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SCANNED MAR 0 7 2011

Form **990-PF**

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

OMB No 1545-0052

		of the Treasury enue Service Note. The		eu as a Filvate i				2000
		ar year 2009, or tax year beginning	06/19/09	e to use a copy of this reti	31/09	ate reporting	requirements	L
		all that apply X Initial return Amended return	Initial re	etum of a former public dress change	charity	e change	Final return	
Oth See Instr H C	<u>Section</u> air mark	Name of foundation Penn Treaty Spectors. Number and street (or P O box num 919 North Front City or town, state, and ZIP code Philadelphia Type of organization X Section 50° (4947(a)(1) nonexempt chantable trucket value of all assets at end From Part II, col (c),	ber if mail is not delivered. Street, Ur PA I(c)(3) exempt private st Other taxab Accounting method Other (specify) Int I, column (d) must capenses (The not necessarily equal	ed to street address) nit D 19123 e foundation ble private foundation X Cash Ac	Room/suite crual (b) Net in	A Emp 27 B Telep 26 C If exe D 1. Fo 88 E If priv section F If the unde	loyer identification nur -0368388 chone number (see page 7-251-2704 emption application is penoreign organizations, check reign organizations meet 5% test, check here and a rate foundation status was con 507(b)(1)(A), check he foundation is in a 60-mor r section 507(b)(1)(B), check (c) Adjusted net income	ding, check here khere khere sing the ttach computation sterminated under receith termination eck here (d) Disbursements for chantable purposes
Revenue	4 5a b 6a b 7 8 9 10a b	Contributions, gifts, grants, etc., received (Check if the foundation is not re Interest on savings and temporary control Dividends and interest from securities Gross rents Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IN Net short-term capital gain Income modifications Gross sales less returns & allowances Less Cost of goods sold Gross profit or (loss) (attach schedule)	attach schedule) quired to attach Sch B ash investments es	188,250		614	0	(cash basis only)
Operating and Administrative Expenses	12 13 14 15 16a b c 17 18 19 20 21 22 23 24	Total. Add lines 1 through 11 Compensation of officers, directors, Other employee salaries and wages Pension plans, employee benefits Legal fees (attach schedule) Accounting fees (attach schedule) Other professional fees (attach schedule) Interest Taxes (attach schedule) (see page 14 of the instruict Depreciation (attach schedule) and deplete Occupancy Travel, conferences, and meetings Printing and publications Other expenses (att. sch.) Stmt 1 Total operating and administrative Add lines 13 through 23 Contributions, gifts, grants paid Total expenses and disbursements. A	ctions) on e expenses.	188,864 74		0 0	RECE FEB 2 2 OGDE!	2011 Q
	a b	Subtract line 26 from line 12 Excess of revenue over expenses and Net investment income (if negative Adjusted net income (if negative, e	, enter -0-)	188,790		614	614	

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions.

Form 990-PF (2009)

1 Cash—non-interest-bearing 2 Savings and tempolary cash investments 3 Accounts receivable ▶ Less allowance for doubtful accounts ▶ 4 Pridges receivable ▶ Less allowance for doubtful accounts ▶ 5 Grants receivable 6 Receivables due from officers, directions, fusities, and other disqualified persons (lation schedule) (see page 16 of the instructions) 7 Other first and stars sectionals ₱		Part I	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
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of the instructions) Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on pnor year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 6 188,790	긥		and complete lines 27 through 31.			
of the instructions) Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on pnor year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 6 188,790	히	27	Capital stock, trust principal, or current funds			
of the instructions) Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on pnor year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 6 188,790	ß	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
of the instructions) Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on pnor year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 6 188,790	Se	29	Retained earnings, accumulated income, endowment, or other funds			
of the instructions) Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on pnor year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 6 188,790	AS	30	Total net assets or fund balances (see page 17 of the			
of the instructions) Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on pnor year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 6 188,790	당		instructions)	0	188,790	
Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on pnor year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 6 188,790	Z	31	Total liabilities and net assets/fund balances (see page 17			
1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on pnor year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 6 188,790			of the instructions)	0	188,790	
end-of-year figure reported on pnor year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30		Part I	Analysis of Changes in Net Assets or Fund Balances			
2 188,790 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 2 188,790 5 188,790	1	Total	net assets or fund balances at beginning of year—Part II, column (a), line 30 (mus	t agree with	1	
3 Other increases not included in line 2 (itemize) ▶ 3 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 6 188,790		end-c	of-year figure reported on pnor year's return)		1	
4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► 6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 4 188,790 5 188,790	2	Enter	amount from Part I, line 27a		2	188,790
5 Decreases not included in line 2 (itemize) ► 6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 6 188,790	3	Other	increases not included in line 2 (itemize) ▶		3	
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 6 188,790	4					
	5	Decre	eases not included in line 2 (itemize)		 	
	_6	Total	net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	188,790

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the

7

7 Add lines 5 and 6

8 Enter qualifying distributions from Part XII, line 4

Part VI instructions on page 18

orm	990-PF(2009) Penn Treaty Special Services 27-0368388		Pa	ige 4
Pa	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instruction	s)		······
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			12
	here ▶ and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of			
	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0
3	Add lines 1 and 2			12
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0 12
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			12
6	Credits/Payments			
a	2009 estimated tax payments and 2008 overpayment credited to 2009 6a			
b	Exempt foreign organizations—tax withheld at source 6b			
С	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld 6d 6d			
7	Total credits and payments Add lines 6a through 6d			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			12
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ Refunded ▶ 11			
Pa	rt VII-A Statements Regarding Activities		, -	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	<u> </u>	Yes	No
	participate or intervene in any political campaign?	1a	ļ	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			
	of the instructions for definition)?	1b	ļ	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			ŀ
C	Did the foundation file Form 1120-POL for this year?	1 <u>c</u>	 	
ď	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers \$ Has the foundation engaged in any activities that have not previously been reported to the IRS? N/I	, ,	1	ŧ
2	That the foundation engages in any destribes that the provinces, seems provinces.	2	+	
	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	1,		x
_	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	4a	+	x
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year? If "Yes" has it filed a tay return on Form 990-T for this year?			
b	If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	· · · · ·	X
5	If "Yes," attach the statement required by General Instruction T.	Ť	1	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
0	By language in the governing instrument, or			Ī
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			I
	conflict with the state law remain in the governing instrument?	4 6		I _
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			
	instructions) ▶ PA			I
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			1
-	(or designate) 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			Ī
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page			
	27)? If "Yes," complete Part XIV	9	X	<u> </u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses (Refer to Seh B)	10		<u>L</u>
		Form 9	90-PF	(2009)

orm	990-PF (2009) Penn Treaty Special Services 27-0368	388			Pa	<u>ige 5</u>
	rt VII-A Statements Regarding Activities (continued)					
1	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the				1	
	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)			11		<u>X</u>
2	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before				İ	
	August 17, 2008?		•	12		<u>X</u>
3	Did the foundation comply with the public inspection requirements for its annual returns and exemption app	lication?		13	X	
	Website address ▶ penntreatyssd.com		0.68.0	<u> </u>	704.	-
4		elephone no	267-2	37-	/91.	T
	1306 B N. 3rd Street		40400			
	Located at ▶ Philadelphia, PA	ZIP+4 ▶	19122			
5	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here	. 1	1		ı	\
	and enter the amount of tax-exempt interest received or accrued during the year	<u> </u>	15			
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Requir	rea			V [
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.				Yes	No
1a	During the year did the foundation (either directly)	□ v	X No		1	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No		I	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	□ vaa	X No			
	disqualified person?	Yes Yes	X No		Ī	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?(5) Transfer any income or assets to a disqualified person (or make any of either available for		21 110		1	
	the benefit or use of a disqualified person)?	Yes	X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		E5		1	
	foundation agreed to make a grant to or to employ the official for a period after					
	termination of government service, if terminating within 90 days)	Yes	X No		- 1	
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regu		ب			
_	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?		N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here		▶ 🗌			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		_		1	
	were not corrected before the first day of the tax year beginning in 2009?		N/A	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private				1	
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))					
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and	_			1	
	6e, Part XIII) for tax year(s) beginning before 2009?	Yes	X No			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20					
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2					
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)	to	37/3			
	all years listed, answer "No" and attach statement—see page 20 of the instructions)		N/A	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here					
	▶ 20 , 20 , 20 , 20					
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	□ v	X No			
	at any time during the year?	Yes	X No			
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or	_				
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the					
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse	, 01				
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		N/A	3b		Ī
4-	foundation had excess business holdings in 2009) Put the foundation invest during the year any amount in a manner that would report up at the charitable number.	nses?	11/11	4a		х
4a h	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purportion bid the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize					-
b	chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning		N/A	4b		Ì
	chantable purpose that had not been removed from Jeopardy before the mot day of the tax year beginning	2000			0-PF	(2009)

Form 990-PF (2009)

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Pŧ	rt VII-B Statements Regarding Activities for Which Form 4	720 May Be R	equired (cont	inued)		· - -	
5a	During the year did the foundation pay or incur any amount to		_	E		Į	
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 49	45(e))?	\ <u> </u>	res X No		I	
	(2) Influence the outcome of any specific public election (see section 4955), or to	carry on,		_		I	
	directly or indirectly, any voter registration drive?		ע וו	∕es X No		Ī	
	(3) Provide a grant to an individual for travel, study, or other similar purposes?		_\	res 🏻 No		I	
	(4) Provide a grant to an organization other than a charitable, etc., organization de	escribed in	_			ŧ	
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instru-	ctions)	_\ \	res X No		Ī	
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or e	ducational		_		Ī	
	purposes, or for the prevention of cruelty to children or animals?		\	res 🗓 No		1	
b	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under	he exceptions des	cribed in			ı	
	Regulations section 53 4945 or in a current notice regarding disaster assistance (s	ee page 22 of the	instructions)?	_N/A	5b		
	Organizations relying on a current notice regarding disaster assistance check here			▶ 🗌		į	
С	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from					ı	
	because it maintained expenditure responsibility for the grant?		N/A 🗌	Yes 🗌 No		1	
	If "Yes," attach the statement required by Regulations section 53 4945-5(d)					1	
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay	premiums				I	
	on a personal benefit contract?			Yes 🔀 No		1	
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a person	onal benefit contra	ct?		6b		X
	If "Yes" to 6b, file Form 8870]	:
7a	At any time during the tax year, was the foundation a party to a prohibited tax shell	er transaction?	·	Yes X No			
b	If yes, did the foundation receive any proceeds or have any net income attributable	to the transaction	12	N/A	7b		
	Information About Officers, Directors, Trustees, Fo			Paid Employ	ees,		
	and Contractors						
1 1	ist all officers, directors, trustees, foundation managers and their compensat	ion (see page 22	of the instruction	ns).			
		(b) Title, and average	(c) Compensation	(d) Contributions to	(2) 5		
	(a) Name and address	hours per week	(If not paid, enter	employee benefit plans and deferred		ense ad allowar	
		devoted to position	-0-)	compensation			
S€	e Statement 2			1			
					ļ		
					<u> </u>		
					 		
				İ			
				ļ <u>.</u>	<u> </u>		
2	Compensation of five highest-paid employees (other than those included on	line 1—see page	23 of the instruc	tions).			
	If none, enter "NONE."						
		(b) Title, and average		(d) Contributions to employee benefit	(e) Ex	pense a	ccount.
	(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred		r allowa	
				compensation	┼—		
NO	NE)		Í				
				 	 		
				 	├		
					 		
					 	_	
Tota	I number of other employees paid over \$50,000				•		

Form 990-PF (2009) Penn Treaty Special Services	27-0368388	Page 7
Part VIII	Information About Officers, Directors, Trustees, Foundand Contractors (continued)	ndation Managers, Highly Paid Emp	loyees,
3 Five high	hest-paid independent contractors for professional services (see pag	e 23 of the instructions). If none, enter "NON	E."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
(NONE)			•
	······································		
	· · ·		
Total number of	of others receiving over \$50,000 for professional services	<u></u>	
Part IX-A	Summary of Direct Charitable Activities		
	tion's four largest direct charitable activities during the tax year. Include relevant stati and other beneficiaries served, conferences convened, research papers produced, et		Expenses
1 See	Statement (3)		
2			
3			
4			
Part IX-B	Summary of Program-Related Investments (see pa	ige 24 of the instructions)	
	vo largest program-related investments made by the foundation during the tax year o		Amount
1 N/A			
2			
All other progra	am-related investments. See page 24 of the instructions		
3			
			
Total. Add line	s 1 through 3	>	

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0

0

3b

4

5

6

Cash distribution test (attach the required schedule)

Enter 1% of Part I, line 27b (see page 26 of the instructions)

Adjusted qualifying distributions. Subtract line 5 from line 4

qualifies for the section 4940(e) reduction of tax in those years

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income

Page 9

	violstributed income (see page 26 o	the instructions)		,	, <u>.</u>
1	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
_	line 7				
2	Undistributed income, if any, as of the end of 2009		‡		1
а	Enter amount for 2008 only				
b	Total for prior years 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2009				
а	From 2004		‡		<u> </u>
b	From 2005	-			Ī
_	From 2006		‡		{
C		-	{		1
d	From 2007	-}			1
е	From 2008	_	ŧ		ł
f	Total of lines 3a through e		<u> </u>		
4	Qualifying distributions for 2009 from Part XII,				•
	line 4 ▶ \$		<u> </u>		
а	Applied to 2008, but not more than line 2a		1		[
	Applied to undistributed income of prior years				
	(Election required—see page 26 of the instructions)				‡
С	Treated as distributions out of corpus (Election		, , , , , , , , , , , , , , , , , , , 	***************************************	, r
	required—see page 26 of the instructions)				‡
d	Applied to 2009 distributable amount			***************************************	
					
e	Remaining amount distributed out of corpus	ļ	[<u></u>
5	Excess distributions carryover applied to 2009				E
	(If an amount appears in column (d), the same				ŧ
	amount must be shown in column (a))				1 5
6	Enter the net total of each column as				
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
þ	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	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				
ч	Subtract line 6c from line 6b Taxable	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		***************************************	· ····································
u					
_	amount—see page 27 of the instructions				
е	Undistributed income for 2008 Subtract line				
	4a from line 2a Taxable amount—see page				
_	27 of the instructions				
f	Undistributed income for 2009. Subtract lines		`		
	4d and 5 from line 1 This amount must be]			
	distributed in 2010		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section	ľ			
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
	instructions)	1			
8	Excess distributions carryover from 2004 not				
	applied on line 5 or line 7 (see page 27 of the				
	instructions)				
9	Excess distributions carryover to 2010.				
-	Subtract lines 7 and 8 from line 6a				
10					
10	Analysis of line 9				
a	Excess from 2005				
b	Excess from 2006	.			
С	Excess from 2007			ĺ	
d	Excess from 2008				
e	Excess from 2009				

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Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to Foundation Recipient Purpose of grant or status of recipient Amount any foundation manager or substantial contributor contribution Name and address (home or business) Paid during the year ▶ 3a Approved for future payment N/A **▶** 3b Total

Part XV	<u>1-A Analysis of Income-Producing A</u>	ctivities				
Enter gross	amounts unless otherwise indicated	Unrelated	business income	Excluded	by section 512, 513, or 514	(e)
1 Program	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of the instructions)
•				+		
b		-		+		
c		- 	·	11		· · · · · · · · · · · · · · · · · · ·
		-			·· ·····	·
			··	1		
f						
g Fee	es and contracts from government agencies	-		 		
	rship dues and assessments					
	on savings and temporary cash investments			14	614	
	ds and interest from securities					
5 Net ren	tal income or (loss) from real estate					
a Deb	ot-financed property					
b Not	debt-financed property					
6 Net ren	tal income or (loss) from personal property					
7 Other in	nvestment income					
8 Gain or	(loss) from sales of assets other than inventory					
	ome or (loss) from special events					 -
	profit or (loss) from sales of inventory					
11 Other re	evenue a	_				
b				├		
				+		
						
e	I Add as least the state of the				614	0
	al Add columns (b), (d), and (e)	L		0	 	
	Add line 12, columns (b), (d), and (e) heet in line 13 instructions on page 28 to verify calcula	t \			13	014
Part XV			ant of Exampt F	Piirnose		
Line No.						
V	accomplishment of the foundation's exempt pur instructions)					of the
N/A						
				<u> </u>		
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Page **13**

Exempt Organizations					
1 Did the organization directly or indirectly engage in any of the following with any other organization d	escribed	Yes No			
in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating	to political				
organizations?	` [
a Transfers from the reporting foundation to a noncharitable exempt organization of					
(1) Cash	1a(1)	<u> X</u>			
(2) Other assets	1a(2)	<u> </u>			
b Other transactions		ļ.,			
(1) Sales of assets to a noncharitable exempt organization	1b(1)	X			
(2) Purchases of assets from a nonchantable exempt organization	1b(2)	X			
(3) Rental of facilities, equipment, or other assets	1b(3)	X			
(4) Reimbursement arrangements	1b(4)	$\frac{\Lambda}{X}$			
(5) Loans or loan guarantees	1b(5) 1b(6)	X			
(6) Performance of services or membership or fundraising solicitations					
 Sharing of facilities, equipment, mailing lists, other assets, or paid employees If the answer to any of the above is "Yes," complete the following schedule Column (b) should alway 	1c	Х			
value of the goods, other assets, or services given by the reporting foundation. If the foundation rece					
value in any transaction or sharing arrangement, show in column (d) the value of the goods, other a					
	on of transfers, transactions, and sharing arrange	ments			
I/A					
					
					
2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organization	one				
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?		s X No			
b If "Yes," complete the following schedule		.0 [2] .10			
(a) Name of organization (b) Type of organization	(c) Description of relationship				
N/A					
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and state	ments, and to the best of my knowledge and				
belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all info	. 64				
John M. Htoose 1-18-11	-heasusers	 			
Signature of officer or trustee Date	Title				
	/ Check if Preparer's identification number (see Signature)				
Preparer's signature William (1/27)	self-employed page 30 of the in:				
	186-52	- /525			
Firm's name (or yours if DGK/Group, P.C.	FN 22 207	2024			
	EIN ► 23-297 Phone no 215-68				
and ZIP code Warminster, PA 18974		0-PF (2009			

Schedule B (Form 990, 990-EZ,

Schedule of Contributors

OMB No 1545-0047

or 990-PF) ► Attach to Form 990, 990-EZ, or 990-PF. Department of the Treasury Internal Revenue Service Name of the organization

527 political organization

Employer identification number

Penn Treaty S District	Special Se	rvices 27-0368388	
Organization type (check or	ne)		
Filers of:	Section:		
Form 990 or 990-EZ	501(c)() (enter number) organization	

4947(a)(1) nonexempt charitable trust not treated as a private foundation

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

X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II

Special Rules

Li	sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution 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 a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, chantable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III
	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.

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

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Page 1 of 1 of Part I

Name of organization Penn Treaty Special Services Employer identification number 27–0368388

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	HSP Gaming, L.P. dba "The Sugarhouse Casino" 1001 N. Delaware Avenue Philadelphia PA 19125	\$ 188,250	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	-	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Penn Treaty Special Services 27-0368388 Form 4562 (2009) Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.) Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles) Yes Do you have evidence to support the business/investment use claimed? No 24b If "Yes," is the evidence written? (c) Business/ (i) **(f)** (g) (b) (d) (e) Elected section Method/ Depreciation Type of property Date placed in Cost or other Basis for depreciation Recovery investment use (list vehicles 179 cost (business/investment Convention deduction service percentage basıs period first) use only) 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) Property used more than 50% in a qualified business use Property used 50% or less in a qualified business use S/L-S/L-28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 28 29 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 Section B-Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles (f) Total business/investment miles driven (a) (b) (c) (d) (e) during the year (do not include Vehicle 1 Vehicle 2 Vehicle 3 Vehicle 4 Vehicle 5 Vehicle 6 commuting miles) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year Add lines 30 through 32 No Yes No Yes No Yes 34 Was the vehicle available for personal Yes No Yes No Yes No use during off-duty hours? Was the vehicle used primarily by a more than 5% owner or related person? Is another vehicle available for personal use? Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions) No Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by Yes 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? Do you meet the requirements concerning qualified automobile demonstration use? (See instructions) Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles Part VI **Amortization** (e) (c) (d) (b) Amortization (a) Amortization for this year Date amortization Amortizable Code period or Description of costs begins amount section percentage Amortization of costs that begins during your 2009 tax year (see instructions) Organization Costs 74 12/01/09 13,250 248 15.0

43

44

43

44

Amortization of costs that began before your 2009 tax year

Total. Add amounts in column (f) See the instructions for where to report

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PTSSD Penn Treaty Special Services 27-0368388 FYE: 12/31/2009

Federal Statements

Officers, Directors, Trustees, Etc.
1 - List of
Part VIII, Line
- Form 990-PF,
Statement 2

Title
Vice-Chair
Secretary
Treasurer
Board Member
Board Member
Board Member

. 11/19/2010 2:23 PM

PTSSD Penn Treaty Special Services 27-0368388 Fede

Federal Statements

FYE: 12/31/2009

Statement 3 - Form 990-PF, Part IX-A, Line 1 - Summary of Direct Charitable Activities

Description

The Organization is in its initial year and did not start to receive contributions until 10/19/09. No expenses were incurred and no grants were made in 2009 related to the Organization's tax exempt purpose. The Tax Exempt purpose is to provide financial assistance to non-profit organizations as well as to provide services to the "Neighborhoods" surrounding The Sugarhouse Casino Development.

PTSSD Penn Treaty Special Services

Federal Statements

FYE: 12/31/2009

27-0368388

Statement 4 - Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

Description

Applicants must fill out a Grant Request Form (see attached). Other documents to be included with the Grant Request Form are: Budgets, quotes, articles, letters of reccomendation and pictures.

Form 990-PF, Part XV, Line 2c - Submission Deadlines

Description

None.

Statement 5 - Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

Description

Grants are restricted to Non-Profit Organizations and Groups located in or around the following "Neighborhoods" within the City of Philadelphia: Fishtown, Northern Liberties, Old Richmond and South Kensington.

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PTSSD Penn Treaty Special Services
Federal Statements

11/8/2010 2:33 PM

FYE: 12/31/2009

Taxable Interest on Investments

Unrelated Exclusion Postal Code Code Description **Business Code** Amount Interest on MMF. . d PΑ 614 6 Total 614

Λ

STATEMENT 3 Supplement

PENN TREATY SPECIAL SERVICES DISTRICT GRANT REQUEST FORM

BACKGROUND INFORMATION ** Request date: _____ Employer / TAX I.D. No.:____ Federal Tax Determination Date Fed. Tax Exemption Classification: Name of Organization: Complete Address: School District: SSD Neighborhood _____ Fax No.: _____ Telephone No.: Chief Staff Member: Title. Title: Contact Person: Web Address: Email Address: Amount Requested \$:____ We respectfully request to present our grant appeal to the PTSSD at the _____ meeting of the Board. (Month) (Please be advised that the PTSSD is only able to accommodate a maximum of five (5) grant requests per monthly meeting. Requests are scheduled in the order in which they are received by the Secretary of the PTSSD Board. Requests can be hand delivered or sent via our website at www penntreatyssd com for faster receipt. The PTSSD meets on the 3rd Wednesday of every month from 6:30-9 00pm EST Please be prepared to make your presentation to the Board in 10 minutes or less. Any information, details, or renderings should be presented within the time allotted. The more detail your organization can provide, the more likely it is the Board can make a proper determination with respect to funding your request. Changes to the standard monthly meeting times of the PTSSD due to inclement weather, holidays, etc will be posted on our website and in The Spirit newspaper as soon as possible) Mission of your Organization: (Apply Attachments if Required) Neighborhoods in which activities are to be conducted:

^{**} Fill out all items applicable to your organization**

Grant Category: [check only one]	
_General Operating Grant; _Program Grant; _Ca Assistance Grant; _Other Grant	pital Project Grant;Capacity / Technical
Please indicate whether there has been any change in of operation since the issuance of its IRS tax ruling:	
Fiduciary Agents	
facting as fiduciary agent for another party/organiza	ation please attach a 1-page letter of
f acting as fiduciary agent for another party/organiza explanation/support. (Define relationship between agencies; express comi	mitment to the project/programs success)
f acting as fiduciary agent for another party/organize explanation/support. (Define relationship between agencies; express come	mitment to the project/programs success) edge and authorization of the Board of Directors.
f acting as fiduciary agent for another party/organize explanation/support. (Define relationship between agencies; express come) This grant request is being submitted with the knowl	mitment to the project/programs success) edge and authorization of the Board of Directors. Board President/Chair
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f acting as fiduciary agent for another party/organize explanation/support. (Define relationship between agencies; express completes for the submitted with the knowledge of the submitted with the submitted with the knowledge of the submitted with the submitted w	edge and authorization of the Board of Directors
f acting as fiduciary agent for another party/organize explanation/support. (Define relationship between agencies; express come) This grant request is being submitted with the knowl Name: Signature: ORGANIZATION NAME:	edge and authorization of the Board of Directors
f acting as fiduciary agent for another party/organize explanation/support. (Define relationship between agencies; express come) This grant request is being submitted with the knowl Name: ORGANIZATION NAME: VOLUNTEER PARTICIPATION IN YOUR	mitment to the project/programs success) edge and authorization of the Board of Directors

Proposed use of SSD funds: (Include all applicable estimates, quotes, budgets, etc - Apply attachments

as required)

FINANCES: Fiscal Health Information

This detailed information is intended to provide the Penn Treaty SSD Board with an important overview of your organization's health.

It is <u>required</u> that we have a response to each item listed below.

Federal	urce of fun %		%	Annual giving	%	Fees	
State	/ _%	Foundation	—′%	Endowment incom	ne %	Contracts	
Local	— <u>%</u>	Special events	—— _%	Self Funded%		Other	
(NOTE: To	tal can be g	greater than 100%	since som	e categories may ov	erlap)	rs)	ecif
				90 for year ending _ services%; Fu Management	%		
Cu	rrent assets			Current l	iabilıties_		
Ne	t Prop/Equ	ip		Long-tern	m Debt_		
LT	Investmen	ts		Total Lia	bilities_		
To	tal assets_			Total Net	t Assets_		
Ur	restricted N	let Assets					
Amount of	operating re	eserve funds availal	ble: \$			_	
How many	months of	perating expenses	would this	s cover?			
				ırplus/deficit: (plea:			
If there is a	deficit, is	this a recurring d	eficit in th	ne past three years?	YES_	NO_	
Explain rea	son for defi	cit:					
				than \$10,000? YE			
L: Li	tigation I	nformation				·	
				igation currently per	1 .0 %	/FC .)	ıΩ