

Public Disclosure

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2017

Open to Public Inspection

Form **990**

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

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

Department of the Treasury
Internal Revenue Service

A For the 2017 calendar year, or tax year beginning , 2017, and ending , 20

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization PRINCETON AREA COMMUNITY FOUNDATION INC. Doing Business As			D Employer identification number 52-1746234	
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 15 PRINCESS ROAD		E Telephone number (609) 219-1800		
	City or town, state or province, country, and ZIP or foreign postal code LAWRENCEVILLE, NJ 08648			G Gross receipts \$ 51,170,760.	
	F Name and address of principal officer: JEFFREY VEGA 15 PRINCESS ROAD LAWRENCEVILLE, NJ 08648			H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527					
J Website: ▶ WWW.PACF.ORG					
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶					
L Year of formation: 1991				M State of legal domicile: NJ	

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: THE PRINCETON AREA COMMUNITY FOUNDATION PROMOTES PHILANTHROPY THROUGH EDUCATION, GRANT MAKING, AND BY CREATING A NETWORK OF DONORS, ADVISORS AND NONPROFIT CORPORATIONS.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	23.
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	23.
	5 Total number of individuals employed in calendar year 2017 (Part V, line 2a)	5	11.
	6 Total number of volunteers (estimate if necessary)	6	42.
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	143,637.
b Net unrelated business taxable income from Form 990-T, line 34	7b	95,947.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	27,602,987.	33,824,088.
	9 Program service revenue (Part VIII, line 2g)	0.	0.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-1,325,633.	4,078,243.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	4,718.	10,683.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	26,282,072.	37,913,014.
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	16,794,725.
14 Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,059,468.	1,458,793.
16a Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 630,010.			
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		434,705.	531,610.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		18,288,898.	22,307,820.
19 Revenue less expenses. Subtract line 18 from line 12	7,993,174.	15,605,194.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 143,441,191.	End of Year 175,719,923.
	21 Total liabilities (Part X, line 26)	1,850,912.	1,492,657.
	22 Net assets or fund balances. Subtract line 21 from line 20.	141,590,279.	174,227,266.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer		Date
	Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	BRAD CARUSO		
	Firm's name ▶ WITHUMSMITH+BROWN, PC	Firm's EIN ▶ 22-2027092	Check <input type="checkbox"/> if self-employed
	Firm's address ▶ ONE TOWER CENTER BLVD 14TH FL EAST BRUNSWICK, NJ 08816	Phone no. 732-828-1614	PTIN P01249134

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Paperwork Reduction Act Notice, see the separate instructions. Form **990** (2017)

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PRINCETON AREA COMMUNITY FOUNDATION INC.

52-1746234

Form 990 (2017)

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Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III Yes No

1 Briefly describe the organization's mission:

THE COMMUNITY FOUNDATION PROMOTES PHILANTHROPY TO ADVANCE THE WELL-BEING OF OUR COMMUNITIES.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 21,054,348. including grants of \$ 20,317,417.) (Revenue \$)

THE COMMUNITY FOUNDATION IS AN ACTIVE GRANTMAKER THROUGH TWO COMPETITIVE GRANT PROGRAMS AND ALSO FROM DONOR-ADVISED, DESIGNATED, FIELD-OF-INTEREST, AND NONPROFIT FUNDS. THE COMMUNITY FOUNDATION ENCOURAGES PHILANTHROPY IN THE REGION THROUGH EDUCATIONAL PARTNERSHIPS AND BY ENGAGING WITH DONORS, NONPROFITS, AND PROFESSIONAL ADVISORS. (SEE SCHEDULE O FOR MORE DETAIL.)

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 21,054,348.

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Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A.</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i>		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? <i>If "Yes," complete Schedule C, Part II.</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III.</i>		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? <i>If "Yes," complete Schedule D, Part I.</i>	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 "Yes," complete Schedule D, Part II.</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV.</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V.</i>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>	X	
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? <i>If "Yes," complete Schedule D, Part VII.</i>	X	
c 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? <i>If "Yes," complete Schedule D, Part VIII.</i>		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i>		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X.</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII.</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		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? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV.</i>	X	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	X	
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? <i>If "Yes," complete Schedule G, Part I</i> (see instructions).		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II.</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i>		X

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Part IV Checklist of Required Schedules (continued)

		Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H.</i>	20a		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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? <i>If "Yes," complete Schedule I, Parts I and II.</i>	21	X	
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? <i>If "Yes," complete Schedule I, Parts I and III.</i>	22	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	23	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.</i>	24a		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	26		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III.</i>	27		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>	28b		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV.</i>	28c		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i>	29	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>	30		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>	31		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	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? <i>If "Yes," complete Schedule R, Part I</i>	33		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	X	

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Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
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.		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?.		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.		
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)?		X
4b	If "Yes," enter the name of the foreign country: <input type="text"/> 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?.		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?.		
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?.		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?.		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	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?	X	
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?.		
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?		X
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the sponsoring organization make any taxable distributions under section 4966?.		X
9b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?.		X
10	Section 501(c)(7) organizations. Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	Section 501(c)(12) organizations. Enter:		
11a	Gross income from members or shareholders		
11b	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?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
13b	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		
13c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in 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

	Yes	No
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 in Schedule O. 1a 23		
b Enter the number of voting members included in line 1a, above, who are independent 1b 23		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? . .		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6 Did the organization have members or stockholders?		X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O.</i>		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?		X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? . . .		
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? .		X
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	X	
13 Did the organization have a written whistleblower policy?	X	
14 Did the organization have a written document retention and destruction policy?	X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	X	
b Other officers or key employees of the organization	X	
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
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

- 17** List the states with which a copy of this Form 990 is required to be filed NJ, PA,
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 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.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records: ►
JEFFREY VEGA 15 PRINCESS ROAD LAWRENCEVILLE, NJ 08648 609-219-1800

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

Check if Schedule O contains a response or note to any line in this Part VII.

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) CAROL P. HERRING CHAIR - TRUSTEE	5.00 0.	X		X				0.	0.	0.
(2) ANTHONY J. CIMINO VICE CHAIR - TRUSTEE	3.00 0.	X		X				0.	0.	0.
(3) MEREDITH C. MOORE VICE CHAIR - TRUSTEE	3.00 0.	X		X				0.	0.	0.
(4) MARGUERITE L. MOUNT, CPA, CGMA TREASURER - TRUSTEE	1.00 0.	X		X				0.	0.	0.
(5) PATRICIA U. HERST, ESQ. SECRETARY - TRUSTEE	1.00 0.	X		X				0.	0.	0.
(6) WILLIAM P. BURKS MD TRUSTEE	5.00 0.	X						0.	0.	0.
(7) ANDREW K. GOLDEN, CFA TRUSTEE	5.00 0.	X						0.	0.	0.
(8) JOHN HATCH, FAIA, LEED AP TRUSTEE	1.00 0.	X						0.	0.	0.
(9) ELEANOR V. HORNE TRUSTEE	5.00 0.	X						0.	0.	0.
(10) CAROLYN P. SANDERSON, CFP TRUSTEE	5.00 0.	X						0.	0.	0.
(11) DAVID R. SCOTT, ESQ. TRUSTEE	1.00 0.	X						0.	0.	0.
(12) LISA SKEETE TATUM TRUSTEE	1.00 0.	X						0.	0.	0.
(13) JOHN D. WALLACE TRUSTEE	5.00 0.	X						0.	0.	0.
(14) THOMAS P. WEIDNER, ESQ. TRUSTEE	1.00 0.	X						0.	0.	0.

Public Disclosure

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) ANA BERDECIA ----- TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(16) WILLIAM HARLA ----- TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(17) ANDREW LIEU ----- TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(18) ELIZABETH MCNEILLY ----- TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(19) JAMIE KYTE SAPOCH ----- TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(20) CALVIN B. THOMAS, JR. ----- TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(21) MICHAEL H. ULLMANN ----- TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(22) VERNON BRAMBLE ----- TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(23) SHAWN W. ELLSWORTH ----- TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(24) LAURA LONGMAN ----- CFO	40.00 ----- 0.			X				159,547.	0.	18,927.
(25) JEFFREY VEGA ----- PRESIDENT & CEO	40.00 ----- 0.			X				223,021.	0.	28,934.
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								746,090.	0.	87,017.
d Total (add lines 1b and 1c)								746,090.	0.	87,017.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **▶** 5

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

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 **▶** 0.

Public Disclosure

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(26) ELIZABETH WAGNER ----- VP OF DEVELOPMENT	40.00 0.					X		138,246.	0.	8,847.
(27) DIANA D LEIGHTON ----- VP OF DEVELOPMENT PROGRAMS	40.00 0.					X		111,389.	0.	14,659.
(28) NELIDA VALENTIN ----- VP OF GRANTS AND PROGRAMS	40.00 0.					X		113,887.	0.	15,650.
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ **5**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

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 ▶

Public Disclosure

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII. X

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	7,458.				
	d Related organizations	1d					
	e Government grants (contributions) . .	1e					
	f All other contributions, gifts, grants, and similar amounts not included above .	1f	33,816,630.				
	g Noncash contributions included in lines 1a-1f: \$		20,505,102.				
	h Total. Add lines 1a-1f			33,824,088.			
Program Service Revenue	2a _____	Business Code					
	b _____						
	c _____						
	d _____						
	e _____						
	f All other program service revenue						
	g Total. Add lines 2a-2f			0.			
Other Revenue	3 Investment income (including dividends, and other similar amounts). <u>ATTACHMENT 1</u>			1,764,951.		143,637.	1,621,314.
	4 Income from investment of tax-exempt bond proceeds			0.			
	5 Royalties			0.			
	6a Gross rents	(i) Real	(ii) Personal				
	b Less: rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)			0.			
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b Less: cost or other basis and sales expenses						
	c Gain or (loss)						
	d Net gain or (loss)			2,313,292.			2,313,292.
	8a Gross income from fundraising events (not including \$ <u>7,458.</u> of contributions reported on line 1c). See Part IV, line 18	<u>ATCH 2</u>					
	b Less: direct expenses			9,478.			
	c Net income or (loss) from fundraising events. <u>ATCH 3</u>			0.			
	9a Gross income from gaming activities. See Part IV, line 19						
b Less: direct expenses							
c Net income or (loss) from gaming activities			0.				
10a Gross sales of inventory, less returns and allowances							
b Less: cost of goods sold							
c Net income or (loss) from sales of inventory			0.				
Miscellaneous Revenue							
11a MISCELLANEOUS REVENUE	Business Code						
b _____							
c _____							
d All other revenue							
e Total. Add lines 11a-11d			10,683.				
12 Total revenue. See instructions.			37,913,014.		143,637.	3,945,289.	

Public Disclosure

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 response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	19,957,919.	19,957,919.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	290,811.	290,811.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	68,687.	68,687.		
4 Benefits paid to or for members	0.			
5 Compensation of current officers, directors, trustees, and key employees	382,568.	156,147.	102,565.	123,856.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.			
7 Other salaries and wages	824,315.	336,449.	220,996.	266,870.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	61,532.	27,884.	27,975.	5,673.
9 Other employee benefits	104,536.	36,477.		68,059.
10 Payroll taxes	85,842.	38,458.	39,560.	7,824.
11 Fees for services (non-employees):				
a Management	44,284.		44,284.	
b Legal	9,860.		9,860.	
c Accounting	25,200.		25,200.	
d Lobbying	0.			
e Professional fundraising services. See Part IV, line 17.	0.			
f Investment management fees	10,943.		10,943.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	0.			
12 Advertising and promotion	40,070.		13,477.	26,593.
13 Office expenses	93,080.	28,483.	47,918.	16,679.
14 Information technology	102,371.	41,783.	27,446.	33,142.
15 Royalties	0.			
16 Occupancy	94,342.	37,647.	26,833.	29,862.
17 Travel	12,817.	5,231.	3,437.	4,149.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19 Conferences, conventions, and meetings	77,768.	19,852.	17,371.	40,545.
20 Interest	0.			
21 Payments to affiliates	0.			
22 Depreciation, depletion, and amortization	11,203.	4,572.	3,004.	3,627.
23 Insurance	9,672.	3,948.	2,593.	3,131.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a _____				
b _____				
c _____				
d _____				
e All other expenses _____				
25 Total functional expenses. Add lines 1 through 24e	22,307,820.	21,054,348.	623,462.	630,010.
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)	0.			

Public Disclosure

PRINCETON AREA COMMUNITY FOUNDATION INC.

52-1746234

Form 990 (2017)

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Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X. X

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	22,209.	1	39,915.
	2 Savings and temporary cash investments	26,966,289.	2	28,715,422.
	3 Pledges and grants receivable, net	2,193,655.	3	793,972.
	4 Accounts receivable, net	0.	4	0.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0.	5	0.
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0.	6	0.
	7 Notes and loans receivable, net	0.	7	0.
	8 Inventories for sale or use	0.	8	0.
	9 Prepaid expenses and deferred charges ATCH 4	31,512.	9	37,566.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	138,869.		
	b Less: accumulated depreciation 10b	124,847.		
		25,225.	10c	14,022.
	11 Investments - publicly traded securities ATCH 5	36,311,476.	11	48,178,308.
	12 Investments - other securities. See Part IV, line 11	77,673,156.	12	97,691,188.
	13 Investments - program-related. See Part IV, line 11	0.	13	0.
	14 Intangible assets	0.	14	0.
15 Other assets. See Part IV, line 11	217,669.	15	249,530.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	143,441,191.	16	175,719,923.	
Liabilities	17 Accounts payable and accrued expenses	47,764.	17	116,639.
	18 Grants payable	1,781,284.	18	1,365,802.
	19 Deferred revenue ATCH 6	21,864.	19	10,216.
	20 Tax-exempt bond liabilities	0.	20	0.
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	0.	21	0.
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0.	22	0.
	23 Secured mortgages and notes payable to unrelated third parties	0.	23	0.
	24 Unsecured notes and loans payable to unrelated third parties	0.	24	0.
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	0.	25	0.
	26 Total liabilities. Add lines 17 through 25	1,850,912.	26	1,492,657.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> X and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	140,792,735.	27	173,717,861.
	28 Temporarily restricted net assets	797,544.	28	509,405.
	29 Permanently restricted net assets	0.	29	0.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	141,590,279.	33	174,227,266.
	34 Total liabilities and net assets/fund balances	143,441,191.	34	175,719,923.

Form **990** (2017)

Public Disclosure

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI.

1	Total revenue (must equal Part VIII, column (A), line 12)	1	37,913,014.
2	Total expenses (must equal Part IX, column (A), line 25)	2	22,307,820.
3	Revenue less expenses. Subtract line 2 from line 1	3	15,605,194.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	141,590,279.
5	Net unrealized gains (losses) on investments	5	17,021,623.
6	Donated services and use of facilities	6	0.
7	Investment expenses	7	0.
8	Prior period adjustments	8	0.
9	Other changes in net assets or fund balances (explain in Schedule O)	9	10,170.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	174,227,266.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII.

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled 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?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Public Disclosure

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.

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

Name of the organization PRINCETON AREA COMMUNITY FOUNDATION INC.	Employer identification number 52-1746234
--	--

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**.
Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations.

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Public Disclosure

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	9,153,790.	18,198,027.	26,475,954.	27,609,432.	33,816,630.	115,253,833.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4 Total. Add lines 1 through 3.	9,153,790.	18,198,027.	26,475,954.	27,609,432.	33,816,630.	115,253,833.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						38,242,627.
6 Public support. Subtract line 5 from line 4						77,011,206.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7 Amounts from line 4.	9,153,790.	18,198,027.	26,475,954.	27,609,432.	33,816,630.	115,253,833.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	3,378,689.	6,140,987.	3,578,435.	1,180,936.	1,764,951.	16,043,998.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . ATCH. 1	14,380.	20,055.	11,345.	7,395.	18,141.	71,316.
11 Total support. Add lines 7 through 10						131,369,147.
12 Gross receipts from related activities, etc. (see instructions)				12		
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f)).	14	58.62%
15 Public support percentage from 2016 Schedule A, Part II, line 14	15	62.45%
16a 33 1/3% support test - 2017. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization.		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2016. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10%-facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.		<input type="checkbox"/>
b 10%-facts-and-circumstances test - 2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

Public Disclosure

PRINCETON AREA COMMUNITY FOUNDATION INC.

52-1746234

Schedule A (Form 990 or 990-EZ) 2017

Page **3**

Part III Support Schedule for Organizations Described in Section 509(a)(2)
 (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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(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.						
7a 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						
c Add lines 7a and 7b.						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts from line 6.						
10a 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						
c 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 (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f)).	15	%
16 Public support percentage from 2016 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2016 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2017. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization .

b 33 1/3% support tests - 2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ►

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ►

Public Disclosure

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a 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)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Public Disclosure

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>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 directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
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? <i>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.</i>		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>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).</i>		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (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?		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section 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 instructions).			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).			
2 Activities Test. Answer (a) and (b) below.		Yes	No
a 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? <i>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.</i>			
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>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.</i>			
3 Parent of Supported Organizations. Answer (a) and (b) below.			
a 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? <i>Provide details in Part VI.</i>			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>			

Public Disclosure

PRINCETON AREA COMMUNITY FOUNDATION INC.

52-1746234

Schedule A (Form 990 or 990-EZ) 2017

Page **6**

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

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

Section A - Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1	
2 Recoveries of prior-year distributions	2	
3 Other gross income (see instructions)	3	
4 Add lines 1 through 3.	4	
5 Depreciation and depletion	5	
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7 Other expenses (see instructions)	7	
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8	

Section B - Minimum Asset Amount	(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a Average monthly value of securities	1a	
b Average monthly cash balances	1b	
c Fair market value of other non-exempt-use assets	1c	
d Total (add lines 1a, 1b, and 1c)	1d	
e Discount claimed for blockage or other factors (explain in detail in Part VI):		
2 Acquisition indebtedness applicable to non-exempt-use assets	2	
3 Subtract line 2 from line 1d.	3	
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6 Multiply line 5 by .035.	6	
7 Recoveries of prior-year distributions	7	
8 Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount		Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2 Enter 85% of line 1.	2	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4 Enter greater of line 2 or line 3.	4	
5 Income tax imposed in prior year	5	
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	

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

Schedule A (Form 990 or 990-EZ) 2017

Public Disclosure

PRINCETON AREA COMMUNITY FOUNDATION INC.

52-1746234

Schedule A (Form 990 or 990-EZ) 2017

Page **7**

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2017 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required-explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013			
c From 2014			
d From 2015			
e From 2016			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2017 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2017, 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 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2018. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2013			
b Excess from 2014			
c Excess from 2015			
d Excess from 2016			
e Excess from 2017			

Schedule A (Form 990 or 990-EZ) 2017

Public Disclosure

PRINCETON AREA COMMUNITY FOUNDATION INC.

52-1746234

Schedule A (Form 990 or 990-EZ) 2017

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Part VI **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.)

ATTACHMENT 1

SCHEDULE A, PART II - OTHER INCOME

DESCRIPTION	2013	2014	2015	2016	2017	TOTAL
MISCELLANEOUS REVENUE	14,380.	20,055.	11,345.	7,395.	10,683.	63,858.
NET FUNDRAISING REVENUE					7,458.	7,458.
TOTALS	<u>14,380.</u>	<u>20,055.</u>	<u>11,345.</u>	<u>7,395.</u>	<u>18,141.</u>	<u>71,316.</u>

Public Disclosure

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2017

Name of the organization

PRINCETON AREA COMMUNITY FOUNDATION INC.

Employer identification number

52-1746234

Organization type (check one):

Filers of:

Section:

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 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

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

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

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

Public Disclosure

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) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 4,900,125.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ 7,025,962.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ 750,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4		\$ 753,192.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
5		\$ 3,577,613.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
6		\$ 2,359,146.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)

Public Disclosure

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) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ 1,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8		\$ 1,362,778.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9		\$ 2,056,677.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
10		\$ 1,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Public Disclosure

Name of organization PRINCETON AREA COMMUNITY FOUNDATION INC.

Employer identification number

52-1746234

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
2	54,330 SHARES OF JOHNSON & JOHNSON	\$ 7,025,962.	12/31/2017
4	14,757 SHARES OF GOLDMAN SACHS	\$ 3,577,613.	12/31/2017
5	5,000 SHARES OF ALIGN TECHNOLOGY 3,358 SHARES OF LABCORP 10,000 SHARES OF GILEAD	\$ 2,359,146.	12/31/2017
3	10,000 SHARES OF GLAXO SMITH KLINE 4,900 SHARES OF EXXON MOBIL	\$ 753,192.	12/31/2017
8	75,655 SHARES OF VARIOUS COMMON STOCK	\$ 1,954,732.	12/31/2017
		\$	

Public Disclosure

Name of organization PRINCETON AREA COMMUNITY FOUNDATION INC.

Employer identification number
52-1746234

Part III *Exclusively* religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____	_____	_____

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
_____	_____
_____	_____
_____	_____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____	_____	_____

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
_____	_____
_____	_____
_____	_____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____	_____	_____

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
_____	_____
_____	_____
_____	_____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____	_____	_____

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
_____	_____
_____	_____
_____	_____

Public Disclosure

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.

OMB No. 1545-0047

2017

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 I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	212.	185.
2 Aggregate value of contributions to (during year)	29,178,170.	4,486,563.
3 Aggregate value of grants from (during year) . .	15,598,014.	4,758,987.
4 Aggregate value at end of year	92,029,967.	77,793,354.
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).	<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education) <input type="checkbox"/> Preservation of a historically important land area <input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of a certified historic structure <input type="checkbox"/> Preservation of open space											
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.	<table border="1"> <thead> <tr> <th></th> <th>Held at the End of the Tax Year</th> </tr> </thead> <tbody> <tr> <td>a Total number of conservation easements</td> <td>2a</td> </tr> <tr> <td>b Total acreage restricted by conservation easements</td> <td>2b</td> </tr> <tr> <td>c Number of conservation easements on a certified historic structure included in (a)</td> <td>2c</td> </tr> <tr> <td>d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register</td> <td>2d</td> </tr> </tbody> </table>			Held at the End of the Tax Year	a Total number of conservation easements	2a	b Total acreage restricted by conservation easements	2b	c Number of conservation easements on a certified historic structure included in (a)	2c	d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d
	Held at the End of the Tax Year											
a Total number of conservation easements	2a											
b Total acreage restricted by conservation easements	2b											
c Number of conservation easements on a certified historic structure included in (a)	2c											
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d											
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____												
4 Number of states where property subject to conservation easement is located ▶ _____												
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	<input type="checkbox"/> Yes <input type="checkbox"/> No											
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____												
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____												
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	<input type="checkbox"/> Yes <input type="checkbox"/> No											
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.												

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.		
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:		
(i) Revenue included on Form 990, Part VIII, line 1.	▶ \$ _____	
(ii) Assets included in Form 990, Part X.	▶ \$ _____	
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:		
a Revenue included on Form 990, Part VIII, line 1.	▶ \$ _____	
b Assets included in Form 990, Part X.	▶ \$ _____	

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

Schedule D (Form 990) 2017

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Public Disclosure

PRINCETON AREA COMMUNITY FOUNDATION INC.

52-1746234

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** 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? Yes No

Part IV Escrow 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? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|--|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	39,931,124.	37,386,642.	39,176,339.	37,970,828.	34,905,245.
b Contributions	214,467.	717,196.	112,713.	1,535,733.	763,728.
c Net investment earnings, gains, and losses	6,090,920.	3,665,753.	156,673.	1,113,995.	3,814,321.
d Grants or scholarships	962,600.	626,786.	1,364,450.	1,024,737.	1,112,965.
e Other expenditures for facilities and programs	539,842.	844,227.	306,278.	41,229.	21,250.
f Administrative expenses	372,416.	367,454.	388,355.	378,251.	378,251.
g End of year balance	44,361,653.	39,931,124.	37,386,642.	39,176,339.	37,970,828.

- 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 ▶ _____ %
 - c** Temporarily restricted endowment ▶ _____ %
- 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:
- | | Yes | No |
|---|---------------|----|
| (i) unrelated organizations | 3a(i) | 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 | |
- 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 (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		63,318.	57,175.	6,143.
d Equipment		75,551.	67,672.	7,879.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				14,022.

Public Disclosure

PRINCETON AREA COMMUNITY FOUNDATION INC.

52-1746234

Schedule D (Form 990) 2017

Page **3**

Part VII Investments - Other Securities.

Complete if the organization answered "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 valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests	23,857.	ATTACHMENT 1
(3) Other		
(A) ALTERNATIVE - MULTI-STRATEGY	39,598,318.	FMV
(B) ALTERNATIVE - L/S STRATEGY	5,035,109.	FMV
(C) ALTERNATIVE - EQUITY FUNDS	32,802,615.	FMV
(D) ALTERNATIVE - REAL ASSETS	5,377,591.	FMV
(E) ALTERNATIVE - NAV INVESTMENTS	14,853,698.	FMV
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶	97,691,188.	

Part VIII Investments - Program Related.

Complete if the organization answered "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 valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶		

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Public Disclosure

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 INCOME TAXES. THE COMMUNITY FOUNDATION FOLLOWS THE PRONOUNCEMENT RELATED TO ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES AND THERE WERE NO UNCERTAIN TAX POSITIONS AT DECEMBER 31, 2017 AND 2016. IN ADDITION, NO INCOME TAX RELATED PENALTIES OR INTEREST HAVE BEEN RECORDED FOR THE YEARS ENDED DECEMBER 31, 2017 AND 2016.

SCHEDULE D, PART XI, LINE 4B

NET CONTRIBUTIONS AND GRANTS FROM NON-PROFIT ORGANIZATION FUNDS AND INVESTMENT EXPENSES. THE COMMUNITY FOUNDATION FOLLOWS THE ACCOUNTING GUIDANCE FOR NON-PROFIT ORGANIZATION FUNDS WHICH ARE SUBJECT TO VARIANCE POWER. THESE FUNDS ARE SHOWN AS CUSTODIAL FUNDS ON THE FINANCIAL STATEMENTS IN ACCORDANCE WITH GENERALLY ACCEPTED ACCOUNTING PRINCIPLES IN THE UNITED STATES, BUT HAVE BEEN INCLUDED IN CHANGES IN NET ASSETS FOR THE PREPARATION OF THE FORM 990 AS DETAILED IN THE AUTHORITATIVE LITERATURE. THE OVERALL NET ADJUSTMENT FOR THESE FUNDS IS \$8,437,372 ON LINE 4B INCLUDING CONTRIBUTIONS AND ALLOCABLE SHARE OF INVESTMENT

Public Disclosure

Part XIII Supplemental Information (continued)

EARNINGS.

SCHEDULE D, PART XII, LINE 4B

GRANTS FROM NON-PROFIT ORGANIZATION FUNDS. THE COMMUNITY FOUNDATION
 FOLLOWS THE ACCOUNTING GUIDANCE FOR NON-PROFIT ORGANIZATION FUNDS WHICH
 ARE SUBJECT TO VARIANCE POWER. THESE FUNDS ARE SHOWN AS CUSTODIAL FUNDS
 ON THE FINANCIAL STATEMENTS IN ACCORDANCE WITH GENERALLY ACCEPTED
 ACCOUNTING PRINCIPLES IN THE UNITED STATES, BUT HAVE BEEN INCLUDED IN
 CHANGES IN NET ASSETS FOR THE PREPARATION OF THE FORM 990 AS DETAILED IN
 THE AUTHORITATIVE LITERATURE. ACCORDINGLY, GRANTS AND EXPENSES OF
 \$2,576,211 ARE INCLUDED IN PART IX AND ARE SHOWN IN THE RECONCILIATION OF
 EXPENSES ON LINE 4B.

SCHEDULE D, PART XI, LINE 2D

CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS: \$25,161
 SPECIAL EVENTS EXPENSE: \$9,478
 TOTAL ON PART XI LINE 2D: \$34,639

SCHEDULE D, PART XII, LINE 2D

SCHOLARSHIP NPV ADJUSTMENT: \$(14,992).
 SPECIAL EVENTS EXPENSE: \$(9,478)
 TOTAL ADJUSTMENT ON PART XII, LINE 2D : (24,470).

ATTACHMENT 1

SCHEDULE D, PART VII - INVESTMENTS - CLOSELY HELD EQUITY INTERESTS

<u>DESCRIPTION</u>	<u>BOOK VALUE</u>	<u>COST OR FMV</u>
PRIVATELY HELD STOCK	23,857.	FMV
TOTALS	<u>23,857.</u>	

Public Disclosure

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No. 1545-0047

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ 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.

Name of the organization

PRINCETON AREA COMMUNITY FOUNDATION INC.

Employer identification number

52-1746234

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

- For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space 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	0.	0.	GRANTMAKING		62,687.
(2) NORTH AMERICA	0.	0.	GRANTMAKING		6,000.
(3) CENTRAL AMERICA/CARIBBEAN	0.	0.	INVESTMENTS		14,853,698.
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total					14,922,385.
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)					14,922,385.

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

Schedule F (Form 990) 2017

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Public Disclosure

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

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)			NORTH AMERICA	GENERAL SUPP	6,000.	EFT			FMV
(2)			CENT. AMERICA/CARIBBEAN	GENERAL SUPP	62,687.	EFT			FMV
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

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

3 Enter total number of other organizations or entities ▶ _____

Public Disclosure

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)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Public Disclosure

PRINCETON AREA COMMUNITY FOUNDATION INC.

52-1746234

Schedule F (Form 990) 2017

Page **4**

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes 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 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)* Yes No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *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 No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* Yes No

Schedule F (Form 990) 2017

Public Disclosure

PRINCETON AREA COMMUNITY FOUNDATION INC.

52-1746234

Schedule F (Form 990) 2017

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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 EDUCATIONAL INSTITUTIONS IN SUPPORT OF SCHOLARSHIP RECIPIENTS ARE MONITORED EACH YEAR TO DETERMINE THAT RECIPIENTS ARE ENROLLED AND MAINTAIN COMPLIANCE WITH SCHOLARSHIP GUIDELINES.

Public Disclosure

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

2017

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

▶ Go to www.irs.gov/Form990 for the latest instructions.

Name of the organization

PRINCETON AREA COMMUNITY FOUNDATION INC.

Employer identification number

52-1746234

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- | | |
|---|--|
| <input type="checkbox"/> a Mail solicitations | <input type="checkbox"/> e Solicitation of non-government grants |
| <input type="checkbox"/> b Internet and email solicitations | <input type="checkbox"/> f Solicitation of government grants |
| <input type="checkbox"/> c Phone solicitations | <input type="checkbox"/> g Special fundraising events |
| <input type="checkbox"/> d In-person solicitations | |

- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No
- b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Public Disclosure

PRINCETON AREA COMMUNITY FOUNDATION INC.

52-1746234

Schedule G (Form 990 or 990-EZ) 2017

Page **2**

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		LUNCHEON <small>(event type)</small>	DINNER <small>(event type)</small>	 <small>(total number)</small>	 <small>(add col. (a) through col. (c))</small>
Revenue	1 Gross receipts	9,795.	7,141.	0.	16,936.
	2 Less: Contributions	4,900.	2,558.	0.	7,458.
	3 Gross income (line 1 minus line 2)	4,895.	4,583.	0.	9,478.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	4,445.	3,834.	0.	8,279.
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	450.	749.	0.	1,199.
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				9,478.
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____

Public Disclosure

PRINCETON AREA COMMUNITY FOUNDATION INC.

52-1746234

Schedule G (Form 990 or 990-EZ) 2017

Page **3**

- 11** Does the organization conduct gaming activities with nonmembers? Yes No
- 12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13** Indicate the percentage of gaming activity conducted in:
- | | | |
|--------------------------------------|------------|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15 a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b** If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.
- c** If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

- Director/officer Employee Independent contractor

17 Mandatory distributions:

- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b** Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV **Supplemental Information.** Provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

Public Disclosure

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2017

**Open to Public
Inspection**

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

PRINCETON AREA COMMUNITY FOUNDATION INC.

Employer identification number

52-1746234

Part I General Information on Grants and Assistance

- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" 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.

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) ABAC FOUNDATION 2802 MOORE HIGHWAY TIFTON, GA 31793	58-6073263	501(C)(3)	10,000.				GENERAL SUPPORT
(2) AIRPORT MARINA COUNSELING SERVICE 7891 LA TIJERA BLVD LOS ANGELES, CA 90245	95-2224149	501(C)(3)	20,000.				AT-RISK KIDS PROGRAM
(3) ALL STARS PROJECT, INC. 33 WASHINGTON STREET NEWARK, NJ 07012	13-3148295	501(C)(3)	35,000.				GENERAL SUPPORT
(4) ALLIED ARTS FOUNDATION 4111 E. MADISON STREET - SUITE 52	91-0829974	501(C)(3)	25,000.				GENERAL SUPPORT
(5) AMERICAN ACADEMY OF NURSING 1000 VERMONT AVENUE NW - SUITE 910	52-2213870	501(C)(3)	50,000.				GENERAL SUPPORT
(6) AMERICAN ASSOCIATION FOR THE ADVANCEMENT OF 1200 NEW YORK AVE NW WASHINGTON, DC 20005	53-0196568	501(C)(3)	28,000.				GENERAL SUPPORT
(7) AMERICAN CAMP ASSOCIATION 5000 STATE ROAD 67 NORTH	35-0962419	501(C)(3)	6,000.				GENERAL SUPPORT
(8) AMERICAN CIVIL LIBERTIES UNION FOUNDATION 125 BROAD STREET, 18TH FL	13-6213516	501(C)(3)	10,000.				GENERAL SUPPORT
(9) AMERICAN HEART ASSOCIATION, INC. 7272 GREENVILLE AVENUE DALLAS, TX 75231	13-5613797	501(C)(3)	50,000.				GENERAL SUPPORT
(10) AMERICAN RED CROSS OF CENTRAL NEW JERSEY 707 ALEXANDER ROAD, SUITE 101	53-0196605	501(C)(3)	10,000.				GENERAL SUPPORT
(11) AMERICAN REPERTORY BALLET/PRINCETON BALLET 80 ALBANY STREET, FLOOR 2	21-0732575	501(C)(3)	49,300.				GENERAL SUPPORT
(12) ANCHOR HOUSE FOUNDATION PO BOX 2357 TRENTON, NJ 08611	22-2898173	501(C)(3)	21,125.				GENERAL SUPPORT

- Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶
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Schedule I (Form 990) (2017)

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(1) ANCHOR HOUSE, INC. 482 CENTRE STREET TRENTON, NJ 08611	22-2229995	501(C)(3)	25,000.				GENERAL SUPPORT
(2) ANSWER/RUTGERS UNIVERSITY FOUNDATION 41 GORDON ROAD, SUITE C	99-9999999	501(C)(3)	20,000.				GENERAL SUPPORT
(3) APPETITE FOR CHANGE, INC. 1200 WEST BROADWAY AVENUE #180	27-5112040	501(C)(3)	50,000.				GENERAL SUPPORT
(4) ARM IN ARM (FORMERLY CRISIS MINISTRY OF MER 123 E HANOVER STREET TRENTON, NJ 08608	22-3198464	501(C)(3)	86,250.				GENERAL SUPPORT
(5) ARTS COUNCIL OF PRINCETON 102 WITHERSPOON STREET PRINCETON, NJ 08542	22-6108090	501(C)(3)	30,000.				GENERAL SUPPORT
(6) ASOCIACION PUERTORRIQUENOS EN MARCHA INC. 1900 NORTH 9TH STREET - 2ND FLOOR	99-9999999	501(C)(3)	7,500.				GENERAL SUPPORT
(7) ASPHALT GREEN, INC. 555 EAST 90TH STREET NEW YORK, NY 10128	99-9999999	501(C)(3)	20,000.				GENERAL SUPPORT
(8) ASSOCIATION FOR THE MULTIPLE IMPAIRED BLIND 35 BEAVERSON BOULEVARD., BUILDING #13	22-1923699	501(C)(3)	10,000.				GENERAL SUPPORT
(9) AUTISM SCIENCE FOUNDATION 106 WEST 32ND STREET NEW YORK, NY 10001	99-9999999	501(C)(3)	60,000.				GENERAL SUPPORT
(10) BETTER COMMUNITY HOUSING OF TRENTON, INC. 802 EAST STATE STREET TRENTON, NJ 08602	23-7229294	501(C)(3)	10,000.				GENERAL SUPPORT
(11) BIG BROTHERS BIG SISTERS OF MERCER COUNTY 535 EAST FRANKLIN STREET TRENTON, NJ 08610	06-1653897	501(C)(3)	100,000.				GENERAL SUPPORT
(12) BLACK WOMEN'S AGENDA 5335 WISCONSIN AVENUE NW	52-1139558	501(C)(3)	10,000.				GENERAL SUPPORT

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(1) BONNIE BRAE SCHOOL FOR BOYS 3415 VALLEY ROAD	22-1500479	501(C)(3)	15,000.				GENERAL SUPPORT
(2) BOOM HEALTH 540 EAST FORDHAM ROAD BRONX, NY 10458	99-9999999	501(C)(3)	7,500.				GENERAL SUPPORT
(3) BOYS & GIRLS CLUBS OF MERCER COUNTY 212 CENTRE STREET TRENTON, NJ 08611	21-0634556	501(C)(3)	56,000.				GENERAL SUPPORT
(4) BOYS & GIRLS CLUBS OF PHILADELPHIA 1518 WALNUT STREET SUITE 605	99-9999999	501(C)(3)	50,000.				GENERAL SUPPORT
(5) BROAD STREET MINISTRY 315 SOUTH BROAD STREET	99-9999999	501(C)(3)	15,000.				GENERAL SUPPORT
(6) BRONXWORKS INC. 60 EAST TREMONT AVENUE BRONX, NY 10453	99-9999999	501(C)(3)	7,500.				GENERAL SUPPORT
(7) CAHABA MEDICAL CARE FOUNDATION 405 BELCHER STREET CENTERVILLE, AL 35042	99-9999999	501(C)(3)	7,500.				GENERAL SUPPORT
(8) CAMDEN AREA HEALTH EDUCATION CENTER 514 COOPER STREET CAMDEN, NJ 08102	22-2358827	501(C)(3)	10,000.				GENERAL SUPPORT
(9) CANCER CONNECTION INC. 41 LOCUST STREET NORTHAMPTON, MA 01060	99-9999999	501(C)(3)	50,000.				GENERAL SUPPORT
(10) CAPITAL HEALTH SYSTEM FOUNDATION TWO CAPITAL WAY PENNINGTON, NJ 08534	99-9999999	501(C)(3)	10,000.				GENERAL SUPPORT
(11) CASA FOR CHILDREN OF MERCER & BURLINGTON CO 1450 PARKSIDE AVENUE - SUITE 22	22-3770968	501(C)(3)	140,000.				GENERAL SUPPORT
(12) CATHOLIC CENTRAL SCHOOL FOUNDATION 1200 EAST HIGH STREET SPRINGFIELD, OH 45505	99-9999999	501(C)(3)	28,800.				GENERAL SUPPORT

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(1) CENTER FOR SUPPORTIVE SCHOOLS 911 COMMONS WAY PRINCETON, NJ 08540	22-2962532	501(C)(3)	10,000.				GENERAL SUPPORT
(2) CENTURION MINISTRIES 1000 HERRONTOWN ROAD PRINCETON, NJ 08540	22-2563979	501(C)(3)	25,000.				GENERAL SUPPORT
(3) CHAPIN SCHOOL, PRINCETON 4101 PRINCETON PIKE PRINCETON, NJ 08540	21-0688891	501(C)(3)	10,000.				GENERAL SUPPORT
(4) CHARLOTTESVILLE AREA COMMUNITY FOUNDATION 114 4TH STREET SE CHARLOTTESVILLE, VA 22902	54-1506312	501(C)(3)	50,000.				GENERAL SUPPORT
(5) CHILDREN'S HOME SOCIETY OF NJ 635 SOUTH CLINTON AVENUE	21-0634966	501(C)(3)	8,000.				OPERATING FUND
(6) CHILDREN'S HOSPITAL OF PHILADELPHIA FOUNDAT PO BOX 781352 PHILADELPHIA, PA 19178-1352	23-2237932	501(C)(3)	30,000.				GENERAL SUPPORT
(7) CHRIST CHURCH 66 HIGHLAND AVENUE SHORT HILLS, NJ 07078	99-9999999	501(C)(3)	7,350.				GENERAL SUPPORT
(8) CHRIST HEALTH CENTER, INC. 5720 1ST AVENUE SOUTH BIRMINGHAM, AL 35212	20-1935552	501(C)(3)	7,500.				GENERAL SUPPORT
(9) CLEVELAND CENTER FOR ARTS AND TECHNOLOGY 3634 EUCLID AVENUE SUITE 100	27-1193704	501(C)(3)	50,000.				GENERAL SUPPORT
(10) CLINICAL SCHOLARS PROGRAM ALUMNI ASSOCIATIO 700 NORTH PENNOCK STREET	82-1308641	501(C)(3)	15,000.				GENERAL SUPPORT
(11) COLUMBIA COUNTY HABITAT FOR HUMANITY 829 ROUTE 66 HUDSON, NY 12534	14-1766587	501(C)(3)	7,500.				GENERAL SUPPORT
(12) COMMITTEE TO ENCOURAGE CORPORATE PHILANTHRO 5 HANOVER SQUARE NEW YORK, NY 10004	13-4024259	501(C)(3)	15,000.				GENERAL SUPPORT

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(1) COMMUNITY FOUNDATION OF NEW JERSEY P.O. BOX 338 MORRISTOWN, NJ 07963-0338	22-2281783	501(C)(3)	10,000.				GENERAL SUPPORT
(2) COMMUNITY FUNDS INC. 909 THIRD AVENUE - 22ND FLOOR	13-3062214	501(C)(3)	100,000.				GENERAL SUPPORT
(3) COMMUNITY HEALTH PROJECT INC. (CALLEN-LORDE) 356 WEST 18TH STREET NEW YORK, NY 10011	13-3765140	501(C)(3)	7,500.				GENERAL SUPPORT
(4) CONSERVANCY OF SOUTHWEST FLORIDA 1450 MERRIHUE DRIVE NAPLES, FL 34102-3449	59-1157084	501(C)(3)	10,000.				GENERAL SUPPORT
(5) COTOCHESSET HISTORIC PRESERVATION TRUST P.O. BOX 249 OSTERVILLE, MA 02655	61-1563684	501(C)(3)	50,000.				GENERAL SUPPORT
(6) CRANBURY TOWNSHIP 23-A NORTH MAIN STREET CRANBURY, NJ 08512	99-9999999	501(C)(3)	9,652.				GENERAL SUPPORT
(7) CUYAHOGA COUNTY BOARD OF HEALTH 5550 VENTURE DRIVE PARMA, OH 44140	99-9999999	501(C)(3)	75,000.				GENERAL SUPPORT
(8) D&R GREENWAY LAND TRUST ONE PRESERVATION PLACE PRINCETON, NJ 08540	22-3035836	501(C)(3)	56,000.				GENERAL SUPPORT
(9) DARTMOUTH COLLEGE 6066 DEVELOPMENT OFFICE	02-0222111	501(C)(3)	10,025.				ANNUAL FUND
(10) DAYTOP NEW JERSEY AT CRAWFORD HOUSE, INC. 362 SUNSET ROAD SKILLMAN, NJ 08558	13-3949518	501(C)(3)	20,000.				GENERAL SUPPORT
(11) DIRECTIONS FOR OUR YOUTH 349 EAST 149TH STREET - SUITE 501	06-1308851	501(C)(3)	7,500.				GENERAL SUPPORT
(12) DOCTORS W/O NYC PO BOX 5030 HAGERSTOWN, MD 21741	13-3433452	501(C)(3)	20,000.				GENERAL SUPPORT

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(1) DRESS FOR SUCCESS MERCER COUNTY 3131 PRINCETON PIKE, BUILDING 4, SUITE 209	37-1536476	501(C)(3)	44,409.				GENERAL SUPPORT
(2) DREXEL UNIVERSITY (THE DORNSIFE CENTER FOR 3509 SPRING GARDEN STREET	23-1352630	501(C)(3)	7,500.				GENERAL SUPPORT
(3) EB RESEARCH PARTNERSHIP 132 EAST 43RD STREET - SUITE 432	27-2417202	501(C)(3)	10,000.				GENERAL SUPPORT
(4) ELIJAH'S PROMISE 211 LIVINGSTON AVENUE	22-3055539	501(C)(3)	10,000.				GENERAL SUPPORT
(5) EMERGENCY ASSISTANCE FOUNDATION 3713 PINE STREET JACKSONVILLE, FL 32205	45-1813056	501(C)(3)	60,000.				GENERAL SUPPORT
(6) EVERGREEN COOPERATIVE CORPORATION 540 EAST 105TH STREET CLEVELAND, OH 44108	45-2743815	501(C)(3)	50,000.				GENERAL SUPPORT
(7) FAMILY GUIDANCE CENTER/FAMILY & CHILDREN'S 1931 NOTTINGHAM WAY HAMILTON, NJ 08619-3554	22-3237254	501(C)(3)	45,000.				GENERAL SUPPORT
(8) FARMER VETERAN COALITION 4614 2ND STREET - SUITE 4 DAVIS, CA 95618	46-2362098	501(C)(3)	12,500.				GENERAL SUPPORT
(9) FELICIAN UNIVERSITY ONE FELICIAN WAY RUTHERFORD, NJ 07070	22-1912028	501(C)(3)	10,000.				GENERAL SUPPORT
(10) FISHERMAN'S MARK 89 NORTH MAIN STREET LAMBERTVILLE, NJ 08530	22-2302255	501(C)(3)	97,300.				GENERAL SUPPORT
(11) FOUNDATION ACADEMIES 363 WEST STATE STREET TRENTON, NJ 08618	20-4406909	501(C)(3)	15,000.				GENERAL SUPPORT
(12) FOUNDATION FIGHTING BLINDNESS-NJ CHAPTER PO BOX 449 PRINCETON, NJ 08540-0449	23-7135845	501(C)(3)	35,000.				GENERAL SUPPORT

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(1) FOUNDATION FOR INSPIRATION & RECOGNITION OF 200 BEDFORD STREET MANCHESTER, NH 03101	27-2657899	501(C)(3)	500,000.				GENERAL SUPPORT
(2) FREEDOM HOUSE 2004 ROUTE 31 NORTH CLINTON, NJ 08809	22-2638093	501(C)(3)	9,000.				GENERAL SUPPORT
(3) FRIENDS OF THE JACOBUS VANDERVEER HOUSE, IN 3055 RIVER ROAD (INSIDE RIVER ROAD PARK)	22-3576710	501(C)(3)	10,000.				GENERAL SUPPORT
(4) FRIENDS OF THE MONMOUTH COUNTY CHILD ADVOCA 75 WEST MAIN STREET FREEHOLD, NJ 07728	56-2329493	501(C)(3)	50,000.				GENERAL SUPPORT
(5) GEORGE STREET PLAYHOUSE 9 LIVINGSTON AVENUE	23-7361588	501(C)(3)	15,000.				GENERAL SUPPORT
(6) GEORGE WASHINGTON UNIVERSITY 2121 I STREET NW - SUITE 601	53-0196584	501(C)(3)	25,000.				GENERAL SUPPORT
(7) GEORGETOWN UNIVERSITY BOX 571252 WASHINGTON, DC 20057-1252	53-0196603	501(C)(3)	10,000.				GENERAL SUPPORT
(8) GETTING OUT AND STAYING OUT INC. 75 EAST 116TH STREET NEW YORK, NY 10029	06-1711370	501(C)(3)	20,000.				GENERAL SUPPORT
(9) GLADSTONE INSTITUTES 1650 OWENS STREET SAN FRANCISCO, CA 94158	23-7203666	501(C)(3)	25,000.				GENERAL SUPPORT
(10) GREATER MERCER PUBLIC HEALTH PARTNERSHIP P.O. BOX 6194 LAWRENCEVILLE, NJ 08648	81-3754468	501(C)(3)	218,418.				GENERAL SUPPORT
(11) GREATER MERCER TRANSPORTATION MANAGEMENT AS 15 ROSZEL ROAD SOUTH, SUITE 101	22-2577631	501(C)(3)	5,445.				GENERAL SUPPORT
(12) GREATER TRENTON, INC. 102 BARRACK STREET TRENTON, NJ 08608	26-1307260	501(C)(3)	95,000.				OPERATING FUND

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▶ Attach to Form 990.

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

Name of the organization

PRINCETON AREA COMMUNITY FOUNDATION INC.

Employer identification number

52-1746234

Part I General Information on Grants and Assistance

- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" 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.

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) GREEN BRONX MACHINE INTERNATIONAL INC. 3935 BLACKSTONE AVENUE - SUITE 12G	45-3303493	501(C)(3)	7,500.				GENERAL SUPPORT
(2) GREENE STREET FRIENDS SCHOOL 5511 GREENE STREET PHILADELPHIA, PA 19144	23-1352643	501(C)(3)	50,000.				GENERAL SUPPORT
(3) GREENS LEDGE LIGHT PRESERVATION SOCIETY 101 ROWYTON AVENUE - 2ND FLOOR	81-3221399	501(C)(3)	50,000.				GENERAL SUPPORT
(4) GROVE PARK FOUNDATION INC. 749 MARIETTA STREET NW ATLANTA, GA 30318	82-1913260	501(C)(3)	7,500.				GENERAL SUPPORT
(5) HABITAT FOR HUMANITY OF BURLINGTON COUNTY A 530 ROUTE 38 EAST MAPLE SHADE, NJ 08052	22-2736214	501(C)(3)	52,500.				GENERAL SUPPORT
(6) HARLEM CHILDREN'S ZONE 35 EAST 125TH STREET NEW YORK, NY 10035	23-7112974	501(C)(3)	50,000.				GENERAL SUPPORT
(7) HEALING TOWERS INC. 2417 TONGASS - SUITE 111-355	81-0704176	501(C)(3)	5,600.				GENERAL SUPPORT
(8) HEALTH POLICY INSTITUTE OF OHIO 10 WEST BROAD STREET COLUMBUS, OH 43215	30-0186863	501(C)(3)	50,000.				GENERAL SUPPORT
(9) HEPATITIS B FOUNDATION 3805 OLD EASTON ROAD	23-2655669	501(C)(3)	25,000.				GENERAL SUPPORT
(10) HIGH FIVES FOUNDATION 10775 PIONEER TRAIL - SUITE 108	26-4275773	501(C)(3)	9,000.				GENERAL SUPPORT
(11) HISTORIC MORVEN 55 STOCKTON STREET PRINCETON, NJ 08540-6912	22-2817982	501(C)(3)	60,000.				GENERAL SUPPORT
(12) HISTORICAL SOCIETY OF PRINCETON 354 QUAKER ROAD PRINCETON, NJ 08540	22-6074979	501(C)(3)	32,000.				GENERAL SUPPORT

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

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Schedule I (Form 990) (2017)

Public Disclosure

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2017

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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Employer identification number

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(1) HITOPS 21 WIGGINS STREET PRINCETON, NJ 08540	22-3486441	501(C)(3)	21,125.				GENERAL SUPPORT
(2) HOMEFRONT 1880 PRINCETON AVENUE	22-3165145	501(C)(3)	241,000.				GENERAL SUPPORT
(3) HOPEWELL PUBLIC LIBRARY 13 E. BROAD STREET HOPEWELL, NJ 08525	99-9999999	501(C)(3)	10,000.				GENERAL SUPPORT
(4) HUGS FOR BRADY FOUNDATION 4 QUENTIN ROAD KENDALL PARK, NJ 08824	27-3921673	501(C)(3)	50,000.				GENERAL SUPPORT
(5) HUMANITY IN ACTION 601 WEST 26TH STREET, SUITE 325	13-3977257	501(C)(3)	10,000.				GENERAL SUPPORT
(6) HUN SCHOOL OF PRINCE 176 EDGERSTOUNE ROAD	21-0639868	501(C)(3)	10,000.				GENERAL SUPPORT
(7) IMPACT SERVICES CORPORATION 1952 EAST ALLEGHENY AVENUE	23-2087348	501(C)(3)	7,500.				GENERAL SUPPORT
(8) INSTITUTE FOR HEALTHCARE IMPROVEMENT 20 UNIVERSITY ROAD - 7TH FLOOR	38-3017223	501(C)(3)	150,000.				GENERAL SUPPORT
(9) INTEGRITY TRANSFORMATIONS' COMMUNITY DEVELO 692 LINDSAY STREET ATLANTA, GA 30318	01-0698118	501(C)(3)	7,500.				GENERAL SUPPORT
(10) ISLES, INC. 10 WOOD STREET TRENTON, NJ 08618	22-2350832	501(C)(3)	81,125.				GENERAL SUPPORT
(11) JAMES RUSHTON I FOUNDATION 5512 1ST AVENUE S BIRMINGHAM, AL 35212	63-0955085	501(C)(3)	7,500.				GENERAL SUPPORT
(12) JED FOUNDATION 6 EAST 39TH ST.REET - SUITE. 1204	13-4131139	501(C)(3)	40,000.				GENERAL SUPPORT

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Schedule I (Form 990) (2017)

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OMB No. 1545-0047

2017

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Department of the Treasury
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(1) JEWISH COMMUNITY CENTER OF SOMERSET HUNTERD 775 TALAMINI ROAD BRIDGEWATER, NJ 08807	22-3681640	501(C)(3)	50,000.				GENERAL SUPPORT
(2) JOHN WITHERSPOON MIDDLE SCHOOL PTO 217 WALNUT LANE PRINCETON, NJ 08540	22-3600348	501(C)(3)	6,000.				GENERAL SUPPORT
(3) JONES VALLEY URBAN FARM 5365 1ST AVENUE N BIRMINGHAM, AL 35212	52-2359003	501(C)(3)	7,500.				GENERAL SUPPORT
(4) JUNTA DE ACCION PUERTORRIQUENA, INC. PUERTO 90 JERSEY AVENUE NEW BRUNSWICK, NJ 08901	22-1944440	501(C)(3)	50,000.				GENERAL SUPPORT
(5) KARTEMQUIN EDUCATIONAL FILMS 1901 WEST WELLINGTON AVENUE	23-7430402	501(C)(3)	25,000.				GENERAL SUPPORT
(6) KENTS HILL SCHOOL 1614 MAIN STREET KENTS HILL, ME 04349	01-0211532	501(C)(3)	100,000.				GENERAL SUPPORT
(7) KIDS KICKING CANCER INC. 27600 NORTHWESTERN HIGHWAY - SUITE 220	38-3500655	501(C)(3)	35,000.				GENERAL SUPPORT
(8) KIDSBRIDGE 999 LOWER FERRY ROAD EWING, NJ 08628	22-3438541	501(C)(3)	25,000.				GENERAL SUPPORT
(9) KIRKRIDGE RETREAT CENTER 2495 FOX GAP ROAD BANGOR, PA 18013	24-0791777	501(C)(3)	10,000.				GENERAL SUPPORT
(10) LATIN AMERICAN LEGAL DEFENSE AND EDUCATIONA 669 CHAMBERS STREET TRENTON, NJ 08611	20-2484231	501(C)(3)	102,750.				GENERAL SUPPORT
(11) LATIN AMERICAN YOUTH CENTER, INC. 1419 COLUMBIA ROAD NW WASHINGTON, DC 20009	52-1023074	501(C)(3)	20,000.				GENERAL SUPPORT
(12) LAZOS AMERICA UNIDA 10 PROSPECT STREET NEW BRUNSWICK, NJ 08901	20-2935339	501(C)(3)	50,000.				GENERAL SUPPORT

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Schedule I (Form 990) (2017)

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(1) LITERACY NEW JERSEY, INC. 121 CHESTNUT STREET - SUITE 203	52-1146384	501(C)(3)	21,000.				GENERAL SUPPORT
(2) LUPUS RESEARCH ALLIANCE INC. 275 MADISON AVENUE - 10TH FLOOR	58-2492929	501(C)(3)	25,000.				GENERAL SUPPORT
(3) MATHENY MEDICAL AND EDUCATIONAL CENTER 65 HIGHLAND AVENUE PEAPACK, NJ 07977	22-1482276	501(C)(3)	10,000.				GENERAL SUPPORT
(4) MCCARTER THEATRE 91 UNIVERSITY PLACE PRINCETON, NJ 08540	21-0724198	501(C)(3)	110,000.				GENERAL SUPPORT
(5) MEALS ON WHEELS OF MERCER COUNTY 320 HOLLOWBROOK DRIVE EWING, NJ 08638	22-1990231	501(C)(3)	35,000.				GENERAL SUPPORT
(6) MELANOMA RESEARCH ALLIANCE 1101 NEW YORK AVENUE, SUITE 620	26-1636099	501(C)(3)	37,500.				GENERAL SUPPORT
(7) MERCER ALLIANCE TO END HOMELESSNESS 1001 SPRUCE STREET - SUITE 205	20-1594569	501(C)(3)	46,125.				GENERAL SUPPORT
(8) MERCER COUNTY COMMUNITY COLLEGE FOUNDATION PO BOX B WEST WINDSOR, NJ 08550	22-2133029	501(C)(3)	25,000.				GENERAL SUPPORT
(9) MERCER COUNTY PARK COMMISSION 197 BLACKWELL ROAD PENNINGTON, NJ 08534	99-9999999	501(C)(3)	10,000.				GENERAL SUPPORT
(10) MERCER STREET FRIENDS FOOD BANK 151 MERCER STREET TRENTON, NJ 08611	21-0733990	501(C)(3)	28,000.				GENERAL SUPPORT
(11) MICHIGAN STATE UNIVE SPARTAN WAY, 535 CHESTNUT ROAD, ROOM 300	23-7326030	501(C)(3)	250,000.				GENERAL SUPPORT
(12) MIDDLESEX COUNTY COLLEGE FOUNDATION 2600 WOODBRIDGE AVENUE	22-6079662	501(C)(3)	25,000.				GENERAL SUPPORT

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

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Schedule I (Form 990) (2017)

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(1) MILKEN INSTITUTE 1250 FOURTH STREET SANTA MONICA, CA 90401	95-4240775	501(C)(3)	50,000.				GENERAL SUPPORT
(2) MILLHILL CHILD & FAMILY DEVELOPMENT 101 OAKLAND STREET TRENTON, NJ 08618	22-2123700	501(C)(3)	75,000.				GENERAL SUPPORT
(3) MONASTERY OF THE GLORIOUS ASCENSION P.O. BOX 2817 EAST SETAUKET, NY 11733-0861	23-7356994	501(C)(3)	11,000.				GENERAL SUPPORT
(4) MONSTER MILERS P.O. BOX 63574 PHILADELPHIA, PA 19147	45-4119892	501(C)(3)	16,500.				GENERAL SUPPORT
(5) MORGAN STANLEY GLOBAL IMPACT FUNDING TRUST, 150 CLOVE ROAD (LOBBY LEVEL)	52-7082731	501(C)(3)	80,000.				GENERAL SUPPORT
(6) MOUNT CARMEL GUILD 73 NORTH CLINTON AVENUE TRENTON, NJ 08609	21-0675183	501(C)(3)	151,125.				GENERAL SUPPORT
(7) M-POWER MINISTRIES 4022 4TH AVENUE SOUTH BIRMINGHAM, AL 35222	31-1639601	501(C)(3)	7,500.				GENERAL SUPPORT
(8) THE NATIONAL CENTER ON ADDICTION AND SUBSTA 633 THIRD AVENUE NEW YORK, NY 10017-6706	52-1736502	501(C)(3)	25,000.				GENERAL SUPPORT
(9) NATIONAL HISPANIC HEALTH FOUNDATION 1920 L STREET NW WASHINGTON, DC 20036	26-0051902	501(C)(3)	10,000.				GENERAL SUPPORT
(10) NATIONAL JUNIOR TENNIS & LEARNING OF TRENTO 949 WEST STATE STREET TRENTON, NJ 08618	52-1260470	501(C)(3)	86,500.				UNRESTRICTED USE
(11) NATIONAL MEDICAL FELLOWSHIPS 347 FIFTH AVENUE - SUITE 510	01-0963657	501(C)(3)	50,000.				GENERAL SUPPORT
(12) NATIONAL TRUST FOR HISTORIC PRESERVATION 2600 VIRGINIA AVENUE - SUITE 1000	53-0210807	501(C)(3)	15,500.				GENERAL SUPPORT

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(1) NEIGHBORHOOD PROGRESS, INC. 11327 SHAKER BLVD. CLEVELAND, OH 44104	34-1611055	501(C)(3)	50,000.				GENERAL SUPPORT
(2) NEW JERSEY GOALS OF CARE INC. P.O. BOX 3083 PRINCETON, NJ 08543	26-4271484	501(C)(3)	55,000.				GENERAL SUPPORT
(3) NEW JERSEY POLICY PERSPECTIVE 137 WEST HANOVER STREET	22-3492715	501(C)(3)	15,000.				GENERAL SUPPORT
(4) NEW JERSEY STATE MUSEUM FOUNDATION PO BOX 530 TRENTON, NJ 08625-0530	22-6098724	501(C)(3)	10,000.				GENERAL SUPPORT
(5) NJ SYMPHONY ORCHESTRA 60 PARK PLACE, 9TH FLOOR NEWARK, NJ 07102	22-1559422	501(C)(3)	11,000.				GENERAL SUPPORT
(6) NEW JERSEY CONSERVATION FOUNDATION 170 LONGVIEW ROAD FAR HILLS, NJ 07931	22-6065456	501(C)(3)	5,111,783.				GENERAL SUPPORT
(7) NORTHEAST ORGANIC FARMING ASSOCIATION 334 RIVER ROAD HILLSBOROUGH, NJ 08844	22-3043823	501(C)(3)	10,000.				UNRESTRICTED SUPPORT
(8) NORTHERN COUNTIES HEALTH CARE 165 SHERMAN DRIVE ST. JOHNSBURY, VT 05819	51-0199559	501(C)(3)	50,000.				GENERAL SUPPORT
(9) OAKS INTEGRATED CARE 770 WOODLANE ROAD MOUNT HOLLY, NJ 08060	23-7048397	501(C)(3)	25,000.				GENERAL SUPPORT
(10) OPPORTUNITY INTERNATIONAL 550 WEST VAN BUREN STREET - SUITE 200	54-0907624	501(C)(3)	20,000.				GENERAL SUPPORT
(11) PARTNERSHIP FOR A DRUG FREE AMERICA, INC. 352 PARK AVENUE SOUTH - 9TH FLOOR	13-3413627	501(C)(3)	15,000.				GENERAL SUPPORT
(12) PASSAGE THEATRE COMPANY 16 EAST HANOVER STREET TRENTON, NJ 08608	22-2679031	501(C)(3)	160,000.				GENERAL SUPPORT

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(1) PEACE ACTION EDUCATION FUND 40 WITHERSPOON STREET PRINCETON, NJ 08540	22-2402577	501(C)(3)	10,000.				UNRESTRICTED SUPPORT
(2) PEI KIDS 231 LAWRENCE ROAD LAWRENCEVILLE, NJ 08648	22-2594219	501(C)(3)	63,800.				GENERAL SUPPORT
(3) PEOPLE & STORIES/GENTE Y CUENTOS 295 EGGERTS CROSSING ROAD	22-3260895	501(C)(3)	20,000.				GENERAL SUPPORT
(4) PEOPLE'S EMERGENCY CENTER 325 NORTH 39TH STREET	23-2017882	501(C)(3)	7,500.				GENERAL SUPPORT
(5) PETEY GREENE PRISONER ASSISTANCE PROGRAM 9 MERCER STREET PRINCETON, NJ 08540	30-0499760	501(C)(3)	12,000.				GENERAL SUPPORT
(6) PHILADELPHIA ANIMAL WELFARE SOCIETY (PAWS) 100 NORTH 2ND STREET (AT ARCH)	26-3862631	501(C)(3)	25,000.				GENERAL SUPPORT
(7) PHILADELPHIA MURAL ARTS ADVOCATES 1729 MOUNT VERNON STREET	23-2876470	501(C)(3)	7,500.				GENERAL SUPPORT
(8) PINELANDS PRESERVATI 17 PEMBERTON ROAD SOUTHAMPTON, NJ 08088	52-1641512	501(C)(3)	11,000.				GENERAL SUPPORT
(9) PLANNED PARENTHOOD OF NORTHERN, CENTRAL, AN 437 EAST STATE STREET TRENTON, NJ 08608	22-1643997	501(C)(3)	46,500.				ANNUAL FUND
(10) POINT COMMUNITY DEVELOPMENT CORPORATION 940 GARRISON AVENUE BRONX, NY 10474	13-3765140	501(C)(3)	7,500.				GENERAL SUPPORT
(11) POMFRET SCHOOL 398 POMFRET STREET POMFRET, CT 06258-0128	06-0646784	501(C)(3)	35,000.				GENERAL SUPPORT
(12) PREVENTION POINT PHILADELPHIA INC. PO BOX 60990 PHILADELPHIA, PA 19133	23-2663699	501(C)(3)	7,500.				GENERAL SUPPORT

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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) PRINCETON (MUNICIPALITY OF) 400 WITHERSPOON STREET PRINCETON, NJ 08540	99-9999999	501(C)(3)	20,000.				GENERAL SUPPORT
(2) PRINCETON ACADEMY OF THE SACRED HEART 1128 GREAT ROAD PRINCETON, NJ 08540	22-3623112	501(C)(3)	10,000.				GENERAL SUPPORT
(3) PRINCETON CENTER FOR TEACHER EDUCATION 487 CHERRY VALLEY ROAD PRINCETON, NJ 08540	22-1853399	501(C)(3)	9,244.				GENERAL SUPPORT
(4) PRINCETON CHARTER SC 100 BUNN DRIVE PRINCETON, NJ 08540	22-3505511	501(C)(3)	30,000.				GENERAL SUPPORT
(5) PRINCETON DAY SCHOOL THE GREAT ROAD PRINCETON, NJ 08542	21-0727645	501(C)(3)	75,000.				GENERAL SUPPORT
(6) PRINCETON EDUCATION 25 VALLEY ROAD PRINCETON, NJ 08542-0176	22-3313605	501(C)(3)	10,000.				GENERAL SUPPORT
(7) PRINCETON FIRST AID & RESCUE SQUAD 237 NORTH HARRISON STREET	23-7140015	501(C)(3)	30,000.				ANNUAL FUND
(8) PRINCETON FRIENDS SCHOOL 470 QUAKER ROAD PRINCETON, NJ 08540	22-2790041	501(C)(3)	180,000.				GENERAL SUPPORT
(9) PRINCETON HEALTHCARE SYSTEM FOUNDATION 5 PLAINSBORO ROAD - SUITE 365	22-2225911	501(C)(3)	111,050.				GENERAL SUPPORT
(10) PRINCETON NURSERY SCHOOL 78 LEIGH AVENUE PRINCETON, NJ 08540	21-0643024	501(C)(3)	25,000.				CAPITAL FUND
(11) PRINCETON PUBLIC LIBRARY FOUNDATION 65 WITHERSPOON STREET PRINCETON, NJ 08542	22-3494366	501(C)(3)	31,667.				GENERAL SUPPORT
(12) PRINCETON RECREATION 380 WITHERSPOON STREET PRINCETON, NJ 08540	99-9999999	501(C)(3)	13,800.				GENERAL SUPPORT

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

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

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

Schedule I (Form 990) (2017)

Public Disclosure

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2017

**Open to Public
Inspection**

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.

Name of the organization

PRINCETON AREA COMMUNITY FOUNDATION INC.

Employer identification number

52-1746234

Part I 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 the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" 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.

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) PRINCETON SENIOR RESOURCE CENTER 45 STOCKTON STREET PRINCETON, NJ 08540	22-2228083	501(C)(3)	75,000.				GENERAL SUPPORT
(2) PRINCETON SYMPHONY ORCHESTRA PO BOX 250 PRINCETON, NJ 08542	22-2327766	501(C)(3)	50,500.				GENERAL SUPPORT
(3) PRINCETON UNIVERSITY ART MUSEUM PRINCETON UNIVERSITY	21-0634501	501(C)(3)	10,000.				GENERAL SUPPORT
(4) PRINCETON-BLAIRSTOWN 13 ROSZEL ROAD, SUITE C204A	22-6075831	501(C)(3)	11,000.				GENERAL SUPPORT
(5) PROJECT HEALING WATERS P.O. BOX 695 LA PLATA, MD 20646	61-1518154	501(C)(3)	9,600.				GENERAL SUPPORT
(6) PROJECT HOME 1515 FAIRMOUNT AVENUE	23-2555950	501(C)(3)	7,500.				GENERAL SUPPORT
(7) PRINCETON UNIVERSITY OFFICE OF ALUMNI AND D PO BOX 5357 PRINCETON, NJ 08543-5357	21-0634501	501(C)(3)	10,000.				GENERAL SUPPORT
(8) PUBLIC HEALTH INSTITUTE 555 12TH STREET, 10TH FLOOR	94-1646278	501(C)(3)	25,000.				GENERAL SUPPORT
(9) PULMONARY HYPERTENSION ASSOCIATION 801 ROEDER ROAD - SUITE 1000	65-0880021	501(C)(3)	25,000.				GENERAL SUPPORT
(10) RACHEL'S NETWORK 1200 18TH STREET, NW - SUITE 910	31-1644905	501(C)(3)	25,400.				GENERAL SUPPORT
(11) REFLECT ORGANIZATION 3910 IRVING ST., MB-5	82-2091088	501(C)(3)	10,000.				GENERAL SUPPORT
(12) RESCUE MISSION OF TRENTON 98 CARROLL STREET TRENTON, NJ 08605-0790	21-0656182	501(C)(3)	75,000.				GENERAL SUPPORT

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

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

Schedule I (Form 990) (2017)

Public Disclosure

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2017

Open to Public
Inspection

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.

Name of the organization

PRINCETON AREA COMMUNITY FOUNDATION INC.

Employer identification number

52-1746234

Part I 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 the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" 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.

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) RIDER UNIVERSITY 2083 LAWRENCEVILLE ROAD	21-0650678	501(C)(3)	32,500.				GENERAL SUPPORT
(2) RIDING WITH HEART 639 COUNTY ROAD 513 PITSTOWN, NJ 08867	57-1233216	501(C)(3)	25,000.				GENERAL SUPPORT
(3) RISE/A COMMUNITY SERVICE PARTNERSHIP 116 NORTH MAIN STREET HIGHTSTOWN, NJ 08520	22-2405087	501(C)(3)	50,000.				GENERAL SUPPORT
(4) ROBERT WOOD JOHNSON UNIVERSITY HOSPITAL HAM ONE HAMILTON HEALTH PLACE	21-0634572	501(C)(3)	30,000.				GENERAL SUPPORT
(5) ROCKEFELLER PHILANTHROPY ADVISORS, INC. 6 WEST 48TH STREET - 10TH FLOOR	13-3615533	501(C)(3)	50,000.				GENERAL SUPPORT
(6) RUTGERS UNIVERSITY FOUNDATION 120 ALBANY STREET NEW BRUNSWICK, NJ 08901	23-7318742	501(C)(3)	290,000.				GENERAL SUPPORT
(7) SAKHI FOR SOUTH ASIAN WOMEN PO BOX 1333 NEW YORK, NY 10008	13-3593806	501(C)(3)	25,000.				GENERAL SUPPORT
(8) SALVATION ARMY P.O. BOX 0060 TRENTON, NJ 08609	13-5562351	501(C)(3)	20,000.				GENERAL SUPPORT
(9) SANTA FE INSTITUTE 1399 HYDE PARK ROAD SANTA FE, NM 87501	85-0325494	501(C)(3)	6,000.				UNRESTRICTED SUPPORT
(10) SAVE 1010 ROUTE 601 SKILLMAN, NJ 08558	22-6082741	501(C)(3)	10,000.				ANNUAL FUND
(11) SILICON VALLEY COMMUNITY FOUNDATION 2440 WEST EL CAMINO REAL, SUITE 300	20-5205488	501(C)(3)	50,000.				GENERAL SUPPORT
(12) SOMERSET HILLS LEARNING INSTITUTE 1810 BURNT MILLS ROAD BEDMINSTER, NJ 07921	22-3593804	501(C)(3)	15,600.				GENERAL SUPPORT

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

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

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

Schedule I (Form 990) (2017)

Public Disclosure

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2017

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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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Name of the organization

PRINCETON AREA COMMUNITY FOUNDATION INC.

Employer identification number

52-1746234

Part I 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 the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" 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.

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) SOURLAND CONSERVANCY 83 PRINCETON AVENUE, SUITE 1A	22-3707157	501(C)(3)	21,000.				GENERAL SUPPORT
(2) SOUTH BRONX UNITED 594 GRAND CONCOURSE, SUITE #2	26-4064041	501(C)(3)	7,500.				GENERAL SUPPORT
(3) SOUTHERN POVERTY LAW CENTER 400 WASHINGTON AVENUE MONTGOMERY, AL 36104	63-0598743	501(C)(3)	21,000.				GENERAL SUPPORT
(4) SPECIAL OPERATIONS W 1137 MARBELLA PLAZA DRIVE TAMPA, FL 33619	52-1183585	501(C)(3)	6,000.				GENERAL SUPPORT
(5) SPRINGPOINT SENIOR LIVING FOUNDATION 4814 OUTLOOK DRIVE, SUITE 201	31-1480524	501(C)(3)	11,000.				GENERAL SUPPORT
(6) ST. LAWRENCE UNIVERSITY ROMODA DRIVE CANTON, NY 13617	15-0532239	501(C)(3)	11,000.				GENERAL SUPPORT
(7) STONY BROOK-MILLSTONE WATERSHED ASSOCIATION 31 TITUS MILL ROAD	21-0649717	501(C)(3)	101,500.				GENERAL SUPPORT
(8) SUITE 1300 SERVICES, INC. 1422 EUCLID AVENUE CLEVELAND, OH 44115	30-0096415	501(C)(3)	75,000.				GENERAL SUPPORT
(9) SUSTAINABLE PRINCETON 1 MONUMENT DRIVE PRINCETON, NJ 08540	45-4743353	501(C)(3)	20,000.				GENERAL SUPPORT
(10) SWARTHMORE COLLEGE 500 COLLEGE ROAD SWARTHMORE, PA 19081	23-1352683	501(C)(3)	15,000.				GENERAL SUPPORT
(11) TECHNOLOGY AFFINITY GROUP, INC. 23 BRIAR ROAD WAYNE, PA 19087	56-2558836	501(C)(3)	50,000.				GENERAL SUPPORT
(12) TENDERLOIN NEIGHBORHOOD DEVELOPMENT CORPORA 201 EDDY STREET SAN FRANCISCO, CA 94102	94-2761808	501(C)(3)	40,000.				GENERAL SUPPORT

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

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

Schedule I (Form 990) (2017)

Public Disclosure

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2017

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Inspection

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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Name of the organization

PRINCETON AREA COMMUNITY FOUNDATION INC.

Employer identification number

52-1746234

Part I 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 the selection criteria used to award the grants or assistance? **Yes** **No**
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" 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.

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) TEXAS A&M UNIVERSITY ROOM 133 COLLEGE STATION, TX 77843-1266	99-9999999	501(C)(3)	50,000.				GENERAL SUPPORT
(2) THOMAS EDISON STATE 101 WEST STATE STREET	99-9999999	501(C)(3)	47,250.				GENERAL SUPPORT
(3) TRAVIS MANION FOUNDATION PO BOX 1485 DOYLESTOWN, PA 18901	41-2237951	501(C)(3)	50,000.				GENERAL SUPPORT
(4) TRENTON AREA SOUP KITCHEN 72 1/2 ESCHER STREET TRENTON, NJ 08605	22-2392881	501(C)(3)	312,135.				GENERAL SUPPORT
(5) TRENTON CHILDREN'S CHORUS 471 PARKWAY AVENUE TRENTON, NJ 08618	45-2633120	501(C)(3)	90,000.				GENERAL SUPPORT
(6) TRENTON CIRCUS SQUAD 675 SOUTH CLINTON AVENUE TRENTON, NJ 08611	47-2150184	501(C)(3)	10,000.				GENERAL SUPPORT
(7) TRENTON COMMUNITY MUSIC SCHOOL PO BOX 5206 TRENTON, NJ 08638	22-3559611	501(C)(3)	6,000.				GENERAL SUPPORT
(8) TRINITY CHURCH 33 MERCER STREET PRINCETON, NJ 08540	21-0647707	501(C)(3)	36,000.				GENERAL SUPPORT
(9) TRINITY COLLEGE 300 SUMMIT AVE HARTFORD, CT 06106	06-0646927	501(C)(3)	11,500.				GENERAL SUPPORT
(10) TRINITY COUNSELING 22 STOCKTON STREET PRINCETON, NJ 08540	22-2185298	501(C)(3)	65,000.				GENERAL SUPPORT
(11) UIH FAMILY PARTNERS 4 NORTH BROAD STREET, 2ND FLOOR SUITE 2R	21-0635048	501(C)(3)	55,000.				GENERAL SUPPORT
(12) UNIVERSITY OF CHICAGO 130 E. RANDOLPH STREET - SUITE 2500	36-2177139	501(C)(3)	1,050,000.				GENERAL SUPPORT

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

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

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Schedule I (Form 990) (2017)

Public Disclosure

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2017

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Department of the Treasury
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Name of the organization

PRINCETON AREA COMMUNITY FOUNDATION INC.

Employer identification number

52-1746234

Part I 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 the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" 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.

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) UNIVERSITY OF PITTSBURGH 3719 TERRACE STREET, ROOM 1017	99-9999999	501(C)(3)	75,000.				GENERAL SUPPORT
(2) URBAN HEALTH PLAN INC. 1065 SOUTHERN BOULEVARD BRONX, NY 10459	23-7360305	501(C)(3)	7,500.				GENERAL SUPPORT
(3) URBAN MINISTRY INC. 1229 COTTON AVENUE SW BIRMINGHAM, AL 35211	63-0717761	501(C)(3)	7,500.				GENERAL SUPPORT
(4) URBANPROMISE TRENTON 801 WEST STATE STREET TRENTON, NJ 08618	81-1548363	501(C)(3)	25,000.				GENERAL SUPPORT
(5) THE V FOUNDATION 106 TOWERVIEW COURT CARY, NC 27513	13-3705951	501(C)(3)	35,000.				GENERAL SUPPORT
(6) VILLAGE CHARTER SCHOOL FUND, INC. 101 SULLIVAN WAY TRENTON, NJ 08628	04-3622534	501(C)(3)	15,000.				GENERAL SUPPORT
(7) VOLUNTEERCONNECT 12 STOCKTON STREET PRINCETON, NJ 08540	22-3595586	501(C)(3)	75,000.				GENERAL SUPPORT
(8) WHALE TRUST P.O. BOX 243 MAKAWAO, HI 96768	91-2144632	501(C)(3)	25,000.				GENERAL SUPPORT
(9) WOMANSPACE 1530 BRUNSWICK AVENUE	22-2172522	501(C)(3)	100,000.				GENERAL SUPPORT
(10) WOMEN'S WAY 123 S. BROAD STREET, SUITE 139	23-1989161	501(C)(3)	20,000.				GENERAL SUPPORT
(11) WORLD WILDLIFE FUND 1250 TWENTY-FOURTH STREET NW	52-1693387	501(C)(3)	10,000.				GENERAL SUPPORT
(12) YMCA OF PRINCETON 59 PAUL ROBESON PLACE PRINCETON, NJ 08540	21-0639890	501(C)(3)	36,050.				GENERAL SUPPORT

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

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

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

Schedule I (Form 990) (2017)

Public Disclosure

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2017

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Department of the Treasury
Internal Revenue Service

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Name of the organization

PRINCETON AREA COMMUNITY FOUNDATION INC.

Employer identification number

52-1746234

Part I 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 the selection criteria used to award the grants or assistance? **Yes** **No**
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" 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.

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) YMCA OF TRENTON 59 PAUL ROBESON PLACE PRINCETON, NJ 08540	21-0635052	501(C)(3)	45,000.				OPERATING FUND
(2) YOUNG AUDIENCES OF NEW JERSEY & EASTERN PA 200 FORRESTAL ROAD PRINCETON, NJ 08540	23-7384991	501(C)(3)	80,000.				GENERAL SUPPORT
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 242.

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

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

Schedule I (Form 990) (2017)

Public Disclosure

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 SCHOLARSHIP RECIPIENTS	52.	290,811.			
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 GRANTEEES 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 GRANTEEES SIGN A CONTRACT WHICH OUTLINES ALL REQUIREMENTS BEFORE THEIR GRANT CHECK IS DELIVERED. GRANTS FROM DONOR-ADVISED AND DESIGNATED FUNDS ARE AWARDED AFTER A THOROUGH REVIEW OF THEIR FORM 990, AND IN MANY CASES, A REVIEW OF THEIR 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 ALSO VISITS

Public Disclosure

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.

MANY LOCAL GRANTEEES EACH YEAR FOR FACE-TO-FACE MEETINGS AND FIRST-HAND EXPERIENCE OF FUNDED PROGRAMS. AS A LOCAL GRANTMAKER, THE COMMUNITY FOUNDATION ALSO HAS ACCESS TO MANY INFORMAL SOURCES OF INFORMATION FROM THE LOCAL NEWSPAPERS TO PROFESSIONAL STAFF AND BOARD RELATIONSHIPS WITH MANY ORGANIZATIONS.

Public Disclosure

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

For 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.

2017

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 I Questions Regarding Compensation

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.

- | | |
|--|---|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> 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

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?

3 Indicate which, if any, of the following the filing 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.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> 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:

- a** Receive a severance payment or change-of-control payment? **4a** **4c**
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? **4b**
- c** Participate in, or receive payment from, an equity-based compensation arrangement? **4c**
- 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:

- a** The organization? **5a** **5b**
- b** Any related organization? **5b**
- 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:

- a** The organization? **6a** **6b**
- b** Any related organization? **6b**
- 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**

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** **9**

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? **9**

	Yes	No
1a		
1b		
2		
3		
4a		<input checked="" type="checkbox"/>
4b		<input checked="" type="checkbox"/>
4c		<input checked="" type="checkbox"/>
5a		<input checked="" type="checkbox"/>
5b		<input checked="" type="checkbox"/>
6a		<input checked="" type="checkbox"/>
6b		<input checked="" type="checkbox"/>
7	<input checked="" type="checkbox"/>	
8		<input checked="" type="checkbox"/>
9		

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

Schedule J (Form 990) 2017

Public Disclosure

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

For each individual whose compensation must be reported 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 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 LAURA LONGMAN CFO	(i)	152,047.	7,500.	0.	9,259.	9,668.	178,474.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
2 JEFFREY VEGA PRESIDENT & CEO	(i)	206,541.	16,480.	0.	12,724.	16,210.	251,955.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
3	(i)							
	(ii)							
4	(i)							
	(ii)							
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

Public Disclosure

Part III 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, 2017. THE FOUNDATION'S COMPENSATION PROGRAM WILL BE: FOCUSED ON A COMBINATION OF BASE SALARY AND INCENTIVE PAY WHICH, WHEN COMBINED, WILL PROVIDE COMPENSATION ABOVE THE MARKET MEDIAN. THE INCENTIVE PAY COMPONENT WILL NOT BE ADDED TO BASE PAY AND WILL BE TARGETED ABOVE MARKET MEDIAN AT OR AROUND THE 65TH TO 85TH PERCENTILE. UNDER NO CIRCUMSTANCES WILL COMPENSATION BE CALCULATED AS A PERCENTAGE OF CONTRIBUTIONS.

Public Disclosure

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2017

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

- ▶ 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 the latest information.

Name of the organization

PRINCETON AREA COMMUNITY FOUNDATION INC.

Employer identification number

52-1746234

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
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	X	199	20,505,102	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 organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) (2017)

JSA

7E1298 1.000

Public Disclosure

PRINCETON AREA COMMUNITY FOUNDATION INC.

52-1746234

Schedule M (Form 990) (2017)

Page 2

Part II **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.

Public Disclosure

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

PRINCETON AREA COMMUNITY FOUNDATION INC.

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

2017

Open to Public
Inspection

Employer identification number

52-1746234

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, WITH NAMES REDACTED FROM SCHEDULE B TO HONOR THE WISHES OF ANONYMOUS DONORS, IS SUBSEQUENTLY DISTRIBUTED TO THE FOUNDATION'S AUDIT COMMITTEE FOR FURTHER REVIEW AND APPROVAL. IT IS THEN DISTRIBUTED TO ALL TRUSTEES PRIOR TO BEING FILED WITH THE IRS.

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

THE COMMUNITY FOUNDATION HAS A WRITTEN CONFLICT OF INTEREST POLICY WHICH HAS BEEN APPROVED BY THE BOARD AND REQUIRES ALL EMPLOYEES, OFFICERS, TRUSTEES AND VOLUNTEERS TO COMPLETE AND SIGN A CONFLICT OF INTEREST DISCLOSURE FORM ANNUALLY. ALL COMPLETED FORMS ARE REVIEWED BY THE PRESIDENT & CEO FOR ACCURACY AND REASONABLENESS. 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.

Public Disclosure

Name of the organization

PRINCETON AREA COMMUNITY FOUNDATION INC.

Employer identification number

52-1746234

FORM 990, PART VI, SECTION B, LINE 15A-B

THE COMMUNITY FOUNDATION HAS A BOARD-APPROVED COMPENSATION POLICY WHICH GUIDES ITS DECISIONS. THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES, WHICH IS COMPRISED OF INDEPENDENT BOARD MEMBERS WHO DO NOT HAVE A CONFLICT OF INTEREST, ACTS AS A PERSONNEL AND COMPENSATION COMMITTEE AND SETS ANNUAL COMPENSATION FOR THE PRESIDENT & 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 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 POSIITONS 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

Public Disclosure

Name of the organization

PRINCETON AREA COMMUNITY FOUNDATION INC.

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52-1746234

WEBSITE AND UPON REQUEST. ITS GOVERNING DOCUMENTS AND FORM 1023 ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART III, LINE 4A

GRANTS: THE COMMUNITY FOUNDATION IS AN ACTIVE GRANTMAKER THROUGH TWO COMPETITIVE GRANT PROGRAMS (GREATER MERCER GRANTS AND THE FUND FOR WOMEN & GIRLS) AND GRANTMAKING FROM DONOR-ADVISED, DESIGNATED, NONPROFIT, AND FIELD-OF-INTEREST FUNDS. ITS PRIMARY FOCUS IS CENTRAL NEW JERSEY, BUT GRANTS FROM DONOR-ADVISED FUNDS ARE MADE REGIONALLY AND NATIONALLY AS WELL. COMPETITIVE GRANTS ADDRESS THE NEEDS OF LOW-INCOME PEOPLE IN GREATER MERCER COUNTY, PROVIDE OPERATING SUPPORT FOR NONPROFITS WORKING WITH LOW-INCOME PEOPLE, AND PROVIDE SUPPORT FOR WORK TO BUILD THE SOCIAL CAPITAL OF THE REGION. 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, GRANTEEES, 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

Public Disclosure

Name of the organization PRINCETON AREA COMMUNITY FOUNDATION INC.	Employer identification number 52-1746234
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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 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.

ATTACHMENT 1

FORM 990, PART VIII - INVESTMENT INCOME

<u>DESCRIPTION</u>	(A) <u>TOTAL REVENUE</u>	(B) <u>RELATED OR EXEMPT REVENUE</u>	(C) <u>UNRELATED BUSINESS REV.</u>	(D) <u>EXCLUDED REVENUE</u>
INTEREST AND DIVIDEND INCOME	1,764,951.		143,637.	1,621,314.
TOTALS	<u>1,764,951.</u>		<u>143,637.</u>	<u>1,621,314.</u>

ATTACHMENT 2

FORM 990, PART VIII - EXCLUDED CONTRIBUTIONS

<u>DESCRIPTION</u>	<u>AMOUNT</u>
LUNCHEON	4,900.
DINNER	2,558.
TOTAL	<u>7,458.</u>

Public Disclosure

Name of the organization PRINCETON AREA COMMUNITY FOUNDATION INC.	Employer identification number 52-1746234
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ATTACHMENT 3

FORM 990, PART VIII - FUNDRAISING EVENTS

<u>DESCRIPTION</u>	<u>GROSS INCOME</u>	<u>DIRECT EXPENSES</u>
LUNCHEON	4,895.	4,895.
DINNER	4,583.	4,583.
TOTALS	<u>9,478.</u>	<u>9,478.</u>

ATTACHMENT 4

FORM 990, PART X - PREPAID EXPENSES AND DEFERRED CHARGES

<u>DESCRIPTION</u>	<u>BEGINNING BOOK VALUE</u>	<u>ENDING BOOK VALUE</u>
PREPAID EXPENSES	31,512.	37,566.
TOTALS	<u>31,512.</u>	<u>37,566.</u>

ATTACHMENT 5

FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

<u>DESCRIPTION</u>	<u>BEGINNING BOOK VALUE</u>	<u>ENDING BOOK VALUE</u>	<u>COST OR FMV</u>
DOMESTIC EQUITY	26,219,205.	38,183,151.	FMV
MUTUAL FUNDS - FIXED ASSETS	10,092,271.	9,995,157.	FMV
TOTALS	<u>36,311,476.</u>	<u>48,178,308.</u>	

ATTACHMENT 6

Public Disclosure

Schedule O (Form 990 or 990-EZ) 2017

Page **2**

Name of the organization

PRINCETON AREA COMMUNITY FOUNDATION INC.

Employer identification number

52-1746234

ATTACHMENT 6 (CONT'D)

FORM 990, PART X - DEFERRED REVENUE

<u>DESCRIPTION</u>	<u>BEGINNING BOOK VALUE</u>	<u>ENDING BOOK VALUE</u>
DEFERRED REVENUE	21,864.	10,216.
TOTALS	<u>21,864.</u>	<u>10,216.</u>