

Form **990**

Department of the Treasury  
Internal Revenue Service

# Return of Organization Exempt From Income Tax

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

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

OMB No. 1545-0047

# 2023

**Open to Public Inspection**

## A For the 2023 calendar year, or tax year beginning and ending

<b>B</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	<b>C</b> Name of organization PRINCETON AREA COMMUNITY FOUNDATION INC.				<b>D</b> Employer identification number 52-1746234	
	Doing Business As				<b>E</b> Telephone number	
	Number and street (or P.O. box if mail is not delivered to street address)		Room/suite		(609) 219-1800	
	212 CARNEGIE CENTER		201			
City or town, state or province, country, and ZIP or foreign postal code PRINCETON, NJ 08540						<b>G</b> Gross receipts \$ 41,209,092.
<b>F</b> Name and address of principal officer: LAURA LONGMAN 212 CARNEGIE CENTER 201, PRINCETON, NJ 08540						<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
						<b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
						If "No," attach a list. (see instructions)
<b>I</b> 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						<b>H(c)</b> Group exemption number ▶
<b>J</b> Website: WWW.PACF.ORG						
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶				<b>L</b> Year of formation: 1991		<b>M</b> State of legal domicile: NJ

## Part I Summary

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <u>THE PRINCETON AREA COMMUNITY FOUNDATION PROMOTES PHILANTHROPY THROUGH EDUCATION, GRANT MAKING, AND BY CREATING A NETWORK OF DONORS, ADVISORS AND NONPROFIT CORPORATIONS.</u>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	19
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	19
	<b>5</b> Total number of individuals employed in calendar year 2023 (Part V, line 2a)	<b>5</b>	18
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	60
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	NONE
<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	NONE	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>	<b>Current Year</b>
	<b>9</b> Program service revenue (Part VIII, line 2g)	19,780,005.	23,131,978.
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	NONE	NONE
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	4,805,532.	1,718,900.
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	25,007,087.	25,299,437.
	<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	19,214,234.
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		NONE	NONE
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		2,196,371.	2,594,075.
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)		NONE	NONE
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,123,191.			
<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,136,438.	1,307,474.
<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		22,547,043.	19,550,271.
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	2,460,044.	5,749,166.	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>21</b> Total liabilities (Part X, line 26)	240,180,528.	272,241,294.
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	73,629,049.	83,946,053.
		166,551,479.	188,295,241.

## 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.

<b>Sign Here</b>	Signature of officer		Date		
	Type or print name and title				
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	BRAD CARUSO	BRAD CARUSO	11/14/2024		P01249134
	Firm's name ▶ WITHUMSMITH+BROWN, PC	Firm's EIN ▶	22-2027092		
Firm's address ▶ ONE TOWER CENTER BLVD 14TH FL EAST BRUNSWICK, NJ 08816	Phone no.	732-828-1614			

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** (2023)

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

THE COMMUNITY FOUNDATION PROMOTES PHILANTHROPY TO ADVANCE THE WELL-BEING OF OUR COMMUNITIES. THE COMMUNITY FOUNDATION HAS SEVERAL GRANTMAKING INITIATIVES IN THE AREAS OF EDUCATION, ARTS, BASIC HUMAN NEEDS, CAPACITY BUILDING, AND MORE.

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 [X] No

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

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 \$ 17,562,897. including grants of \$ 15,648,722. ) (Revenue \$ 448,559. )

THE COMMUNITY FOUNDATION IS AN ACTIVE GRANTMAKER THROUGH SEVERAL COMPETITIVE GRANT PROGRAMS; ALL KIDS THRIVE IS ADDRESSING HIGH RATES OF CHRONIC ABSENTEEISM IN LOCAL PUBLIC SCHOOLS, AND COMMUNITY IMPACT GRANTS SUPPORT NONPROFITS WORKING TO IMPROVE THE QUALITY OF LIFE FOR CHILDREN, FAMILIES, AND COMMUNITIES. THE COMMUNITY FOUNDATION ALSO MAKES GRANTS FROM DONOR ADVISED, DESIGNATED, NONPROFIT AND FIELD OF INTEREST FUNDS AND SUPPORTS GIVING CIRCLES INCLUDING THE FUND FOR WOMEN AND GIRLS AND THE NEXTGEN GIVING CIRCLE (SEE SCHEDULE O FOR MORE DETAILS).

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

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

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses 17,562,897.

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> 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	
<b>2</b> Is the organization required to complete Schedule B, Schedule of Contributors? See instructions. . . . .	X	
<b>3</b> 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
<b>4 Section 501(c)(3) organizations.</b> 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
<b>5</b> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III . . . . .</i>		X
<b>6</b> 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	
<b>7</b> 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
<b>8</b> 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
<b>9</b> 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	
<b>10</b> Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V . . . . .</i>	X	
<b>11</b> 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.		
<b>a</b> 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>b</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	
<b>c</b> 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
<b>d</b> 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
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X . . . . .</i>	X	
<b>f</b> 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	
<b>12a</b> 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>b</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
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E . . . . .</i>		X
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? . . . . .		X
<b>b</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	
<b>15</b> 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	
<b>16</b> 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	
<b>17</b> 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. See instructions . . . . .</i>		X
<b>18</b> 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
<b>19</b> 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
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H . . . . .</i>		X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? . . . . .		
<b>21</b> 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>	X	

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question, Yes, No. Rows 22-38 covering various organizational requirements and schedules.

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 [ ]

Table with 3 columns: Question, Yes, No. Rows 1a-1c regarding Form 1096, W-2G forms, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a 18		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	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
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		X
9	<b>Sponsoring organizations maintaining donor advised funds.</b>		
a	Did the sponsoring organization make any taxable distributions under section 4966?		X
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		X
10	<b>Section 501(c)(7) organizations.</b> Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	<b>Section 501(c)(12) organizations.</b> Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
a	Is the organization licensed to issue qualified health plans in more than one state? <b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15	X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X
17	<b>Section 501(c)(21) organizations.</b> Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.	17	

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 on Schedule O. See instructions.

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a (19), 1b (19), 2 (X), 3 (X), 4 (X), 5 (X), 6 (X), 7a (X), 7b (X), 8a (X), 8b (X), 9 (X).

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

Table with 3 columns: Question, Yes, No. Rows include: 10a (X), 10b, 11a (X), 12a (X), 12b (X), 12c (X), 13 (X), 14 (X), 15a (X), 15b (X), 16a (X), 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed CA, DC, FL, NJ, NY, PA, RI, SC, WV,
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records. LAURA LONGMAN 212 CARNEGIE CENTER, SUITE 201 PRINCETON, NJ 08540

609-219-1800

**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 the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week 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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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) JEFFREY VEGA (DEC'D 1/28/2024) PRESIDENT & CEO	40.00 NONE			X				284,965.	NONE	39,200.
(2) LAURA LONGMAN COO/CFO	40.00 NONE			X				223,163.	NONE	26,583.
(3) MARCIA SHACKELFORD CHIEF PHILANTHROPY OFFICER	40.00 NONE					X		196,132.	NONE	34,867.
(4) LYNNE TOYE EXEC DIR OF NEW JERSEY ARTS	40.00 NONE					X		191,862.	NONE	23,672.
(5) NELIDA VALENTIN VICE PRESIDENT, GRANTS & PRGM	40.00 NONE					X		185,130.	NONE	24,341.
(6) MIKE NUNO SENIOR DIRECTOR OF PHILANTHROPY	40.00 NONE					X		159,096.	NONE	19,685.
(7) MICHELLE SAHN DIRECTOR OF COMMUNICATIONS	40.00 NONE					X		126,870.	NONE	17,011.
(8) SONIA DELGADO, MGA BOARD CHAIR - TRUSTEE	5.00 NONE	X		X				NONE	NONE	NONE
(9) ANTHONY J. "SKIP" CIMINO IMMEDIATE PAST CHAIR - TRUSTEE	5.00 NONE	X		X				NONE	NONE	NONE
(10) SCOT D. PANNEPACKER, CPA/ABV BOARD SECRETARY - TRUSTEE	5.00 NONE	X		X				NONE	NONE	NONE
(11) MICHELLE EVERMAN, CPA CGMA TREASURER - TRUSTEE	5.00 NONE	X		X				NONE	NONE	NONE
(12) NICOLE BRONZAN TRUSTEE	1.00 NONE	X						NONE	NONE	NONE
(13) LOVEPREET BUTTAR TRUSTEE	1.00 NONE	X						NONE	NONE	NONE
(14) STEVE DOWNS TRUSTEE	1.00 NONE	X						NONE	NONE	NONE

**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 ) PEG FORRESTEL TRUSTEE	1.00 NONE	X					NONE	NONE	NONE	
( 16 ) DR. KATHRYN A. "KATE" FOSTER TRUSTEE	1.00 NONE	X					NONE	NONE	NONE	
( 17 ) ANDREW K. GOLDEN, CFA TRUSTEE	1.00 NONE	X					NONE	NONE	NONE	
( 18 ) DR. SHANNON MASON TRUSTEE	1.00 NONE	X					NONE	NONE	NONE	
( 19 ) HEATHER ESHELMAN MCCUSKER TRUSTEE	1.00 NONE	X					NONE	NONE	NONE	
( 20 ) RAKIA REYNOLDS TRUSTEE	1.00 NONE	X					NONE	NONE	NONE	
( 21 ) VICTORIA RIVERA-CRUZ TRUSTEE	1.00 NONE	X					NONE	NONE	NONE	
( 22 ) JOHN P. THURBER TRUSTEE	1.00 NONE	X					NONE	NONE	NONE	
( 23 ) ANNE M. VANLENT TRUSTEE	1.00 NONE	X					NONE	NONE	NONE	
( 24 ) MIKE VAN WAGNER TRUSTEE	1.00 NONE	X					NONE	NONE	NONE	
( 25 ) ATIYA WEISS TRUSTEE	1.00 NONE	X					NONE	NONE	NONE	
<b>1b Sub-total</b> . . . . .							1,367,218.	NONE	185,359.	
<b>c Total from continuation sheets to Part VII, Section A</b> . . . . .							NONE	NONE	NONE	
<b>d Total (add lines 1b and 1c)</b> . . . . .							1,367,218.	NONE	185,359.	

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 ▶ 8

	Yes	No
3 Did the organization list any <b>former</b> officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> . . . . .		
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> . . . . .		
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> . . . . .		

**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 ▶



**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 ) TONYA WOODLAND, M.H.R.M, M.S TRUSTEE	1.00 NONE	X						NONE	NONE	NONE
<b>1b Sub-total</b> . . . . .										
<b>c Total from continuation sheets to Part VII, Section A</b> . . . . .										
<b>d Total (add lines 1b and 1c)</b> . . . . .										

**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 ▶

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> . . . . .		X
<b>4</b> 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	
<b>5</b> 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
VERREX LLC 1130 ROUTE 22 WEST MOUNTAINSIDE, NJ 07092	AV SYSTEMS	102,424.

**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 ▶ **1**

**Part VIII Statement of Revenue**

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514			
<b>Contributions, Gifts, Grants, and Other Similar Amounts</b>	<b>1a</b>	Federated campaigns . . . . .	<b>1a</b>							
	<b>b</b>	Membership dues . . . . .	<b>1b</b>							
	<b>c</b>	Fundraising events . . . . .	<b>1c</b>							
	<b>d</b>	Related organizations . . . . .	<b>1d</b>							
	<b>e</b>	Government grants (contributions) . .	<b>1e</b>							
	<b>f</b>	All other contributions, gifts, grants, and similar amounts not included above .	<b>1f</b>	23,131,978.						
	<b>g</b>	Noncash contributions included in lines 1a-1f . . . . .	<b>1g</b>	\$ 4,108,254.						
	<b>h</b>	<b>Total.</b> Add lines 1a-1f . . . . .		23,131,978.						
<b>Program Service Revenue</b>	<b>2a</b>	_____	Business Code							
	<b>b</b>	_____								
	<b>c</b>	_____								
	<b>d</b>	_____								
	<b>e</b>	_____								
	<b>f</b>	All other program service revenue . . . . .								
	<b>g</b>	<b>Total.</b> Add lines 2a-2f . . . . .		NONE						
<b>Other Revenue</b>	<b>3</b>	Investment income (including dividends, interest, and other similar amounts) . . . . .		2,434,236.		NONE	2,434,236.			
	<b>4</b>	Income from investment of tax-exempt bond proceeds . . .		NONE						
	<b>5</b>	Royalties . . . . .		NONE						
	<b>6a</b>	Gross rents . . . . .	<b>6a</b>	(i) Real						
				(ii) Personal						
	<b>b</b>	Less: rental expenses	<b>6b</b>							
	<b>c</b>	Rental income or (loss)	<b>6c</b>	NONE	NONE					
	<b>d</b>	Net rental income or (loss) . . . . .		NONE						
	<b>7a</b>	Gross amount from sales of assets other than inventory	<b>7a</b>	(i) Securities	15,194,319.					
				(ii) Other						
	<b>b</b>	Less: cost or other basis and sales expenses . . . . .	<b>7b</b>	15,909,655.						
	<b>c</b>	Gain or (loss) . . . . .	<b>7c</b>	-715,336.						
<b>d</b>	Net gain or (loss) . . . . .		-715,336.			-715,336.				
<b>8a</b>	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 . . . . .	<b>8a</b>		NONE						
			<b>b</b>	Less: direct expenses . . . . .	<b>8b</b>	NONE				
			<b>c</b>	Net income or (loss) from fundraising events . . . . .		NONE				
			<b>9a</b>	Gross income from gaming activities. See Part IV, line 19 . . . . .	<b>9a</b>		NONE			
						<b>b</b>	Less: direct expenses . . . . .	<b>9b</b>	NONE	
						<b>c</b>	Net income or (loss) from gaming activities . . . . .		NONE	
			<b>10a</b>	Gross sales of inventory, less returns and allowances . . . . .	<b>10a</b>		NONE			
						<b>b</b>	Less: cost of goods sold . . . . .	<b>10b</b>	NONE	
						<b>c</b>	Net income or (loss) from sales of inventory . . . . .		NONE	
<b>Miscellaneous Revenue</b>	<b>11a</b>	ADMINISTRATIVE FEES	Business Code	900099	448,559.	448,559.				
	<b>b</b>	_____								
	<b>c</b>	_____								
	<b>d</b>	All other revenue . . . . .								
	<b>e</b>	<b>Total.</b> Add lines 11a-11d . . . . .		448,559.						
<b>12</b>	<b>Total revenue.</b> See instructions . . . . .		25,299,437.	448,559.	NONE	1,718,900.				

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

Table with 5 columns: (A) Total expenses, (B) Program service expenses, (C) Management and general expenses, (D) Fundraising expenses. Rows include categories like Grants, Salaries, Pension, and Total functional expenses.

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing . . . . .	18,758.	<b>1</b>	18,388.
	<b>2</b> Savings and temporary cash investments. . . . .	29,020,716.	<b>2</b>	23,504,547.
	<b>3</b> Pledges and grants receivable, net . . . . .	1,643,238.	<b>3</b>	11,752,887.
	<b>4</b> Accounts receivable, net . . . . .	NONE	<b>4</b>	NONE
	<b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons . . . . .	NONE	<b>5</b>	NONE
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B). . . . .	NONE	<b>6</b>	NONE
	<b>7</b> Notes and loans receivable, net . . . . .	NONE	<b>7</b>	NONE
	<b>8</b> Inventories for sale or use . . . . .	NONE	<b>8</b>	NONE
	<b>9</b> Prepaid expenses and deferred charges . . . . .	132,664.	<b>9</b>	126,567.
	<b>10 a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D . . . . .	568,507.	<b>10a</b>	
	<b>b</b> Less: accumulated depreciation. . . . .	181,888.	<b>10b</b>	
	<b>11</b> Investments - publicly traded securities. . . . .	65,352,682.	<b>11</b>	44,078,139.
	<b>12</b> Investments - other securities. See Part IV, line 11 . . . . .	143,702,638.	<b>12</b>	188,525,766.
	<b>13</b> Investments - program-related. See Part IV, line 11. . . . .	NONE	<b>13</b>	NONE
	<b>14</b> Intangible assets . . . . .	NONE	<b>14</b>	NONE
	<b>15</b> Other assets. See Part IV, line 11 . . . . .	301,926.	<b>15</b>	3,848,381.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) . . . . .	240,180,528.	<b>16</b>	272,241,294.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses. . . . .	62,665.	<b>17</b>	145,036.
	<b>18</b> Grants payable . . . . .	1,224,053.	<b>18</b>	2,315,105.
	<b>19</b> Deferred revenue . . . . .	NONE	<b>19</b>	NONE
	<b>20</b> Tax-exempt bond liabilities . . . . .	NONE	<b>20</b>	NONE
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .	72,342,331.	<b>21</b>	78,006,728.
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons . . . . .	NONE	<b>22</b>	NONE
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .	NONE	<b>23</b>	NONE
	<b>24</b> Unsecured notes and loans payable to unrelated third parties. . . . .	NONE	<b>24</b>	NONE
	<b>25</b> 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 . . . . .	NONE	<b>25</b>	3,479,184.
	<b>26 Total liabilities.</b> Add lines 17 through 25. . . . .	73,629,049.	<b>26</b>	83,946,053.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.</b> <input checked="" type="checkbox"/>			
	<b>27</b> Net assets without donor restrictions. . . . .	164,616,440.	<b>27</b>	176,214,077.
	<b>28</b> Net assets with donor restrictions. . . . .	1,935,039.	<b>28</b>	12,081,164.
	<b>Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.</b> <input type="checkbox"/>			
	<b>29</b> Capital stock or trust principal, or current funds . . . . .		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund . . . . .		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds . . . . .		<b>31</b>	
	<b>32</b> Total net assets or fund balances . . . . .	166,551,479.	<b>32</b>	188,295,241.
<b>33</b> Total liabilities and net assets/fund balances. . . . .	240,180,528.	<b>33</b>	272,241,294.	

**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	25,299,437.
2	Total expenses (must equal Part IX, column (A), line 25)	2	19,550,271.
3	Revenue less expenses. Subtract line 2 from line 1	3	5,749,166.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	166,551,479.
5	Net unrealized gains (losses) on investments	5	15,940,596.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	54,000.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	188,295,241.

**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 on 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 on 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 Uniform Guidance, 2 C.F.R. Part 200, Subpart F? . . . . .
- 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 on Schedule O and describe any steps taken to undergo such audits . . .

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

**SCHEDULE A  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

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

Attach to Form 990 or Form 990-EZ.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2023**

**Open to Public  
Inspection**

<b>Name of the organization</b> PRINCETON AREA COMMUNITY FOUNDATION INC.	<b>Employer identification number</b> 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).)
- 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 on 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 . . . . .
- g Provide the following information about the supported organization(s).

	(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)							
<b>Total</b>							

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

Schedule A (Form 990) 2023

JSA  
3E1210 1.000

**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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . .	16,991,618.	19,707,552.	15,797,513.	19,780,005.	23,131,978.	95,408,666.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						NONE
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						NONE
<b>4 Total.</b> Add lines 1 through 3. . . . .	16,991,618.	19,707,552.	15,797,513.	19,780,005.	23,131,978.	95,408,666.
<b>5</b> 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). . . . .						32,372,307.
<b>6 Public support.</b> Subtract line 5 from line 4						63,036,359.

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
<b>7</b> Amounts from line 4 . . . . .	16,991,618.	19,707,552.	15,797,513.	19,780,005.	23,131,978.	95,408,666.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . . . . .	1,755,222.	1,263,406.	2,040,805.	2,413,915.	2,434,236.	9,907,584.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on . . . . .				40,939.	20,526.	61,465.
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . .	312,705.	259,651.	357,172.	421,550.	448,559.	1,799,637.
<b>11 Total support.</b> Add lines 7 through 10 . . . . .						107,177,352.

**12** Gross receipts from related activities, etc. (see instructions) . . . . . **12**

**13 First 5 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**

<b>14</b> Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f)) . . . . .	<b>14</b>	58.81 %
<b>15</b> Public support percentage from 2022 Schedule A, Part II, line 14 . . . . .	<b>15</b>	62.25 %

**16a 33 1/3% support test - 2023.** 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. . . . .

**b 33 1/3% support test - 2022.** 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 . . . . .

**17a 10%-facts-and-circumstances test - 2023.** 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. . . . .

**b 10%-facts-and-circumstances test - 2022.** 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. . . . .

**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 . . . . .

**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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
<b>2</b> 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 . . . . .						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 . . . . .						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						
<b>6 Total.</b> Add lines 1 through 5. . . . .						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons . . . . .						
<b>b</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 . . . . .						
<b>c</b> Add lines 7a and 7b. . . . .						
<b>8 Public support.</b> (Subtract line 7c from line 6.) . . . . .						

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
<b>9</b> Amounts from line 6. . . . .						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources. . . . .						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . . .						
<b>c</b> Add lines 10a and 10b . . . . .						
<b>11</b> Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on. . . . .						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . .						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.) . . . . .						

**14 First 5 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**

<b>15</b> Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f)) . . . . .	<b>15</b>	%
<b>16</b> Public support percentage from 2022 Schedule A, Part III, line 15 . . . . .	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2023</b> (line 10c, column (f), divided by line 13, column (f)). . . . .	<b>17</b>	%
<b>18</b> Investment income percentage from <b>2022</b> Schedule A, Part III, line 17 . . . . .	<b>18</b>	%

**19a 33 1/3% support tests - 2023.** 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 - 2022.** 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 . .



**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

	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 lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b <b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c <b>Substitutions only.</b> 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 (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</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 on 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 on 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 line 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>		

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? Sub-rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? Row 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?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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? Row 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? Row 3: By reason of the relationship described on line 2, above, 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?

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). Sub-rows a, b, c. Row 2: Activities Test. Answer lines 2a and 2b below. Sub-rows a, b. Row 3: Parent of Supported Organizations. Answer lines 3a and 3b below. Sub-rows a, b.

**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.

<b>Section A - Adjusted Net Income</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b>	Net short-term capital gain	<b>1</b>	
<b>2</b>	Recoveries of prior-year distributions	<b>2</b>	
<b>3</b>	Other gross income (see instructions)	<b>3</b>	
<b>4</b>	Add lines 1 through 3.	<b>4</b>	
<b>5</b>	Depreciation and depletion	<b>5</b>	
<b>6</b>	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)	<b>6</b>	
<b>7</b>	Other expenses (see instructions)	<b>7</b>	
<b>8</b>	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	<b>8</b>	

<b>Section B - Minimum Asset Amount</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b>	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
<b>a</b>	Average monthly value of securities	<b>1a</b>	
<b>b</b>	Average monthly cash balances	<b>1b</b>	
<b>c</b>	Fair market value of other non-exempt-use assets	<b>1c</b>	
<b>d</b>	<b>Total</b> (add lines 1a, 1b, and 1c)	<b>1d</b>	
<b>e</b>	<b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):		
<b>2</b>	Acquisition indebtedness applicable to non-exempt-use assets	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	
<b>4</b>	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	<b>4</b>	
<b>5</b>	Net value of non-exempt-use assets (subtract line 4 from line 3)	<b>5</b>	
<b>6</b>	Multiply line 5 by 0.035.	<b>6</b>	
<b>7</b>	Recoveries of prior-year distributions	<b>7</b>	
<b>8</b>	<b>Minimum Asset Amount</b> (add line 7 to line 6)	<b>8</b>	

<b>Section C - Distributable Amount</b>			Current Year
<b>1</b>	Adjusted net income for prior year (from Section A, line 8, column A)	<b>1</b>	
<b>2</b>	Enter 0.85 of line 1.	<b>2</b>	
<b>3</b>	Minimum asset amount for prior year (from Section B, line 8, column A)	<b>3</b>	
<b>4</b>	Enter greater of line 2 or line 3.	<b>4</b>	
<b>5</b>	Income tax imposed in prior year	<b>5</b>	
<b>6</b>	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	<b>6</b>	
<b>7</b>	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

**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	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i> )	5
6	Other distributions ( <i>describe in Part VI</i> ). See instructions.	6
7	<b>Total annual distributions.</b> Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive ( <i>provide details in Part VI</i> ). See instructions.	8
9	Distributable amount for 2023 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2023 (reasonable cause required - <i>explain in Part VI</i> ). See instructions.			
3	Excess distributions carryover, if any, to 2023			
a	From 2018 . . . . .			
b	From 2019 . . . . .			
c	From 2020 . . . . .			
d	From 2021 . . . . .			
e	From 2022 . . . . .			
f	<b>Total</b> of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2023 distributable amount			
i	Carryover from 2018 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2023 from Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2023 distributable amount			
c	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6	Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7	<b>Excess distributions carryover to 2024.</b> Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2019 . . . .			
b	Excess from 2020 . . . .			
c	Excess from 2021 . . . .			
d	Excess from 2022 . . . .			
e	Excess from 2023 . . . .			

**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.)

SCHEDULE A, PART II - OTHER INCOME

DESCRIPTION	2019	2020	2021	2022	2023	TOTAL
MISCELLANEOUS REVENUE	312,705.	259,651.	357,172.	421,550.	448,559.	1,799,637.
<b>TOTALS</b>	312,705.	259,651.	357,172.	421,550.	448,559.	1,799,637.

Schedule B (Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2023

Name of the organization

Employer identification number

PRINCETON AREA COMMUNITY FOUNDATION INC.

52-1746234

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

[X] 501(c)( 3 ) (enter number) organization

[ ] 4947(a)(1) nonexempt charitable trust 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

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

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

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

Name of organization <p style="text-align: center;">PRINCETON AREA COMMUNITY FOUNDATION INC.</p>	Employer identification number <p style="text-align: center;">52-1746234</p>
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**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	N/A <hr/> <hr/>	\$ 5,014,314.	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:80%; padding: 2px;">Person</td> <td style="width:20%; text-align: center; padding: 2px;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;">Payroll</td> <td style="text-align: center; padding: 2px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;">Noncash</td> <td style="text-align: center; padding: 2px;"><input type="checkbox"/></td> </tr> </table> <p style="font-size: small; margin-top: 5px;">(Complete Part II for noncash contributions.)</p>	Person	<input checked="" type="checkbox"/>	Payroll	<input type="checkbox"/>	Noncash	<input type="checkbox"/>
Person	<input checked="" type="checkbox"/>								
Payroll	<input type="checkbox"/>								
Noncash	<input type="checkbox"/>								
2	N/A <hr/> <hr/>	\$ 1,031,205.	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:80%; padding: 2px;">Person</td> <td style="width:20%; text-align: center; padding: 2px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;">Payroll</td> <td style="text-align: center; padding: 2px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;">Noncash</td> <td style="text-align: center; padding: 2px;"><input checked="" type="checkbox"/></td> </tr> </table> <p style="font-size: small; margin-top: 5px;">(Complete Part II for noncash contributions.)</p>	Person	<input type="checkbox"/>	Payroll	<input type="checkbox"/>	Noncash	<input checked="" type="checkbox"/>
Person	<input type="checkbox"/>								
Payroll	<input type="checkbox"/>								
Noncash	<input checked="" type="checkbox"/>								
3	N/A <hr/> <hr/>	\$ 1,299,949.	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:80%; padding: 2px;">Person</td> <td style="width:20%; text-align: center; padding: 2px;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;">Payroll</td> <td style="text-align: center; padding: 2px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;">Noncash</td> <td style="text-align: center; padding: 2px;"><input checked="" type="checkbox"/></td> </tr> </table> <p style="font-size: small; margin-top: 5px;">(Complete Part II for noncash contributions.)</p>	Person	<input checked="" type="checkbox"/>	Payroll	<input type="checkbox"/>	Noncash	<input checked="" type="checkbox"/>
Person	<input checked="" type="checkbox"/>								
Payroll	<input type="checkbox"/>								
Noncash	<input checked="" type="checkbox"/>								
4	N/A <hr/> <hr/>	\$ 725,000.	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:80%; padding: 2px;">Person</td> <td style="width:20%; text-align: center; padding: 2px;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;">Payroll</td> <td style="text-align: center; padding: 2px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;">Noncash</td> <td style="text-align: center; padding: 2px;"><input type="checkbox"/></td> </tr> </table> <p style="font-size: small; margin-top: 5px;">(Complete Part II for noncash contributions.)</p>	Person	<input checked="" type="checkbox"/>	Payroll	<input type="checkbox"/>	Noncash	<input type="checkbox"/>
Person	<input checked="" type="checkbox"/>								
Payroll	<input type="checkbox"/>								
Noncash	<input type="checkbox"/>								
5	N/A <hr/> <hr/>	\$ 470,000.	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:80%; padding: 2px;">Person</td> <td style="width:20%; text-align: center; padding: 2px;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;">Payroll</td> <td style="text-align: center; padding: 2px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;">Noncash</td> <td style="text-align: center; padding: 2px;"><input type="checkbox"/></td> </tr> </table> <p style="font-size: small; margin-top: 5px;">(Complete Part II for noncash contributions.)</p>	Person	<input checked="" type="checkbox"/>	Payroll	<input type="checkbox"/>	Noncash	<input type="checkbox"/>
Person	<input checked="" type="checkbox"/>								
Payroll	<input type="checkbox"/>								
Noncash	<input type="checkbox"/>								
6	N/A <hr/> <hr/>	\$ 10,500,000.	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:80%; padding: 2px;">Person</td> <td style="width:20%; text-align: center; padding: 2px;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;">Payroll</td> <td style="text-align: center; padding: 2px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;">Noncash</td> <td style="text-align: center; padding: 2px;"><input type="checkbox"/></td> </tr> </table> <p style="font-size: small; margin-top: 5px;">(Complete Part II for noncash contributions.)</p>	Person	<input checked="" type="checkbox"/>	Payroll	<input type="checkbox"/>	Noncash	<input type="checkbox"/>
Person	<input checked="" type="checkbox"/>								
Payroll	<input type="checkbox"/>								
Noncash	<input type="checkbox"/>								

Name of organization <p style="text-align: center;">PRINCETON AREA COMMUNITY FOUNDATION INC.</p>	Employer identification number <p style="text-align: center;">52-1746234</p>
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**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	5250 SHARES OF APPLE _____ _____ _____	\$ 1,031,205.	12/19/2023
3	29585 VARIOUS SHARES _____ _____ _____	\$ 1,293,449.	12/26/2023
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____



Name of organization <p style="text-align:center;">PRINCETON AREA COMMUNITY FOUNDATION INC.</p>	Employer identification number <p style="text-align:center;">52-1746234</p>
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**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.

<b>(a) No. from Part I</b>	<b>(b) Purpose of gift</b>	<b>(c) Use of gift</b>	<b>(d) Description of how gift is held</b>
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
_____ _____ _____		_____ _____ _____	
<b>(a) No. from Part I</b>	<b>(b) Purpose of gift</b>	<b>(c) Use of gift</b>	<b>(d) Description of how gift is held</b>
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
_____ _____ _____		_____ _____ _____	
<b>(a) No. from Part I</b>	<b>(b) Purpose of gift</b>	<b>(c) Use of gift</b>	<b>(d) Description of how gift is held</b>
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
_____ _____ _____		_____ _____ _____	
<b>(a) No. from Part I</b>	<b>(b) Purpose of gift</b>	<b>(c) Use of gift</b>	<b>(d) Description of how gift is held</b>
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
_____ _____ _____		_____ _____ _____	

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2023

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Name of the organization

Employer identification number

PRINCETON AREA COMMUNITY FOUNDATION INC.

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.

Table with 3 columns: Line number, (a) Donor advised funds, (b) Funds and other accounts. Includes rows for total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions regarding donor advisement.

Part II Conservation Easements

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

Form for Part II Conservation Easements. Includes checkboxes for types of easements, a table for conservation contributions (2a-2d), and several yes/no questions regarding monitoring and reporting.

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.

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Includes questions about reporting art and historical treasures and a table for amounts required to be reported.

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

Schedule D (Form 990) 2023

JSA 3E1268 1.000

**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 make 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 program
  - 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 . . . . .             | <b>1c</b> |
| d Additions during the year . . . . .     | <b>1d</b> |
| e Distributions during the year . . . . . | <b>1e</b> |
| f Ending balance . . . . .                | <b>1f</b> |
- 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 in 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 . . . . .	49,234,164.	57,662,612.	50,326,767.	46,214,634.	38,770,702.
b Contributions . . . . .	203,661.	573,117.	579,340.	54,827.	319,171.
c Net investment earnings, gains, and losses . . . . .	5,525,535.	-6,422,460.	7,646,329.	6,097,568.	8,729,704.
d Grants or scholarships . . . . .	2,540,420.	2,579,105.	889,824.	1,292,787.	866,818.
e Other expenditures for facilities and programs . . . . .				747,475.	738,125.
f Administrative expenses . . . . .					
g End of year balance . . . . .	52,422,940.	49,234,164.	57,662,612.	50,326,767.	46,214,634.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment 100.0000 %
  - b Permanent endowment NONE %
  - c Term endowment NONE %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |  | Yes                      | No                                  |
|--|--------------------------|-------------------------------------|
| (i) Unrelated organizations? . . . . .   | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (ii) Related organizations? . . . . .  | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? . . . . . | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
- 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.	63,318.	NONE
d Equipment . . . . .		505,189.	118,570.	386,619.
e Other . . . . .				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B)) . . . . .				386,619.

**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 . . . . .		
(3) Other _____		
(A) ALTERNATIVE - MULTI-STRATEGY	57,945,168.	FMV
(B) ALTERNATIVE - L/S STRATEGY	3,763,590.	FMV
(C) ALTERNATIVE - EQUITY FUNDS	67,520,111.	FMV
(D) ALTERNATIVE - REAL ASSETS	9,554,820.	FMV
(E) ALTERNATIVE - INTER. EQUITY FU	29,953,259.	FMV
(F) ALTERNATIVE - VENTURE CAPITAL	19,788,818.	FMV
(G)		
(H)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, line 12, col. (B)) . . .	188,525,766.	

**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)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, line 13, col. (B)) . . .		

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

**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) LEASE LIABILITY	3,479,184.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, line 25, col. (B)). . . . .	3,479,184.

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

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .	<b>1</b>	41,236,128.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
<b>a</b>	Net unrealized gains (losses) on investments . . . . .	<b>2a</b>	15,940,596.
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>	
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.) . . . . .	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	15,940,596.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	25,295,532.
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	3,905.
<b>b</b>	Other (Describe in Part XIII.) . . . . .	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	3,905.
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.) . . . . .	<b>5</b>	25,299,437.

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total expenses and losses per audited financial statements . . . . .	<b>1</b>	19,492,366.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>	
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>	
<b>c</b>	Other losses . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.) . . . . .	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	19,492,366.
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	3,905.
<b>b</b>	Other (Describe in Part XIII.) . . . . .	<b>4b</b>	54,000.
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	57,905.
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.) . . . . .	<b>5</b>	19,550,271.

**Part XIII Supplemental Information**

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

SEE SUPPLEMENTAL PAGE

**Part XIII** Supplemental Information (continued)

SCHEDULE D, PART V, LINE 4

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

SCHEDULE D, PART X, LINE 2

THE COMMUNITY FOUNDATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. ACCORDINGLY, THE FINANCIAL STATEMENTS DO NOT REFLECT A PROVISION FOR FEDERAL OR STATE INCOME TAXES. HOWEVER, REVENUE EARNED ON ACTIVITIES WHICH ARE UNRELATED TO THE COMMUNITY FOUNDATION'S EXEMPT PURPOSE IS TAXABLE. THE COMMUNITY FOUNDATION'S UNRELATED BUSINESS INCOME IS GENERATED FROM INVESTMENT INCOME FROM CERTAIN OF ITS INVESTMENTS IN ALTERNATIVE ASSETS. THE COMMUNITY FOUNDATION HAD NO INCOME TAXES ASSESSED FOR THE YEARS ENDED DECEMBER 31, 2023 AND 2022.

THE COMMUNITY FOUNDATION FOLLOWS THE PRONOUNCEMENT RELATED TO ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES AND THERE WERE NO UNCERTAIN TAX POSITIONS AT DECEMBER 31, 2023 AND 2022. IN ADDITION, NO INCOME TAX RELATED PENALTIES OR INTEREST HAVE BEEN RECORDED FOR THE YEARS ENDED DECEMBER 31, 2023 AND 2022.

**Part XIII Supplemental Information** (continued)

SCHEDULE D, PART IV, LINE 2B

THE COMMUNITY FOUNDATION RECEIVES AND DISTRIBUTES ASSETS UNDER CERTAIN AGENCY AND INTERMEDIARY ARRANGEMENTS. WHEN THE COMMUNITY FOUNDATION ACCEPTS A DEPOSIT FROM A NOT-FOR-PROFIT ORGANIZATION ("NPO") TO ESTABLISH A FUND THAT SPECIFIES ITSELF OR ITS AFFILIATE AS THE BENEFICIARY OF THAT FUND, THE COMMUNITY FOUNDATION WILL ACCOUNT FOR THE TRANSFER OF SUCH ASSETS AS A LIABILITY. THE LIABILITY IS ESTABLISHED AT THE FAIR VALUE OF THE FUNDS RECEIVED, ADJUSTED FOR INVESTMENT EARNINGS AND FEES, GAINS AND LOSSES AND NET OF ANY FUNDS RETURNED WHICH IS GENERALLY EQUIVALENT TO THE PRESENT VALUE OF FUTURE PAYMENTS EXPECTED TO BE MADE TO THE NPOS. THESE FUNDS ARE REFLECTED AS "FUNDS HELD FOR OTHERS" IN THE ACCOMPANYING STATEMENTS OF FINANCIAL POSITION. UPON WRITTEN REQUEST, FULL LIQUIDATIONS OCCUR AT THE DISCRETION OF THE COMMUNITY FOUNDATION, FOLLOWING THE MONTHLY RECONCILIATION OR AT THE END OF THE FOLLOWING QUARTER WHEN THE PORTFOLIO IS REBALANCED. TIMING OF LIQUIDATIONS IS DETERMINED BY THE COMMUNITY FOUNDATION TO ENSURE NO ADVERSE IMPACT ON THE PERFORMANCE OF THE INVESTMENT POOL.

SCHEDULE D, PART XII, LINE 4B

REFUNDS OF GRANTS PAID IN PRIOR YEARS = \$54,000.

**SCHEDULE F  
(Form 990)**

**Statement of Activities Outside the United States**

OMB No. 1545-0047

**2023**

**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](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization

Employer identification number

PRINCETON AREA COMMUNITY FOUNDATION INC.

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.

**1 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**

**2 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
<b>(1)</b> CENTRAL AMERICA/CARIBBEAN	NONE	NONE	INVESTMENTS	NONE	29,953,259.
<b>(2)</b>					
<b>(3)</b>					
<b>(4)</b>					
<b>(5)</b>					
<b>(6)</b>					
<b>(7)</b>					
<b>(8)</b>					
<b>(9)</b>					
<b>(10)</b>					
<b>(11)</b>					
<b>(12)</b>					
<b>(13)</b>					
<b>(14)</b>					
<b>(15)</b>					
<b>(16)</b>					
<b>(17)</b>					
<b>3a</b> Subtotal . . . . .	NONE	NONE			29,953,259.
<b>b</b> Total from continuation sheets to Part I . . . . .					
<b>c Totals</b> (add lines 3a and 3b)	NONE	NONE			29,953,259.

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

Schedule F (Form 990) 2023

JSA  
3E1274 1.000



**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)									
(2)									
(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 a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . \_\_\_\_\_

3 Enter total number of other organizations or entities . . . . . \_\_\_\_\_

**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)							

**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 the 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 the 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 the 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 the 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 the 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 the Instructions for Form 5713; don't file with Form 990)* . . . . .  Yes  No

**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 TO ELIGIBLE NOT FOR PROFITS AFTER A THOROUGH REVIEW OF THE GRANTEE'S ORGANIZATIONAL DOCUMENTS AND OTHER RELEVANT INFORMATION. STAFF ALSO REVIEW WEBSITES, ANNUAL REPORTS AND NEWSLETTERS TO CONFIRM THE TAX-EXEMPT STATUS AND EFFICACY OF EACH ORGANIZATION. THE COMMUNITY FOUNDATION GRANTS SCHOLARSHIPS AND AWARDS THROUGH COMPETITIVE PROCESSES TO SUPPORT COLLEGE STUDY AND TO HONOR ACHIEVEMENT IN THE ARTS, MUSIC, GRAPHIC DESIGN, AND COMMUNITY SERVICE.

SCHEDULE F, PART I, LINE 2

ALL FOREIGN GRANTS MADE BY THE COMMUNITY FOUNDATION ARE PAID THROUGH ORGANIZATIONS BASED IN THE UNITED STATES WITH 501(C)(3) TAX-EXEMPT STATUS AND FORWARDED TO FOREIGN GRANTEES. ALL MONITORING OF GRANTS AND DUE DILIGENCE AFTER THE GRANT IS MADE IS ADMINISTERED BY THE GRANTEE ORGANIZATION BASED IN THE UNITED STATES. SCHOLARSHIPS MADE TO FOREIGN

**Part V Supplemental Information**

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

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

**SCHEDULE I  
(Form 990)**

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

OMB No. 1545-0047

**2023**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

Attach to Form 990.

Go to [www.irs.gov/Form990](http://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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
<b>(1)</b> 6TH REGIMENT UNITED STATES COLORED TROOPS 688 MLK JR BLVD TRENTON, NJ 08618	31-1806291	501(C)(3)	14,000.				GENERAL SUPPORT
<b>(2)</b> ADVANCEMENT PROJECT EDUCATION FUND 1220 L ST NW WASHINGTON, DC 20005	87-4702350	501(C)(3)	12,500.				GENERAL SUPPORT
<b>(3)</b> ADVENTURE CYCLING ASSOCIATION 150 E PINE ST MISSOULA, MT 59807	23-7427629	501(C)(3)	20,000.				GENERAL SUPPORT
<b>(4)</b> ADVOCACY AND SERVICES FOR LGBTQ ELDERS 305 7TH AVE NEW YORK, NY 10001	13-2947657	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(5)</b> ADVOCATES FOR CHILDREN OF NEW JERSEY 35 HALSEY ST NEWARK, NJ 07102	22-1695034	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(6)</b> AJA FOREVER FOUNDATION CORPORATION 108 PEARL LIGHT CIR FT WASHINGTON, MD 20744	87-2948150	501(C)(3)	7,500.				GENERAL SUPPORT
<b>(7)</b> ALICE PAUL INSTITUTE P.O. BOX 1376 MT. LAUREL, NJ 08054	22-2545683	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(8)</b> ALL THE WAY UP ADULT EDUCATION CENTER 31 MULBERRY ST NEWARK, NJ 07102	82-5272378	501(C)(3)	6,250.				GENERAL SUPPORT
<b>(9)</b> ALLEN-SHAW FOUNDATION 140 DARROW PL BRONX, NY 10475	13-3912445	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(10)</b> AMERICAN CIVIL LIBERTIES NJ POST OFFICE BOX 32159 NEWARK, NJ 07102	22-2010593	501(C)(3)	30,000.				GENERAL SUPPORT
<b>(11)</b> AMERICAN NEAR EAST REFUGEE AID (ANERA) 1111 14TH ST NW WASHINGTON, DC 20005	52-0882226	501(C)(3)	12,000.				GENERAL SUPPORT
<b>(12)</b> AMERICAN RED CROSS OF CENTRAL NEW JERSEY 209 FAIRFIELD RD FAIRFIELD, NJ 07004-2420	53-0196605	501(C)(3)	10,000.				GENERAL SUPPORT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 416

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

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Schedule I (Form 990) 2023

**SCHEDULE I  
(Form 990)**

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.  
Attach to Form 990.

OMB No. 1545-0047

**2023**

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Department of the Treasury  
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Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

Name of the organization

Employer identification number

PRINCETON AREA COMMUNITY FOUNDATION INC.

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
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**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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
<b>(1)</b> AMERICAN REPERTORY BALLET/PRINCETON BALLET 301 N. HARRISON PRINCETON, NJ 08540	21-0732575	501(C)(3)	65,000.				GENERAL SUPPORT
<b>(2)</b> AMERICAN THEATER GROUP 57 FARMS RD CIRCLE EAST BRUNSWICK, NJ 08816	27-1141524	501(C)(3)	15,000.				GENERAL SUPPORT
<b>(3)</b> ANCHOR HOUSE, INC. 482 CENTRE ST TRENTON, NJ 08611	22-2229995	501(C)(3)	57,500.				GENERAL SUPPORT
<b>(4)</b> ANGELICA PATIENT ASSISTANT PROGRAM 243 W 60TH ST # 9 NEW YORK, NY 10023	20-3391292	501(C)(3)	20,000.				GENERAL SUPPORT
<b>(5)</b> ANIMAL WELFARE ASSOCIATION INC. 509 CENTENNIAL BLVD VOORHEES, NJ 08043	22-1752792	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(6)</b> ARBOR RISING 270 W. 39TH ST NEW YORK, NY 10018	27-4205023	501(C)(3)	75,000.				GENERAL SUPPORT
<b>(7)</b> ARIAH FOUNDATION 291 MONROE ST BROOKLYN, NY 11216	87-3887912	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(8)</b> ARIEL RIVKA DANCE 341 MONMOUTH ST, 408D JERSEY CITY, NJ 07302	47-4452473	501(C)(3)	20,000.				GENERAL SUPPORT
<b>(9)</b> ARM IN ARM 1 N JOHNSTON AVE HAMILTON, NJ 08609	22-3198464	501(C)(3)	58,500.				GENERAL SUPPORT
<b>(10)</b> ART AGAINST RACISM 208 LAUREL CIR PRINCETON, NJ 08540	85-1291324	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(11)</b> ART HOUSE PRODUCTIONS 100 SHEARWATER CT JERSEY CITY, NJ 07305	14-1993156	501(C)(3)	20,000.				GENERAL SUPPORT
<b>(12)</b> ART IN THE ATRIUM P O BOX 9158 MORRISTOWN, NJ 07963	22-3262907	501(C)(3)	25,000.				GENERAL SUPPORT

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<b>(1)</b> ART WITH A HEART 3000 FALLS RD BALTIMORE, MD 21211	52-2227996	501(C)(3)	6,250.				GENERAL SUPPORT
<b>(2)</b> ARTISTIC REALIZATION TECH 11 WHIPPOORWILL WAY BELLE MEAD, NJ 08502	22-3421254	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(3)</b> ARTS BY THE PEOPLE 14 ELM ST MORRISTOWN, NJ 07960	27-1256226	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(4)</b> ARTS COUNCIL OF PRINCETON 102 WITHERSPOON ST PRINCETON, NJ 08542	22-6108090	501(C)(3)	19,500.				GENERAL SUPPORT
<b>(5)</b> ARTS ED NJ INC 432 HIGH ST BURLINGTON, NJ 08016	47-3402518	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(6)</b> ARTS HORIZONS 1 GRAND AVE, ST 7 ENGLEWOOD, NJ 07631	22-2418718	501(C)(3)	20,000.				GENERAL SUPPORT
<b>(7)</b> ARTWORKS TRENTON INC 19 EVERETT ALLEY TRENTON, NJ 08611	22-1803117	501(C)(3)	42,000.				GENERAL SUPPORT
<b>(8)</b> ASBURY PARK MUSIC FOUNDATION 621 LAKE AVE, # 1C ASBURY PARK, NJ 07712	45-2675974	501(C)(3)	20,000.				GENERAL SUPPORT
<b>(9)</b> ASSOCIATION OF BLACK FOUNDATION EXECUTIVES 55 EXCHANGE PL NEW YORK, NY 10005	23-7156531	501(C)(3)	20,000.				GENERAL SUPPORT
<b>(10)</b> ASU FOUNDATION PO BOX 872401 TEMPE, AZ 85287	86-6051042	501(C)(3)	7,500.				GENERAL SUPPORT
<b>(11)</b> ATLANTIC CITY ARTS FOUNDATION PO BOX 3 ATLANTIC CITY, NJ 08404	45-2409043	501(C)(3)	23,000.				GENERAL SUPPORT
<b>(12)</b> AUTISTIC WOMEN & NONBINARY NETWORK, INC 5100 VAN DORN ST LINCOLN, NE 68506	27-5133111	501(C)(3)	50,000.				GENERAL SUPPORT

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Schedule I (Form 990) 2023



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<b>(1)</b> AXELROD PERFORMING ARTS CENTER 100 GRANT AVE DEAL, NJ 07723	27-2362887	501(C)(3)	20,000.				GENERAL SUPPORT
<b>(2)</b> BALLERS AND BOOKWORMS 3023 ROOSEVELT ST WALL, NJ 07719	88-2265859	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(3)</b> BERNARDSVILLE LIBRARY FOUNDATION, INC. 1 ANDERSON HILL RD. BERNARDSVILLE, NJ 07924	27-4485942	501(C)(3)	20,000.				GENERAL SUPPORT
<b>(4)</b> BLACK FAIRY GODMOTHER FOUNDATION 472 BEARDSLEY AVE BLOOMFIELD, NJ 07003	86-1228717	501(C)(3)	50,000.				GENERAL SUPPORT
<b>(5)</b> BLACK FOOD SOVEREIGNTY COALITION 1526 SE ELLIOTT AVE PORTLAND, OR 97214	84-3776029	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(6)</b> BLACK SWAN ACADEMY 1200 U ST NW WASHINGTON, DC 20009	46-4244374	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(7)</b> BLACK WOMENS BLUEPRINT 271 CADMAN PLZ E BROOKLYN, NY 11202	27-1308862	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(8)</b> BONEFISH & TARPON TRUST 2937 SW 27TH AVE MIAMI, FL 33133	65-0988321	501(C)(3)	15,000.				GENERAL SUPPORT
<b>(9)</b> BOROUGH OF HOPEWELL 88 E BRD ST HOPEWELL, NJ 08525	99-9999999	501(C)(3)	80,000.				GENERAL SUPPORT
<b>(10)</b> BOROUGH OF MANVILLE SCHOOL DISTRICT 1100 BROOKS BLVD MANVILLE, NJ 08835	22-6002064	501(C)(3)	14,000.				GENERAL SUPPORT
<b>(11)</b> BOYS & GIRLS CLUBS OF MARTIN COUNTY PO BOX 910 HOBE SOUND, FL 33475	65-0253002	501(C)(3)	30,000.				GENERAL SUPPORT
<b>(12)</b> BOYS & GIRLS CLUBS OF MERCER COUNTY 212 CENTRE ST TRENTON, NJ 08611	21-0634556	501(C)(3)	90,000.				GENERAL SUPPORT

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<b>(1)</b> BRAVEN INC. 100 N LA SALLE ST CHICAGO, IL 60602-2406	46-4340594	501(C)(3)	20,000.				GENERAL SUPPORT
<b>(2)</b> BRENNAN CENTER FOR JUSTICE 120 BROADWAY NEW YORK, NY 10271	13-3839293	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(3)</b> BRIDGETON BOARD OF EDUCATION 41 BANK ST BRIDGETON, NJ 08302	21-6000144	501(C)(3)	20,000.				GENERAL SUPPORT
<b>(4)</b> BROOKLYN PUBLIC LIBRARY 10 GRAND ARMY PLZ BROOKLYN, NY 11238	11-1904261	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(5)</b> BROTHERS BUILDING A BETTER NATION 511 S ORANGE AVE NEWARK, NJ 07103	85-2939456	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(6)</b> BUILD MISSOURI HEALTH 4254 VISTA AVE ST. LOUIS, MO 63110	83-2641644	501(C)(3)	15,000.				GENERAL SUPPORT
<b>(7)</b> CAMDEN COUNTY HISTORICAL SOCIETY 1900 PARK BLVD CAMDEN, NJ 08103	21-6008076	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(8)</b> CAMDEN FIREWORKS INCORPORATED 1813 S BRDWAY CAMDEN, NJ 08104	47-3674290	501(C)(3)	51,500.				GENERAL SUPPORT
<b>(9)</b> CAMDEN REPERTORY THEATER COMMUNITY DEVELOPM 445 MECHANIC ST CAMDEN, NJ 08104	26-2729699	501(C)(3)	45,000.				GENERAL SUPPORT
<b>(10)</b> CAMINAR LATINO, INC. PO BOX 48623 DORAVILLE, GA 30362	83-0378198	501(C)(3)	65,000.				GENERAL SUPPORT
<b>(11)</b> CAN: CHURCH AND COMMUNITY ABOLITION NETWORK 6 NAUGHRIGHT RD. HACKETTSTOWN, NJ 07840	83-1582935	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(12)</b> CAPE COD HEALTHCARE FOUNDATION PO BOX 370 HYANNIS, MA 02601	04-3475950	501(C)(3)	10,000.				GENERAL SUPPORT

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<b>(1)</b> CAPITAL CITY COMMUNITY FOUNDATION D/B/A I A P.O. BOX 1743 TRENTON, NJ 08607-1743	61-1529153	501(C)(3)	75,000.				GENERAL SUPPORT
<b>(2)</b> CAPITAL HARMONY WORKS 1 N. JOHNSTON AVE TRENTON, NJ 08609	22-3559611	501(C)(3)	63,000.				GENERAL SUPPORT
<b>(3)</b> CAPITAL HEALTH SYSTEM FOUNDATION TWO CAPITAL WAY PENNINGTON, NJ 08534	22-2230681	501(C)(3)	35,000.				GENERAL SUPPORT
<b>(4)</b> CAPITAL SINGERS OF TRENTON P.O. BOX 5297 TRENTON, NJ 08638	20-5167648	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(5)</b> CAREAKA COOPERATIVE FOR ASSISTANCE & RELIEF P.O. BOX 1870 MERRIFIELD, VA 22116-8070	13-1685039	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(6)</b> CATHOLIC YOUTH ORGANIZATION OF MERCER COUNT 920 S BRD ST TRENTON, NJ 08611	22-2054324	501(C)(3)	6,000.				GENERAL SUPPORT
<b>(7)</b> CATLIN GABEL SCHOOL 8825 SW BARNES RD. PORTLAND, OR 97225	93-0386804	501(C)(3)	7,500.				GENERAL SUPPORT
<b>(8)</b> CAUSE EFFECTIVE 209 W 29TH ST #242 NEW YORK, NY 10001	13-3083978	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(9)</b> CAVANKERRY PRESS 303 MAIN ST FT LEE, NJ 07024	22-3686265	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(10)</b> C-CHANGE CONVERSATIONS PO BOX 1206 PRINCETON, NJ 08542	82-0839429	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(11)</b> CENTER AT 353 (FORMERLY TRINITY COUNSELING) 353 NASSAU ST PRINCETON, NJ 08540	22-2185298	501(C)(3)	60,000.				GENERAL SUPPORT
<b>(12)</b> CENTER FOR CHILD AND FAMILY ACHIEVEMENT 1600 PERRINEVILLE RD MONROE TWP, NJ 08831	22-3333470	501(C)(3)	20,000.				GENERAL SUPPORT

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<b>(1)</b> CENTER FOR COMMUNITY ARTS 717 FRANKLIN ST CAPE MAY, NJ 08204	22-3350637	501(C)(3)	14,000.				GENERAL SUPPORT
<b>(2)</b> CENTER FOR EMERGING VISUAL ARTISTS 237 S 18TH ST, ST 3A PHILADELPHIA, PA 19103	23-2250532	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(3)</b> CENTER FOR POPULAR DEMOCRACY 449 TROUTMAN ST BROOKLYN, NY 11237	45-3813436	501(C)(3)	50,000.				GENERAL SUPPORT
<b>(4)</b> CENTER FOR SUPPORTIVE SCHOOLS INC 911 COMMONS WAY PRINCETON, NJ 08540	22-2962532	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(5)</b> CENTRAL JERSEY KALAHI ATHLETIC ASSOCIATION 14 VOGEL AVE PISCATAWAY, NJ 08854	46-5058276	501(C)(3)	12,500.				GENERAL SUPPORT
<b>(6)</b> CENTURION MINISTRIES 1000 HERRONTOWN RD PRINCETON, NJ 08540	22-2563979	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(7)</b> CHAPIN SCHOOL, PRINCETON 4101 PRINCETON PIKE PRINCETON, NJ 08540	21-0688891	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(8)</b> CHARLESTON LITERARY FESTIVAL, INC P.O. BOX 1825 CHARLESTON, SC 29402	81-3123725	501(C)(3)	15,000.				GENERAL SUPPORT
<b>(9)</b> CHERISHED CREATIONS 343 SNYDER AVE. BERKELEY HEIGHTS, NJ 07922	22-3460913	501(C)(3)	20,000.				GENERAL SUPPORT
<b>(10)</b> CHICAGO CHILDREN'S ADVOCACY CENTER 1240 S. DAMEN AVE CHICAGO, IL 60608	36-4251865	501(C)(3)	45,000.				GENERAL SUPPORT
<b>(11)</b> CHICKEN BONE BEACH HISTORICAL FOUNDATION IN 1721 MCKINLEY AVE ATLANTIC CITY, NJ 08401	22-3644108	501(C)(3)	12,000.				GENERAL SUPPORT
<b>(12)</b> CHILDREN'S DEFENSE FUND 840 FIRST ST NE WASHINGTON, DC 20002	52-0895622	501(C)(3)	25,000.				GENERAL SUPPORT

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<b>(1)</b> CHILDREN'S LAW CENTER INC. 501 THIRD ST, NW WASHINGTON, DC 20001	52-1961588	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(2)</b> CIEE INC. 600 S'BOROUGH DR S. PORTLAND, ME 04106	13-4038907	501(C)(3)	6,000.				GENERAL SUPPORT
<b>(3)</b> CITY HARVEST 150 52ND ST BROOKLYN, NY 11232	13-3170676	501(C)(3)	20,000.				GENERAL SUPPORT
<b>(4)</b> CITY OF BORDENTOWN 101 PARK ST BORDENTOWN, NJ 08505	99-9999999	501(C)(3)	40,000.				GENERAL SUPPORT
<b>(5)</b> CITY OF BRIDGETON 181 E. COMMERCE ST BRIDGETON, NJ 08302	21-6000380	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(6)</b> CLARK UNIVERSITY 950 MAIN ST WORCESTER, MA 01610	04-2111203	501(C)(3)	8,600.				GENERAL SUPPORT
<b>(7)</b> CLEVELAND CLINIC FOUNDATION PO BOX 931517 CLEVELAND, OH 44193	34-0714585	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(8)</b> COLAB ARTS, INC. P.O. BOX 887 NEW BRUNSWICK, NJ 08903	27-2611798	501(C)(3)	14,000.				GENERAL SUPPORT
<b>(9)</b> COLLEGE OF THE ATLANTIC 105 EDEN ST BAR HARBOR, ME 04609	23-7032625	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(10)</b> COMMON CAUSE EDUCATION FUND 805 15TH ST NW WASHINGTON, DC 20005-2207	31-1705370	501(C)(3)	30,000.				GENERAL SUPPORT
<b>(11)</b> COMMUNITY DEVELOPMENT PROJECT, INC. D/B/A T 123 WILLIAM ST NEW YORK, NY 10038	83-1441257	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(12)</b> COMMUNITY HOPE FUND INC. 601 DEAL RD OCEAN, NJ 07712	27-0224957	501(C)(3)	30,000.				GENERAL SUPPORT

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Schedule I (Form 990) 2023

**SCHEDULE I  
(Form 990)**

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

OMB No. 1545-0047

**2023**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

Attach to Form 990.

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Name of the organization

Employer identification number

PRINCETON AREA COMMUNITY FOUNDATION INC.

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
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**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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
<b>(1)</b> CORNER HOUSE FOUNDATION 503 N EUCLID AVE. 9E PRINCETON, NJ 08542	22-2359490	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(2)</b> CURE CMD 3217 CARSON ST, #1014 LAKEWOOD, CA 90712	26-2640975	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(3)</b> D&R GREENWAY LAND TRUST ONE PRESERVATION PL PRINCETON, NJ 08540	22-3035836	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(4)</b> D.C. ABORTION FUND P.O. BOX 65061 WASHINGTON, DC 20035	20-4713150	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(5)</b> DANCE NEW JERSEY, INC. PO BOX 205 VERONA, NJ 07044	22-3613725	501(C)(3)	23,000.				GENERAL SUPPORT
<b>(6)</b> DANCE PLACE 3225 8TH ST, NE WASHINGTON, DC 20017	52-1118504	501(C)(3)	55,000.				GENERAL SUPPORT
<b>(7)</b> DE LA SALLE ACADEMY 332 W 43RD ST NEW YORK, NY 10036	13-3228140	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(8)</b> DEFENDER MOBILITY 27056 JOY RD REDFORD, MI 48239	47-4543354	501(C)(3)	5,555.				GENERAL SUPPORT
<b>(9)</b> DELIVERING GOOD 266 W 37TH ST NEW YORK, NY 10018	13-3300271	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(10)</b> DOCTORS WITHOUT BORDERS/MEDECINS SANS FRONT 40 RECTOR ST NEW YORK, NY 10006-1705	13-3433452	501(C)(3)	40,000.				GENERAL SUPPORT
<b>(11)</b> DRAKE UNIVERSITY -THE HARKIN INSTITUTE FOR 2507 UNIVERSITY AVE DES MOINES, IA 50311	42-0680460	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(12)</b> DRCNET FOUNDATION 9039 SLIGO CRK PKWY SILVER SPRING, MD 20901	52-2034867	501(C)(3)	25,000.				GENERAL SUPPORT

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<b>(1)</b> DRESS FOR SUCCESS CENTRAL NEW JERSEY 3131 PRINCETON PIKE LAWRENCEVILLE, NJ 08648	37-1536476	501(C)(3)	34,995.				GENERAL SUPPORT
<b>(2)</b> DTS PARTNERS IN EDUCATION INC. PO BOX 186 SERGEANTSVILLE, NJ 08557	22-3338857	501(C)(3)	30,000.				GENERAL SUPPORT
<b>(3)</b> EASEL ANIMAL RESCUE LEAGUE 4 JAKE GARZIO DR EWING, NJ 08628	80-0155306	501(C)(3)	7,400.				GENERAL SUPPORT
<b>(4)</b> EAST NEW YORK CLT INC. 2966 FULTON ST BROOKLYN, NY 11208	85-4288954	501(C)(3)	12,500.				GENERAL SUPPORT
<b>(5)</b> EASTERN ENVIRONMENTAL LAW CENTER 1 GATEWAY CTR NEWARK, NJ 07102	22-3353036	501(C)(3)	30,000.				GENERAL SUPPORT
<b>(6)</b> EDEN AUTISM SERVICES FOUNDATION 2 MEWRICK RD PRINCETON, NJ 08540	22-4215005	501(C)(3)	30,000.				GENERAL SUPPORT
<b>(7)</b> EDUCATIONAL ARTS TEAM 300 MORRIS PESIN DR. JERSEY CITY, NJ 07305	22-2382747	501(C)(3)	20,000.				GENERAL SUPPORT
<b>(8)</b> ELEVATED ACCESS INC PO BOX 6806 CHAMPAIGN, IL 61826	88-1949758	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(9)</b> ELIZABETH YOUTH THEATER ENSEMBLE 229 E 5TH AVE ROSELLE, NJ 07203	80-0948665	501(C)(3)	30,000.				GENERAL SUPPORT
<b>(10)</b> ELON UNIVERSITY 2615 CAMPUS BOX ELON, NC 27244	56-0532303	501(C)(3)	75,000.				GENERAL SUPPORT
<b>(11)</b> ENVIRONMENTAL DEFENSE FUND 257 PARK AVE S NEW YORK, NY 10010	11-6107128	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(12)</b> ESSEX COUNTY LATINO AMERICAN CHAMBER OF COM 714 SCOTLAND RD ORANGE, NJ 07050	87-3420719	501(C)(3)	12,500.				GENERAL SUPPORT

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<b>(1)</b> EVERGLADES FOUNDATION 18001 OLD CUTLER RD PALMETTO BAY, FL 33157	59-3228899	501(C)(3)	150,000.				GENERAL SUPPORT
<b>(2)</b> EVERY CHILD VALUED 175 JOHNSON AVE LAWRENCEVILLE, NJ 08648	26-4654078	501(C)(3)	27,100.				GENERAL SUPPORT
<b>(3)</b> FAITH IN ACTION NETWORK 1616 P ST NW WASHINGTON, DC 20036	94-2206497	501(C)(3)	50,000.				GENERAL SUPPORT
<b>(4)</b> FARM SHARE INC 14125 SW 320TH ST HOMESTEAD, FL 33033	65-0342192	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(5)</b> FEEDING HANDS 957 RIVER RD HILLSBOROUGH, NJ 08844	47-2253408	501(C)(3)	8,333.				GENERAL SUPPORT
<b>(6)</b> FIRST BAPTIST CHURCH OF LINCOLN GARDENS 771 SOMERSET ST - #3 SOMERSET, NJ 08873	22-1825131	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(7)</b> FISHERMANS MARK 60 WILSON ST. LAMBERTVILLE, NJ 08530	22-2302255	501(C)(3)	80,000.				GENERAL SUPPORT
<b>(8)</b> FOUNDATION ACADEMY CHARTER SCHOOL 363 W STATE ST TRENTON, NJ 08618	20-4406909	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(9)</b> FOUNDATION FIGHTING BLINDNESS-NJ CHAPTER 6925 OAKLAND MILLS RD COLUMBIA, MD 21045	23-7135845	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(10)</b> FREEDOM HORSE FARM LLC 158 FLOCKTOWN RD LONG VALLEY, NJ 07853	20-8393563	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(11)</b> FREEDOM HOUSE 2004 STATE RTE 31 CLINTON, NJ 08809	22-2638093	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(12)</b> FRIENDS FOR THE ABBOTT MARSHLANDS INC. 157 WESTCOTT AVE HAMILTON, NJ 08610	85-2224128	501(C)(3)	16,613.				GENERAL SUPPORT

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<b>(1)</b> FRIENDS OF FOUNDATION ACADEMY 363 W STATE ST TRENTON, NJ 08618	27-2091277	501(C)(3)	7,500.				GENERAL SUPPORT
<b>(2)</b> FRIENDS OF HOPEWELL VALLEY OPEN SPACE PO BOX 395 PENNINGTON, NJ 08534	22-2810757	501(C)(3)	15,640.				GENERAL SUPPORT
<b>(3)</b> FRIENDS OF PRINCETON OPEN SPACE 57 MOUNTAIN AVE PRINCETON, NJ 08540	23-7259355	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(4)</b> FRIENDS OF THE ISRAEL DEFENSE FORCES 60 E 42ND ST NEW YORK, NY 10165	13-3156445	501(C)(3)	7,500.				GENERAL SUPPORT
<b>(5)</b> GEORGE STREET PLAYHOUSE 9 LVNGSTN AVE NEW BRNSWCK, NJ 08901-1903	23-7361588	501(C)(3)	20,000.				GENERAL SUPPORT
<b>(6)</b> GLASSROOTS, INC. 10 BLEEKER ST NEWARK, NJ 07162	22-3671890	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(7)</b> GREATER PRINCETON YOUTH ORCHESTRA PO BOX 3037 PRINCETON, NJ 08543	51-0147091	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(8)</b> GREATER SOMERSET COUNTY YMCA/PRINCETON YMCA 59 PAUL ROBESON PL PRINCETON, NJ 08540	22-1559439	501(C)(3)	22,100.				GENERAL SUPPORT
<b>(9)</b> GREENPEACE FUND, INC. 1300 EYE ST, NW WASHINGTON, DC 20005	95-3313195	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(10)</b> GREENS LEDGE LIGHT PRESERVATION SOCIETY 101 ROWYTON AVE ROWAYTON, CT 06853	81-3221399	501(C)(3)	12,000.				GENERAL SUPPORT
<b>(11)</b> GROUNDS FOR SCULPTURE 80 SCULPTORS WAY HAMILTON, NJ 08619	22-3694371	501(C)(3)	15,200.				GENERAL SUPPORT
<b>(12)</b> GULFSHORE PLAYHOUSE 2640 GOLDEN GATE PKWY NAPLES, FL 34105	90-0178566	501(C)(3)	100,000.				GENERAL SUPPORT

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<b>(1)</b> HABCORE, INC. PO BOX 2361 RED BANK, NJ 07701	52-1596165	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(2)</b> HABITAT FOR HUMANITY OF SOUTH CENTRAL NEW J 530 ROUTE 38 E MAPLE SHADE, NJ 08052	22-2905055	501(C)(3)	20,000.				GENERAL SUPPORT
<b>(3)</b> HACKENSACK MERIDIAN HEALTH INC. A.K.A. OCEA 1340 CAMPUS PKWY WALL, NJ 07753	01-0649794	501(C)(3)	9,267.				GENERAL SUPPORT
<b>(4)</b> HADPRE, INC. 490 WESTFIELD RD CHARLOTTESVILLE, VA 22901	82-1121832	501(C)(3)	9,500.				GENERAL SUPPORT
<b>(5)</b> HAMILTON AREA YMCA 1315 W HORSE-MRCRVLL E RD HAMILTON, NJ 08619	21-0702879	501(C)(3)	15,000.				GENERAL SUPPORT
<b>(6)</b> HANDS TOGETHER P. O. BOX 80985 SPRINGFIELD, MA 01138	23-2566502	501(C)(3)	6,000.				GENERAL SUPPORT
<b>(7)</b> HARRIET TUBMAN MUSEUM OF CAPE MAY P O BOX 1 CAPE MAY, NJ 08204	83-3148050	501(C)(3)	30,000.				GENERAL SUPPORT
<b>(8)</b> HAWAII COMMUNITY FOUNDATION 827 FORT ST MALL HONOLULU, HI 96813	99-0261283	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(9)</b> HEALTHY NEWSWORKS PO BOX 431 DREXEL HILL, PA 19026	81-4668072	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(10)</b> HELP SELF COMMUNITY DEVELOPMENT CORPORATION 215 N. MONTGOMERY ST TRENTON, NJ 08608	22-3849068	501(C)(3)	15,000.				GENERAL SUPPORT
<b>(11)</b> HENRY J. AUSTIN HEALTH CENTER, INC. 321 N WARREN ST TRENTON, NJ 08618	22-2682708	501(C)(3)	57,500.				GENERAL SUPPORT
<b>(12)</b> HIGHER ELEVATION YOUTH ENHANCEMENT ORGANIZA 2105 FLATBUSH AVE BROOKLYN, NY 11234	26-3123537	501(C)(3)	10,000.				GENERAL SUPPORT

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<b>(1)</b> HILL SCHOOL 717 E HIGH ST POTTSTOWN, PA 19464-5791	23-1352647	501(C)(3)	15,000.				GENERAL SUPPORT
<b>(2)</b> HISTORIC MORVEN, INC. - AKA MORVEN MUSEUM & 55 STOCKTON ST PRINCETON, NJ 08540-6912	22-2817982	501(C)(3)	22,500.				GENERAL SUPPORT
<b>(3)</b> HITOPS 300 WITHERSPOON ST PRINCETON, NJ 08542	22-3486441	501(C)(3)	15,000.				GENERAL SUPPORT
<b>(4)</b> HOBART AND WILLIAM SMITH COLLEGES 337 PULTENEY ST GENEVA, NY 14456	16-0743040	501(C)(3)	15,000.				GENERAL SUPPORT
<b>(5)</b> HOMEFRONT 1880 PRINCETON AVE	22-3165145	501(C)(3)	175,100.				GENERAL SUPPORT
<b>(6)</b> HONEY BEE SOCIETY 3339 NW 30TH CIRCLE CAMAS, WA 98607	83-3868196	501(C)(3)	8,333.				GENERAL SUPPORT
<b>(7)</b> HONOR THE EARTH 1430 HAINES AVE RAPID CITY, SD 57701	45-4714238	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(8)</b> HOPEWELL FIRE DEPARTMENT 113 GRANDVIEW AVE HOPEWELL, NJ 08525	22-6090528	501(C)(3)	13,500.				GENERAL SUPPORT
<b>(9)</b> HOPEWELL VOLUNTEER FIRE DEPARTMENT AND EMER 4 COLUMBIA AVE HOPEWELL, NJ 08525	22-6090528	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(10)</b> HOUSING INITIATIVES OF PRINCETON CHARITABLE 33 MERCER ST PRINCETON, NJ 08540	27-6983137	501(C)(3)	95,000.				GENERAL SUPPORT
<b>(11)</b> HOWARD UNIVERSITY 1851 9TH ST NW WASHINGTON, DC 20001	53-0204707	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(12)</b> HOWARD'S HEALTHY CHOICES INC. 1115 GREENWOOD AVE TRENTON, NJ 08609	45-3443185	501(C)(3)	10,000.				GENERAL SUPPORT

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<b>(1)</b> HUN SCHOOL OF PRINCETON 176 EDGERSTOUNE RD PRINCETON, NJ 08540	21-0639868	501(C)(3)	20,000.				GENERAL SUPPORT
<b>(2)</b> HUNTERDON LAND TRUST 111 MINE ST FLEMINGTON, NJ 08822	22-3477465	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(3)</b> HURRICANE MARIA ASSISTANCE & RELIEF INSTITU 270 CONVENT AVE NEW YORK, NY 10031	83-2165198	501(C)(3)	7,400.				GENERAL SUPPORT
<b>(4)</b> INSPIRED-THREADS INC 1 N JOHNSTON AVE HAMILTON, NJ 08609	83-2230781	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(5)</b> INSTITUTE FOR ADVANCED STUDY 1 EINSTEIN DRIVE PRINCETON, NJ 08540	21-0634988	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(6)</b> INSTITUTE OF MUSIC FOR CHILDREN INC 780 SALEM AVE ELIZABETH, NJ 07208	02-0687805	501(C)(3)	68,000.				GENERAL SUPPORT
<b>(7)</b> INTERNATIONAL GIRLS ACADEMY A NJ NONPROFIT 841 S 11TH ST NEWARK, NJ 07108	84-4793612	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(8)</b> INTERNATIONAL RESCUE COMMITTEE 122 E 42ND ST NEW YORK, NY 10168	13-5660870	501(C)(3)	40,000.				GENERAL SUPPORT
<b>(9)</b> ISLES, INC. 10 WOOD ST TRENTON, NJ 08618	22-2350832	501(C)(3)	45,000.				GENERAL SUPPORT
<b>(10)</b> IVY HILL VAILLSBURG CENTER FOR ARTS CULTURE 23 MEAD ST NEWARK, NJ 07106	82-1568787	501(C)(3)	12,500.				GENERAL SUPPORT
<b>(11)</b> JAMES R HALSEY FOUNDATION OF THE ARTS 525 E. FRANKLIN ST TRENTON, NJ 08610	83-1144406	501(C)(3)	63,500.				GENERAL SUPPORT
<b>(12)</b> JAZZ ARTS PROJECT, INC. 77 PINCKNEY RD RED BANK, NJ 07701	20-4767964	501(C)(3)	39,000.				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) 2023

**SCHEDULE I  
(Form 990)**

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

OMB No. 1545-0047

**2023**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

Name of the organization

Employer identification number

PRINCETON AREA COMMUNITY FOUNDATION INC.

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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
<b>(1)</b> JERSEY CITY ARTS COUNCIL 201 MONTGOMERY ST JERSEY CITY, NJ 07302	81-4983879	501(C)(3)	23,000.				GENERAL SUPPORT
<b>(2)</b> JERSEY CITY THEATER CENTER, INC. 330 NEWARK AVE. JERSEY CITY, NJ 07302	20-5151520	501(C)(3)	15,000.				GENERAL SUPPORT
<b>(3)</b> JEWISH FAMILY & CHILDREN'S SERVICES OF GREA 707 ALEXANDER RD PRINCETON, NJ 08540	21-0634563	501(C)(3)	54,050.				GENERAL SUPPORT
<b>(4)</b> JOHN BARTRAM ASSOCIATION 5400 LINDBERGH BLVD PHILADELPHIA, PA 19143	23-7393771	501(C)(3)	15,000.				GENERAL SUPPORT
<b>(5)</b> JOHNS HOPKINS CENTER FOR GUN VIOLENCE SOLUT 615 N. WOLFE ST BALTIMORE, MD 21205-2179	52-0595110	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(6)</b> JOYFUL HEART FOUNDATION 320 7TH AVE #161 BROOKLYN, NY 11215	72-1519537	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(7)</b> JUDAISM YOUR WAY 950 S. CHERRY ST. DENVER, CO 80246	46-0517841	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(8)</b> K9S FOR VETERANS NFP 2312 OLDE MILL RD PLAINFIELD, IL 60586	81-1450763	501(C)(3)	15,000.				GENERAL SUPPORT
<b>(9)</b> KENYON COLLEGE COLLEGE REL BLDG GAMBIER, OH 43022	31-4379507	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(10)</b> KEYS 2 SUCCESS 1536 SPRNGFLD AVE NEW PROVIDENCE, NJ 07974	81-4533133	501(C)(3)	50,000.				GENERAL SUPPORT
<b>(11)</b> KINDERSMILE FOUNDATION 10 BRD ST BLOOMFIELD, NJ 07003	56-2635166	501(C)(3)	175,000.				GENERAL SUPPORT
<b>(12)</b> LATIN AMERICAN LEGAL DEFENSE AND EDUCATIONA 714-716 S. CLINTON AVE TRENTON, NJ 08611	20-2484231	501(C)(3)	25,000.				GENERAL SUPPORT

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(1) LAWSIDE HISTORICAL SOCIETY, INC. PO BOX 608 LAWSIDE, NJ 08045	52-1747850	501(C)(3)	20,000.				GENERAL SUPPORT
(2) LAWYERS' COMMITTEE FOR CIVIL RIGHTS UNDER L 1500 K ST NW WASHINGTON, DC 20005	52-0799246	501(C)(3)	15,000.				GENERAL SUPPORT
(3) LEVOY THEATRE PRESERVATION SOCIETY INC. 126-130 N. HIGH ST MILLVILLE, NJ 08332	22-3359256	501(C)(3)	10,000.				GENERAL SUPPORT
(4) LEWIS AND CLARK COLLEGE 615 S PALATINE HILL RD PORTLAND, OR 97219	93-0386858	501(C)(3)	50,000.				GENERAL SUPPORT
(5) LIFE CHOICES RESOURCE CENTER INC. 503 MAIN ST METUCHEN, NJ 08840	22-2672203	501(C)(3)	10,000.				GENERAL SUPPORT
(6) LIGHTHOUSE GUILD (FORMERLY LIGHTHOUSE INTER 250 W 64TH ST NEW YORK, NY 10023	46-4215298	501(C)(3)	7,500.				GENERAL SUPPORT
(7) LOWN INSTITUTE INC. 163 HIGHLAND AVE NEEDHAM, MA 02949	04-3291770	501(C)(3)	25,000.				GENERAL SUPPORT
(8) LUNA STAGE, INC. 555 VALLEY RD WEST ORANGE, NJ 07052	22-3209976	501(C)(3)	20,000.				GENERAL SUPPORT
(9) MARBLEJAM KIDS INC. 214 STATE ST HACKENSACK, NJ 07601	26-0689618	501(C)(3)	20,000.				GENERAL SUPPORT
(10) MARCH ON WASHINGTON FILM FESTIVAL 525 9TH ST NW WASHINGTON, DC 20004	46-4604132	501(C)(3)	50,000.				GENERAL SUPPORT
(11) MARINLINK 5800 NORTHGATE MALL SAN RAFAEL, CA 94903	20-0879422	501(C)(3)	9,500.				GENERAL SUPPORT
(12) MASSACHUSETTS GENERAL HOSPITAL 125 NASHUA ST BOSTON, MA 02114-1101	04-1564655	501(C)(3)	25,000.				GENERAL SUPPORT

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Employer identification number

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52-1746234

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<b>(1)</b> MAZZONI CENTER 1348 BAINBRIDGE ST PHILADELPHIA, PA 19147	23-2176338	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(2)</b> MCCARTER THEATRE 91 UNIVERSITY PL PRINCETON, NJ 08540	21-0724198	501(C)(3)	26,000.				GENERAL SUPPORT
<b>(3)</b> MEALS ON WHEELS OF MERCER COUNTY 320 HOLLOWBROOK DR EWING, NJ 08638	22-1990231	501(C)(3)	21,500.				GENERAL SUPPORT
<b>(4)</b> MEDSHARE 3240 CLIFTON SPRINGS RD DECATUR, GA 30034	58-2433968	501(C)(3)	15,000.				GENERAL SUPPORT
<b>(5)</b> MENA SINGER FOUNDATION INC. P.O. BOX 191 HAZLET, NJ 07730	85-2900838	501(C)(3)	15,000.				GENERAL SUPPORT
<b>(6)</b> MERCER ALLIANCE TO END HOMELESSNESS 98 CARRLL ST TRENTON, NJ 08605	20-1594569	501(C)(3)	44,275.				GENERAL SUPPORT
<b>(7)</b> MERCER COUNTY COMMUNITY COLLEGE FOUNDATION 1200 OLD TRENTON RD WEST WINDSOR, NJ 08550	22-2133029	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(8)</b> MERCER STREET FRIENDS FOOD BANK 151 MERCER ST TRENTON, NJ 08611	21-0733990	501(C)(3)	97,500.				GENERAL SUPPORT
<b>(9)</b> METROPOLITAN OPERA GUILD INC 70 LINCOLN CENTER PLZ NEW YORK, NY 10023	13-1681983	501(C)(3)	5,500.				GENERAL SUPPORT
<b>(10)</b> MIDDLESEX COUNTY COLLEGE FOUNDATION 2600 WOODBRIDGE AVE EDISON, NJ 08818	22-6079662	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(11)</b> MIDLAND SCHOOL PO BOX 5026 NORTH BRANCH, NJ 08876	22-1666121	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(12)</b> MIJENTE SUPPORT COMMITTEE 734 W. POLK ST PHOENIX, AZ 85007	82-1711382	501(C)(3)	40,000.				GENERAL SUPPORT

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<b>(1)</b> MILE HIGH UNITED WAY 711 PARK AVE W DENVER, CO 80205	84-0404235	501(C)(3)	35,000.				GENERAL SUPPORT
<b>(2)</b> MILLHILL CHILD & FAMILY DEVELOPMENT CORPORA 101 OAKLAND ST TRENTON, NJ 08618	22-2123700	501(C)(3)	83,000.				GENERAL SUPPORT
<b>(3)</b> MILLVILLE ARMY AIRFIELD MUSEUM, INC. 1 LEDDON ST MILLVILLE, NJ 08332	52-1568914	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(4)</b> MINDFUL AWARENESS ACADEMY FOR CHILDREN 17 LUDDINGTON RD WEST ORANGE, NJ 07052	82-1645074	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(5)</b> MINKWON CENTER FOR COMMUNITY ACTION INC. 133-29 41ST AVE FLUSHING, NY 11355	11-2710506	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(6)</b> MIXTECA ORGANIZATION INC. 245 23RD ST BROOKLYN, NY 11215	11-3561651	501(C)(3)	27,400.				GENERAL SUPPORT
<b>(7)</b> MONMOUTH COUNTY ARTS COUNCIL INC AKA MONMOU 105 MONMOUTH ST RED BANK, NJ 07701	22-3642107	501(C)(3)	23,000.				GENERAL SUPPORT
<b>(8)</b> MONTCLAIR FILM FESTIVAL, INC. 41 WATCHUNG PLZ MONTCLAIR, NJ 07042	27-1732322	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(9)</b> MONTCLAIR HISTORICAL SOCIETY/ AKA MONTCLAIR 108 ORANGE RD MONTCLAIR, NJ 07042	22-6106685	501(C)(3)	30,000.				GENERAL SUPPORT
<b>(10)</b> MONTCLAIR SCHOLARSHIP FUND INC. 100 CHESTNUT ST MONTCLAIR, NJ 07042	22-6047818	501(C)(3)	15,000.				GENERAL SUPPORT
<b>(11)</b> MONTGOMERY TOWNSHIP EDUCATION FOUNDATION 9 ASPEN COURT BELLE MEAD, NJ 08502	52-1634735	501(C)(3)	15,000.				GENERAL SUPPORT
<b>(12)</b> MONTGOMERY TOWNSHIP HIGH SCHOOL 1016 ROUTE 601 SKILLMAN, NJ 08558-1799	99-9999999	501(C)(3)	6,900.				GENERAL SUPPORT

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<b>(1)</b> MOREHOUSE SCHOOL OF MEDICINE INC 720 WESTVIEW DR SW ATLANTA, GA 30310	58-1438873	501(C)(3)	40,000.				GENERAL SUPPORT
<b>(2)</b> MOST BLESSED SACRAMENT CHURCH 787 FRANKLIN LKS RD FRNKLN LAKES, NJ 07417	22-2387272	501(C)(3)	20,000.				GENERAL SUPPORT
<b>(3)</b> MOVE OVER BREAST CANCER 48 FLEMING WAY PRINCETON, NJ 08540	84-2931340	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(4)</b> MOVEMENT TRAINING NETWORK PO BOX 171 TIERRA AMARILLA, NM 87575	86-1287825	501(C)(3)	6,000.				GENERAL SUPPORT
<b>(5)</b> MS GLOBAL IMPACT FUNDING TRUST: SANDERSON F 1200 LENOX DR LAWRENCEVILLE, NJ 08648	52-7082731	501(C)(3)	38,124.				GENERAL SUPPORT
<b>(6)</b> MT. AIRY 4-H DAIRY CLUB (RUTGERS THE STATE 314 STATE ROUTE 12 FLEMINGTON, NJ 08822	14-2012968	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(7)</b> MUDGIRLS STUDIOS A NJ NONPROFIT CORP 203 HELENA DRIVE LINWOOD, NJ 08221	81-1205572	501(C)(3)	12,000.				GENERAL SUPPORT
<b>(8)</b> MUSIC FOR ALL SEASONS, INC. 336 PARK AVE SCOTCH PLAINS, NJ 07076-1100	22-3122153	501(C)(3)	20,000.				GENERAL SUPPORT
<b>(9)</b> NAI-NI CHEN DANCE COMPANY, INC. PO BOX 1121 FT LEE, NJ 07024	22-2930684	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(10)</b> NANTICOKE LENNI-LENAPE INDIANS INC 18 E COMMERCE ST BRIDGETON, NJ 08302	22-2214219	501(C)(3)	20,000.				GENERAL SUPPORT
<b>(11)</b> NARRATIVE NATION INC 48 LONGSHORE ST BAY SHORE, NY 11706	82-3760872	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(12)</b> NATIONAL COMMITTEE FOR QUALITY ASSURANCE (N 1100 13TH ST NW WASHINGTON, DC 20005	52-1191985	501(C)(3)	10,000.				GENERAL SUPPORT

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<b>(1)</b> NATIONAL FLORENCE CRITTENTON MISSION 610 SW ALDER ST PORTLAND, OR 97205	54-0505932	501(C)(3)	50,000.				GENERAL SUPPORT
<b>(2)</b> NATIONAL FOUNDATION FOR INFECTIOUS DISEASES 7201 WISCONSIN AVE BETHESDA, MD 20814	23-7198530	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(3)</b> NATIONAL JUNIOR TENNIS & LEARNING OF TRENTON 949 W STATE ST TRENTON, NJ 08618	52-1260470	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(4)</b> NATIONAL PARTNERSHIP FOR WOMEN & FAMILIES 1725 EYE ST NW WASHINGTON, DC 20006	23-7124915	501(C)(3)	6,396.				GENERAL SUPPORT
<b>(5)</b> NATIVE AMERICANS IN PHILANTHROPY 1140 3RD ST NE WASHINGTON, DC 20002	56-1849598	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(6)</b> NATURAL RESOURCES DEFENSE COUNCIL AKA NRDC 40 W 20TH ST NEW YORK, NY 10011	13-2654926	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(7)</b> NEEM KAROLI BABA ASHRAM AND HANUMAN TEMPLE, PO BOX 1710 TAOS, NM 87571	85-0331037	501(C)(3)	45,108.				GENERAL SUPPORT
<b>(8)</b> NEW BREATH FOUNDATION 1999 HARRISON ST OAKLAND, CA 94612	81-4166805	501(C)(3)	20,000.				GENERAL SUPPORT
<b>(9)</b> NEW GEORGIA PROJECT INC. 830 GLENWOOD AVE. SE ATLANTA, GA 30316	82-1348307	501(C)(3)	30,000.				GENERAL SUPPORT
<b>(10)</b> NEW HAMPSHIRE PRESERVATION ALLIANCE 7 EAGLE SQUARE CONCORD, NH 03301	22-2603277	501(C)(3)	20,000.				GENERAL SUPPORT
<b>(11)</b> NEW JERSEY CONSERVATION FOUNDATION 170 LONGVIEW RD FAR HILLS, NJ 07931	22-6065456	501(C)(3)	1,195,000.				GENERAL SUPPORT
<b>(12)</b> NEW JERSEY HISTORICAL SOCIETY 52 PARK PL NEWARK, NJ 07102	22-1506302	501(C)(3)	15,000.				GENERAL SUPPORT

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<b>(1)</b> NEW JERSEY INSTITUTE FOR SOCIAL JUSTICE INC 60 PARK PL NEWARK, NJ 07102	22-3478143	501(C)(3)	7,500.				GENERAL SUPPORT
<b>(2)</b> NEW JERSEY NATURE CONSERVANCY 200 POTTERSVILLE RD CHESTER, NJ 07930	53-0242652	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(3)</b> NEW JERSEY PERFORMING ARTS CENTER CORPORATI 1 CENTER ST NEWARK, NJ 07102	22-2889703	501(C)(3)	15,000.				GENERAL SUPPORT
<b>(4)</b> NEW JERSEY THEATRE ALLIANCE PO BOX 124 ALLENHURST, NJ 07711	22-2383501	501(C)(3)	48,000.				GENERAL SUPPORT
<b>(5)</b> NEW YORK ACADEMY OF MEDICINE 1216 FIFTH AVE NEW YORK, NY 10029	13-1656674	501(C)(3)	15,000.				GENERAL SUPPORT
<b>(6)</b> NEW YORK FOUNDATION FOR THE ARTS 29 W 38TH ST NEW YORK, NY 11201	23-7129564	501(C)(3)	49,444.				GENERAL SUPPORT
<b>(7)</b> NEW YORK UNIVERSITY 70 WASHINGTON SQ NEW YORK, NY 10012	13-5562308	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(8)</b> NEWARK ARTS COUNCIL AKA NEWARK ARTS 17 ACADEMY ST NEWARK, NJ 07102	22-2412819	501(C)(3)	148,000.				GENERAL SUPPORT
<b>(9)</b> NIMBUS DANCE WORKS, INC 329 WARREN ST JERSEY CITY, NJ 07302	26-3416084	501(C)(3)	20,000.				GENERAL SUPPORT
<b>(10)</b> NJ SEEDS 494 BRD ST NEWARK, NJ 07102	22-3181507	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(11)</b> NONPROFITCONNECT 957 RTE. 33 HAMILTON TWP, NJ 08690	22-3595586	501(C)(3)	50,000.				GENERAL SUPPORT
<b>(12)</b> NORTH CAROLINA JAZZ FESTIVAL AT WILMINGTON P.O. BOX 7681 WILMINGTON, NC 28406	58-1400812	501(C)(3)	6,000.				GENERAL SUPPORT

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Schedule I (Form 990) 2023

**SCHEDULE I  
(Form 990)**

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

OMB No. 1545-0047

**2023**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

Attach to Form 990.

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Name of the organization

Employer identification number

PRINCETON AREA COMMUNITY FOUNDATION INC.

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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
<b>(1)</b> NORTH PARK UNIVERSITY 3225 W FOSTER AVE CHICAGO, IL 60625	36-1557840	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(2)</b> NORTHEAST ORGANIC FARMING ASSOCIATION 386 ROCK RD EAST LAMBERTVILLE, NJ 08530	22-3043823	501(C)(3)	20,000.				GENERAL SUPPORT
<b>(3)</b> NORTHFIELD MT. HERMON SCHOOL 1 LAMPLIGHTER WAY MT HERMON, MA 01354	04-2109865	501(C)(3)	420,000.				GENERAL SUPPORT
<b>(4)</b> OCEAN'S HARBOR HOUSE 808 CONIFER ST TOMS RIVER, NJ 08753	22-2672209	501(C)(3)	8,666.				GENERAL SUPPORT
<b>(5)</b> ONE VET @ A TIME - PROJECT OVAT P.O. BOX 548 PARRISH, FL 34219	83-4706216	501(C)(3)	26,672.				GENERAL SUPPORT
<b>(6)</b> OUTDOOR EQUITY ALLIANCE 18 PINFLOWER LN W WINDSOR TWP, NJ 08550	93-3015477	501(C)(3)	75,000.				GENERAL SUPPORT
<b>(7)</b> PARKER FAMILY HEALTH CENTER 211 SHREWSBURY AVE RED BANK, NJ 07701	22-3619518	501(C)(3)	20,000.				GENERAL SUPPORT
<b>(8)</b> PARTNERS FOR WOMEN AND JUSTICE INC. 650 BLOOMFIELD AVE BLOOMFIELD, NJ 07003	22-3825867	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(9)</b> PATTENBURG RESCUE SQUAD INC. 590 COUNTY RD 614 ASBURY, NJ 08802	22-2141911	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(10)</b> PEACE ACTION EDUCATION FUND 7 VANDEVENTER AVE PRINCETON, NJ 08542	22-2402577	501(C)(3)	15,000.				GENERAL SUPPORT
<b>(11)</b> PEI KIDS AKA PREVENTION EDUCATION INC 231 LAWRENCE RD LAWRENCEVILLE, NJ 08648	22-2594219	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(12)</b> PENNSYLVANIA STATE UNIVERSITY PHILANTHROPIC 2583 GATEWAY DR STATE COLLG, PA 16801-3098	27-4628784	501(C)(3)	10,000.				GENERAL SUPPORT

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<b>(1)</b> PEOPLE & STORIES/GENTE Y CUENTOS 475 WALL ST PRINCETON, NJ 08540	22-3260895	501(C)(3)	37,250.				GENERAL SUPPORT
<b>(2)</b> PERINATAL HEALTH EQUITY FOUNDATION DBA PERI 280 S HARRISON ST EAST ORANGE, NJ 07018	82-4815853	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(3)</b> PETERS VALLEY SCHOOL OF CRAFT, INC. 19 KUHN RD LAYTON, NJ 07851	22-1920050	501(C)(3)	66,000.				GENERAL SUPPORT
<b>(4)</b> PLANNED PARENTHOOD OF NORTHERN, CENTRAL, AN 196 SPEEDWELL AVE MORRISTOWN, NJ 07960-3889	22-1643997	501(C)(3)	88,000.				GENERAL SUPPORT
<b>(5)</b> PRESIDENT AND TRUSTEES OF BATES COLLEGE 2 ANDREWS RD LEWISTON, ME 04240	01-0211781	501(C)(3)	15,000.				GENERAL SUPPORT
<b>(6)</b> PRINCETON ACADEMY OF THE SACRED HEART 1128 GREAT RD PRINCETON, NJ 08540	22-3623112	501(C)(3)	20,000.				GENERAL SUPPORT
<b>(7)</b> PRINCETON BLAIRSTOWN CENTER 13 ROSZEL RD PRINCETON, NJ 08540	22-6075831	501(C)(3)	20,494.				GENERAL SUPPORT
<b>(8)</b> PRINCETON CHARTER SCHOOL CAPITAL & ENDOWMEN 100 BUNN DRIVE PRINCETON, NJ 08540	38-3642213	501(C)(3)	20,000.				GENERAL SUPPORT
<b>(9)</b> PRINCETON CHILDREN'S FUND P.O. BOX 652 PRINCETON, NJ 08542	81-4663325	501(C)(3)	7,500.				GENERAL SUPPORT
<b>(10)</b> PRINCETON COMMUNITY HOUSING 1 MONUMENT DRIVE PRINCETON, NJ 08540-3036	13-3026182	501(C)(3)	7,000.				GENERAL SUPPORT
<b>(11)</b> PRINCETON DAY SCHOOL PO BOX 75 PRINCETON, NJ 08542	21-0727645	501(C)(3)	137,500.				GENERAL SUPPORT
<b>(12)</b> PRINCETON FIRST AID & RESCUE SQUAD 2 MOUNT LUCAS RD PRINCETON, NJ 08540	23-7140015	501(C)(3)	10,000.				GENERAL SUPPORT

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<b>(1)</b> PRINCETON HEALTH CARE SYSTEM FOUNDATION INC 1 PLAINSBORO RD PLAINSBORO, NJ 08536-1913	22-2225911	501(C)(3)	231,763.				GENERAL SUPPORT
<b>(2)</b> PRINCETON MIDDLE SCHOOL 217 WALNUT LANE PRINCETON, NJ 08540-0711	22-3600348	501(C)(3)	6,760.				GENERAL SUPPORT
<b>(3)</b> PRINCETON NURSERY SCHOOL 78 LEIGH AVE PRINCETON, NJ 08540	21-0643024	501(C)(3)	48,750.				GENERAL SUPPORT
<b>(4)</b> PRINCETON SENIOR RESOURCE CENTER - (DBA) CE 101 POOR FARM RD PRINCETON, NJ 08540	22-2228083	501(C)(3)	41,700.				GENERAL SUPPORT
<b>(5)</b> PRINCETON SYMPHONY ORCHESTRA INC PO BOX 250 PRINCETON, NJ 08542	22-2327766	501(C)(3)	91,525.				GENERAL SUPPORT
<b>(6)</b> PRINCETON UNIVERSITY OFFICE OF ALUMNI AND D PO BOX 5357 PRINCETON, NJ 08543-5357	21-0634501	501(C)(3)	60,000.				GENERAL SUPPORT
<b>(7)</b> PROJECT BROADWAY 322 W 52ND ST NEW YORK, NY 10101	45-1622128	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(8)</b> PROJECT FOR EMPTY SPACE, INC. 800 BROAD STREET NEWARK, NJ 07102	46-5377697	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(9)</b> PUBLIC HEALTH INSTITUTE 555 12TH ST OAKLAND, CA 94607	94-1646278	501(C)(3)	30,000.				GENERAL SUPPORT
<b>(10)</b> PUBLIC INTEREST LAW CENTER 1500 JFK BLVD PHILADELPHIA, PA 19102	23-1923398	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(11)</b> PUERTO RICAN COMMUNITY CENTER INC 223 PERRY ST TRENTON, NJ 08629	22-2124503	501(C)(3)	54,050.				GENERAL SUPPORT
<b>(12)</b> RAICES CULTURAL CENTER 20 RIVER RD HIGHLAND PARK, NJ 08904	26-2725218	501(C)(3)	20,000.				GENERAL SUPPORT

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<b>(1)</b> RAZOM INC AKA RAZOM FOR UKRAINE 140 2ND AVE NEW YORK, NY 10003	46-4604398	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(2)</b> REAL DOG RESCUE PO BOX 7106 OAKLAND, NJ 07436	81-4743943	501(C)(3)	15,000.				GENERAL SUPPORT
<b>(3)</b> RECTOR WARDENS VESTRYMEN TRINITY CHURCH 33 MERCER ST PRINCETON, NJ 08540	21-0647707	501(C)(3)	29,000.				GENERAL SUPPORT
<b>(4)</b> REDHAWK INDIAN ARTS COUNCIL 3 VANDELFT DRIVE #11 SOUTH AMBOY, NJ 08879	13-3712843	501(C)(3)	46,000.				GENERAL SUPPORT
<b>(5)</b> RESCUE MISSION OF TRENTON 98 CARROLL ST TRENTON, NJ 08605-0790	21-0656182	501(C)(3)	45,000.				GENERAL SUPPORT
<b>(6)</b> RESEARCH! AMERICA 241 18TH ST S ARLINGTON, VA 22202	52-1609875	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(7)</b> RIDER UNIVERSITY 2083 L'VILLE RD	21-0650678	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(8)</b> RIP MEDICAL DEBT 28-07 JACKSON AVE LG ISL CITY, NY 11101	47-1442997	501(C)(3)	9,000.				GENERAL SUPPORT
<b>(9)</b> RISE/A COMMUNITY SERVICE PARTNERSHIP PO BOX 88 HIGHTSTOWN, NJ 08520	22-2405087	501(C)(3)	235,000.				GENERAL SUPPORT
<b>(10)</b> RITZ THEATRE COMPANY, INC. 915 WHITE HORSE PKE HADDON TWP, NJ 08107	22-3246280	501(C)(3)	20,000.				GENERAL SUPPORT
<b>(11)</b> ROCKING THE BOAT 812 EDGEWATER RD BRONX, NY 10474	13-4177814	501(C)(3)	15,000.				GENERAL SUPPORT
<b>(12)</b> RONALD MCDONALD HOUSE CHARITIES OF SOUTH FL 1145 NW 14 TERR MIAMI, FL 33136	59-1899866	501(C)(3)	10,000.				GENERAL SUPPORT

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(1) RONALD MCDONALD HOUSE CHARITIES OF THE PHIL 3925 CHESTNUT ST PHILADELPHIA, PA 19111	23-7377505	501(C)(3)	15,000.				GENERAL SUPPORT
(2) ROSA VERA FUND INC. 910 E AVE DOUGLAS, AZ 85607	33-1209818	501(C)(3)	25,000.				GENERAL SUPPORT
(3) ROXEY BALLET COMPANY 6 7TH ST FRENCHTOWN, NJ 08825	22-3466604	501(C)(3)	20,000.				GENERAL SUPPORT
(4) RUTGERS UNIVERSITY FOUNDATION P. O. BOX 193 NEW BRUNSWICK, NJ 08903-0193	23-7318742	501(C)(3)	10,000.				GENERAL SUPPORT
(5) SAFE IN HUNTERDON, INC. PO BOX 63 FLEMINGTON, NJ 08822	22-2267191	501(C)(3)	30,000.				GENERAL SUPPORT
(6) SALVATION ARMY 575 E. STATE ST TRENTON, NJ 08609	13-5562351	501(C)(3)	20,000.				GENERAL SUPPORT
(7) SANCTUARY FOR FAMILIES INC. P.O. BOX 1406 NEW YORK, NY 10268	13-3193119	501(C)(3)	20,000.				GENERAL SUPPORT
(8) SARAH'S DAUGHTERS MINISTRIES, INC. 9 WOODBINE AVE NEW ROCHELLE, NY 10801	45-4608121	501(C)(3)	30,000.				GENERAL SUPPORT
(9) SAVE THE CHILDREN FEDERATION 501 KINGS HWY E FAIRFIELD, CT 06825-4861	06-0726487	501(C)(3)	10,000.				GENERAL SUPPORT
(10) SAVE, A FRIEND TO HOMELESS ANIMALS 1010 ROUTE 601 SKILLMAN, NJ 08558	22-6082741	501(C)(3)	10,000.				GENERAL SUPPORT
(11) SB ICNA RELIEF USA 1529 JERICHO TPK NEW HYDE PARK, NY 11040	04-3810161	501(C)(3)	10,000.				GENERAL SUPPORT
(12) SECOND LIFE BIKES 21 MAIN ST ASBURY PARK, NJ 07712	27-3484801	501(C)(3)	25,000.				GENERAL SUPPORT

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<b>(1)</b> SHARRON MILLER'S ACADEMY FOR THE PERFORMING 14 S PARK ST MONTCLAIR, NJ 07042	22-3484652	501(C)(3)	50,000.				GENERAL SUPPORT
<b>(2)</b> SNIPES FARM AND EDUCATION CENTER 890 W BRIDGE ST MORRISVILLE, PA 19067	26-1338481	501(C)(3)	7,500.				GENERAL SUPPORT
<b>(3)</b> SOCIAL AND ENVIRONMENTAL ENTREPRENEURS (SEE 23564 CALABASAS RD CALABASAS, CA 91302	95-4116679	501(C)(3)	40,000.				GENERAL SUPPORT
<b>(4)</b> SOCIAL GOOD FUND PO BOX 5473 RICHMOND, CA 94805	46-1323531	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(5)</b> SOMERSET HILLS LEARNING INSTITUTE 1810 BURNT MILLS RD BEDMINSTER, NJ 07921	22-3593804	501(C)(3)	25,821.				GENERAL SUPPORT
<b>(6)</b> SOURLAND CONSERVANCY P.O. BOX 197 SKILLMAN, NJ 08558	22-3707157	501(C)(3)	30,000.				GENERAL SUPPORT
<b>(7)</b> SOUTH ASIAN ENGAGEMENT FOUNDATION A NJ NONP 40 BRIDGE ST METUCHEN, NJ 08840	83-2376781	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(8)</b> SOUTH JERSEY CULTURAL ALLIANCE 101 V KING FARRIS DR GALLOWAY, NJ 08205	22-3144933	501(C)(3)	53,750.				GENERAL SUPPORT
<b>(9)</b> SOUTHERN APPALACHIAN HIGHLANDS CONSERVANCY 372 MERRIMON AVE ASHEVILLE, NC 28801	62-1098890	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(10)</b> SOUTHERN ENVIRONMENTAL LAW CENTER 120 GARRETT ST CHARLOTTESVILLE, VA 22902	52-1436778	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(11)</b> ST ANDREWS SCHOOL OF DELAWARE INC. 350 NOXONTOWN RD MIDDLETOWN, DE 19709	51-0079506	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(12)</b> STATE DEMOCRACY PROJECT 77 SANDS ST BROOKLYN, NY 11201	52-2003442	501(C)(3)	50,000.				GENERAL SUPPORT

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**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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) STATE THEATRE REGIONAL ARTS CENTER AT NEW B 15 LVNGSTN AVE NEW BRUNSWCK, NJ 08901-1903	16-1616384	501(C)(3)	25,000.				GENERAL SUPPORT
(2) STORYTELLING ARTS P.O. BOX 157 LAMBERTVILLE, NJ 08530	22-3473712	501(C)(3)	20,000.				GENERAL SUPPORT
(3) STOUTSBURG SOURLAND AFRICAN AMERICAN MUSEUM PO BOX 162 HOPEWELL, NJ 08525	81-2811228	501(C)(3)	50,000.				GENERAL SUPPORT
(4) STRETTO YOUTH CHAMBER ORCHESTRA 611 LAKE DRIVE PRINCETON, NJ 08540	47-4984177	501(C)(3)	12,500.				GENERAL SUPPORT
(5) STUART COUNTRY DAY SCHOOL OF THE SACRED HEA 1200 STUART RD PRINCETON, NJ 08540-1297	21-0744683	501(C)(3)	10,000.				GENERAL SUPPORT
(6) SUPERIOR ARTS INSTITUTE 139 STATE ST ST B CAMDEN, NJ 08102	46-4054499	501(C)(3)	73,000.				GENERAL SUPPORT
(7) SURATI FOR PERFORMING ARTS 31 RIVER COURT JERSEY CITY, NJ 07310	46-1212380	501(C)(3)	36,500.				GENERAL SUPPORT
(8) SUSTAINABLE PRINCETON 1 MONUMENT DRIVE PRINCETON, NJ 08540	45-4743353	501(C)(3)	25,000.				GENERAL SUPPORT
(9) SUSTAINABLE WOODSTOCK PO BOX 611 WOODSTOCK, VT 05091	27-1178081	501(C)(3)	25,000.				GENERAL SUPPORT
(10) SYMPHONY IN C 576 HADDON AVE. COLLINGSWOOD, NJ 08108	51-0244534	501(C)(3)	10,500.				GENERAL SUPPORT
(11) SYRACUSE UNIVERSITY 820 COMSTOCK AVE SYRACUSE, NY 13244-5040	15-0532081	501(C)(3)	6,841.				GENERAL SUPPORT
(12) T. THOMAS FORTUNE FOUNDATION PO BOX 2248 RED BANK, NJ 07701	81-5308319	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) 2023

**SCHEDULE I  
(Form 990)**

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

OMB No. 1545-0047

**2023**

**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](http://www.irs.gov/Form990) for the latest information.

Name of the organization

Employer identification number

PRINCETON AREA COMMUNITY FOUNDATION INC.

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
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<b>(1)</b> TE AO MANA INC. 217 W 18TH ST #1191 NEW YORK, NY 10113	85-4179100	501(C)(3)	15,000.				GENERAL SUPPORT
<b>(2)</b> THE APPEL FARM ARTS & MUSIC CENTER, INC 457 SHIRLEY RD ELMER, NJ 08318-0888	22-2235002	501(C)(3)	20,000.				GENERAL SUPPORT
<b>(3)</b> THE ART SCHOOL AT OLD CHURCH, INC. 561 PIERMONT AVE. DEMAREST, NJ 07627	23-7400684	501(C)(3)	20,000.				GENERAL SUPPORT
<b>(4)</b> THE BROTHERHOOD SISTER SOL INC. 512 W 143RD ST NEW YORK, NY 10031	13-3857387	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(5)</b> THE CAT COLLABORATIVE 201 ROUSE BLVD. PHILADELPHIA, PA 19112-1902	87-4344838	501(C)(3)	175,000.				GENERAL SUPPORT
<b>(6)</b> THE CATHOLIC CHURCH EXTENSION SOCIETY OF TH 150 S WACKER DR CHICAGO, IL 60606	36-6000520	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(7)</b> THE CHILDREN'S HOME SOCIETY OF NJ - (KIDSBR 635 S CLINTON AVE TRENTON, NJ 08611-1831	21-0634966	501(C)(3)	16,000.				GENERAL SUPPORT
<b>(8)</b> THE CHUBBY'S PROJECT 1 RAILRD PL HOPEWELL, NJ 08525	83-2259460	501(C)(3)	40,000.				GENERAL SUPPORT
<b>(9)</b> THE CITADEL FOUNDATION 171 MOULTRIE ST CHARLESTON, SC 29409	57-6020493	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(10)</b> THE COLLEGE OF NEW JERSEY FOUNDATION PO BOX 7718 EWING, NJ 08628	22-2448189	501(C)(3)	42,868.				GENERAL SUPPORT
<b>(11)</b> THE FATHER CENTER OF NEW JERSEY 1 W STATE ST TRENTON, NJ 08608	21-0635048	501(C)(3)	62,970.				GENERAL SUPPORT
<b>(12)</b> THE FIVE STAR HEART PROJECT 1221 LORAIN AVE BETHLEHEM, PA 18018	47-5436125	501(C)(3)	10,000.				GENERAL SUPPORT

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Schedule I (Form 990) 2023

**SCHEDULE I  
(Form 990)**

**Grants and Other Assistance to Organizations,  
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Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.  
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<b>(1)</b> THE HAVEN 4405 DESOTO RD SARASOTA, FL 34235	59-1305522	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(2)</b> THE HOPELINE 884 E 163RD ST BRONX, NY 10459	13-3603303	501(C)(3)	15,000.				GENERAL SUPPORT
<b>(3)</b> THE KENNEDY DANCERS, INC. 79 CENTRAL AVE JERSEY CITY, NJ 07306	22-2253752	501(C)(3)	12,000.				GENERAL SUPPORT
<b>(4)</b> THE KOSCIUSZKO FOUNDATION INC. 15 E 65TH ST NEW YORK, NY 10065	13-1628179	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(5)</b> THE LOADING DOCK INC 2 N KRESSON ST BALTIMORE, MD 21224	52-1349891	501(C)(3)	20,000.				GENERAL SUPPORT
<b>(6)</b> THE PHI BETA KAPPA SOCIETY 1606 NEW HAMP AVE, NW WASHINGTON, DC 20009	53-0226282	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(7)</b> THE ROAD TO 120-EDUCATION EQUITY FOR YOUNG 105 W 89TH ST NEW YORK, NY 10024	83-3365132	501(C)(3)	15,000.				GENERAL SUPPORT
<b>(8)</b> THE VANGUARD THEATER COMPANY 180 BLOOMFIELD AVE MONTCLAIR, NJ 07042	47-3543143	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(9)</b> THE WATERSHED INSTITUTE 31 TITUS MILL RD PENNINGTON, NJ 08534-9946	21-0649717	501(C)(3)	115,000.				GENERAL SUPPORT
<b>(10)</b> THE WORKWELL PARTNERSHIP 2688 MAIN ST LAWRENCEVILLE, NJ 08648	88-2646920	501(C)(3)	105,800.				GENERAL SUPPORT
<b>(11)</b> TOMMY'S PANTRY 633 SLIGO AVE SILVER SPRING, MD 20910	87-2088993	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(12)</b> TRENT HOUSE ASSOCIATION 15 MARKET ST TRENTON, NJ 08611	23-7378513	501(C)(3)	34,500.				GENERAL SUPPORT

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<b>(1)</b> TRENTON AREA SOUP KITCHEN 72 1/2 ESCHER ST TRENTON, NJ 08605	22-2392881	501(C)(3)	150,000.				GENERAL SUPPORT
<b>(2)</b> TRENTON CIRCUS SQUAD DBA TRENTON CIVIL CIRC 675 S CLINTON AVE TRENTON, NJ 08611	47-2150184	501(C)(3)	40,000.				GENERAL SUPPORT
<b>(3)</b> TRENTON YOUTH WRESTLING 4547 PROVINCE LINE RD PRINCETON, NJ 08540	82-5265929	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(4)</b> TRI314 MULTIDISCIPLINARY VISUAL PERFORMANCE 153 JEFFERSON AVE BROOKLYN, NY 11216	84-2837277	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(5)</b> TRI-COUNTY COMMUNITY ACTION AGENCY (D/B/A G 110 COHANSEY ST BRIDGETON, NJ 08302	22-1942357	501(C)(3)	12,500.				GENERAL SUPPORT
<b>(6)</b> TRILOGY AN OPERA COMPANY 30 HOWARD COURT NEWARK, NJ 07103	16-1681342	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(7)</b> TRINITY EPISCOPAL CHURCH 503 ASBURY AVE ASBURY PARK, NJ 07712	21-0689313	501(C)(3)	21,400.				GENERAL SUPPORT
<b>(8)</b> TULSA COMMUNITY FOUNDATION 7030 S YALE AVE - ST 600 TULSA, OK 74136	73-1554474	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(9)</b> UNICORN THERAPEUTIC HORSEBACK RIDING 171 MARSHALL'S CORNER PENNINGTON, NJ 08534	81-4565168	501(C)(3)	20,000.				GENERAL SUPPORT
<b>(10)</b> UNION CITY HIGH SCHOOL 2500 KENNEDY BLVD UNION CITY, NJ 07073	99-9999999	501(C)(3)	30,000.				GENERAL SUPPORT
<b>(11)</b> UNITARIAN UNIVERSALIST CONGREGATION OF PRIN 50 CHERRY HILL RD PRINCETON, NJ 08540	21-0694751	501(C)(3)	6,500.				GENERAL SUPPORT
<b>(12)</b> UNITED CHILDREN'S MUSIC PROJECT (FORMERLY U 340B MOUNTAIN AVE UNION CITY, NJ 07087	45-3663891	501(C)(3)	10,000.				GENERAL SUPPORT

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<b>(1)</b> UNITED WAY OF WELD COUNTY PO BOX 1944 GREELEY, CO 80632	84-6011918	501(C)(3)	30,000.				GENERAL SUPPORT
<b>(2)</b> UNIVERSITY OF ORANGE, A NJ NONPROFIT CORPOR 47 CLEVELAND ST ORANGE, NJ 07050	27-3939616	501(C)(3)	20,000.				GENERAL SUPPORT
<b>(3)</b> UNIVERSITY OF VIRGINIA 1001 N. EMMET ST	54-1682176	501(C)(3)	150,000.				GENERAL SUPPORT
<b>(4)</b> UNIVERSITY OF VIRGINIA HEALTH FOUNDATION P.O. BOX 800773 CHROTTSVILLE, VA 22908-0773	41-2097394	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(5)</b> URBANPROMISE TRENTON 801 W STATE ST TRENTON, NJ 08618	81-1548363	501(C)(3)	15,000.				GENERAL SUPPORT
<b>(6)</b> USTA FOUNDATION INCORPORATED 2500 WESTCHESTER AVE PURCHASE, NY 10577	13-3782331	501(C)(3)	6,000.				GENERAL SUPPORT
<b>(7)</b> VANGUARD CHARITABLE ENDOWMENT PROGRAM PO BOX 9509 WARWICK, RI 02889	23-2888152	501(C)(3)	106,329.				GENERAL SUPPORT
<b>(8)</b> VERMONT ADAPTIVE SKI & SPORTS P.O. BOX 139 KILLINGTON, VT 05751	74-2472938	501(C)(3)	12,000.				GENERAL SUPPORT
<b>(9)</b> VICTORY HALL INC. 926 NEWARK AVE. JERSEY CITY, NJ 07306	22-3833573	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(10)</b> VILLANOVA UNIVERSITY 800 E. LANCASTER AVE VILLANOVA, PA 19085	23-1352688	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(11)</b> VIRGINIA UNITED METHODIST HOMES INC AKA PIN 120 EASTSHORE DR GLEN ALLEN, VA 23059-5985	54-0720603	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(12)</b> WASHINGTON NATIONAL CATHEDRAL 3101 WISCONSIN AVE. NW WASHINGTON, DC 20016	53-0196604	501(C)(3)	25,000.				GENERAL SUPPORT

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<b>(1)</b> WATCHTOWER BIBLE AND TRACT SOCIETY OF NEW Y 900 RED MILLS RD WALLKILL, NY 12589	11-1753577	501(C)(3)	8,300.				GENERAL SUPPORT
<b>(2)</b> WATER FIRST INTERNATIONAL 1904 3RD AVE SEATTLE, WA 98101	20-2601035	501(C)(3)	15,000.				GENERAL SUPPORT
<b>(3)</b> WE MAKE: AUTISM AT WORK 109 ROUTE 31 N PENNINGTON, NJ 08534	82-2577852	501(C)(3)	51,750.				GENERAL SUPPORT
<b>(4)</b> WEEKEND OF CHAMBER MUSIC INC. P.O. BOX 147 JEFFERSONVILLE, NY 12748	16-1518575	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(5)</b> WELLMET PROJECT INC. 649 MASS AVE CAMBRIDGE, MA 02139	04-2270072	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(6)</b> WEST JERSEY MUSIC ACADEMY 101 BRIDGEBORO RD MOORESTOWN, NJ 08057	81-5287243	501(C)(3)	17,500.				GENERAL SUPPORT
<b>(7)</b> WEST ORANGE ARTS COUNCIL INC. 551 VALLEY RD WEST ORANGE, NJ 07052	22-3687063	501(C)(3)	6,200.				GENERAL SUPPORT
<b>(8)</b> WEST WINDSOR ARTS COUNCIL 952 ALEXANDER RD 03-0494648	03-0494648	501(C)(3)	8,000.				GENERAL SUPPORT
<b>(9)</b> WHALE TRUST P.O. BOX 1360 PUUNENE, HI 96784	91-2144632	501(C)(3)	15,000.				GENERAL SUPPORT
<b>(10)</b> WHARTON INSTITUTE FOR THE PERFORMING ARTS 60 LOCUST AVE BERKELEY HEIGHTS, NJ 07922	22-2609457	501(C)(3)	20,000.				GENERAL SUPPORT
<b>(11)</b> WHITESBOG PRESERVATION TRUST INC. 120 W WHITES BOGS RD BROWNS MILLS, NJ 08015	22-2807777	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(12)</b> WHY 150 N SIXTH ST PHILADELPHIA, PA 19106	23-1438083	501(C)(3)	15,000.				GENERAL SUPPORT

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<b>(1)</b> WNET (CHANNEL 13) 825 8TH AVE NEW YORK, NY 10019-7435	26-2810489	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(2)</b> WOMANSPACE 1530 BRUNSWICK AVE LAWRENCEVILLE, NJ 08648	22-2172522	501(C)(3)	70,000.				GENERAL SUPPORT
<b>(3)</b> WOMEN'S COLLEGE CLUB OF PRINCETON NJ P.O. BOX 3181 PRINCETON, NJ 08540	21-6016688	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(4)</b> WORLD HERITAGE USA: US/ICOMOS 1701 PENN AVE NW WASHINGTON, DC 20006	23-7366110	501(C)(3)	10,000.				GENERAL SUPPORT
<b>(5)</b> YOUNG AUDIENCES OF NEW JERSEY & EASTERN PA P. O. BOX 3175 PRINCETON, NJ 08540	23-7384991	501(C)(3)	73,750.				GENERAL SUPPORT
<b>(6)</b> YOUNG CENTER FOR IMMIGRANT CHILDREN'S RIGHT 2245 S. MICHIGAN AVE CHICAGO, IL 60616	26-1839249	501(C)(3)	50,000.				GENERAL SUPPORT
<b>(7)</b> YOUTH COMMUNICATION 242 W 38TH ST NEW YORK, NY 10018-5860	13-3047555	501(C)(3)	25,000.				GENERAL SUPPORT
<b>(8)</b> YWCA PRINCETON 59 PAUL ROBESON PL PRINCETON, NJ 08540	21-0635056	501(C)(3)	7,100.				GENERAL SUPPORT
<b>(9)</b>							
<b>(10)</b>							
<b>(11)</b>							
<b>(12)</b>							

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Schedule I (Form 990) 2023



**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.

MONITORING OF GRANTS

ALL GRANTEES SIGN A CONTRACT WHICH OUTLINES ALL REQUIREMENTS BEFORE THEIR GRANT CHECK IS DELIVERED. GRANTS FROM DONOR ADVISED AND DESIGNATED FUNDS ARE AWARDED AFTER A THOROUGH REVIEW OF THEIR 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.

**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

Name of the organization

PRINCETON AREA COMMUNITY FOUNDATION INC.

**Compensation Information**

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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2023**

**Open to Public  
Inspection**

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 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**  **4a**
- b** Participate in or receive payment from a supplemental nonqualified retirement plan? **4b**  **4b**
- c** Participate in or receive payment from an equity-based compensation arrangement? **4c**  **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**  **5a**
- b** Any related organization? **5b**  **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**  **6a**
- b** Any related organization? **6b**  **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**  **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**  **8**

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

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

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

Schedule J (Form 990) 2023

**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 and/or 1099-NEC 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 JEFFREY VEGA (DEC'D 1/ PRESIDENT & CEO	(i)	263,530.	21,435.	NONE	16,077.	23,123.	324,165.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
2 LAURA LONGMAN COO/CFO	(i)	203,030.	20,133.	NONE	12,080.	14,503.	249,746.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
3 MIKE NUNO SENIOR DICTOR OF PHILANTHROPY	(i)	154,461.	4,635.	NONE	9,270.	10,415.	178,781.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
4 MARCIA SHACKELFORD CHIEF PHILANTHROPY OFFICER	(i)	177,577.	18,555.	NONE	11,133.	23,734.	230,999.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
5 LYNNE TOYE EXEC DIR OF NEW JERSEY ARTS	(i)	191,862.	NONE	NONE	11,485.	12,187.	215,534.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
6 NELIDA VALENTIN VICE PRESIDENT, GRANTS & PRGM	(i)	168,330.	16,800.	NONE	10,080.	14,261.	209,471.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
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)							

**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, 2023. THE FOUNDATION'S COMPENSATION PROGRAM WILL BE: FOCUSED ON A COMBINATION OF BASE SALARY AND INCENTIVE PAY WHICH, WHEN COMBINED, WILL PROVIDE COMPENSATION ABOVE THE MARKET MEDIAN CONSISTENT WITH THE BOARD OF TRUSTEES COMPENSATION PHILOSOPHY STATEMENT. THE INCENTIVE PAY COMPONENT WILL NOT BE ADDED TO BASE PAY AND WILL BE TARGETED ABOVE MARKET MEDIAN AT OR AROUND THE 65TH TO 85TH PERCENTILE. UNDER NO CIRCUMSTANCES WILL COMPENSATION BE CALCULATED AS A PERCENTAGE OF CONTRIBUTIONS.

**SCHEDULE M  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Noncash Contributions**

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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2023**

**Open to Public  
Inspection**

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	91	4,108,254.	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 V, 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 3 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) 2023

JSA

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**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.

**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 1, LINE 1B

THE ORGANIZATION REPORTED 91 CONTRIBUTIONS OF STOCK AT THEIR FMV. THIS IS  
THE NUMBER OF CONTRIBUTIONS, NOT CONTRIBUTORS.

**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](http://www.irs.gov/form990).

OMB No. 1545-0047

**2023**

**Open to Public  
Inspection**

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52-1746234

**FORM 990, PART III, LINE 4A**

FORM 990, PART III, LINE 4A

GRANTS: THE COMMUNITY FOUNDATION IS AN ACTIVE GRANTMAKER THROUGH SEVERAL GRANT PROGRAMS INCLUDING GREATER MERCER GRANTS AND THE FUND FOR WOMEN & GIRLS) AND GRANTMAKING FROM DONOR-ADVISED, DESIGNATED, NONPROFIT, AND FIELD-OF-INTEREST FUNDS. THE COMMUNITY FOUNDATION'S STRATEGIC GRANTMAKING PROGRAM, ALL KIDS THRIVE, WAS DESIGNED TO ADDRESS HIGH RATES OF CHRONIC ABSENTEEISM IN LOCAL PUBLIC SCHOOLS. IN 2023, THE FIRST PHASE OF THE PROGRAM CONCLUDED. WE EVALUATED THE PROGRAM, CELEBRATED ITS SUCCESSES, AND TOOK STEPS TO BEGIN DESIGNING THE NEXT PHASE OF THE PROGRAM TO HELP CONTINUE TO MEET THE NEEDS OF LOW-INCOME STUDENTS AND THEIR FAMILIES.

COMMUNITY IMPACT GRANTS SUPPORT NONPROFITS WORKING TO IMPROVE THE QUALITY OF LIFE FOR CHILDREN, FAMILIES AND COMMUNITIES, INCLUDING NONPROFITS FOCUSING ON FOOD INSECURITY, MENTAL HEALTH, ECONOMIC DEVELOPMENT AND ARTS EDUCATION. WE ALSO SUPPORT GIVING CIRCLES AND FIELD OF INTEREST FUNDS TO ENGAGE WOMEN AND MILLENNIALS IN PHILANTHROPY. THE NJ ARTS & CULTURAL RECOVERY FUND IS AWARDING GRANTS TO NONPROFITS STATEWIDE. THE COMMUNITY FOUNDATION ALSO MAKES GRANTS FROM DONOR-ADVISED, DESIGNATED, NONPROFIT AND FIELD OF INTEREST FUNDS. ITS PRIMARY FOCUS IS CENTRAL NEW JERSEY, BUT GRANTS FROM DONOR-ADVISED FUNDS ARE MADE REGIONALLY AND NATIONALLY AS WELL. COMPETITIVE GRANTS ADDRESS THE NEEDS OF LOW-INCOME PEOPLE IN GREATER MERCER COUNTY, PROVIDE OPERATING SUPPORT FOR NONPROFITS WORKING WITH LOW-INCOME PEOPLE, AND PROVIDE SUPPORT FOR WORK TO BUILD THE SOCIAL CAPITAL OF THE REGION. IN 2015 THE BOARD DEFINED SOCIAL CAPITAL AS



**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](http://www.irs.gov/form990).

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**2023**

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52-1746234

BUILDING COMMUNITIES. THE COMMUNITY FOUNDATION'S GRANTMAKING TOUCHES MANY PROGRAMMATIC AREAS INCLUDING EDUCATION, BASIC SERVICES, HEALTH, ARTS & CULTURE, HOUSING, THE ENVIRONMENT, HISTORIC PRESERVATION, CIVIL RIGHTS, AND ANIMAL WELFARE. PROMOTING PHILANTHROPY AND PROVIDING EDUCATION: THE COMMUNITY FOUNDATION ACTIVELY ENGAGES ITS DONORS, GRANTEES, AND THE PROFESSIONAL ADVISORS IN THE REGION TO ENCOURAGE CHARITABLE GIVING BROADLY, AND TO BUILD OVER TIME A COMMUNITY-WIDE COMMITMENT TO PHILANTHROPY. IT SPONSORS SEMINARS AND WORKSHOPS ON TOPICS SUCH AS ENDOWMENT-BUILDING, GOOD GOVERNANCE, GRANT-SEEKING BEST PRACTICES, RISK MANAGEMENT, AND PLANNED GIVING. THE COMMUNITY FOUNDATION POSITIONS ITSELF AS A RESOURCE TO THE REGION AND REGULARLY RESPONDS TO REQUESTS FOR INFORMATION AND GUIDANCE. THE COMMUNITY FOUNDATION PARTNERS WITH OTHER ORGANIZATIONS SUCH AS THE COUNCIL OF NJ GRANTMAKERS, THE GIFT PLANNING COUNCIL OF NEW JERSEY, CENTER FOR NONPROFITS, AND THE SUPPORT CENTER PARTNERSHIP IN PHILANTHROPY TO EXPAND ITS EDUCATIONAL OFFERINGS. OUTSIDE GROUPS CONDUCT RELATED WORKSHOPS ON ITS PREMISES. STAFF ARE AVAILABLE TO CONSULT WITH DONORS, NONPROFITS, PROFESSIONAL ADVISORS, AND COMMUNITY LEADERS ON ISSUES RELATED TO GIFTS, GRANTS, PARTNERSHIPS AND 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.

**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](http://www.irs.gov/form990).

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**2023**

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52-1746234

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

**FORM 990, PART VI, SECTION B, LINE 11B**

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

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

THE COMMUNITY FOUNDATION HAS A WRITTEN CONFLICT OF INTEREST POLICY WHICH HAS BEEN APPROVED BY THE BOARD AND REQUIRES ALL EMPLOYEES, OFFICERS, 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

**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](http://www.irs.gov/form990).

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52-1746234

THE RELEVANT DISCUSSION AND RECUSES HIM/HERSELF FROM ANY VOTE IN WHICH THEY HAVE A CONFLICT OF INTEREST; IN ACCORDANCE WITH THE CONFLICT OF INTEREST POLICY.

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

THE COMMUNITY FOUNDATION HAS A BOARD-APPROVED COMPENSATION POLICY WHICH GUIDES ITS DECISIONS. THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES, WHICH IS COMPRISED OF INDEPENDENT BOARD MEMBERS WHO DO NOT HAVE A CONFLICT OF INTEREST, ACTS AS A PERSONNEL AND COMPENSATION COMMITTEE AND SETS ANNUAL COMPENSATION FOR THE PRESIDENT & CEO. THE EXECUTIVE COMMITTEE PERFORMS AN ANNUAL REVIEW OF THE PRESIDENT & CEO'S PERFORMANCE AGAINST OBJECTIVES AND METRICS AGREED TO AT THE BEGINNING OF THE FISCAL YEAR AND SOLICITS FEEDBACK FROM ALL TRUSTEES. AS PART OF THE BUDGET PROCESS, THE FINANCE COMMITTEE SUGGESTS AN INCREASE RANGE DURING THE BUDGET PROCESS. THE PRESIDENT & CEO THEN REVIEWS THE PERFORMANCE OF ALL OTHER STAFF AND RECOMMENDS SALARY INCREASES FOR THE NEXT YEAR TO THE EXECUTIVE COMMITTEE 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.

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

Department of the Treasury  
Internal Revenue Service

Name of the organization

**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](http://www.irs.gov/form990).

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**PRINCETON AREA COMMUNITY FOUNDATION INC.**

**52-1746234**

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

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

**FORM 990, PART XI, LINE 9**

OTHER CHANGES IN NETS ASSETS:

GRANT REFUNDS \$54,000.

Name of the organization

Employer identification number

PRINCETON AREA COMMUNITY FOUNDATION INC.

52-1746234

FORM 990, PART X - PREPAID EXPENSES AND DEFERRED CHARGES

=====

DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE
-----	-----	-----
PREPAID EXPENSES	132,664.	126,567.
TOTALS	----- 132,664. =====	----- 126,567. =====

Name of the organization

Employer identification number

**PRINCETON AREA COMMUNITY FOUNDATION INC.**

**52-1746234**

FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

=====

DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE	COST OR FMV
-----	-----	-----	-----
DOMESTIC EQUITY	45,395,150.	42,755,653.	FMV
MUTUAL FUNDS	19,957,532.	1,322,486.	FMV
TOTALS	-----	-----	
	65,352,682.	44,078,139.	
	=====	=====	

SCHEDULE A: LP PARTNERSHIP INCOME

INCOME (LOSS) FROM PARTNERSHIPS AND/OR S CORPORATIONS

	SHARE OF GROSS INCOME	SHARE OF DEDUCTIONS	GAIN OR (LOSS)
TOTAL INCOME (LOSS) FROM PARTNERSHIPS AND/OR S CORPORATIONS			-16,805.

**Return by a U.S. Transferor of Property  
 to a Foreign Corporation**

▶ Go to [www.irs.gov/Form926](http://www.irs.gov/Form926) for instructions and the latest information.  
 ▶ Attach to your income tax return for the year of the transfer or distribution.

**Part I U.S. Transferor Information** (see instructions)

Name of transferor **PRINCETON AREA COMMUNITY FOUNDATION** Identifying number (see instructions)  
**52-1746234**

- 1** Is the transferee a specified 10%-owned foreign corporation that is not a controlled foreign corporation? . . .  Yes  No
- 2** If the transferor was a corporation, complete questions 2a through 2d.
- a** If the transfer was a section 361(a) or (b) transfer, was the transferor controlled (under section 368(c)) by five or fewer domestic corporations? . . . . .  Yes  No
- b** Did the transferor remain in existence after the transfer? . . . . .  Yes  No
- If not, list the controlling shareholder(s) and their identifying number(s).

Controlling shareholder	Identifying number

- c** If the transferor was a member of an affiliated group filing a consolidated return, was it the parent corporation? . . . . .  Yes  No
- If not, list the name and employer identification number (EIN) of the parent corporation.

Name of parent corporation	EIN of parent corporation

- d** Have basis adjustments under section 367(a)(4) been made? . . . . .  Yes  No

- 3** If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such under section 367), complete questions 3a through 3d.

- a** List the name and EIN of the transferor's partnership.

Name of partnership	EIN of partnership
<b>FARALLON CAPITAL INSTITUTIONAL PARTNER</b>	<b>94-3106323</b>

- b** Did the partner pick up its pro rata share of gain on the transfer of partnership assets? . . . . .  Yes  No
- c** Is the partner disposing of its **entire** interest in the partnership? . . . . .  Yes  No
- d** Is the partner disposing of an interest in a limited partnership that is regularly traded on an established securities market? . . . . .  Yes  No

**Part II Transferee Foreign Corporation Information** (see instructions)

**4** Name of transferee (foreign corporation)  
**HI BOB LTD**

**6** Address (including country)  
 5 NEW STREET SQUARE  
 LONDON UK EC4A 3TW

**7** Country code of country of incorporation or organization (see instructions)  
**UK**

**8** Foreign law characterization (see instructions)  
**CORPORATION**

**9** Is the transferee foreign corporation a controlled foreign corporation? . . . . .  Yes  No

**5a** Identifying number, if any

**5b** Reference ID number (see instructions)

For Paperwork Reduction Act Notice, see separate instructions.



**Part III Information Regarding Transfer of Property** (see instructions)

**Section A - Cash**

Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Cash	09/28/2023		141,385.		

**10** Was cash the only property transferred?  **Yes**  **No**  
 If "Yes," skip the remainder of Part III and go to Part IV.

**Section B - Other Property (other than intangible property subject to section 367(d))**

Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Stock and securities					
Inventory					
Other property (not listed under another category)					
Property with built-in loss					
Totals					

**11** Did the transferor transfer stock or securities subject to section 367(a) with respect to which a gain recognition agreement was filed?  **Yes**  **No**

**12a** Were any assets of a foreign branch (including a branch that is a foreign disregarded entity) transferred to a foreign corporation?  **Yes**  **No**  
 If "Yes," go to line 12b.

**b** Was the transferor a domestic corporation that transferred substantially all of the assets of a foreign branch (including a branch that is a foreign disregarded entity) to a specified 10%-owned foreign corporation?  **Yes**  **No**  
 If "Yes," continue to line 12c. If "No," skip lines 12c and 12d, and go to line 13.

**c** Immediately after the transfer, was the domestic corporation a U.S. shareholder with respect to the transferee foreign corporation?  **Yes**  **No**  
 If "Yes," continue to line 12d. If "No," skip line 12d, and go to line 13.

**d** Enter the transferred loss amount included in gross income as required under section 91 ► \$ \_\_\_\_\_

**13** Did the transferor transfer property described in section 367(d)(4)?  **Yes**  **No**  
 If "No," skip Section C and questions 14a through 15.

**Section C - Intangible Property Subject to Section 367(d)**

Type of property	(a) Date of transfer	(b) Description of property	(c) Useful life	(d) Arm's length price on date of transfer	(e) Cost or other basis	(f) Income inclusion for year of transfer (see instructions)
Property described in sec. 367(d)(4)						
Totals						

- 14a Did the transferor transfer any intangible property that, at the time of the transfer, had a useful life reasonably anticipated to exceed 20 years?  Yes  No
- b At the time of the transfer, did any of the transferred intangible property have an indefinite useful life?  Yes  No
- c Did the transferor choose to apply the 20-year inclusion period provided under Regulations section 1.367(d)-1(c)(3)(ii) for any intangible property?  Yes  No
- d If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in Regulations section 1.367(d)-1(c)(3)(ii) ► \$ \_\_\_\_\_
- 15 Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)?  Yes  No

**Supplemental Part III Information Required To Be Reported** (see instructions)

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**Part IV Additional Information Regarding Transfer of Property** (see instructions)

- 16 Enter the transferor's interest in the transferee foreign corporation before and after the transfer.  
(a) Before NONE % (b) After 0.053 %
- 17 Type of nonrecognition transaction (see instructions) ► IRC SECTION 351
- 18 Indicate whether any transfer reported in Part III is subject to any of the following.
  - a Gain recognition under section 904(f)(3)  Yes  No
  - b Gain recognition under section 904(f)(5)(F)  Yes  No
  - c Recapture under section 1503(d)  Yes  No
  - d Exchange gain under section 987  Yes  No
- 19 Did this transfer result from a change in entity classification?  Yes  No
- 20a Did a domestic corporation make a distribution of property covered by section 367(e)(2)? See instructions. If "Yes," complete lines 20b and 20c.  Yes  No
- b Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b) ► \$ \_\_\_\_\_
- c Did the domestic corporation not recognize gain or loss on the distribution of property because the property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)?  Yes  No
- 21 Did a domestic corporation make a section 355 distribution of stock in a foreign controlled corporation covered by section 367(e)(1)? See instructions  Yes  No

**Return by a U.S. Transferor of Property  
 to a Foreign Corporation**

▶ Go to [www.irs.gov/Form926](http://www.irs.gov/Form926) for instructions and the latest information.  
 ▶ Attach to your income tax return for the year of the transfer or distribution.

**Part I U.S. Transferor Information** (see instructions)

Name of transferor **PRINCETON AREA COMMUNITY FOUNDATION** Identifying number (see instructions)  
**52-1746234**

- 1** Is the transferee a specified 10%-owned foreign corporation that is not a controlled foreign corporation? . . .  Yes  No
- 2** If the transferor was a corporation, complete questions 2a through 2d.
- a** If the transfer was a section 361(a) or (b) transfer, was the transferor controlled (under section 368(c)) by five or fewer domestic corporations? . . . . .  Yes  No
- b** Did the transferor remain in existence after the transfer? . . . . .  Yes  No
- If not, list the controlling shareholder(s) and their identifying number(s).

Controlling shareholder	Identifying number

- c** If the transferor was a member of an affiliated group filing a consolidated return, was it the parent corporation? . . . . .  Yes  No
- If not, list the name and employer identification number (EIN) of the parent corporation.

Name of parent corporation	EIN of parent corporation

- d** Have basis adjustments under section 367(a)(4) been made? . . . . .  Yes  No

- 3** If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such under section 367), complete questions 3a through 3d.

- a** List the name and EIN of the transferor's partnership.

Name of partnership	EIN of partnership
<b>FARALLON CAPITAL INSTITUTIONAL PARTNER</b>	<b>94-3106323</b>

- b** Did the partner pick up its pro rata share of gain on the transfer of partnership assets? . . . . .  Yes  No
- c** Is the partner disposing of its **entire** interest in the partnership? . . . . .  Yes  No
- d** Is the partner disposing of an interest in a limited partnership that is regularly traded on an established securities market? . . . . .  Yes  No

**Part II Transferee Foreign Corporation Information** (see instructions)

**4** Name of transferee (foreign corporation)  
**ALCANTIL EMPREENDIMENTOS**

**5a** Identifying number, if any

**6** Address (including country)  
 AVENIDA DRA RUTH CARDOSO 8501 ANDAR 4 SALA G  
 SAO PAULO BR 05425-070

**5b** Reference ID number (see instructions)

**7** Country code of country of incorporation or organization (see instructions)  
**BR**

**8** Foreign law characterization (see instructions)  
**CORPORATION**

**9** Is the transferee foreign corporation a controlled foreign corporation? . . . . .  Yes  No

For Paperwork Reduction Act Notice, see separate instructions.

**Part III Information Regarding Transfer of Property** (see instructions)

**Section A - Cash**

Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Cash	12/14/2023		148,087.		

**10** Was cash the only property transferred?  **Yes**  **No**  
 If "Yes," skip the remainder of Part III and go to Part IV.

**Section B - Other Property (other than intangible property subject to section 367(d))**

Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Stock and securities					
Inventory					
Other property (not listed under another category)					
Property with built-in loss					
Totals					

**11** Did the transferor transfer stock or securities subject to section 367(a) with respect to which a gain recognition agreement was filed?  **Yes**  **No**

**12a** Were any assets of a foreign branch (including a branch that is a foreign disregarded entity) transferred to a foreign corporation?  **Yes**  **No**  
 If "Yes," go to line 12b.

**b** Was the transferor a domestic corporation that transferred substantially all of the assets of a foreign branch (including a branch that is a foreign disregarded entity) to a specified 10%-owned foreign corporation?  **Yes**  **No**  
 If "Yes," continue to line 12c. If "No," skip lines 12c and 12d, and go to line 13.

**c** Immediately after the transfer, was the domestic corporation a U.S. shareholder with respect to the transferee foreign corporation?  **Yes**  **No**  
 If "Yes," continue to line 12d. If "No," skip line 12d, and go to line 13.

**d** Enter the transferred loss amount included in gross income as required under section 91 ► \$ \_\_\_\_\_

**13** Did the transferor transfer property described in section 367(d)(4)?  **Yes**  **No**  
 If "No," skip Section C and questions 14a through 15.

**Section C - Intangible Property Subject to Section 367(d)**

Type of property	(a) Date of transfer	(b) Description of property	(c) Useful life	(d) Arm's length price on date of transfer	(e) Cost or other basis	(f) Income inclusion for year of transfer (see instructions)
Property described in sec. 367(d)(4)						
Totals						

- 14a Did the transferor transfer any intangible property that, at the time of the transfer, had a useful life reasonably anticipated to exceed 20 years?  Yes  No
- b At the time of the transfer, did any of the transferred intangible property have an indefinite useful life?  Yes  No
- c Did the transferor choose to apply the 20-year inclusion period provided under Regulations section 1.367(d)-1(c)(3)(ii) for any intangible property?  Yes  No
- d If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in Regulations section 1.367(d)-1(c)(3)(ii) ► \$ \_\_\_\_\_
- 15 Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)?  Yes  No

**Supplemental Part III Information Required To Be Reported** (see instructions)

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**Part IV Additional Information Regarding Transfer of Property** (see instructions)

- 16 Enter the transferor's interest in the transferee foreign corporation before and after the transfer.  
(a) Before NONE % (b) After 0.097 %
- 17 Type of nonrecognition transaction (see instructions) ► IRC SECTION 351
- 18 Indicate whether any transfer reported in Part III is subject to any of the following.
  - a Gain recognition under section 904(f)(3)  Yes  No
  - b Gain recognition under section 904(f)(5)(F)  Yes  No
  - c Recapture under section 1503(d)  Yes  No
  - d Exchange gain under section 987  Yes  No
- 19 Did this transfer result from a change in entity classification?  Yes  No
- 20a Did a domestic corporation make a distribution of property covered by section 367(e)(2)? See instructions.  Yes  No  
If "Yes," complete lines 20b and 20c.
- b Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b) ► \$ \_\_\_\_\_
- c Did the domestic corporation not recognize gain or loss on the distribution of property because the property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)?  Yes  No
- 21 Did a domestic corporation make a section 355 distribution of stock in a foreign controlled corporation covered by section 367(e)(1)? See instructions  Yes  No

**Return by a U.S. Transferor of Property  
 to a Foreign Corporation**

▶ Go to [www.irs.gov/Form926](http://www.irs.gov/Form926) for instructions and the latest information.  
 ▶ Attach to your income tax return for the year of the transfer or distribution.

**Part I U.S. Transferor Information** (see instructions)

Name of transferor **PRINCETON AREA COMMUNITY FOUNDATION** Identifying number (see instructions)  
**52-1746234**

- 1** Is the transferee a specified 10%-owned foreign corporation that is not a controlled foreign corporation? . . .  Yes  No
- 2** If the transferor was a corporation, complete questions 2a through 2d.
- a** If the transfer was a section 361(a) or (b) transfer, was the transferor controlled (under section 368(c)) by five or fewer domestic corporations? . . . . .  Yes  No
- b** Did the transferor remain in existence after the transfer? . . . . .  Yes  No
- If not, list the controlling shareholder(s) and their identifying number(s).

Controlling shareholder	Identifying number

- c** If the transferor was a member of an affiliated group filing a consolidated return, was it the parent corporation? . . . . .  Yes  No
- If not, list the name and employer identification number (EIN) of the parent corporation.

Name of parent corporation	EIN of parent corporation

- d** Have basis adjustments under section 367(a)(4) been made? . . . . .  Yes  No

- 3** If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such under section 367), complete questions 3a through 3d.

- a** List the name and EIN of the transferor's partnership.

Name of partnership	EIN of partnership
<b>FARALLON CAPITAL INSTITUTIONAL PARTNER</b>	<b>94-3106323</b>

- b** Did the partner pick up its pro rata share of gain on the transfer of partnership assets? . . . . .  Yes  No
- c** Is the partner disposing of its **entire** interest in the partnership? . . . . .  Yes  No
- d** Is the partner disposing of an interest in a limited partnership that is regularly traded on an established securities market? . . . . .  Yes  No

**Part II Transferee Foreign Corporation Information** (see instructions)

**4** Name of transferee (foreign corporation)  
**PAYSANNE S.A.R.L.**

**6** Address (including country)  
 2 RUE HILDEGARD VON BINGEN L-1282  
 LU

**7** Country code of country of incorporation or organization (see instructions)  
**LU**

**8** Foreign law characterization (see instructions)  
**CORPORATION**

**9** Is the transferee foreign corporation a controlled foreign corporation? . . . . .  Yes  No

**5a** Identifying number, if any

**5b** Reference ID number (see instructions)

For Paperwork Reduction Act Notice, see separate instructions.

**Part III Information Regarding Transfer of Property** (see instructions)

**Section A - Cash**

Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Cash	12/29/2023		160,985.		

**10** Was cash the only property transferred?  **Yes**  **No**  
 If "Yes," skip the remainder of Part III and go to Part IV.

**Section B - Other Property (other than intangible property subject to section 367(d))**

Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Stock and securities					
Inventory					
Other property (not listed under another category)					
Property with built-in loss					
Totals					

**11** Did the transferor transfer stock or securities subject to section 367(a) with respect to which a gain recognition agreement was filed?  **Yes**  **No**

**12a** Were any assets of a foreign branch (including a branch that is a foreign disregarded entity) transferred to a foreign corporation?  **Yes**  **No**  
 If "Yes," go to line 12b.

**b** Was the transferor a domestic corporation that transferred substantially all of the assets of a foreign branch (including a branch that is a foreign disregarded entity) to a specified 10%-owned foreign corporation?  **Yes**  **No**  
 If "Yes," continue to line 12c. If "No," skip lines 12c and 12d, and go to line 13.

**c** Immediately after the transfer, was the domestic corporation a U.S. shareholder with respect to the transferee foreign corporation?  **Yes**  **No**  
 If "Yes," continue to line 12d. If "No," skip line 12d, and go to line 13.

**d** Enter the transferred loss amount included in gross income as required under section 91 ► \$ \_\_\_\_\_

**13** Did the transferor transfer property described in section 367(d)(4)?  **Yes**  **No**  
 If "No," skip Section C and questions 14a through 15.

**Section C - Intangible Property Subject to Section 367(d)**

Type of property	(a) Date of transfer	(b) Description of property	(c) Useful life	(d) Arm's length price on date of transfer	(e) Cost or other basis	(f) Income inclusion for year of transfer (see instructions)
Property described in sec. 367(d)(4)						
Totals						

- 14a Did the transferor transfer any intangible property that, at the time of the transfer, had a useful life reasonably anticipated to exceed 20 years?  Yes  No
- b At the time of the transfer, did any of the transferred intangible property have an indefinite useful life?  Yes  No
- c Did the transferor choose to apply the 20-year inclusion period provided under Regulations section 1.367(d)-1(c)(3)(ii) for any intangible property?  Yes  No
- d If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in Regulations section 1.367(d)-1(c)(3)(ii) ► \$ \_\_\_\_\_
- 15 Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)?  Yes  No

**Supplemental Part III Information Required To Be Reported** (see instructions)

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**Part IV Additional Information Regarding Transfer of Property** (see instructions)

- 16 Enter the transferor's interest in the transferee foreign corporation before and after the transfer.  
(a) Before NONE % (b) After 0.109 %
- 17 Type of nonrecognition transaction (see instructions) ► IRC SECTION 351
- 18 Indicate whether any transfer reported in Part III is subject to any of the following.
  - a Gain recognition under section 904(f)(3)  Yes  No
  - b Gain recognition under section 904(f)(5)(F)  Yes  No
  - c Recapture under section 1503(d)  Yes  No
  - d Exchange gain under section 987  Yes  No
- 19 Did this transfer result from a change in entity classification?  Yes  No
- 20a Did a domestic corporation make a distribution of property covered by section 367(e)(2)? See instructions. If "Yes," complete lines 20b and 20c.  Yes  No
- b Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b) ► \$ \_\_\_\_\_
- c Did the domestic corporation not recognize gain or loss on the distribution of property because the property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)?  Yes  No
- 21 Did a domestic corporation make a section 355 distribution of stock in a foreign controlled corporation covered by section 367(e)(1)? See instructions  Yes  No