HOMEFRONT 1880 PRINCETON AVENUE 22-3165145 501(C) (3) HOMEWORKS TRENTON 174 NASSAU STREET BOX #196 81-5218769 501(C) (4) HOPEWELL VALLEY ARTS COUNCIL PO BOX 145 HOPEWELL, NJ 08525 46-2693345 501(C) (5) HOPEWELL VALLEY CENTRAL HIGH SCHOOL 259 PENNINGTON-TITUSVILLE ROAD 11-1111111 501(C) (6) HOPEWELL VOLUNTEER FIRE DEPARTMENT AND EMER 4 COLUMBIA AVENUE HOPEWELL, NJ 08525 22-6090528 501(C)	the use of grant funds tions and Domestic than \$5,000. Part II C section or plicable) (d) Amount of grant (3) 36,	s in the United States. C Governments. Cocan be duplicated if cash (e) Amount of nor cash assistance	omplete if the organized f	zation answered "Yneeded.	res" on Form 990, (h) Purpose of grant or assistance
the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring Part II Grants and Other Assistance to Domestic Organization Part IV, line 21, for any recipient that received more 1 (a) Name and address of organization or government (b) EIN (c) IRC (if apply 1) (if app	the use of grant funds tions and Domestic than \$5,000. Part II C section or plicable) (d) Amount of grant (3) 36,	s in the United States. C Governments. Cocan be duplicated if cash (e) Amount of nor cash assistance	omplete if the organized f	zation answered "Yneeded.	res" on Form 990, (h) Purpose of grant or assistance
Part IV, line 21, for any recipient that received more 1 (a) Name and address of organization or government (b) EIN (c) IRC (if application or government) (1) HOLMDEL THEATRE COMPANY 36 CRAWFORDS CORNER RD HOLMDEL, NJ 07733 22-2881735 501(C) (2) HOMEFRONT 1880 PRINCETON AVENUE 22-3165145 501(C) (3) HOMEWORKS TRENTON 174 NASSAU STREET BOX #196 (4) HOPEWELL VALLEY ARTS COUNCIL PO BOX 145 HOPEWELL, NJ 08525 46-2693345 501(C) (5) HOPEWELL VALLEY CENTRAL HIGH SCHOOL 259 PENNINGTON-TITUSVILLE ROAD 11-111111 501(C) (6) HOPEWELL VOLUNTEER FIRE DEPARTMENT AND EMER 4 COLUMBIA AVENUE HOPEWELL, NJ 08525 22-6090528 501(C)	than \$5,000. Part II C section of grant (d) Amount of grant (3) 36 (3) 337	can be duplicated if cash (e) Amount of nor cash assistance	f additional space is	needed. (g) Description of	(h) Purpose of grant or assistance
1 (a) Name and address of organization or government (b) EIN (c) IRC (if approximate) (1) HOLMDEL THEATRE COMPANY 36 CRAWFORDS CORNER RD HOLMDEL, NJ 07733 22-2881735 501(C) (2) HOMEFRONT 1880 PRINCETON AVENUE (3) HOMEWORKS TRENTON 174 NASSAU STREET BOX #196 (4) HOPEWELL VALLEY ARTS COUNCIL PO BOX 145 HOPEWELL, NJ 08525 (5) HOPEWELL VALLEY CENTRAL HIGH SCHOOL 259 PENNINGTON-TITUSVILLE ROAD (6) HOPEWELL VOLUNTEER FIRE DEPARTMENT AND EMER 4 COLUMBIA AVENUE HOPEWELL, NJ 08525 22-6090528 501(C)	C section plicable) (d) Amount of grant (3) 36	f cash (e) Amount of nor cash assistance	•	(g) Description of	or assistance
1 (a) Name and address of organization or government (b) EIN (c) IRC (if approximate) (1) HOLMDEL THEATRE COMPANY 36 CRAWFORDS CORNER RD HOLMDEL, NJ 07733 22-2881735 501(C) (2) HOMEFRONT 1880 PRINCETON AVENUE (3) HOMEWORKS TRENTON 174 NASSAU STREET BOX #196 (4) HOPEWELL VALLEY ARTS COUNCIL PO BOX 145 HOPEWELL, NJ 08525 (5) HOPEWELL VALLEY CENTRAL HIGH SCHOOL 259 PENNINGTON-TITUSVILLE ROAD (6) HOPEWELL VOLUNTEER FIRE DEPARTMENT AND EMER 4 COLUMBIA AVENUE HOPEWELL, NJ 08525 22-6090528 501(C)	C section plicable) (d) Amount of grant (3) 36	f cash (e) Amount of nor cash assistance	•	(g) Description of	or assistance
22-2881735 501(C) (2) HOMEFRONT	(3) 337	,650.			NEW JERSEY ARTS AND
(2) HOMEFRONT 1880 PRINCETON AVENUE (3) HOMEWORKS TRENTON 174 NASSAU STREET BOX #196 (4) HOPEWELL VALLEY ARTS COUNCIL PO BOX 145 HOPEWELL, NJ 08525 (5) HOPEWELL VALLEY CENTRAL HIGH SCHOOL 259 PENNINGTON-TITUSVILLE ROAD (6) HOPEWELL VOLUNTEER FIRE DEPARTMENT AND EMER 4 COLUMBIA AVENUE HOPEWELL, NJ 08525 22-6090528 501(C)	(3) 337	,650.			NEW JERSEY ARTS AND
1880 PRINCETON AVENUE 22-3165145 501(C)					
1880 PRINCETON AVENUE 22-3165145 501(C)					
174 NASSAU STREET BOX #196 81-5218769 501(C) (4) HOPEWELL VALLEY ARTS COUNCIL PO BOX 145 HOPEWELL, NJ 08525 46-2693345 501(C) (5) HOPEWELL VALLEY CENTRAL HIGH SCHOOL 259 PENNINGTON-TITUSVILLE ROAD 11-1111111 501(C) (6) HOPEWELL VOLUNTEER FIRE DEPARTMENT AND EMER 4 COLUMBIA AVENUE HOPEWELL, NJ 08525 22-6090528 501(C)	(3) 81	,000.			BACK TO SCHOOL
(4) HOPEWELL VALLEY ARTS COUNCIL PO BOX 145 HOPEWELL, NJ 08525 (5) HOPEWELL VALLEY CENTRAL HIGH SCHOOL 259 PENNINGTON-TITUSVILLE ROAD (6) HOPEWELL VOLUNTEER FIRE DEPARTMENT AND EMER 4 COLUMBIA AVENUE HOPEWELL, NJ 08525 22-6090528 501(C)	(3) 81	,000.		1	
PO BOX 145 HOPEWELL, NJ 08525 46-2693345 501(C) (5) HOPEWELL VALLEY CENTRAL HIGH SCHOOL 259 PENNINGTON-TITUSVILLE ROAD 11-1111111 501(C) (6) HOPEWELL VOLUNTEER FIRE DEPARTMENT AND EMER 4 COLUMBIA AVENUE HOPEWELL, NJ 08525 22-6090528 501(C)			1		GENERAL FUNDS - UNRE
PO BOX 145 HOPEWELL, NJ 08525 46-2693345 501(C) (5) HOPEWELL VALLEY CENTRAL HIGH SCHOOL 259 PENNINGTON-TITUSVILLE ROAD 11-1111111 501(C) (6) HOPEWELL VOLUNTEER FIRE DEPARTMENT AND EMER 4 COLUMBIA AVENUE HOPEWELL, NJ 08525 22-6090528 501(C)		1			
259 PENNINGTON-TITUSVILLE ROAD 11-111111 501(C) (6) HOPEWELL VOLUNTEER FIRE DEPARTMENT AND EMER 4 COLUMBIA AVENUE HOPEWELL, NJ 08525 22-6090528 501(C)	(3) 8	,600.			NEW JERSEY ARTS AND
(6) HOPEWELL VOLUNTEER FIRE DEPARTMENT AND EMER 4 COLUMBIA AVENUE HOPEWELL, NJ 08525 22-6090528 501(C)					
4 COLUMBIA AVENUE HOPEWELL, NJ 08525 22-6090528 501(C)	(3)	,000.			BOYS SOCCER PROGRAM
/7) UNICENC INTERATIVES OF DEMOSTON CUADITADIS	(3) 11	,500.			HOPEWELL VOLUNTEERS
(1) HOUSING INITIATIVES OF PRINCETON CHARITABLE					
33 MERCER STREET PRINCETON, NJ 08540 27-6983137 501(C)	(3) 34	,350.			GENERAL SUPPORT
(8) HUB CITY JAZZ FESTIVAL, INC.					
PO BOX 1910 NEW BRUNSWICK, NJ 08903 47-5014948 501(C)	(3) 16	,875.			NEW JERSEY ARTS AND
(9) HUDSON THEATRE WORKS, INC.					
54 STERLING AVENUE WEEHAWKEN, NJ 07086 45-3605792 501(C)	(3) 8	,750.			NEW JERSEY ARTS AND
(10) HUMANE SOCIETY OF NAPLES					
370 AIRPORT-PULLING ROAD NORTH 59-1033966 501(C)	(3) 6	,000.			RUN FOR THE PAWS
(11) HUMANITY IN ACTION					
41 FLATBUSH AVENUE, SUITE 203 13-3977257 501(C)	(3) 10	,000.			GENERAL SUPPORT
(12) HUN SCHOOL OF PRINCETON					
176 EDGERSTOUNE ROAD PRINCETON, NJ 08540 21-0639868 501(C)	(3) 17	,500.			RAIDER GIVING DAY FF

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047
2021

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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Open to Public Inspection

Name of the organization						Employer identificat	ion number
PRINCETON AREA COMMUNITY FOUNDATION INC.						52-1746234	
Part I General Information on Grants and	d Assistanc	e					
 Does the organization maintain records to s the selection criteria used to award the grant Describe in Part IV the organization's proced 	ts or assistand	e?					Yes No
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient to		_			additional space is n		es" on Form 990,
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 noncash assistance	(h) Purpose of grant or assistance
(1) HUNTERDON ART MUSEUM							
7 LOWER CENTER STREET CLINTON, NJ 08809	22-1550244	501(C)(3)	28,125.				NEW JERSEY ARTS AND
(2) INLET PUBLIC PRIVATE ASSOCIATION INC., DBA							
31 S. RHODE ISLAND AVE.	22-2937095	501(C)(3)	28,125.				NEW JERSEY ARTS AND
(3) INSTITUTE FOR ADVANCED STUDY							
1 EINSTEIN DRIVE PRINCETON, NJ 08540	21-0634988	501(C)(3)	27,250.				GENERAL SUPPORT
(4) INSTITUTE FOR THE DEVELOPMENT OF EDUCATION							
217 MARKET STREET CAMDEN, NJ 08103	22-3408467	501(C)(3)	40,500.				NEW JERSEY ARTS AND
(5) INSTITUTE OF MUSIC FOR CHILDREN INC							
780 SALEM AVENUE ELIZABETH, NJ 07208	02-0687805	501(C)(3)	37,500.				NEW JERSEY ARTS AND
(6) ISLES, INC.							
10 WOOD STREET TRENTON, NJ 08618	22-2350832	501(C)(3)	130,650.				GENERAL SUPPORT
(7) JAMES R HALSEY FOUNDATION OF THE ARTS							
243 ANDOVER PLACE ROBBINSVILLE, NJ 08691	83-1144406	501(C)(3)	8,300.				GENERAL SUPPORT
(8) JAPANESE AMERICAN CITIZENS LEAGUE							
1765 SUTTER STREET	94-1245885	501(C)(3)	40,000.				CENTENNIAL EDUCATION
(9) JAZZ ARTS PROJECT, INC.							
77 PINCKNEY ROAD RED BANK, NJ 07701	20-4767964	501(C)(3)	31,500.				NEW JERSEY ARTS AND
(10) JAZZ HOUSE KIDS INC.							
347 BLOOMFIELD AVENUE, LOWER LEVEL	56-2303577	501(C)(3)	50,000.				NEW JERSEY ARTS AND
(11) JERSEY CITY THEATER CENTER, INC.							
330 NEWARK AVE., 2ND FLOOR	20-5151520	501(C)(3)	28,125.				NEW JERSEY ARTS AND
(12) JEWISH FAMILY & CHILDREN'S SERVICES OF GREA							
707 ALEXANDER ROAD, SUITE 102	21-0634563	501(C)(3)	6,500.				GENERAL SUPPORT
2 Enter total number of section 501(c)(3) and3 Enter total number of other organizations lis	ted in the line	1 table				>	
For Paperwork Reduction Act Notice, see the Instruct	ions for Form 9	90.				S	chedule I (Form 990) 2021

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047

Schedule I (Form 990) 2021

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Name of the organization						Employer identificat	ion number
PRINCETON AREA COMMUNITY FOUNDATION INC.						52-1746234	
Part I General Information on Grants and	d Assistanc	e				'	
 Does the organization maintain records to so the selection criteria used to award the grant Describe in Part IV the organization's proced 	s or assistand dures for mor	e? nitoring the use	of grant funds in th	e United States.			Yes No
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the		_					'es" on Form 990,
(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 noncash assistance	(h) Purpose of grant or assistance
(1) JOYFUL HEART FOUNDATION							
320 7TH AVE #161 BROOKLYN, NY 11215	72-1519537	501(C)(3)	12,500.				GENERAL OPERATING SU
(2) KENYON COLLEGE							
OFFICE OF DEVELOPMENT GAMBIER, OH 43022	31-4379507	501(C)(3)	6,100.				THE ANNUAL FUND FROM
(3) KINDERSMILE FOUNDATION							
10 BROAD STREET BLOOMFIELD, NJ 07003	56-2635166	501(C)(3)	133,000.				THIS GRANT IS FOR US
(4) LATIN AMERICAN LEGAL DEFENSE AND EDUCATIONA							
714-716 S. CLINTON AVENUE TRENTON, NJ 08611	20-2484231	501(C)(3)	80,000.				GENERAL SUPPORT
(5) LATINO ACTION NETWORK FOUNDATION							
1 BROAD STREET FREEHOLD, NJ 08826	45-5150013	501(C)(3)	80,000.				TO PROMOTE PUBLIC EN
(6) LAWRENCEVILLE MAIN STREET							
17 PHILLIPS AVENUE LAWRENCEVILLE, NJ 08648	52-1555972	501(C)(3)	6,500.				SUMMER STIPEND FOR G
(7) LAWRENCEVILLE SCHOOL							
2500 MAIN STREET LAWRENCEVILLE, NJ 08648	21-0634503	501(C)(3)	11,000.				JEREMY PERLMAN CLASS
(8) LAWYERS' COMMITTEE FOR CIVIL RIGHTS UNDER L							
1500 K STREET N.W. SUITE 900	52-0799246	501(C)(3)	10,000.				GENERAL SUPPORT
(9) LAZOS AMERICA UNIDA							
10 PROSPECT STREET NEW BRUNSWICK, NJ 08901	20-2935339	501(C)(3)	22,500.				NEW JERSEY ARTS AND
(10) LEAD FILIPINO							
991 W. HEDDING STREET, SUITE 202	85-2095347	501(C)(3)	10,000.				GENERAL OPERATING SU
(11) LEAGUE OF WOMEN VOTERS OF NEW JERSEY EDUCAT							
204 WEST STATE STREET TRENTON, NJ 08608	22-2407784	501(C)(3)	140,200.				TO PROMOTE PUBLIC EN
(12) LEARNING ALLY AKA RECORDING FOR THE BLIND A							
20 ROSZEL ROAD PRINCETON, NJ 08540	13-1659345	501(C)(3)	5,350.				SUPPORTING THE 2021
2 Enter total number of section 501(c)(3) and3 Enter total number of other organizations list	-	•					

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047

Schedule I (Form 990) 2021

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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Open to Public Inspection

Name of the organization						Employer identificat	ion number
PRINCETON AREA COMMUNITY FOUNDATION INC.						52-1746234	
Part I General Information on Grants and	d Assistanc	е					
 Does the organization maintain records to so the selection criteria used to award the grant Describe in Part IV the organization's proced Part II Grants and Other Assistance to D 	s or assistand dures for mor	e? nitoring the use	of grant funds in the	e United States.			Yes No
Part IV, line 21, for any recipient the		_					
(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 noncash assistance	(h) Purpose of grant or assistance
(1) LEASHES OF VALOR							
24114 SPARTA ROAD MILFORD, VA 22514	82-1110902	501(C)(3)	25,000.				IN HONOR AND MEMORY
(2) LEWIS AND CLARK COLLEGE							
0615 SW PALATINE HILL ROAD, MSC 88	93-0386858	501(C)(3)	50,000.				DEAN'S DISCRETIONARY
(3) LIFETIES							
ADMINISTRATIVE OFFICE - JOHN S. WATSON SR.	22-2417627	501(C)(3)	25,500.				EMPOWERING HOMELESS
(4) LIFTING SPIRITS MINIATURE THERAPY HORSES IN							
23 PLEASANT ST. ANDOVER, MA 01810	83-2366280	501(C)(3)	12,500.				GENERAL OPERATING SU
(5) LINCOLN PARK COAST CULTURAL DISTRICT							
450 WASHINGTON STREET, LOWER LEVEL	22-3729215	501(C)(3)	50,000.				NEW JERSEY ARTS AND
(6) LIONS EYE BANK OF DELAWARE VALLEY							
401 N. 3RD STREET, SUITE 305	23-1513699	501(C)(3)	15,000.				IN MEMORY OF JOHN HE
(7) LUNA STAGE, INC.							
555 VALLEY RD WEST ORANGE, NJ 07052	22-3209976	501(C)(3)	20,000.				NEW JERSEY ARTS AND
(8) LUPUS RESEARCH ALLIANCE INC.							
275 MADISON AVENUE - 10TH FLOOR	58-2492929	501(C)(3)	25,000.				THE LUPUS RESEARCH A
(9) LYDIA JOHNSON DANCE							
91 ARNOLD TERRACE SOUTH ORANGE, NJ 07079	54-2080734	501(C)(3)	29,750.				NEW JERSEY ARTS AND
(10) M25 INITIATIVE A NONPROFIT CORPORATION							
31 N. PEARL STREET BRIDGETON, NJ 08302	47-4644945	501(C)(3)	10,000.				GENERAL OPERATING SU
(11) MAINSTAGE CENTER FOR THE ARTS, INC.							
27 S BLACK HORSE PIKE BLACKWOOD, NJ 08012	22-3284805	501(C)(3)	7,500.				NEW JERSEY ARTS AND
(12) MANAVI INC.							
P.O. BOX 3103 NEW BRUNSWICK, NJ 08903	22-3673667	501(C)(3)	25,000.				GENERAL OPERATING SU

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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Open to Public Inspection

Name of the organization						Employer identificat	ion number
PRINCETON AREA COMMUNITY FOUNDATION INC.						52-1746234	
Part I General Information on Grants and	d Assistanc	е					
 Does the organization maintain records to su the selection criteria used to award the grant Describe in Part IV the organization's proced 	s or assistand	e?					Yes No
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the		-			additional space is n		es" on Form 990,
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 noncash assistance	(h) Purpose of grant or assistance
(1) MCCARTER THEATRE							
91 UNIVERSITY PLACE PRINCETON, NJ 08540	21-0724198	501(C)(3)	46,700.				GENERAL SUPPORT
(2) MEALS ON WHEELS OF MERCER COUNTY							
320 HOLLOWBROOK DRIVE EWING, NJ 08638	22-1990231	501(C)(3)	24,500.				GENERAL SUPPORT
(3) MEMORIAL SLOAN KETTERING CANCER CENTER							
P.O. BOX 27106 NEW YORK, NY 10087	13-1924236	501(C)(3)	157,650.				GENERAL SUPPORT
(4) MERCER COUNTY COMMUNITY COLLEGE FOUNDATION							
DEVELOPMENT OFFICE WEST WINDSOR, NJ 08550	22-2133029	501(C)(3)	22,350.				WWFM THE CLASSICAL N
(5) MERCER STREET FRIENDS FOOD BANK							
151 MERCER STREET TRENTON, NJ 08611	21-0733990	501(C)(3)	214,900.				THE ANNUAL FUND
(6) METROPOLITAN OPERA GUILD INC							
70 LINCOLN CENTER PLAZA, 6TH FLOOR	13-1681983	501(C)(3)	11,500.				THE PATRON PROGRAM
(7) MID-ATLANTIC CENTER FOR THE ARTS							
PO BOX 340 CAPE MAY, NJ 08204	22-1923415	501(C)(3)	22,500.				NEW JERSEY ARTS AND
(8) MIDDLESEX COUNTY COLLEGE FOUNDATION							
2600 WOODBRIDGE AVENUE EDISON, NJ 08818	22-6079662	501(C)(3)	21,350.				HOLT/LANCEFIELD SCHO
(9) MIDDLETOWN TOWNSHIP CULTURAL & ARTS COUNCIL							
MIDDLETOWN ARTS CENTER, 36 CHURCH STREET	01-0588839	501(C)(3)	18,750.				NEW JERSEY ARTS AND
(10) MILE SQUARE THEATRE							
1400 CLINTON STREET HOBOKEN, NJ 07030	01-0778023	501(C)(3)	11,750.				NEW JERSEY ARTS AND
(11) MILLHILL CHILD & FAMILY DEVELOPMENT CORPORA							
101 OAKLAND STREET TRENTON, NJ 08618	22-2123700	501(C)(3)	100,564.				GENERAL SUPPORT
(12) MILLVILLE ARMY AIRFIELD MUSEUM, INC.							
1 LEDDON STREET MILLVILLE, NJ 08332	52-1568914	501(C)(3)	10,000.				NEW JERSEY ARTS AND
 Enter total number of section 501(c)(3) and Enter total number of other organizations list For Paperwork Reduction Act Notice, see the Instruction 	ted in the line	1 table				<u> </u>	chedule I (Form 990) 2021

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service
Name of the organization

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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Open to Public Inspection

Schedule I (Form 990) 2021

Employer identification number

PRINCETON AREA COMMUNITY FOUNDATION INC.						52-1746234	
Part I General Information on Grants and	d Assistanc	е				•	
 Does the organization maintain records to so the selection criteria used to award the grant Describe in Part IV the organization's proced 	s or assistand	e?					Yes No
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient tl		_					'es" on Form 990,
(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 noncash assistance	(h) Purpose of grant or assistance
(1) MILLVILLE DEVELOPMENT CORPORATION							
22 N. HIGH STREET MILLVILLE, NJ 08332	22-3304583	501(C)(3)	18,000.				NEW JERSEY ARTS AND
(2) MINNESOTA SPAN ASSOCIATION							
P.O. BOX 270927 MINNEAPOLIS, MN 55427	41-0848313	501(C)(3)	10,000.				GENERAL SUPPORT
(3) MOMI, MUSEUM OF IMAGINATION + INNOVATION							
P.O. BOX 227 BASKING RIDGE, NJ 07920	83-1218106	501(C)(3)	7,500.				THE 2021 PROGRAMS -
(4) MONMOUTH COUNTY ARTS COUNCIL INC AKA MONMOU							
105 MONMOUTH STREET RED BANK, NJ 07701	22-3642107	501(C)(3)	42,500.				NEW JERSEY ARTS AND
(5) MONMOUTH COUNTY HISTORICAL ASSOCIATION							
70 COURT STREET FREEHOLD, NJ 07728	21-6000882	501(C)(3)	40,000.				NEW JERSEY ARTS AND
(6) MONMOUTH MUSEUM & CULTURAL CENTER							
765 NEWMAN SPRINGS RD LINCROFT, NJ 07738	22-1739205	501(C)(3)	8,500.				NEW JERSEY ARTS AND
(7) MONTCLAIR ART MUSEUM							
3 SOUTH MOUNTAIN AVENUE MONTCLAIR, NJ 07042	22-1487582	501(C)(3)	22,500.				NEW JERSEY ARTS AND
(8) MONTCLAIR FILM FESTIVAL, INC.							
505 BLOOMFIELD AVENUE MONTCLAIR, NJ 07042	27-1732322	501(C)(3)	26,250.				NEW JERSEY ARTS AND
(9) MONTCLAIR HISTORICAL SOCIETY							
108 ORANGE ROAD MONTCLAIR, NJ 07042	22-6106685	501(C)(3)	20,250.				NEW JERSEY ARTS AND
(10) MONTCLAIR SCHOLARSHIP FUND INC.							
100 CHESTNUT STREET MONTCLAIR, NJ 07042	22-6047818	501(C)(3)	25,000.				TO PROVIDE RESOURCES
(11) MONTGOMERY TOWNSHIP HIGH SCHOOL							
1016 ROUTE 601 SKILLMAN, NJ 08558-1799	11-1111111	501(C)(3)	9,300.				GENERAL SUPPORT
(12) MOORESTOWN THEATER COMPANY							
5 WEST MAIN STREET, LOWER LEVEL	90-0069649	501(C)(3)	7,500.				NEW JERSEY ARTS AND
2 Enter total number of section 501(c)(3) and	government	organizations lis	sted in the line 1 tal	ole			
3 Enter total number of other organizations lis	ted in the line	1 table					

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

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Open to Public Inspection

Name of the organization **Employer identification number** PRINCETON AREA COMMUNITY FOUNDATION INC. 52-1746234 **General Information on Grants and Assistance** 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Yes No the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on 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. (f) Method of valuation (book, FMV, appraisal, other) (c) IRC section 1 (a) Name and address of organization (b) EIN (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant (if applicable) grant cash assistance noncash assistance or assistance or government (1) MOUNT CARMEL GUILD OF TRENTON NJ 73 NORTH CLINTON AVENUE TRENTON, NJ 08609 21-0675183 501(C)(3) 6,000 GENERAL SUPPORT FROM (2) MOVE OVER BREAST CANCER 10,000. 48 FLEMING WAY PRINCETON, NJ 08540 84-2931340 501(C)(3) GENERAL SUPPORT (3) MUSEUM OF EARLY TRADES & CRAFTS 9 MAIN STREET MADISON, NJ 07940 23-7029776 501(C)(3) 10,750. NEW JERSEY ARTS AND (4) MUSIC BEYOND MEASURE INC. 46-1838769 501(C)(3) 12,800. 1 THE CRESCENT, #B1 MONTCLAIR, NJ 07042 NEW JERSEY ARTS AND (5) MUSIC FOR ALL SEASONS, INC. 336 PARK AVENUE, SUITE 2R 22-3122153 501(C)(3) 20,250. NEW JERSEY ARTS AND (6) NAACP LEGAL DEFENSE & EDUCATIONAL FUND PRIN 137 LAWRENCEVILLE-PENNINGTON ROAD 13-1655255 501(C)(3) 7,500 GENERAL SUPPORT (7) NAI-NI CHEN DANCE COMPANY, INC. 501(C)(3) PO BOX 1121 FORT LEE, NJ 07024 22-2930684 50,000 NEW JERSEY ARTS AND (8) NASSAU PRESBYTERIAN CHURCH 61 NASSAU STREET PRINCETON, NJ 08540 21-0634470 501(C)(3) 35,000. LOAVES AND FISHES 20 (9) NATIONAL JUNIOR TENNIS & LEARNING OF TRENTO 949 WEST STATE STREET TRENTON, NJ 08618 52-1260470 501(C)(3) 46,250. GENERAL SUPPORT (10) NATIONAL MEDICAL FELLOWSHIPS INC. 1199 NORTH FAIRFAX STREET - SUITE 600 01-0963657 501(C)(3) 50,000. NATIONAL MEDICAL FEL (11) NATIONAL TRUST FOR HISTORIC PRESERVATION IN THE WATERGATE OFFICE BUILDING 53-0210807 501(C)(3) 10,100. GENERAL SUPPORT (12) NATIONALITIES SERVICE CENTER 1216 ARCH STREET, 4TH FLOOR 23-1352336 501(C)(3) 25,000. GENERAL OPERATING SU

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

Schedule I (Form 990) 2021

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047
2021

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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Schedule I (Form 990) 2021

Name of the organization						Employer identificat	ion number
PRINCETON AREA COMMUNITY FOUNDATION INC.						52-1746234	
Part I General Information on Grants ar	nd Assistanc	е				'	
 Does the organization maintain records to see the selection criteria used to award the grant Describe in Part IV the organization's process Part II Grants and Other Assistance to I	nts or assistand dures for mor Domestic Or	ee? nitoring the use ganizations ar	of grant funds in the	e United States.	nplete if the organiz	ation answered "Y	Yes No
Part IV, line 21, for any recipient to 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 noncash assistance	(h) Purpose of grant or assistance
(1) NATURAL RESOURCES DEFENSE COUNCIL AKA NRDC							
40 WEST 20TH STREET NEW YORK, NY 10011	13-2654926	501(C)(3)	8,600.				GENERAL SUPPORT
(2) NATURE CONSERVANCY							
4245 NORTH FAIRFAX DRIVE, SUITE 100	53-0242652	501(C)(3)	9,550.				GENERAL SUPPORT
(3) NEO PHILANTHROPY, INC.							
45 WEST 36TH STREET - 6TH FLOOR	13-3191113	501(C)(3)	80,000.				NJ ALLIANCE FOR IMMI
(4) NEW ALTERNATIVES FOR CHILDREN							
37 WEST 26TH STREET 6TH FLOOR	13-3149298	501(C)(3)	12,500.				GENERAL OPERATING SU
(5) NEW JERSEY AUDUBON SOCIETY							
9 HARDSCRABBLE ROAD BERNARDSVILLE, NJ 07924	22-1539642	501(C)(3)	15,500.				GENERAL OPERATING SU
(6) NEW JERSEY BALLET							
15 MICROLAB ROAD LIVINGSTON, NJ 07039	23-7447316	501(C)(3)	22,500.				NEW JERSEY ARTS AND
(7) NEW JERSEY CAPITAL PHILHARMONIC ORCHESTRA,							
P.O. BOX 7683 TRENTON, NJ 08608	46-3700565	501(C)(3)	7,500.				NEW JERSEY ARTS AND
(8) NEW JERSEY CONSERVATION FOUNDATION							
BAMBOO BROOK FAR HILLS, NJ 07931	22-6065456	501(C)(3)	1,316,500.				\$25,000.00 FOR THE M
(9) NEW JERSEY DANCE THEATRE ENSEMBLE							
315B SPRINGFIELD AVENUE SUMMIT, NJ 07901	22-3308553	501(C)(3)	19,125.				NEW JERSEY ARTS AND
(10) NEW JERSEY GOALS OF CARE INC.							
P.O. BOX 3083 PRINCETON, NJ 08543	26-4271484	501(C)(3)	58,500.				GENERAL SUPPORT
(11) NEW JERSEY INSTITUTE FOR SOCIAL JUSTICE INC							
60 PARK PLACE, SUITE 511 NEWARK, NJ 07102	22-3478143	501(C)(3)	163,333.				GENERAL OPERATING SU
(12) NEW JERSEY POLICY PERSPECTIVE							
137 WEST HANOVER STREET	22-3492715	501(C)(3)	118,255.				GENERAL SUPPORT

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

2021

OMB No. 1545-0047

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Name of the organization						Employer identificat	ion number
PRINCETON AREA COMMUNITY FOUNDATION INC.						52-1746234	
Part I General Information on Grants ar	d Assistanc	е					
 Does the organization maintain records to see the selection criteria used to award the grant Describe in Part IV the organization's process. 	its or assistand	e?					Yes No
Part II Grants and Other Assistance to I Part IV, line 21, for any recipient		-					es" on Form 990,
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 noncash assistance	(h) Purpose of grant or assistance
(1) NEW JERSEY PRESS FOUNDATION							
P.O. BOX 358 TITUSVILLE, NJ 08560	22-6071765	501(C)(3)	80,000.				EDUCATION
(2) NEW JERSEY REPERTORY COMPANY							
179 BROADWAY LONG BRANCH, NJ 07740	22-3513797	501(C)(3)	30,000.				NEW JERSEY ARTS AND
(3) NEW JERSEY STATE MUSEUM FOUNDATION							
PO BOX 530 TRENTON, NJ 08625-0530	22-6098724	501(C)(3)	11,803.				REIMBURSE FLOWERS AN
(4) NEW JERSEY STATE POLICEMEN'S BENEVOLENT ASS							
PO BOX 484 HOPEWELL, NJ 08525	22-3106012	501(C)(8)	10,000.				THE HOPEWELL TOWNSHI
(5) NEW JERSEY THEATRE ALLIANCE							
PO BOX 124 ALLENHURST, NJ 07711	22-2383501	501(C)(3)	40,000.				NEW JERSEY ARTS AND
(6) NEW MEXICO COMMUNITY CAPITAL							
301 GOLD AVE. SUITE 102	20-1798654	501(C)(3)	33,333.				SUPPORT FOR THE CHAR
(7) NEW VENTURE FUND							
1201 CONNECTICUT AVENUE NW - SUITE 300	20-5806345	501(C)(3)	25,000.				TO SUPPORT THE CHARI
(8) NEW YORK FOUNDATION FOR THE ARTS							
20 JAY STREET, 7TH FLOOR BROOKLYN, NY 11201	23-7129564	501(C)(3)	40,000.				MUSIC AT CLOSE RANGE
(9) NEWARK ARTS COUNCIL AKA NEWARK ARTS							
17 ACADEMY STREET, SUITE 702	22-2412819	501(C)(3)	50,000.				NEW JERSEY ARTS AND
(10) NEWARK ARTS COUNCIL, INC.							
17 ACADEMY ST., #702 NEWARK, NJ 07102	22-2412819	501(C)(3)	100,000.				NEW JERSEY ARTS AND
(11) NEWARK BOYS CHORUS SCHOOL							
1016 BROAD STREET NEWARK, NJ 07102	22-1893378	501(C)(3)	33,750.				NEW JERSEY ARTS AND
(12) NEWARK PERFORMING ARTS CORPORATION							
1030 BROAD STREET NEWARK, NJ 07102	22-2804063	501(C)(3)	50,000.				NEW JERSEY ARTS AND
 2 Enter total number of section 501(c)(3) and 3 Enter total number of other organizations list For Paperwork Reduction Act Notice, see the Instruction 	sted in the line	1 table				<u> </u>	

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047
2021

Department of the Treasury
Internal Revenue Service
Name of the organization

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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Schedule I (Form 990) 2021

Employer identification number

PRINCETON AREA COMMUNITY FOUNDATION INC.						52-1746234	
Part I General Information on Grants and	d Assistanc	е					
 Does the organization maintain records to so the selection criteria used to award the grant Describe in Part IV the organization's proced 	ts or assistand	e?					Yes No
Part IV, line 21, for any recipient to		•					es" on Form 990,
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 noncash assistance	(h) Purpose of grant or assistance
(1) NEWARK PRINT SHOP							
304 UNIVERSITY AVENUE FL 2 NEWARK, NJ 07102	46-3346417	501(C)(3)	20,000.				NEW JERSEY ARTS AND
(2) NEWARK SCHOOL OF THE ARTS							
89 LINCOLN PARK NEWARK, NJ 07102	22-1849047	501(C)(3)	33,750.				NEW JERSEY ARTS AND
(3) NEWTOWN PRESBYTERIAN CHURCH							
25 NORTH CHANCELLOR STREET	23-1472524	501(C)(3)	50,000.				DONATION DESIGNATED
(4) NICK VIRGILIO HAIKU ASSOCIATION							
1801 BROADWAY CAMDEN, NJ 08104	52-1728278	501(C)(3)	8,463.				NEW JERSEY ARTS AND
(5) NIMBUS DANCE WORKS, INC							
329 WARREN STREET JERSEY CITY, NJ 07302	26-3416084	501(C)(3)	100,000.				NEW JERSEY ARTS AND
(6) NJ FESTIVAL ORCHESTRA							
224 E. BROAD STREET WESTFIELD, NJ 07090	22-2432213	501(C)(3)	15,750.				NEW JERSEY ARTS AND
(7) NONPROFITCONNECT							
957 RTE. 33 - SUITE 12, #145	22-3595586	501(C)(3)	51,500.				GENERAL SUPPORT
(8) NORTHEAST ORGANIC FARMING ASSOCIATION							
NORTH SLOPE FARM LAMBERTVILLE, NJ 08530	22-3043823	501(C)(3)	22,200.				THE ENDOWMENT
(9) OCEAN GROVE HISTORIC PRESERVATION / JERSEY							
66 SOUTH MAIN STREET OCEAN GROVE, NE 07756	22-3505238	501(C)(3)	8,926.				NEW JERSEY ARTS AND
(10) OCEAN PROFESSIONAL THEATRE CO DBA SURFLIGHT							
P. O. BOX 1155 BEACH HAVEN, NJ 08008	45-3335015	501(C)(3)	10,000.				NEW JERSEY ARTS AND
(11) OLD BARRACKS ASSOCIATION, INC.							
101 BARRACKS STREET TRENTON, NJ 08608	21-0634593	501(C)(3)	12,500.				NEW JERSEY ARTS AND
(12) ONE HUNDRED BLACK MEN							
2601 FREDERICK DOUGLASS BOULEVARD	23-7379940	501(C)(3)	10,000.				GENERAL OPERATING SU
2 Enter total number of section 501(c)(3) and3 Enter total number of other organizations lis	•	•					

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

2021

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Schedule I (Form 990) 2021

Name of the organization						Employer identificat	ion number
PRINCETON AREA COMMUNITY FOUNDATION INC.						52-1746234	
Part I General Information on Grants a	and Assistanc	е				•	
 Does the organization maintain records to the selection criteria used to award the grazing and the process of the selection criteria used to award the grazing and the process of the selection of th	ants or assistand cedures for moi Domestic Or	ce? nitoring the use ganizations a i	of grant funds in th	e United States.	nplete if the organiz	ation answered "Y	Yes No
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 noncash assistance	(h) Purpose of grant or assistance
(1) ONE SIMPLE WISH							
1977 NORTH OLDEN AVE, #292	26-3128590	501(C)(3)	25,000.				GENERAL OPERATING SU
(2) ONE VET @ A TIME - PROJECT OVAT							
P.O. BOX 548 PARRISH, FL 34219	83-4706216	501(C)(3)	84,666.				SUPPORT FOR THE ""CA
(3) OPERATION GROW							
P.O. BOX 248 BLOOMFIELD, NJ 07003	84-1776636	501(C)(3)	10,000.				GENERAL OPERATING SU
(4) OPPORTUNITY INTERNATIONAL							
550 WEST VAN BUREN STREET - SUITE 200	54-0907624	501(C)(3)	12,000.				GENERAL SUPPORT
(5) OUR LADY OF LOURDES CHURCH							
29 BOULEVARD N.E. ATLANTA, GA 30312	58-0814551	501(C)(3)	15,000.				GENERAL OPERATING SU
(6) OXFAM AMERICA							
226 CAUSEWAY STREET - 5TH FLOOR	23-7069110	501(C)(3)	6,100.				THE 2021 MATCHING GI
(7) PALESTINIAN AMERICAN COMMUNITY CENTER							
388 LAKEVIEW AVENUE CLIFTON, NJ 07011	46-5270907	501(C)(3)	25,000.				TO PROMOTE PUBLIC EN
(8) PARKER FAMILY HEALTH CENTER							
211 SHREWSBURY AVENUE RED BANK, NJ 07701	22-3619518	501(C)(3)	10,000.				GENERAL SUPPORT
(9) PARTNERSHIP TO END ADDICTION							
711 THIRD AVENUE, 5TH FLOOR	52-1736502	501(C)(3)	15,000.				FUNDS TO BE USED FOR
(10) PASSAGE THEATRE COMPANY							
P.O. BOX 967 TRENTON, NJ 08605-0967	22-2679031	501(C)(3)	46,400.				GENERAL SUPPORT
(11) PAUL ROBESON HOUSE							
112 WITHERSPOON STREET PRINCETON, NJ 08542	46-0587094	501(C)(3)	24,700.				GENERAL SUPPORT
(12) PEACE ACTION EDUCATION FUND							
40 WITHERSPOON STREET PRINCETON, NJ 08542	22-2402577	501(C)(3)	21,200.				GENERAL SUPPORT
2 Enter total number of section 501(c)(3) ar 3 Enter total number of other organizations	•	•					

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

2021

Schedule I (Form 990) 2021

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service
Name of the organization

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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Open to Public Inspection

Employer identification number

PRINCETON AREA COMMUNITY FOUNDATION INC.						52-1746234	
Part I General Information on Grants ar	nd Assistanc	е					
 Does the organization maintain records to see the selection criteria used to award the grant Describe in Part IV the organization's process. 	nts or assistand	e?					Yes No
Part IV, line 21, for any recipient		_					es" on Form 990,
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 noncash assistance	(h) Purpose of grant or assistance
(1) PEI KIDS AKA PREVENTION EDUCATION INC							
231 LAWRENCE ROAD LAWRENCEVILLE, NJ 08648	22-2594219	501(C)(3)	12,500.				GENERAL SUPPORT
(2) PEOPLE & STORIES/GENTE Y CUENTOS							
295 EGGERTS CROSSING ROAD	22-3260895	501(C)(3)	36,030.				THE ANNUAL FUND
(3) PEOPLE HELPING PEOPLE, INC.							
1011 LEESVILLE AVE RAHWAY, NJ 07065	22-3641781	501(C)(3)	13,920.				NEW JERSEY ARTS AND
(4) PERKINS CENTER FOR THE ARTS							
395 KINGS HIGHWAY MOORESTOWN, NJ 08057	22-2132838	501(C)(3)	18,750.				NEW JERSEY ARTS AND
(5) PET RESCUE OF MERCER							
P.O. BOX 2574 HAMILTON, NJ 08690	52-2157757	501(C)(3)	10,000.				GENERAL OPERATING SU
(6) PETERS VALLEY SCHOOL OF CRAFT, INC.							
19 KUHN ROAD LAYTON, NJ 07851	22-1920050	501(C)(3)	37,500.				NEW JERSEY ARTS AND
(7) PETEY GREENE PROGRAM INC.							
22 STOCKTON STREET PRINCETON, NJ 08540	30-0499760	501(C)(3)	5,750.				GENERAL SUPPORT
(8) PHILABUNDANCE							
3616 SOUTH GALLOWAY STREET	23-2290505	501(C)(3)	15,000.				GENERAL OPERATING SU
(9) PHILADELPHIA ANIMAL WELFARE SOCIETY (PAWS)							
100 NORTH 2ND STREET (AT ARCH)	26-3862631	501(C)(3)	132,400.				2021 DONATION
(10) PHILADELPHIA MURAL ARTS ADVOCATES							
1727-29 MOUNT VERNON STREET	23-2876470	501(C)(3)	25,000.				GENERAL OPERATING SU
(11) PHOENIX PRODUCTIONS, INC.							
59 CHESTNUT STREET RED BANK, NJ 07738	52-1569717	501(C)(3)	6,500.				NEW JERSEY ARTS AND
(12) PLANNED PARENTHOOD ASSOCIATION OF UTAH							
654 S 900 E SALT LAKE CITY, UT 84102	87-0288909	501(C)(3)	25,000.				GENERAL OPERATING SU

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service
Name of the organization

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Schedule I (Form 990) 2021

Employer identification number

PRINCETON AREA COMMUNITY FOUNDATION INC.						52-1746234	
Part I General Information on Grants and	d Assistanc	е					
 Does the organization maintain records to su the selection criteria used to award the grant Describe in Part IV the organization's proced 	s or assistand	e?					Yes No
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the		_					'es" on Form 990,
(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 noncash assistance	(h) Purpose of grant or assistance
(1) PLANNED PARENTHOOD FEDERATION OF AMERICA							
123 WILLIAM STREET - 10TH FLOOR	13-1644147	501(C)(3)	24,150.				GENERAL SUPPORT
(2) PLANNED PARENTHOOD OF NORTHERN, CENTRAL, AN							
196 SPEEDWELL AVENUE	22-1643997	501(C)(3)	362,531.				GENERAL SUPPORT
(3) PLAYHOUSE ARTISTS							
12 WEST MECHANIC STREET - SUITE 2A	47-5530437	501(C)(3)	10,000.				GALAVANT IN THE GARD
(4) PRESBYTERIAN CHURCH OF LAWRENCEVILLE							
2688 MAIN STREET (ROUTE 206)	21-0698910	501(C)(3)	9,250.				GENERAL SUPPORT
(5) PRESERVATION NEW JERSEY							
P.O. BOX 7815 WEST TRENTON, NJ 08628	22-2344109	501(C)(3)	22,750.				GENERAL SUPPORT
(6) PRESIDENT AND TRUSTEES OF BATES COLLEGE							
BATES COLLEGE GIFT PROCESSING	01-0211781	501(C)(3)	10,000.				BATES PARENT FUND T
(7) PRINCETON ACADEMY OF THE SACRED HEART							
1128 GREAT ROAD PRINCETON, NJ 08540	22-3623112	501(C)(3)	10,500.				GENERAL SUPPORT
(8) PRINCETON BLAIRSTOWN CENTER							
13 ROSZEL ROAD, SUITE C204A	22-6075831	501(C)(3)	18,517.				DANIELSON AND WASH H
(9) PRINCETON CHARTER SCHOOL CAPITAL & ENDOWMEN							
100 BUNN DRIVE PRINCETON, NJ 08540	38-3642213	501(C)(3)	13,000.				GENERAL SUPPORT
(10) PRINCETON CHILDREN'S FUND							
P.O. BOX 652 PRINCETON, NJ 08542	81-4663325	501(C)(3)	20,000.				GENERAL SUPPORT
(11) PRINCETON COMMUNITY HOUSING							
ONE MONUMENT DRIVE PRINCETON, NJ 08540-3036	13-3026182	501(C)(3)	33,450.				GENERAL SUPPORT
(12) PRINCETON DAY SCHOOL							
PO BOX 75 PRINCETON, NJ 08542	21-0727645	501(C)(3)	203,500.				THE ANNUAL FUND FROM
2 Enter total number of section 501(c)(3) and3 Enter total number of other organizations list	_	•					

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

2021

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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Schedule I (Form 990) 2021

Name of the organization						Employer identificat	ion number
PRINCETON AREA COMMUNITY FOUNDATION INC.						52-1746234	
Part I General Information on Grants and	d Assistanc	е				'	
 Does the organization maintain records to so the selection criteria used to award the grant Describe in Part IV the organization's proced Part II Grants and Other Assistance to D 	s or assistand dures for mor omestic Or	ee? nitoring the use ganizations ar	of grant funds in th	e United States.	nplete if the organiza	ation answered "Y	Yes No
Part IV, line 21, for any recipient the 1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	,000. Part II can	(e) Amount of non- cash assistance	additional space is n (f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) PRINCETON EDUCATION FOUNDATION					outor)		
25 VALLEY ROAD PRINCETON, NJ 08542-0176	22-3313605	501(C)(3)	5,100.				GENERAL SUPPORT
(2) PRINCETON FIRST AID & RESCUE SQUAD	22 3313003	301(0)(3)	371001				DENEME BOTTOM
2 MOUNT LUCAS ROAD PRINCETON, NJ 08540	23-7140015	501(C)(3)	144,500.				GENERAL SUPPORT
(3) PRINCETON HEALTH CARE SYSTEM FOUNDATION INC			,				
1 PLAINSBORO ROAD PLAINSBORO, NJ 08536-1913	22-2225911	501(C)(3)	47,550.				NURSES GOLF OUTING S
(4) PRINCETON NURSERY SCHOOL							
78 LEIGH AVENUE PRINCETON, NJ 08540	21-0643024	501(C)(3)	52,000.				GENERAL SUPPORT
(5) PRINCETON PRO MUSICA							
PO BOX 2244 PRINCETON, NJ 08543-2244	22-2317363	501(C)(3)	17,400.				ARTS
(6) PRINCETON PUBLIC LIBRARY							
SANDS LIBRARY BUILDING - DONATIONS DEPARTME	21-6008497	501(C)(3)	5,950.				GENERAL SUPPORT FROM
(7) PRINCETON RECREATION DEPARTMENT							
380 WITHERSPOON STREET PRINCETON, NJ 08540	11-1111111	501(C)(3)	14,000.				TO SUPPORT SCHOLARSE
(8) PRINCETON SENIOR RESOURCE CENTER							
101 POOR FARM ROAD, BUILDING B	22-2228083	501(C)(3)	1,482,671.				THE CAPITAL CAMPAIGN
(9) PRIVILEGE INSTITUTE INC.							
2221 S. WEBSTER AVE, SUITE 260A	46-4646857	501(C)(3)	25,000.				WHITE PRIVILEGE CONF
(10) SAVE, A FRIEND TO HOMELESS ANIMALS							
1010 ROUTE 601 SKILLMAN, NJ 08558	22-6082741	501(C)(3)	20,550.				GENERAL SUPPORT
(11) STORYTELLING ARTS							
PO BOX 157 STOCKTON, NJ 08559-0157	22-3473712	501(C)(3)	20,000.				NEW JERSEY ARTS AND
(12) STOUTSBURG SOURLAND AFRICAN AMERICAN MUSEUM							
PO BOX 162 HOPEWELL, NJ 08525	81-2811228	501(C)(3)	184,250.				GENERAL SUPPORT - F
2 Enter total number of section 501(c)(3) and 3 Enter total number of other organizations list	government	organizations lis	sted in the line 1 tal				GENERAL SUPPORT - F

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

2021

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Name of the organization						Employer identificat	ion number
PRINCETON AREA COMMUNITY FOUNDATION INC.						52-1746234	
Part I General Information on Grants and	d Assistanc	e				<u>'</u>	
 Does the organization maintain records to so the selection criteria used to award the grant Describe in Part IV the organization's proced Part II Grants and Other Assistance to D Part IV, line 21, for any recipient to 	s or assistand dures for mor omestic Or	ee? nitoring the use ganizations ar	of grant funds in th	e United States.	nplete if the organiz	ation answered "Y	Yes No
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 noncash assistance	(h) Purpose of grant or assistance
(1) STRAY CAT RELIEF FUND							
PO BOX 54845 PHILADELPHIA, PA 19148	27-3138601	501(C)(3)	11,170.				URGENT MEDICAL CARE
(2) THE THEATER PROJECT, A NJ NON-PROFIT CORP,							
676 LEXINGTON RD UNION, NJ 07083	45-2256837	501(C)(3)	7,500.				NEW JERSEY ARTS AND
(3) THE TLC FOUNDATION							
716 SOQUEL AVENUE - SUITE A	77-0266587	501(C)(3)	17,500.				RESEARCH, BUT NOT R
(4) THE TREVOR PROJECT INC.							
PO BOX 69232 WEST HOLLYWOOD, CA 90069	95-4681287	501(C)(3)	200,000.				GENERAL OPERATING S
(5) THE WATERSHED INSTITUTE							
31 TITUS MILL ROAD	21-0649717	501(C)(3)	230,000.				GENERAL SUPPORT
(6) TIDES FOUNDATION							
P.O. BOX 399389 SAN FRANCISCO, CA 94129	51-0198509	501(C)(3)	40,000.				GENERAL OPERATING S
(7) TRI-COUNTY COMMUNITY ACTION AGENCY (D/B/A G							
110 COHANSEY STREET BRIDGETON, NJ 08302	22-1942357	501(C)(3)	15,000.				GENERAL OPERATING S
(8) TRILOGY AN OPERA COMPANY							
30 HOWARD COURT NEWARK, NJ 07103	16-1681342	501(C)(3)	12,500.				NEW JERSEY ARTS AND
(9) TRINITY COLLEGE							
300 SUMMIT STREET HARTFORD, CT 06106	06-0646927	501(C)3	20,500.				GENERAL SUPPORT
(10) TRINITY COUNSELING SERVICE							
353 NASSAU STREET PRINCETON, NJ 08540	22-2185298	501(C)(3)	102,750.				GENERAL SUPPORT
(11) TRUSTEES OF BOSTON UNIVERSITY							
BOSTON UNIVERSITY BOSTON, MA 02215	04-2103547	501(C)(3)	7,100.				AGNI LITERARY MAGAZ
(12) TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA							
3451 WALNUT STREET - ROOM 433	23-1352685	501(C)(3)	15,000.				THE PENN CHAMPIONS
2 Enter total number of section 501(c)(3) and3 Enter total number of other organizations lis	•	•					

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

Schedule I (Form 990) 2021

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047
2021

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Name of the organization						Employer identificat	ion number
PRINCETON AREA COMMUNITY FOUNDATION INC.		52-1746234					
Part I General Information on Grants an	d Assistanc	e					
 Does the organization maintain records to s the selection criteria used to award the grant Describe in Part IV the organization's process 	ts or assistand dures for mor	e? nitoring the use	of grant funds in th	e United States.			Yes No
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient to		_					'es" on Form 990,
(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 noncash assistance	(h) Purpose of grant or assistance
(1) TWIN LIGHTS HISTORICAL SOCIETY							
2 LIGHTHOUSE ROAD HIGHLANDS, NJ 07732	22-6104975	501(C)(3)	9,600.				NEW JERSEY ARTS AND
(2) UC DAVIS CHEMICAL ENGINEERING EXCELLENCE FU							
ONE SHIELDS AVENUE DAVIS, CA 95616-5270	94-6036494	501(C)(3)	8,000.				UC DAVIS GIVE DAY CH
(3) UNICORN THERAPEUTIC HORSEBACK RIDING							
171 MARSHALL'S CORNER WOODSVILLE ROAD	81-4565168	501(C)(3)	6,500.				GENERAL SUPPORT
(4) UNION THEOLOGICAL SEMINARY							
3041 BROADWAY NEW YORK, NY 10027	13-1624238	501(C)(3)	40,000.				THE MCALPIN PROFESSO
(5) UNITARIAN UNIVERSALIST CONGREGATION OF PRIN							
50 CHERRY HILL ROAD PRINCETON, NJ 08540	21-0694751	501(C)(3)	6,500.				GENERAL SUPPORT
(6) UNITARIAN UNIVERSALIST CONGREGATION OF SOME							
123 EAST CLIFF STREET SOMERVILLE, NJ 08876	22-3532354	501(C)(3)	6,700.				CHURCH'S COMMUNITY P
(7) UNITED CHILDREN'S MUSIC PROJECT (FORMERLY U							
340B MOUNTAIN AVENUE UNION CITY, NJ 07087	45-3663891	501(C)(3)	45,000.				NEW JERSEY ARTS AND
(8) UNIVERSITY OF MARYLAND COLLEGE PARK FOUNDAT							
COLLEGE OF BEHAVIORAL AND SOCIAL SCIENCES	52-2197313	501(C)(3)	5,650.				WOMEN'S STUDIES PROG
(9) UNIVERSITY OF ORANGE, A NJ NONPROFIT CORPOR							
47 CLEVELAND STREET ORANGE, NJ 07050	27-3939616	501(C)(3)	18,750.				NEW JERSEY ARTS AND
(10) UNIVERSITY OF PITTSBURGH							
PETERSEN EVENTS CENTER, PANTHER CLUB	25-0965591	501(C)(3)	50,000.				VICTORY HEIGHTS
(11) URBANPROMISE TRENTON							
801 WEST STATE STREET TRENTON, NJ 08618	81-1548363	501(C)(3)	61,000.				GENERAL SUPPORT
(12) USTA FOUNDATION INCORPORATED							
70 WEST RED OAK LANE WHITE PLAINS, NY 10604	13-3782331	501(C)(3)	7,500.				NJTL - TO SUPPORT TH
2 Enter total number of section 501(c)(3) and	government	organizations lis	sted in the line 1 tal	ole			
3 Enter total number of other organizations lis	ted in the line	1 table				>	

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

2021

OMB No. 1545-0047

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vame of the organization						Employer Identificat	ion number
PRINCETON AREA COMMUNITY FOUNDATION INC.		52-1746234	52-1746234				
Part I General Information on Grants an	d Assistanc	е				•	
 Does the organization maintain records to s the selection criteria used to award the gran Describe in Part IV the organization's proces 	ts or assistand	e?					Yes No
Part II Grants and Other Assistance to D	Oomestic Or	ganizations ar	nd Domestic Gov	vernments. Com	plete if the organiz	ation answered "Y	es" on Form 990,
Part IV, line 21, for any recipient t	hat received	more than \$5	,000. Part II can b	oe duplicated if a	additional space is r	needed.	
(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 noncash assistance	(h) Purpose of grant or assistance
(1) UTEC, INC.							
P.O. BOX 7066 LOWELL, MA 01852	38-3669532	501(C)(3)	51,000.				UTEC - CORE OPERATIN
(2) VALLEYARTS LLC							
400 S. JEFFERSON STREET ORANGE, NJ 07050	26-1613016	501(C)(3)	30,000.				NEW JERSEY ARTS AND
(3) VAUGHN COLLEGE OF AERONAUTICS AND TECHNOLOG							
OFFICE OF ADVANCEMENT AND ENGAGEMENT	11-0461385	501(C)(3)	25,000.				AN ANCHOR GIFT FOR T
(4) VICTORY HALL INC.							
926 NEWARK AVE. JERSEY CITY, NJ 07306	22-3833573	501(C)(3)	7,500.				NEW JERSEY ARTS AND
(5) VILLAGES IN PARTNERSHIP							
P O BOX 52 ALLENTOWN, NJ 08501	45-2442802	501(C)(3)	12,000.				GENERAL SUPPORT
(6) VILLANOVA UNIVERSITY							
DEVELOPMENT DEPARTMENT VILLANOVA, PA 19085	23-1352688	501(C)(3)	10,000.				PLEASE GIVE TOWARDS
(7) VISIONS AND PATHWAYS							
49 BRAHMA AVENUE BRIDGEWATER, NJ 08807-6871	23-7061564	501(C)(3)	15,000.				GENERAL OPERATING SU
(8) VISUAL ARTS CENTER OF NEW JERSEY							
58 ELM STREET SUMMIT, NJ 07901	22-6046896	501(C)(3)	28,125.				NEW JERSEY ARTS AND
(9) VOICES OF SEPTEMBER 11TH							
80 MAIN STREET - SUITE 5	16-1639299	501(C)(3)	6,000.				IN MEMORY OF THOMAS
10) W.E.B. DUBOIS SCHOLARS INSTITUTE							
174 NASSAU STREET, SUITE 360	22-3294039	501(C)(3)	20,000.				GENERAL OPERATING SU
11) WASHINGTON DC ALUMNAE FOUNDATION INC.							
5521 NORTH CAPITOL STREET, N.E.	52-1433878	501(C)(3)	15,000.				GENERAL OPERATING SU
12) WEST WINDSOR ARTS COUNCIL							
952 ALEXANDER ROAD	03-0494648	501(C)(3)	8,750.				NEW JERSEY ARTS AND

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047
2021

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Schedule I (Form 990) 2021

Employer identification number

PRINCETON AREA COMMUNITY FOUNDATION INC.						52-1746234	
Part I General Information on Grants and	d Assistanc	е					
 Does the organization maintain records to so the selection criteria used to award the grant Describe in Part IV the organization's proced 	s or assistand	e?					Yes No
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the		_					'es" on Form 990,
(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 noncash assistance	(h) Purpose of grant or assistance
(1) WHALE TRUST							
P.O. BOX 243 MAKAWAO, HI 96768	91-2144632	501(C)(3)	15,000.				GENERAL SUPPORT
(2) WHARTON INSTITUTE FOR THE PERFORMING ARTS							
60 LOCUST AVENUE BERKELEY HEIGHTS, NJ 07922	22-2609457	501(C)(3)	23,000.				NEW JERSEY ARTS AND
(3) WHEATON ARTS AND CULTURAL CENTER							
1501 GLASSTOWN RD MILLVILLE, NJ 08332	22-1849118	501(C)(3)	50,000.				NEW JERSEY ARTS AND
(4) WHITESBOG PRESERVATION TRUST INC.							
120 W. WHITES BOGS RD. #34	22-2807777	501(C)(3)	10,000.				NEW JERSEY ARTS AND
(5) WHYY							
INDEPENDENCE MALL WEST	23-1438083	501(C)(3)	10,100.				UNRESTRICTED SUPPORT
(6) WIND OF THE SPIRIT IMMIGRANT RESOURCE CENTE							
PO BOX 345 MORRISTOWN, NJ 07960	22-3777248	501(C)(3)	26,000.				TO PROMOTE PUBLIC EN
(7) WOMANSPACE							
1530 BRUNSWICK AVENUE	22-2172522	501(C)(3)	19,050.				GENERAL SUPPORT
(8) WORLD CENTRAL KITCHEN INCORPORATED							
200 MASSACHUSETTS AVE NW 7TH FLOOR	27-3521132	501(C)(3)	13,000.				GENERAL OPERATING SU
(9) WOUNDED WARRIOR PROJECT							
PO BOX 758533 TOPEKA, KS 66675	20-2370934	501(C)(3)	10,600.				GENERAL OPERATING SU
(10) YOUNG AUDIENCES OF NEW JERSEY & EASTERN PA							
P. O. BOX 3175 PRINCETON, NJ 08540	23-7384991	501(C)(3)	369,644.				SUPPORTING THE 2021
(11) YOUNG SURVIVAL COALITION							
405 LEXINGTON AVE., 26TH FLOOR	13-4057685	501(C)(3)	5,250.				YSC - 2021 TOUR DE P
(12) YOUTH REPRESENT							
11 PARK PLACE SUITE 1512 NEW YORK, NY 10007	20-8034010	501(C)(3)	45,000.				GENERAL OPERATING SU
2 Enter total number of section 501(c)(3) and3 Enter total number of other organizations list	•	•					

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

2021

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Schedule I (Form 990) 2021

Name of the organization						Employer identificat	ion number	
PRINCETON AREA COMMUNITY FOUNDATION INC.						52-1746234		
Part I General Information on Grants	and Assistance	е						
 Does the organization maintain records to the selection criteria used to award the gr Describe in Part IV the organization's pro 	ants or assistanc	e?					Yes No	
Part II Grants and Other Assistance to	Domestic Org	ganizations ar	nd Domestic Gov	vernments. Com	plete if the organiz	ation answered "Y	es" on Form 990,	
Part IV, line 21, for any recipien	t that received	more than \$5	,000. Part II can b	oe duplicated if	additional space is n	eeded.		
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 noncash assistance	(h) Purpose of grant or assistance	
(1) YWCA PRINCETON								
59 PAUL ROBESON PLACE PRINCETON, NJ 08540	21-0635056	501(C)(3)	66,900.				GENERAL SUPPORT	
(2)								
(3)								
(4)								
(5)								
(6)								
(8)								
(9)								
(10)								
(11)								
(12)								
2 Enter total number of section 501(c)(3) at3 Enter total number of other organizations	•	•						

rt III	Grants and Other Assistance to Domestic Individuals.	Complete if the organization answered	"Yes" on Form 990, Part IV, line 22.
	Part III can be duplicated if additional space is needed.		

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
2					
3					
4					
5					
6					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

MONITORING OF GRANTS

THE COMMUNITY FOUNDATION REQUIRES GRANTEES OF COMPETITIVELY AWARDED GRANTS TO SUBMIT FULL WRITTEN REPORTS DETAILING PROGRAMMATIC ACHIEVEMENTS 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. SOME REQUIREMENTS WERE AMENDED DURING THE PANDEMIC. GRANTS FROM DONOR ADVISED AND DESIGNATED FUNDS ARE AWARDED AFTER A THOROUGH REVIEW OF THEIR FORM 990, AND IN MANY CASES, A REVIEW OF THEIR AUDITED FINANCIAL STATEMENTS. STAFF ALSO REVIEW WEBSITES, ANNUAL

Schedule I (Form 990) (2021)

Part III	Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.	
	Part III can be duplicated if additional space is needed.	

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
2					
3					
4					
5					
6					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

REPORTS AND NEWSLETTERS TO CONFIRM THE TAX-EXEMPT STATUS AND EFFICACY OF

EACH ORGANIZATION.

PRE-PANDEMIC, THE COMMUNITY FOUNDATION STAFF ALSO VISITED MANY LOCAL GRANTEES EACH YEAR FOR FACE-TO-FACE MEETINGS AND FIRST-HAND EXPERIENCE OF FUNDED PROGRAMS. BECAUSE OF PANDEMIC-RELATED CLOSURES, MANY OF THOSE SITE VISITS WERE CONDUCTED VIA ZOOM IN 2021.

SCHEDULE J (Form 990)

Compensation InformationFor certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

PRINCETON AREA COMMUNITY FOUNDATION INC.

Employer identification number

52-1746234

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
_	explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line			
	1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of:			
а	The organization?	5a		Х
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of:			
а	The organization?	6a		Х
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed			
	payments not described on lines 5 and 6? If "Yes," describe in Part III.	7	X	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
	in Part III	8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	a		

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

Schedule J (Form 990) 2021

For each individual whose compensation must be reported on 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 aren't 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.

(A) Name and Title		(B) Breakdown of W-2 a	nd/or 1099-MISC and/or	1099-NEC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
LAURA LONGMAN	(i)	180,611.	18,347.	NONE	11,473.	12,295.	222,726.	NONE
1 COO/CFO	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
JEFFREY M. VEGA	(i)	230,710.	22,960.	NONE	14,721.	18,420.	286,811.	NONE
2 PRESIDENT & CEO	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
MARCIA W. SHACKELFORD	(i)	163,608.	16,995.	NONE	10,579.	19,931.	211,113.	NONE
3 CHIEF PHILANTHROPY OF	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
NELIDA VALENTIN	(i)	133,018.	10,830.	NONE	8,424.	14,785.	167,057.	NONE
4 VP, GRANTS AND PROGRA	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
	(i)							
_ 5	(ii)							
	(i)							
_ 6	(ii)							
	(i)							
_ 7	(ii)							
	(i)							
_ 8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
11	(ii)							
	(i)							
12	(ii)							
	(i)							
13	(ii)							
	(i)							
14	(ii)							
	(i)							
15	(ii)							
	(i)							
16	(ii)							

Part | Supplemental Information

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 PERSONS LISTED IN FORM 990,
PART VII, SECTION A, LINE 1A DURING THE YEAR ENDED DECEMBER 31, 2021. 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 CONSISTENT WITH THE BOARD OF
TRUSTEES COMPENSATION PHILOSOPHY STATEMENT. 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.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

Employer identification number

PRINCETON AREA COMMUNITY FOUNDATION INC. 52-1746234							
Par	Part I Types of Property						
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported or Form 990, Part VIII, line	n Niethod C	(d) of determinin atribution am	
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		78	6,076,73	6. 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			
	which the organization completed F	Form 8283,	Part V, Donee Acknowledge	ement	29		
						Yes	No
30a	During the year, did the organizat				_		
	28, that it must hold for at least the	-					
	to be used for exempt purposes for		olding period?			30a	X
b	If "Yes," describe the arrangement i						
31	Does the organization have a				-		
	contributions?					31 X	1
32a	Does the organization hire or use	•	•	· •			
	contributions?					32a	X
	If "Yes," describe in Part II.		-l (-) (manta fam. 1111	- (-) !- ! ! !		
33	If the organization didn't report an	amount in c	olumn (c) for a type of pro	perty for which colum	n (a) is checked,		

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

Schedule M (Form 990) 2021

describe in Part II.

Part II Suppleme

Supplemental Information. 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 COMMUNITY FOUNDATION.

Part II Supplem

Supplemental Information. 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 1, LINE 1B

ON SCHEDULE M PART 1, LINE 1 B, THE ORGANIZATION REPORTED 78

CONTRIBUTIONS OF STOCK AT THEIR FMV. THIS IS THE NUMBER OF CONTRIBUTIONS,

NOT CONTRIBUTORS.

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.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

PRINCETON AREA COMMUNITY FOUNDATION INC.

52-1746234

CORE FORM 990 RESPONSES

FORM 990, PART III, LINE 4A

GRANTS: THE COMMUNITY FOUNDATION IS AN ACTIVE GRANTMAKER THROUGH SEVERAL GRANT PROGRAMS INCLUDING GREATER MERCER GRANTS AND THE FUND FOR WOMEN & GIRLS) AND GRANTMAKING FROM DONOR-ADVISED, DESIGNATED, NONPROFIT, AND FIELD-OF-INTEREST FUNDS. THE COMMUNITY FOUNDATION'S STRATEGIC GRANTMAKING PROGRAM, ALL KIDS THRIVE, IS ADDRESSING HIGH RATES OF CHRONIC ABSENTEEISM IN LOCAL PUBLIC SCHOOLS. BECAUSE OUR SCHOOLS WERE REMOTE DURING MUCH OF THE 2021 SCHOOL YEAR, WE ALLOWED OUR ALL KIDS THRIVE GRANTEE PARTNERS TO USE FUNDING TO INCREASE STUDENT ENGAGEMENT DURING VIRTUAL LEARNING AND TO HELP MEET THE BASIC NEEDS OF STUDENTS AND THEIR FAMILIES. COMMUNITY IMPACT GRANTS SUPPORT NONPROFITS WORKING TO IMPROVE THE QUALITY OF LIFE FOR CHILDREN, FAMILIES AND COMMUNITIES, INCLUDING NONPROFITS FOCUSING ON FOOD INSECURITY, MENTAL HEALTH, ECONOMIC DEVELOPMENT AND ARTS EDUCATION. WE ALSO SUPPORT GIVING CIRCLES AND FIELD OF INTEREST FUNDS TO ENGAGE WOMEN AND MILLENNIALS IN PHILANTHROPY. IN 2020, THE COMMUNITY FOUNDATION CREATED A COVID-19 RELIEF & RECOVERY FUND TO HELP LOCAL NONPROFITS RESPOND TO THE DEVASTATING IMPACT THE PANDEMIC HAD ON LOCAL COMMUNITIES. FUNDING WAS PROVIDED TO HELP NONPROFITS ADDRESS FOOD INSECURITY, OTHER BASIC AND SOCIAL SERVICE NEEDS, CAPACITY BUILDING, PHYSICAL AND MENTAL HEALTH NEEDS AND COUNSELING SERVICES, AND HOUSING AND RENTAL ASSISTANCE. LATER THAT YEAR, THE COMMUNITY FOUNDATION AGREED TO HOST A FUND CREATED TO ADDRESS THE PANDEMIC-RELATED NEEDS OF NONPROFIT ARTS, CULTURE AND HISTORICAL INSTITUTIONS. THE NJ ARTS & CULTURAL RECOVERY FUND IS AWARDING GRANTS TO NONPROFITS STATEWIDE. THE COMMUNITY

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.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2021

Open to Public Inspection

Internal Revenue Service

Name of the organization

Employer identification number

FOUNDATION ALSO MAKES GRANTS 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. IN 2015 THE BOARD DEFINED SOCIAL CAPITAL AS BUILDING COMMUNITIES. 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 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. THE COMMUNITY FOUNDATION PARTNERS WITH OTHER ORGANIZATIONS SUCH AS THE COUNCIL OF NJ GRANTMAKERS, THE GIFT PLANNING COUNCIL OF NEW JERSEY, CENTER FOR NONPROFITS, AND THE SUPPORT CENTER PARTNERSHIP IN PHILANTHROPY 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

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.

OMB No. 1545-0047

2021

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Department of the Treasury Internal Revenue Service

Name of the organization

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Inspection number

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." THE COMMUNITY FOUNDATION INCLUDES MANY SCHOLARSHIP FUNDS. IT GRANTS SCHOLARSHIPS AND AWARDS THROUGH COMPETITIVE PROCESSES TO SUPPORT COLLEGE STUDY AND TO HONOR ACHIEVEMENT IN THE ARTS, MUSIC, AND COMMUNITY SERVICE.

THE COMMUNITY FOUNDATION'S LIABILITIES TO ASSETS RATIO INCREASES AS THE COMMUNITY FOUNDATION'S PORTFOLIO OF NON-PROFIT FUNDS INCREASE. AS PART OF ITS MISSION, THE COMMUNITY FOUNDATION ASSISTS LOCAL NON-PROFIT ORGANIZATIONS INVEST THEIR MONEY. THIS RELATIONSHIP WITH LOCAL NON-PROFIT FUNDHOLDERS IS IMPORTANT TO OUR MISSION AND SHOWS AS A LIABILITY ON OUR FINANCIAL STATEMENTS.

FORM 990, PART VI, SECTION B, 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 & CEO WHO SUGGEST NECESSARY REVISIONS. THE FORM 990 IS SUBSEQUENTLY DISTRIBUTED TO THE FOUNDATION'S AUDIT COMMITTEE FOR FURTHER REVIEW AND APPROVAL. IT IS THEN DISTRIBUTED TO ALL TRUSTEES WITH SCHEDULE B REDACTED TO PROTECT THE PRIVACY OF DONORS, 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,

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.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2021

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Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

TRUSTEES AND VOLUNTEERS TO COMPLETE AND SIGN A CONFLICT OF INTEREST DISCLOSURE FORM ANNUALLY. ALL COMPLETED FORMS ARE REVIEWED BY THE PRESIDENT & CEO 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 AS WELL AS 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.

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 & CEO. THE EXECUTIVE COMMITTEE PERFORMS AN ANNUAL REVIEW OF THE PRESIDENT & CEO'S PERFORMANCE AGAINST OBJECTIVES AND METRICS AGREED TO AT THE BEGINNING OF THE FISCAL YEAR AND SOLICITS FEEDBACK FROM ALL TRUSTEES. AS PART OF THE BUDGET PROCESS, THE FINANCE COMMITTEE SUGGESTS AN INCREASE RANGE DURING THE BUDGET PROCESS. THE PRESIDENT & CEO THEN REVIEWS THE PERFORMANCE OF ALL OTHER STAFF AND RECOMMENDS SALARY INCREASES FOR THE NEXT YEAR TO THE EXECUTIVE COMMITTEE

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.

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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, SUCH AS FROM THE COUNCIL ON FOUNDATIONS AND/OR THE COUNCIL OF NEW JERSEY GRANTMAKERS. SEVERAL FACTORS ARE CONSIDERED SUCH AS COMMUNITY FOUNDATIONS OF SIMILAR SIZE AND COMPENSATION FOR SIMILAR POSITIONS IN THE LOCAL CENTRAL NEW JERSEY MARKETPLACE. THE FORMS 990 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.

FORM 990, PART XI, LINE 9

OTHER CHANGES IN NETS ASSETS:

CHANGE IN SPLIT INTEREST AGREEMENT \$46,742.

GRANT REFUNDS \$29,867

Name of the organization		Employer identification number
PRINCETON AREA COMMUNITY FOUNDATION	INC.	52-1746234
FORM 990, PART X - PREPAID EXPENSES AND DEFERE		
	BEGINNING	ENDING
DESCRIPTION	BOOK VALUE	BOOK VALUE
PREPAID EXPENSES	90,347.	92,528.
TOTALS	90,347.	92,528.

Name of the organization Employer identification number

FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

PRINCETON AREA COMMUNITY FOUNDATION INC.

MUTUAL FUNDS - FIXED ASSETS 15,917,718. 20,760,299. FMV

TOTALS ------ 46,159,846. 68,003,081.

52-1746234