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Form **990-PF**

Department of the Treasury

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

OMB No 1545-0052

inter	au He	/enue Service Note, The Tourination may i	be able to use a copy of this	Tetain to Sausiy State repo	ung requirements.	
For	caler	dar year 2009, or tax year beginning		, and ending		
G (Check	all that apply: Initial return	Initial return of a fo	ormer public charity	Final return	1
		Amended return	Address chan	ge	Name change	
lles	the	IRS Name of foundation			A Employer identification	number
	abei					
	erwi		23-2984663	}		
	print	Number and street (or P O box number if mail is not de	B Telephone number			
	r type		T, PO BOX 17	6	(215)257-5	035
	Spe	City or town state and ZIP code			C If exemption application is p	
Inst	ructio	PERKASIE, PA 18944-0	176	,	D 1. Foreign organization:	
H	heck	type of organization: X Section 501(c)(3) ex			Foreign organizations me check here and attach co	seting the 85% test,
	_		Other taxable private founda	ation		
l Fa		irket value of all assets at end of year J Accounti		Accrual	E If private foundation sta under section 507(b)(1)	
		·	her (specify)			•
-	·\$	2,507,887. (Part I, colu	mn (d) must be on cash i	basis.)	F If the foundation is in a under section 507(b)(1)	
	irt í			(b) Net investment		(d) Disbursements
L		The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	income	(c) Adjusted net income	for charitable purposes (cash basis only)
	T 4	Contributions, gifts, grants, etc., received			N/A	(cash basis only)
	,	Check X If the foundation is not required to attach Sch B		<u>''</u>	N/A	
	4	Interest on savings and temporary cash investments	<u></u>			
	3		50,813.	50,813.		COLO OTENZANIO 1
	5.	Dividends and interest from securities	30,613.	50,613.		STATEMENT 1
	".	Gross rents				<u> </u>
	_ `	Net rental income or (loss)	700 204		l	<u> </u>
ě	ba	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	-782,294.			<u> </u>
Revenue	_D	assets on line 6a 1,623,232.				
ě	7	Capital gain net income (from Part IV, line 2)		0.		
_	8	Net short-term capital gain				
	9	Income modifications EIVED Gross sales less returns EIVED and allowances				
	10a		·	· -		
	b	Gross profit or (loss) T 0 4 2010 (0)	<u> </u>		· 	}
		The state of the s		<u></u> _		
	11	Other income	F21 401	FO 012		
	12	Total. Add lines Hhrough FAN. UI		50,813.		
	13	Compensation of officers, directors, trustees, etc	0.	0.		0.
	14	Other employee salaries and wages				
ű	15	Pension plans, employee benefits				
nse	16a	Legal fees	0.000	1 000		1 000
ě	b	Accounting fees STMT 2	2,000.			1,000.
Administrative Expenses	C	Other professional fees STMT 3	21,815.	21,815.		0.
ţ	17	Interest	4 000	 		
itra	18	Taxes STMT 4	1,200.	0.		0.
inis	19	Depreciation and depletion				
臣	20	Occupancy		 		
Ϋ́		Travel, conferences, and meetings				
and	22	Printing and publications			ļ	
ing	23	Other expenses STMT 5	2,438.	0.		0.
rat	24	Total operating and administrative	0- 4	00 01-	İ	
Operating		expenses. Add lines 13 through 23	27,453.	22,815.		1,000.
	25	Contributions, gifts, grants paid	170,050.			170,050.
	26	Total expenses and disbursements.				
	 	Add lines 24 and 25	197,503.	22,815.		171,050.
	27	Subtract line 26 from line 12:			1	
	1	Excess of revenue over expenses and disbursements	-928,984.			
		Net investment income (if negative, enter -0-)	ļ	27,998.		ļ
0225		Adjusted net income (if negative, enter -0-)	L	L	N/A	
9235 02-0	U 1 2-10	LHA For Privacy Act and Paperwork Reduction	Act Notice, see the instruc	tions.		Form 990-PF (2009)

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_		0-FF (2009) FIRST SAVINGS COMMUNITY		23-2984663		2
F	art	II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of		_
<u></u>	art	Balance Sheets column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value	_
	1	Cash - non-interest-bearing	107,990.	9,203.	9,203	•
	2	Savings and temporary cash investments	708,427.	392,529.	392,529	•
	3	Accounts receivable ▶				
	1	Less: allowance for doubtful accounts ▶				_
	4	Pledges receivable ►				
	ļ	Less: allowance for doubtful accounts ▶				_
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
	ļ	disqualified persons				_
	7	Other notes and loans receivable				
		Less: allowance for doubtful accounts ▶				
ţ	8	Inventories for sale or use				_
Assets	9	Prepaid expenses and deferred charges				_
Ř	10a	Investments - U.S. and state government obligations				_
	Ь	Investments - corporate stock				
	C	Investments - corporate bonds				
	11	Investments - land, buildings, and equipment basis	'			
		Less accumulated depreciation		····		_
	12	Investments - mortgage loans				
	13	Investments - other STMT 6	2,333,420.	1,819,121.	2,106,155	•
	14	Land, buildings, and equipment basis ▶	}			
	ĺ	Less accumulated depreciation				_
	15	Other assets (describe				_
	}					
_		Total assets (to be completed by all filers)	3,149,837.	2,220,853.	<u>2,507,887</u>	•
	Į.	Accounts payable and accrued expenses				
	18	Grants payable				
ies	19	Deferred revenue			•	
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
Ľį	21	Mortgages and other notes payable				
	22	Other liabilities (describe				
		Total link littles (add lease 17 through 00)	0.	0.		
_	23	Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here				
		and complete lines 24 through 26 and lines 30 and 31.	Ì			
es	24	Unrestricted				
Net Assets or Fund Balances	25	Temporarily restricted				
3ala		Permanently restricted				
Ĕ	20	Foundations that do not follow SFAS 117, check here				
Ę	İ	and complete lines 27 through 31.	[
þ	27	Capital stock, trust principal, or current funds	0.	0.		
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.1	0.		
Ass	29	Retained earnings, accumulated income, endowment, or other funds	3,149,837.	2,220,853.		
let	30	Total net assets or fund balances	3,149,837.	2,220,853.		
Z	••					
	31	Total liabilities and net assets/fund balances	3,149,837.	2,220,853.		
						_
	art	Analysis of Changes III Net Assets of Fund by				
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	30			-
	•	st agree with end-of-year figure reported on prior year's return)		<u>1</u>	3,149,837	•
		r amount from Part I, line 27a		2	-928,984	·
		r increases not included in line 2 (itemize)		3	0	_
		lines 1, 2, and 3		4	2,220,853	
		eases not included in line 2 (itemize)	<u></u>	5	0	
<u>6</u>	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	2,220,853	
					Form 990-PF (2009	3)

ured (d) Date sold (mo., day, yr.)
or (loss) minus (g)
<u>-782,294.</u>

/h) sain minus
(h) gain minus less than -0-) or
om col. (h))
-782,294.
-104,434.
···
-782,294.
70072524
N/A
Yes X No
(d) Distribution ratio
l. (b) divided by col. (c)) • 0 6 1 2 8 3
.056101
.054496
.053253
.052119
05505
. 277252
.277252
.055450
.055450 2,234,902
.055450 2,234,902 123,925
.055450 2,234,902 123,925 280
.277252 .055450 2,234,902 123,925 280 124,205
.055450 2,234,902 123,925 280
}

	990-PF (2009) FIRST SAVINGS COMMUNITY FOUNDATION 2.	<u>3-2</u>	<u>984663</u>	1	Page 4
_	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 494	<u> 8 - s</u>	see instru	ction	<u>15)</u>
1a	Exempt operating foundations described in section 4940(d)(2), check here \(\bigs \) and enter "N/A" on line 1.	ļ			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			_	
þ	The second of the second of	1		2	<u>80.</u>
	of Part I, line 27b	- }			
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)				_
	, , , , , , , , , , , , , , , , , , ,	2			<u>0.</u>
-		3		2	80.
		4			0.
	· · · · · · · · · · · · · · · · · · ·	5			80.
	Credits/Payments:	- 1			
	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 1,100.	}			
	Exempt foreign organizations - tax withheld at source	1			
	Tax paid with application for extension of time to file (Form 8868)				
	Backup withholding erroneously withheld	_		1 1	00
	,	7		<u> </u>	<u>00.</u>
		8			
	· · · · · · · · · · · · · · · · · · ·	9			20.
		10 11		0	0.
	Enter the amount of line 10 to be: Credited to 2010 estimated tax ► 820 . Refunded ► 1 trt VII-A Statements Regarding Activities	<u> </u>			<u> </u>
_	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in			Yes	No
Ia	any political campaign?		1a		X
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		1b		X
٠	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published of	าก	- 		
	distributed by the foundation in connection with the activities.	,		رائي	
c	Did the foundation file Form 1120-POL for this year?		10		X_
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
-	(1) On the foundation. ▶ \$ 0 . (2) On foundation managers. ▶ \$ 0 .		;		٠,
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		' -	-1 -	ļ. ,
	managers. ► \$ 0.		1,73	, ,	1 12
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
	If "Yes," attach a detailed description of the activities.		, , ,	*	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or				:
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3	<u> </u>	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		. 4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/	A 4b	<u> </u>	<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		. 5		X_
	If "Yes," attach the statement required by General Instruction T.				[
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		1	1	ł
	By language in the governing instrument, or				l
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state la	.W			
	remain in the governing instrument?		6	.	X
7	Did the foundation have at least \$5,000 in assets at any time during the year?		7	X	 -
_	If "Yes," complete Part II, col (c), and Part XV.				1
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			1	1
	of each state as required by General Instruction G? If "No," attach explanation		8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calend	ar			
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV		9		X
10	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses .		10	<u></u>	X
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had not been removed from jeopardy before the first day of the tax year beginning in 2009?

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orm 990-PF (2009) FIRST SAVINGS COMMUNITY			<u>23-29846</u>	<u>63</u>	Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:			1	ļ	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Ye	s X No		
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire	ectly,		- }	
any voter registration drive?		Ye	s X No	- 1	1
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section		Ì	ŀ	
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s X No	-	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	for	Ì	ľ		
the prevention of cruelty to children or animals?	• •				
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unc	der the exceptions described	n Regulations			1
section 53.4945 or in a current notice regarding disaster assistance (see instru		•	N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	•				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ined	_	1	
expenditure responsibility for the grant?		. —	s 🗀 No	ŧ	
If "Yes," attach the statement required by Regulations section 53.4945					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to			ŀ	ĺ	
a personal benefit contract?	pe) p		s X No	ŀ	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b	ĺχ
If "Yes" to 6b, file Form 8870.	oroonar oonom oona zot:		· -		
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	□ v _e	s X No	Į	İ
b If yes, did the foundation receive any proceeds or have any net income attribute			N/A	7b	
Information About Officers Division Trust		nagers. Highly			
Part VIII Paid Employees, and Contractors	,				
1 List all officers, directors, trustees, foundation managers and their	compensation.				
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans	(e)	Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	1 4000	ount, other owances
				 	
]		1	
SEE STATEMENT 7		0.	0.	1	0.
72 3 7 111 11111 1			<u>_</u>	1	
				ļ	
				 	
				ì	
				1	
		<u> </u>		 	
				1	
				1	
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."		ــــــــــــــــــــــــــــــــــــــ	
		1	(d) Contributions to employee benefit plans and deterred	(e)	Expense ount, other
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	and deferred compensation	acco	ount, other owances
NONE	4070104 10 p00111011	 	oomponedam.	 	
NOND				1	
		 		+	
				 	
		 		 	
				1	
		 	 	+	
	1	1			
- 1				Ь	
Total number of other employees paid over \$50,000	· · · · · · · · · · · · · · · · · · ·		<u> </u>	000 5	PF (2009)
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Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndation	s, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a		1a	1,704,007.
b		16	564,929.
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	10	2,268,936.
е			
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	2,268,936.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	34,034.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,234,902.
6_	Minimum investment return. Enter 5% of line 5	6	111,745.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	id certai	n
1	Minimum investment return from Part X, line 6	1	111,745.
28	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	20	280.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	111,465.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	111,465.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	111,465.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	<u>171,050.</u>
þ	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
8	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	171,050.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	280.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	170,770.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (4940(e) reduction of tax in those years.	qualifies	for the section

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,				
line 7				111,465.
2 Undistributed income, if any, as of the end of 2009			_	
a Enter amount for 2008 only			0.	
b Total for prior years:		2		
		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004 5, 249.	,			
b From 2005 10, 284.				
c From 2006 13,961.				
d From 2007 22,485.	,	. ,		
e From 2008 31,036.	02 015		a.	
f Total of lines 3a through e 4 Qualifying distributions for 2009 from	83,015.			
Part XII, line 4: > \$ 171,050.	•	' 		
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	···			
(Election required - see instructions)	0.		i	
d Applied to 2009 distributable amount				111,465.
e Remaining amount distributed out of corpus	59,585.			111/403.
5 Excess distributions carryover applied to 2009	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:		,		, ,
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	142,600.	g .		
b Prior years' undistributed income. Subtract				
line 4b from line 2b	- ,	0.		,
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line	,			
4a from line 2a. Taxable amount - see instr.		· .	0.	
f Undistributed income for 2009. Subtract	İ	*		
lines 4d and 5 from line 1. This amount must				1
be distributed in 2010				0.
7 Amounts treated as distributions out of				}
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.	 _		
8 Excess distributions carryover from 2004	E 240			
not applied on line 5 or line 7	5,249.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	137,351.			
10 Analysis of line 9:			 	
a Excess from 2005 10,284.				
b Excess from 2006 13,961.				1
c Excess from 2007 22, 485.				
d Excess from 2008 31,036.		ii		1
e Excess from 2009 59,585.				
				Form 900-PF (2000)

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Part XIV Private Operating F	_ 		I-A, question 9)	N/A	
1 a If the foundation has received a ruling of		-			
foundation, and the ruling is effective fo	•	_	▶ L		
b Check box to indicate whether the foun		ng foundation described		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(5) 0000	Prior 3 years	(4) 0000	- (-) T -4-1
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for					
each year listed			ļ	 	
b 85% of line 2a				 	
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c			<u></u>		
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter;					
(1) Value of all assets				<u> </u>	ļ <u></u>
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income			ļ		
Part XV Supplementary Info			if the foundation	n had \$5,000 or m	ore in assets
at any time during t	the year-see the	instructions.)			
1 Information Regarding Foundation	-				
a List any managers of the foundation wh			tributions received by the	e foundation before the clo	ose of any tax
year (but only if they have contributed r	nore man \$5,000). (See S	ection 507 (u)(2).)			
NONE					
 b List any managers of the foundation who other entity) of which the foundation ha 			(or an equally large port	ion of the ownership of a p	partnership or
NONE	s a rozo or grouter micro	, 			
	ion Grant Gift Loan	Scholarchin etc. P	rograme:		
2 Information Regarding Contribut Check here ► if the foundation of		• • • •	-	not accept uncolicited rea	upete for funde. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	`				
FREDERICK E SCHEA, C				E. 215-257-5	5035
219 S NINTH ST, PO E				_, 20 20, 0	
b The form in which applications should t					
REQUEST VIA LETTER I		-		ES.	
c Any submission deadlines:					
NONE					
d Any restrictions or limitations on award	s, such as by geographic	al areas, charitable fields	, kinds of institutions, or	other factors:	
501(C)(3) ORGANIZATI					Ŧ
COUNTIES, PA					
923601 02-02-10					Form 990-PF (2009)

3 Grants and Contributions Paid During the		Payment		
Recipient	If recipient is an individual.		T	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor			
a rate canny the year				
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	}	}	1	
SEE STATEMENT 8		ĺ		
Total			▶_ 3a	170,050
b Approved for future payment				170,030
- Appleaded to telescopely main				
		1		
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NONE				
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Total	_ 		<u></u> 3b_	0.
923011 02-02-10	<u></u>	· · · · · · · · · · · · · · · · · · ·	F	orm 990-PF (2009)

nter gross amounts unless otherwise indicated.	Unrelated b	Unrelated business income		by section 512, 513, or 514	(e)
·	(a) Business	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a				***************************************	
b					
С		- 			
d					
e					
1					
g Fees and contracts from government agencies					_
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments .					
4 Dividends and interest from securities			14	50,813.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other	-"				
than inventory			18	-782,294.	
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue:			1 1		
8					
b	_				
c	_				
d	_				
e	_				
2 Subtotal. Add columns (b), (d), and (e)			0.	-731,481.	(
3 Total. Add line 12, columns (b), (d), and (e)				13	<u>-731,481</u>
See worksheet in line 13 instructions to verify calculations.	.)				
Part XVI-B Relationship of Activities	s to the Accom	plishment of	Exempt P	urposes	
Line No. Explain below how each activity for which in		olumn (e) of Part X\ for such purposes)		d importantly to the accomp	olishment of

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
	the foundation's exempt purposes (other than by providing lands for such purposes).
\longrightarrow	
	
$\overline{}$	
923621 02-02-10	Form 990-PF (2009)

Pa	art XV	II Information Re Exempt Organ	egarding Transfers To a lizations	and Transactions	and Relatio	nships With Nonchai	itable		<u>0 10</u>
1	Did the	e organization directly or indi	rectly engage in any of the followin	g with any other organizat	tion described in	section 501(c) of	Y	es	No
	the Co	de (other than section 501(c)(3) organizations) or in section 52	27, relating to political orga	anizations?			\neg	
a	a Transfers from the reporting foundation to a noncharitable exempt organization of:							- }	
	(1) Ca	ash					1a(1)	Ì	<u>X</u> _
	(2) Ot	her assets					1a(2)	\neg	$\overline{\mathbf{x}}$
b	Other t	ransactions;							
	(1) Sa	ales of assets to a noncharita	ble exempt organization				16(1)	Į	X
			ncharitable exempt organization				1b(2)	\top	X
	(3) Re	ental of facilities, equipment,	or other assets			·	1b(3)		X
	(4) Re	eimbursement arrangements			·		1b(4)		X
		oans or loan guarantees					1b(5)	7	X
	(6) Pe	erformance of services or me	embership or fundraising solicitatio	ons			1b(6)		X
C	Sharin	g of facilities, equipment, ma	uling lists, other assets, or paid em	ployees			1c		$\overline{\mathbf{x}}$
đ			"Yes," complete the following sche		always show the f	air market value of the goods, o	ther assets	,	
		•	oundation. If the foundation receive			= :		-	
	colum	n (d) the value of the goods,	other assets, or services received.						
(a) L	ine no	(b) Amount involved	(c) Name of noncharitable	exempt organization	(d) Descri	ption of transfers, transactions, and s	haring arrang	emen	ts
-			N/A						
-									
		·							
									
						-, -, -, -, -, -, -, -, -, -, -, -, -, -			
							-		
		<u></u>							
				_		_ 		-	
2a	Is the f	oundation directly or indirec	tly affiliated with, or related to, one	or more tax-exempt organ	nizations describe	ed			
	ın sect	ion 501(c) of the Code (other	r than section 501(c)(3)) or in sect	tion 527?	_	. [☐ Yes	X	No
Ь		complete the following sch							
		(a) Name of org		(b) Type of organization		(c) Description of relations	ιφ		
		N/A							
							_		
\neg			nave examined this return, including acco				rue, correct,		
- 1	and comp	plete Declaration of preparer (other	er than taxpayer or fiduciary) is based on	- 1 i		6			
	\mathbf{V}	- Xunk	> //	1 9/28/10	PRES	IDENT			
E	Sig	nature of officer or trustee		Date	Title				
Sign Here		Preparer's			Date /a/	Check if Prepare	r's identifying	numb	oer
Sig.	Paid Preparer's Use Only	signature STEVE	N J. MASTERSON		8/19/10	employed >			
<u> </u>	Paid Spare Se On	Firm's name (or yours PARE	NTEBEARD LLC	<u> </u>	,	EIN ▶			
l'	L Se E		MARKET ST, 6TH		625				
┙		address, and ZIP code HARR	ISBURG, PA 1710	8-0625		Phone no. (717)			
						Fo	rm 990-F	PF (2	(009

FORM 990-PF DIVIDEND	S AND INTER	REST FROM SECU	RITIES	STATEMENT	1
SOURCE	GROSS		ITAL GAINS IVIDENDS	COLUMN (A) AMOUNT	
INTEREST AND DIVIDENDS		50,813.	0.	50,81	.3.
TOTAL TO FM 990-PF, PART I, L	N 4	50,813.	0.	50,81	.3.
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM		
AUDIT FEES	2,000.	1,000.		1,00	0.
TO FORM 990-PF, PG 1, LN 16B	2,000.	1,000.		1,00	0.
FORM 990-PF O	THER PROFES	SSIONAL FEES		STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM		
FEES FOR SERVICING	21,815.	21,815.			0.
TO FORM 990-PF, PG 1, LN 16C =	21,815.	21,815.			0.
FORM 990-PF	TAX	KES		STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM		
			. ————		
EXCISE TAX	1,200.	0.			0.

FORM 990-PF	OTHER E	XPENSES		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OTHER EXPENSES	2,438.	0.		0.
TO FORM 990-PF, PG 1, LN 23	2,438.	0.		0.
FORM 990-PF	OTHER INV	ESTMENTS		STATEMENT 6
	VA	LUATION	OK VALUE	STATEMENT 6 FAIR MARKET VALUE
FORM 990-PF DESCRIPTION BONDS MUTUAL FUNDS	VA M	LUATION ETHOD BO	OK VALUE 642,631. 1,176,490.	FAIR MARKET

FORM 990-PF

STATEMENT

	ND FOUNDATION MANAG			
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE
WALTER H CRESSMAN 219 S NINTH ST, PO BOX 176 PERKASIE, PA 18944-0176	DIRECTOR 2.00	0.	0.	0.
ROBERT L BYERS JR 219 S NINTH ST, PO BOX 176 PERKASIE, PA 18944-0176	DIRECTOR 2.00	0.	0.	0.
E RICHARD AICHELE III 219 S NINTH ST, PO BOX 176 PERKASIE, PA 18944-0176	DIRECTOR 2.00	0.	0.	0.
FREDERICK E SCHEA 219 S NINTH ST, PO BOX 176 PERKASIE, PA 18944-0176	PRESIDENT/CEO 2.00	0.	0.	0.
VERNON C WEHRUNG 219 S NINTH ST, PO BOX 176 PERKASIE, PA 18944-0176	DIRECTOR 2.00	0.	0.	0.
JEFFREY A NAUGLE 219 S NINTH ST, PO BOX 176 PERKASIE, PA 18944-0176	DIRECTOR 2.00	0.	0.	0.
TODD HURLEY 219 S NINTH ST, PO BOX 176 PERKASIE, PA 18944-0176	SECRETARY/COO 2.00	0.	0.	0.
JERRY ARRISON 219 S NINTH ST, PO BOX 176 PERKASIE, PA 18944-0176	CFO 2.00	0.	0.	0.
KIMBERLY WEICHEL 219 S NINTH ST, PO BOX 176 PERKASIE, PA 18944-0176	ASST SECRETARY 2.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	6, PART VIII	0.	0.	0.

PART VIII - LIST OF OFFICERS, DIRECTORS

	AND CONTRIBUTIONS DURING THE YEAR	STATI	EMENT 8
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
A WOMAN'S PLACE DOYLESTOWN, PA	NONE SPECIAL PROGRAM	501(C)(3)	2,500.
BARC HOLICONG, PA	NONE SPECIAL PROGRAM	501(C)(3)	500.
BUCKS BEAUTIFUL DOYLESTOWN, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	200.
BUCKS COUNTY COMMUNITY COLLEGE NEWTOWN, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	10,500.
BUCKS COUNTY COUNCIL, BSA DOYLESTOWN, PA	NONE SPECIAL PROGRAM	501(C)(3)	1,500.
BUCKS COUNTY HISTORICAL SOCIETY DOYLESTOWN, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	250.
BUCKS COUNTY OPPORTUNITY COUNCIL DOYLESTOWN, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	100.
CENTRAL BUCKS FAMILY YMCA DOYLESTOWN, PA	NONE CAPITAL CAMPAIGN	501(C)(3)	16,000.

FIRST SAVINGS COMMUNITY FOUNDA	TION		23-2984663
CHAL-BRIT EMS CHALFONT, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	500.
CHALFONT FIRE & EMS JOINT CHALFONT, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	5,000.
CHALFONT FIRE COMPANY CHALFONT, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	2,500.
DOYLESTOWN HOSPITAL DOYLESTOWN, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	10,000.
DUBLIN FIRE COMPANY DUBLIN, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	2,500.
EASTERN UPPER BUCKS SENIOR CENTER OTTSVILLE, PA	NONE SPECIAL PROGRAM	501(C)(3)	500.
FOUNDATION FOR FREE ENTERPRISE ERIE, PA	NONE SPECIAL PROGRAM	501(C)(3)	1,050.
FRIENDS OF OPEN LINE PENNSBURG, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	250.
FRIENDS OF THE DELAWARE CANAL NEW HOPE, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	250.
GRAND VIEW HOSPITAL AUXILIARY SELLERSVILLE, PA	NONE SPECIAL PROGRAM	501(C)(3)	250.

FIRST SAVINGS COMMUNITY FOUNDAT	ION		23-2984663
GRANDVIEW HOSPITAL SELLERSVILLE, PA	NONE CAPITAL CAMPAIGN	501(C)(3)	5,000.
HABITAT FOR HUMANITY NEW BRITAIN, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	10,000.
INDIAN VALLEY HOUSING CORPORATION SOUDERTON, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	3,000.
IVY HILL THERAPEUTIC EQUESTRAIN CENTER CHALFONT, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	250.
JAMES A MICHENER ART MUSEUM DOYLESTOWN, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	5,500.
JUST COMMUNITY INC QUAKERTOWN, PA	NONE SPECIAL PROGRAM	501(C)(3)	500.
KIDS VOTING SOUTHEAST PA DOYLESTOWN, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	1,000.
LUTHERAN HOME AT TELFORD TELFORD, PA	NONE SPECIAL PROGRAM	501(C)(3)	1,000.
MEDIC 151 - GRANDVIEW HOSPITAL SELLERSVILLE, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	500.
MILFORD TOWNSHIP FIRE DEPARTMENT MILFORD SQUARE, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	7,500.

FIRST SAVINGS COMMUNITY FOUNDAT	ION		23-2984663
NATIONAL MS SOCIETY PHILADELPHIA, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	250.
OTTSVILLE FIRE COMPANY OTTSVILLE, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	1,500.
PACB FOUNDATION HARRISBURG, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	1,000.
PALISADES COMM FOUND (JOLLY ROGER) OTTSVILLE, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	1,000.
PEARL S. BUCK INTERNATIONAL, INC. PERKASIE, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	5,500.
PENN FOUNDATION SELLERSVILLE, PA	NONE SPECIAL PROGRAM	501(C)(3)	15,000.
PENNRIDGE COMMUNITY DAY PERKASIE, PA	NONE SPECIAL PROGRAM	501(C)(3)	5,000.
PENNRIDGE COMMUNITY SENIOR CENTER PERKASIE, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	2,500.
PENNRIDGE FISH PERKASIE, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	1,000.
PERKASIE FIRE COMPANY PERKASIE, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	3,000.

FIRST SAVINGS COMMUNITY FOUNDAT	PION		23-2984663
PERKASIE HISTORICAL SOCIETY PERKASIE, PA	ANNUAL OPERATING FUNDS	501(C)(3)	250.
PLUMSTEADVILLE FIRE COMPANY PLUMSTEADVILLE, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	2,500.
POINT PLEASANT- PLUMSTEADVILLE EMS PLUMSTEADVILLE, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	500.
QUAKERTOWN BAND QUAKERTOWN, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	250.
QUAKERTOWN CHRISTIAN SCHOOL QUAKERTOWN, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	500.
QUAKERTOWN FIRE DEPARTMENT QUAKERTOWN, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	2,500.
RICHLAND HISTORICAL SOCIETY QUAKERTOWN, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	300.
RICHLAND TOWNSHIP QUAKERTOWN, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	250.
RICHLANDTOWN FIRE COMPANY NO. 1 RICHLANDTOWN, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	2,500.
RIEGELSVILLE FIRE COMPANY RIEGELSVILLE, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	2,500.

FIRST SAVINGS COMMUNITY FOUND	ATION	, •	23-2984663
RIEGELSVILLE LIBRARY RIEGELSVILLE, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	100.
RIVERSIDE SYMPHONIA NEW HOPE, PA	NONE SPECIAL PROGRAM	501(C)(3)	500.
SALVATION ARMY PHILADELPHIA, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	100.
SAMUEL PIERCE BRANCH LIBRARY PERKASIE, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	600.
SELLERSVILLE FIRE DEPARTMENT SELLERSVILLE, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	1,500.
SPECIAL OLYMPICS NORRISTOWN, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	250.
ST LUKES EMS QUAKERTOWN, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	250.
ST LUKES HOSPITAL QUAKERTOWN, PA	NONE CAPITAL CAMPAIGN	501(C)(3)	2,000.
TELFORD DIVING UNIT HARLEYSVILLE, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	100.
UNITED FRIENDS SCHOOL QUAKERTOWN, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	500.

FIRST SAVINGS COMMUNITY FOUND	ATION	**	23-2984663
UPPER BUCKS REGIONAL EMS REVERE, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	5,500.
UPPER BUCKS SENIOR CENTER QUAKERTOWN, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	2,000.
UPPER BUCKS YMCA QUAKERTOWN, PA	NONE CAPITAL CAMPAIGN	501(C)(3)	4,000.
VOLUNTEER DOCTORS CARE QUAKERTOWN, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	1,000.
AMERICAN LEGION POST 280 PERKASIE, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	250.
CHILD, HOME AND COMMUNITY DOYLESTOWN, PA	NONE ANNUAL OPERATING FUNDS	501(C)(3)	500.
MERCER MUSEUM DOYLESTOWN, PA	NONE CAPITAL CAMPAIGN	501(C)(3)	10,000.
PENNRIDGE COMMUNITY EDUCATION FOUNDATION PERKASIE, PA	NONE SPECIAL PROGRAM	501(C)(3)	500.
RICHLAND LIBRARY COMPANY QUAKERTOWN, PA	NONE CAPITAL CAMPAIGN	501(C)(3)	1,000.
BIG BROTHERS BIG SISTERS PERKASIE, PA	NONE EMPLOYEE MATCH-BOWL FOR KIDS	501(C)(3)	1,000.

FIRST SAVINGS COMMUNITY FOUND	NOITAG		23-2984663
AMERICAN CANCER SOCIETY PERKASIE, PA	NONE EMPLOYEE MATCH-RELAY FOR LIFE	501(C)(3)	1,000.
ENTERTAINMENT INDUSTRY FOUNDATION PERKASIE, PA	NONE EMPLOYEE MATCH-LEE NATIONAL DENIM DAYS	501(C)(3)	1,000.
TOTAL TO FORM 990-PF, PART XV,	LINE 3A		170,050.

Form 8868 (Rev. 4-2009)					Page 2
• If you are filing for an Additional (Not Aut	omatic) 3-Month Extension, complete only Part II and chec	ck this box			$\triangleright \overline{\mathbf{x}}$
· · · · · · · · · · · · · · · · · · ·	dy been granted an automatic 3-month extension on a previou		•	8	
• If you are filing for an Automatic 3-Month	Extension, complete only Part I (on page 1)	·			
	atic) 3-Month Extension of Time. Only file the ongi	nal (no cop	ies need	ied)	
Type or Name of Exempt Organization		1	mploye	r identificat	tion number
print FIRST SAVINGS COM	MUNITY FOUNDATION		23-	298466	3
extended due date for filing the Number, street, and room or suit due date for 219 SOUTH NINTH S	e no If a P.O. box, see instructions. IREET, PO BOX 176	F	or IRS u	use only	
return See City, town or post office, state, a PERKASIE, PA 189	nd ZIP code. For a foreign address, see instructions.				
Check type of return to be filed (File a sepa Form 990 Form 990-EZ Form 990-BL X Form 990-PF	rate application for each return): Form 990-T (sec. 401(a) or 408(a) trust) Form 990-T (trust other than above) Form 472		Form 5		Form 8870
STOP! Do not complete Part II if you were	not already granted an automatic 3-month extension on a	previously	filed Fo	orm 8868.	
 The books are in the care of ► PERK Telephone No. ► 215-257-503 If the organization does not have an office 	FAX No. ► or place of business in the United States, check this box inization's four digit Group Exemption Number (GEN) eck this box ► and attach a list with the names and Ellipsia or of time until NOVEMBER 15, 2010. year beginning , and each of the company and each or of the company and each or of the company and each of the company and	If this i	s for the embers t	whole grouphe extension	
8a If this application is for Form 990-BL, 99 nonrefundable credits. See instructions	0-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	-	3a \$		1,100.
	0-T, 4720, or 6069, enter any refundable credits and estimate ear overpayment allowed as a credit and any amount paid	<u> </u>	3b \$		1,100.
c Balance Due. Subtract line 8b from line	8a. Include your payment with this form, or, if required, depo	esit	3c \$		0.
	Signature and Verification				
Under penalties of perjury, I declare that I have exant is true, correct, and complete, and that I am autho	ined this form, including accompanying schedules and statements, a rized to prepare this form.	ind to the be	st of my l		
Signature Dekkit Bard	Title ► CPA	1	Date 🚩	8/11/1	10
			-	Form poed	2 (Bay, 4-2000)

INTERNAL REVENUE SERVICE
W&I - FIELD ASSISTANCE
HARRISHURG DA 17108

AUG 1 1 2010

RECEIVED 17407

