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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 black lung benefit trust or private foundation)

► The organization may have to use a copy of this return to satisfy state reporting requirements

2010

OMB No 1545-0047

Open to Public Inspection

A Fo	r the	2010 ca	lendar year, or tax year begin	ning 01-01-2010 and ending 12-31-20)10		
		pplicable	C Name of organization			D Employe	r identification number
_	dress ch		DELAWARE VALLEY GRANTMAKER	5		23-251	8417
— _{Na}	me cha	inae	Doing Business As			E Telephor	o number
_	tıal retu	-				4	
_			Number and street (or P O box i 230 S BROAD ST SUITE 402	f mail is not delivered to street address)	Room/suite	(215) 7	90-9700
	mınate					G Gross rece	eipts \$ 514,781
Am	ended	return	City or town, state or country, an PHILADELPHIA, PA 19102	d ZIP + 4		G Gloss lecc	sipts \$ 314,701
Ap	plication	n pending	,				
			F Name and address of p	rıncıpal officer	H(a) Is this	a group return for a	ffiliates? Yes V No
			DEBRA KAHN 230 S BROAD ST SUITE	402			
			PHILADELPHIA,PA 191			affiliates includ	
			•				st (see instructions)
I Ta	x-exem	npt status	▼ 501(c)(3)	¶ (insert no)	H(c) Grou	ıp exemptıon	number 🟲
1 W	ehsit <i>e</i>	 b- \//\/	/W DVG ORG				
					<u> </u>		T
			Corporation Trust Associa	tion Other ►	L Year of fo	rmation 1988	M State of legal domicile PA
Pa	rt I	Sum	mary				
Governance	,	TO PRO A RESO	MOTE AND ENHANCE REGIO	sion or most significant activities DNAL PHILANTHROPY BY SERVING A R AND ABOUT THE REGION'S GRAN			,
Ĕ							
9. 6.	.						
	2 (Check th	nis box 🚩 if the organization	discontinued its operations or dispose	d of more than 2	5% of its ne	tassets
න් ග	3	Number	of voting members of the gove	rning body (Part VI, line 1a)		3	19
Ē	4	Number	of independent voting member	s of the governing body (Part VI, line 1	b)	. 4	19
Activities &	5	Total nu	mber of individuals employed i	n calendar year 2010 (Part V, line 2a)		_ 5	5
ď	6	Total nu	mber of volunteers (estımate ı	fnecessary)		- 6	0
	7a ⁻	Total un	related busıness revenue from	Part VIII, column (C), line 12		7:	a 0
	ь	Net unre	lated business taxable income	from Form 990-T, line 34		7	b 0
					Prio	r Year	Current Year
۵.	8	Contri	butions and grants (Part VIII,	line 1h)		474,291	471,145
Revenue	9	Progra	ım service revenue (Part VIII	line 2g)		40,613	39,560
e Are	10	Invest	tment income (Part VIII, colui	nn (A), lines 3, 4, and 7d)		7,87€	3,315
Ξ.	11	Other	revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		10,596	761
	12			.1 (must equal Part VIII, column (A), l	ine	533,37€	514,781
	13			rt IX, column (A), lines 1–3)		000,000	
	14			t IX, column (A), line 4)			
	15			yee benefits (Part IX, column (A), lines	. 5_		-
\$	15	10)	es, other compensation, emplo	yee beliefits (Fart 1x, Column (A), illies	, 5-	358,013	348,599
Expenses	16a	Profes	sional fundraising fees (Part I	X, column (A), line 11e)		С	0
충	ь	Total fu	ndraising expenses (Part IX, column	(D), line 25) ▶ 10,183			
ш	17), lines 11a-11d, 11f-24f)		224,857	218,423
	18			nust equal Part IX, column (A), line 25)		582,870	· ·
	19		·	e 18 from line 12		-49,494	<u> </u>
± αη 3π Α.	 	,	poo oaberaee III		Beginning	g of Current	<u> </u>
Net Assets or Fund Balances						ear earrein	End of Year
888 888 888	20	Total	assets (Part X, line 16)			543,679	475,708
7 Z	21	Totall	iabilities (Part X, line 26) .			27,293	11,563
źŹ	22	Netas	sets or fund balances Subtra	ct line 21 from line 20	•	516,386	464,145
Pa	rt II	Sign	ature Block				
know				nined this return, including accompanying e. Declaration of preparer (other than offi			
		****	**		20)11-08-03	
Sigr	1	Signa	ature of officer			ate	
Her		DEBR	RA KAHN EXECUTIVE DIRECTOR				
			or print name and title				
		Print/Typ		Preparer's signature	Date	Check if self-	_ PTIN
Paid		preparer's	s name JOSEPH MCLAUGHLIN me F TAIT WELLER & BAKER LLP	JOSEPH MCLAUGHLIN	2011-08-01	employed 🕨	
	arer -						Firm's EIN 🕨
		Firm's add	dress 🕨 1818 MARKET STREET SUITI	= 2400			
	Only	i iiii s aa	diess · Toto i / Miller Stiller Softi	- 2.00			Phone no ► (215) 979- 8800

May the IRS discuss this return with the preparer shown above? (see instructions)

✓ Yes No

Form	n 990 (2010) Page 2
Par	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission
OFR	AWARE VALLEY GRANTMAKERS (DVG) BUILDS STRONGER COMMUNITIES BY INCREASING THE IMPACT AND EFFECTIVENESS REGIONAL PHILANTHROPY DVG SERVES ITS MEMBERS AND THE GENERAL PUBLIC THROUGH ACTIVITIES THAT FOSTER RNING AND NETWORKING, PROVIDE INFORMATION ABOUT GRANTMAKING, AND ENCOURAGE PHILANTHROPY
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ 192,950 including grants of \$) (Revenue \$ 40,321)
	INCLUDING ARTS, EDUCATION, COMMUNITY DEVELOPMENT, WOMEN AND GIRLS' ISSUES, FOOD SYSTEMS, AND FAMILY PHILANTHROPY ADDITIONAL PROGRAMMING TRACKS WERE OFFERED TO HELP MEMBERS LEARN BEST PRACTICES IN GRANTMAKING THROUGH SKILLS BUILDING IN PROPOSAL REVIEW, FINANCIAL BASICS, LEGAL AND ETHICAL ISSUES, EVALUATION AND GRANTS MANAGEMENT. THE ORGANIZATION ALSO HELD DIALOGUES WITH CITY AND COUNTY OFFICIALS DVG'S MAJOR EDUCATIONAL AND NETWORKING EVENTS OF THE YEAR WERE A FALL CONFERENCE ATTENDED BY 290 PHILANTHROPIC, NONPROFIT AND GOVERNMENT LEADERS, AND AN ANNUAL MEMBERS' MEETING ATTENDED BY OVER 100 GRANTMAKERS BOTH EVENTS FEATURED PROMINENT NATIONAL AND LOCAL SPEAKERS WHO INFORMED AND INSPIRED ATTENDEES TO SHARE INFORMATION AND EMPLOY PHILANTHROPIC PRACTICES AIMED AT STRENGTHENING COMMUNITIES COMBINED, DVG'S PROGRAMS ATTRACTED MORE THAN 1,300 PARTICIPANTS
4b	(Code) (Expenses \$ 129,790 including grants of \$) (Revenue \$)
	COMMUNICATION AND MEMBER SERVICES DVG SERVED MEMBERS, NONPROFIT ORGANIZATIONS, CIVIC LEADERS, POLICYMAKERS AND THE MEDIA WITH AN ARRAY OF COMMUNICATIONS SERVICES, SUPPLYING INFORMATION ABOUT IDEAS, TRENDS AND DEVELOPMENTS IN LOCAL AND NATIONAL PHILANTHROPY COMMUNICATIONS VEHICLES INCLUDED 1) A NEW WEBSITE WITH REGULAR UPDATES OF NEWS, EVENTS, RESOURCES AND MEMBER DIRECTORY LISTINGS, 2) NEW WEBSITE FEATURES, GIVING STORIES AND MEMBER VOICES, DESIGNED TO HIGHLIGHT THE DIVERSE APPROACHES AND PERSPECTIVES OF DVG MEMBERS, 3) A MONTHLY MEMBERS' UPDATE - EMAILED 12X/YEAR TO 800+ INDIVIDUALS REPRESENTING MEMBER ORGANIZATIONS, 4) A YEAR-END MEMBERS' MEMO PRESENTING PROGRAM HIGHLIGHTS OF 2010 ADDITIONALLY, THE ORGANIZATION CONDUCTED A COMPREHENSIVE MEMBER SURVEY IN 2010 IN ORDER TO GAUGE MEMBER OPINIONS ABOUT CURRENT DVG SERVICES AND PRIORITIES FOR FUTURE ACTIVITIES SURVEY INVITATIONS WERE SENT TO OVER 800 INDIVIDUALS REPRESENTING MORE THAN 140 ORGANIZATIONS, MORE THAN 50% OF MEMBER ORGANIZATIONS RESPONDED
4c	(Code) (Expenses \$ 67,547 including grants of \$) (Revenue \$)
-	COMMUNITY OUTREACH AND RECRUITMENT DVG STAFF AND LEADERSHIP WORKED TO RAISE THE ORGANIZATION'S PROFILE AND ENHANCE AWARENESS ABOUT THE PHILANTHROPIC SECTOR THROUGH SPEAKING ENGAGEMENTS AND OTHER OUTREACH AND INTERACTION WITH REGIONAL, NONPROFIT COMMUNITY AND CIVIC ORGANIZATIONS AND BY REPRESENTING PHILANTHROPY IN THE MEDIA DVG COLLABORATED WITH OTHER LOCAL AND NATIONAL ORGANIZATIONS ON JOINT PROGRAMMING, INCLUDING CO-SPONSORING A REGIONAL SUMMIT ON STRATEGIC PARTNERSHIPS, WHICH INCLUDED THE LAUNCH OF THE INNOVATIVE PARTNERSHIPS PRIZE, AIMED TO FOSTER COLLABORATIVE LEARNING AND ACTION TO BETTER MEET NONPROFIT MISSIONS DVG STAFF DEVOTED SIGNIFICANT TIME AND RESOURCES TOWARDS MEMBER RECRUITMENT IN ORDER TO INCREASE THE NUMBER AND DIVERSITY OF OUR MEMBERS AND IN TURN ENHANCE THE ORGANIZATION'S ROLE AS A PHILANTHROPIC LEADER, IN 2010 THE ORGANIZATION ATTRACTED 17 NEW MEMBERS
A.I	Other many common (December of Cabadula O.) Caralla Additional Data (or December)
4d	Other program services (Describe in Schedule O) See also Additional Data for Description (Expenses \$ 35,454 including grants of \$) (Revenue \$)
4e	Total program service expenses▶\$ 425,741

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νο
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		Νο
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		Νο
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		Νο
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If</i> "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Parts III and IV.	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νο
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
Ь	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

1 01111	990 (2010)			Page -
Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1^7 If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Νο
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Νο
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
	<i>IV</i>	28a		Νο
Ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Νο
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Νο
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Νo
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Νο
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		No
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Yes Vo			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		Νο
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

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Part V	Statements	Regarding	Other	IRS Filings	and Tax	Compliance

Statements Regarding Other TRS Fillings and Tax Compilance Check Redeals O Cestina response to any passes on in the Tax Compilance Check Redeals O Cestina response to any passes on the segmentation among the passes of th	Form	990 (2010)			Page 5
Extract the number reported in Bot 2 of Form 1090 Losser - 0 - Hope applicable 1	Pa				
Extert the rumber reported in Box 3 of form 1090 Letter-0 - fined applicable 1		Check if Schedule O contains a response to any question in this Part V		୮	1
Enter the number of Forms W-26 included in time to Enter-do-I feet applicable 5. Old the organization control by beckes on withhelding rules for respectable payments to evendors and reportable payments for the number of employees registed on Form W-3, Transmitted Wage and Top Samemon's finding of the celebrate payments for the number of employees registed on Form W-3, Transmitted Wage and Top Samemon's finding for the celebrate was endorned with or within the year covered by this return. 5. If the number of employees registed on Form W-3, Transmitted Wage and Top Samemon's finding for the celebrate was endorned in control the celebrate payment tax returns? 5. If the set on it is reported in line 22, did the organization has all requires federal amplications. 5. If the set of the celebrate between segments are possible on time country and the set of the celebrate payments are possible on the celebrate payment in a problematic as whether transactions are separated on the celebrate payment in the celebrat				Yes	No
to but the organization comply with backup withholding rules for reportable payments to vendors and reportable 2 2 Enter the number of employees reported on Form W-3, Tyramonized of Wage and Tyramonized for Wage and Tyramonized for the calendar year entered to the calendar year entered to the calendar year entered to the calendar year. 3 but the calendar entered to the first this year? If Mo. Institute the calendar of schedule (i.e. as matrix the state of the first this year? If Mo. Institute the calendar of the calendar year entered to the calendar year. A train the daming the calendar year, dult the organization have an interest in, or a superior or other authority to the calendar year. Institute the first the representation country is a first year of the first the representation of the calendar year. A train of the calendar year of the first year of the first the representation of the year entered to the calendar year. 5 but the calendar year year they the calendar that it was on is a party to a prohibited tax shelter transaction? 5 country of the page of the year entered they are calendar year. 5 country of the page of the year entered they are calendary to the page of the year entered they are the year entered to the year entered they entered they are they ar	1a		5		
maning (pamping) summings to prize winners? Senter the number of employees period on Family 3, Transcription (Moge and Tay 2) Senter the number of employees reported on Family 3, Transcription (Moge and Tay 2) Senter the number of employees reported on the Calendar year ending with or within the veri overred by this part of the symmath of the symma	b		-		
26 Enter the number of employees reported on Farm W.S. Tyransmitted Wave and Tar Statements filed for the calandary are adding with a within they are noticed by the Statements filed for the calandary are adding with a within they are noticed by the Statements filed for the calandary are adding with a within they are noticed by the statements filed for the calandary are adding with a filed for the calandary are adding with a filed for the statement of the statement of the statement of the organization in 24, 45 the drag market than 28, you may be required to e-file (see instructions) 30 bit the organization see unable of the statement of the statement of the organization in the calandary are if of the organization have an interest in, or a significant or other suthers' and country. 40 bit the organization is foreign country (such as a bank account, accounts account). 51 bit files, "extent the passe of the terrog noustry. 52 bit is the organization aparty to a prohibited as a short account; to a prohibited that shelter transaction? 53 bit is the organization aparty to a prohibited as a short account; to a prohibited that shelter transaction? 54 bit is the organization aparty to a prohibited as a shelter transaction? 55 bit is the organization aparty to a prohibited that shelter transaction? 56 bit is the organization have a ninual gross receipts that are normally greater than 100,000, and did the organization in the may receive deductable contributions and exercise statement that such contributions or also account to the organization and aparty and the organization may be received the contributions and the organization and aparts are deductable? 57 bit files, "filed the organization may be deductable contributions under section 170(c). 58 bit files, and the organization may be deductable contributions under section 170(c). 59 bit files, and accounts that may receive deductable contributions under section 170(c). 50 bit the organization receive a contribution of qualified in tile contributions and acco	c		1c	Yes	
Note. If the sum of times 12 and 2 as ing estate than 250, you may be required to a fills (see instructions) Note. If the sum of times 12 and 2 as ing estate than 250, you may be required to a fills (see instructions) b If the you may be required to sum of times 12 and 2 as ing estate than 250, you may be required to a fills (see instructions) b If they, than it fills a form 990-T for this year? If 'No' immine an exploration in schedule 0. 30	2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax</i> Statements filed for the calendar year ending with or within the year covered by this			
Det the regunation has a marked as any exercise spread of \$1,000 or more during the service of \$1,000 or servi	ь		5		
by 15° year, the sit field a Form 990-T for the year 15° Wo, "provide an explanation in Schedule 0 38 No 16° 15° year, the sit field a Form 990-T for the year 15° Wo, "provide an explanation in Schedule 0 38 No 16° 15° year, the sit field a Form 990-T for the year 15° Wo, "provide an explanation have an interest in, or a signature or other authority over, a francial account in a foreign country. See the commendation of the foreign country. See instructions for filling requirements for Form TDF 90-22 J., Report of Foreign Bank and Financial Accounts 50° 15° Year," enter the name of the foreign country. See instructions for filling requirements for Form TDF 90-22 J., Report of Foreign Bank and Financial Accounts 50° 15° Year," the site or 55° b, did the organization fall Form 8086-T? 50 Was the organization a party to a prohibited tax is helicit transaction? 51° 15° Year," to line 5 a or 55° b, did the organization fills Form 8086-T? 52 So		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
b If "Yes," has if filled a Farm 980-T for this year? If "No," provide an explanation in Schedulc 0. At any time during the calendary year, did the organization have an interest in, or a signature or other authority once, a financial in a foreign country. Secretary of the control of the country of the co	3a		20		N.o.
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 accounts account)? If "Yes," emerche name of the foreign country See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the foreign country See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts If Yes," the organization is party to a prohibited tax shelter transaction? If "Yes," to line Se or Sh, did the organization file Form 888-77. If "Yes," to line Se or Sh, did the organization file Form 888-77. If "Yes," the the organization include with very solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions undersection 170(c). If "Yes," did the organization include with very solicitation and services provided or services provided to the payor? Organizations that may receive deductible contributions undersection 170(c). If "Yes," did the organization notify the donor of the value of the goods or services provided? Organizations that may receive deductible contributions undersection 170(c). If "Yes," did the organization notify the donor of the value of the goods or services provided? If "Yes," did the organization notify the donor of the value of the goods or services provided? If "Yes," did the organization notify the donor of the value of the goods or services provided? If "Yes," did the organization notify the donor of the value of the goods or services provided? If "Yes," did the organization notify the donor of the value of the goods or services provided? If ye organization devices the number of forms 8292 filed during the year. If the organization file are number of forms 8292 filed during the year. If the organization file are the provided t	Ь				INO
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contract? 7c					
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	е		7e		
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b Did the organization make a distribution to a donor, donor advisor, or related person?	9	Sponsoring organizations maintaining donor advised funds.			
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14a Did the organization receive any payments for indoor tanning services during the tax year? 14a No	c	Enter the amount of reserves on hand			
 	14a		14a		l No
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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

<u>S</u> e	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax			
Lu	year			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Does the organization have members or stockholders?	6		Νο
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νo
	ection B. Policies (This Section B requests information about policies not required by the Internal evenue Code.)			
	venue couc.		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?			
		11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
Ь	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed ▶PA			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply			

- Own website Another's website Upon request
- Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨 20 DELAWARE VALLEY GRANTMAKERS 230 S BROAD ST SUITE 402

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

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

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

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

(A) Name and Title	(B) Average hours	Posi t	tion (that a	che		II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
(1) RONNIE L BLOOM PRESIDENT	1 00	х		х				0	0	0
(2) MAILEE WALKER VICE PRESIDENT	1 00	х		х				0	0	0
(3) WESTON SOMERVILLE TREASURER	1 00	х		х				0	0	0
(4) SARA MORAN SECRETARY	1 00	х		х				0	0	0
(5) BILL BLACK DIRECTOR	1 00	х						0	0	0
(6) DENISE BROWN DIRECTOR	1 00	х						0	0	0
(7) MICHAEL DELBENE DIRECTOR	1 00	х						0	0	0
(8) RUSSELL JOHNSON DIRECTOR	1 00	х						0	0	0
(9) MELLANIE LASSITER DIRECTOR	1 00	х						0	0	0
(10) VALERIE MARTIN DIRECTOR	1 00	х						0	0	0
(11) HEIDI MCPHERSON DIRECTOR	1 00	х						0	0	0
(12) REBECCA QUINN-WOLF DIRECTOR	1 00	х						0	0	0
(13) GREGORY T ROWE DIRECTOR	1 00	х						0	0	0
(14) ANN SCHMIEG DIRECTOR	1 00	х						0	0	0
(15) SUSAN SEGAL DIRECTOR	1 00	х						0	0	0
(16) FRANCES M SHEEHAN DIRECTOR	1 00	х						0	0	0
										Form 990 (2010)

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

(A) Name and Title		(B) Average hours	1	((tion (hat a	(che		11		(D) Reportable compensation	(E) Reportable compensation from related		(F) Estima mount of	other
		per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	or	compens from t ganizatio relate organiza	he on and d
(17) A	ANDY TOY CTOR	1 00	х						0	•	0		0
(18) ⁻ DIREC	TAMI WISE CTOR	1 00	х						0	1	0		0
	DIANE-LOUISE WORMLEY	1 00	х						0	(0
(20) [DEBRA A KAHN JTIVE DIRECTOR	40 00			х				111,038	(0		6,763
1b	Sub-Total				٠.	٠.	 	 					
С	Total from continuation sheets	to Part VII, Sec	tion A				Þ						
d	Total (add lines 1b and 1c) .							►	111,038	0			6,763
2	Total number of individuals (incl \$100,000 in reportable compens					ted	above) who	received more tha	n			
										_		Yes	No
3	Did the organization list any fori on line 1a? <i>If</i> "Yes," complete Sch					eye •	mploy •	ee, o	r highest compens		3		N -
4	For any individual listed on line 1 organization and related organiza	1a, is the sum o	f reporta	able (comp					from the	<u>.</u>		No
	individual			•	•	•		•			4		No
5	Did any person listed on line 1a services rendered to the organiz								_	·	5		N o
Se	ection B. Independent Con	tractors											
1	Complete this table for your five \$100,000 of compensation from			ndep	ende	ent c	ontra	ctors	that received more	e than			
	Nan	(A) ne and business add	dress						Descri	(B) uption of services		(C) Compens	
											#	,	
											\pm		

2 Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 in compensation from the organization **>**0

art \	/ 111	Statement of Reven	ue					
					(A) Total revenue	(B) Related or	(C) Unrelated business	(D) Revenue
						exempt function	revenue	exclude from
								tax
						revenue		under sections
								512,
								513, or
(O) (O)	1a	Federated campaigns	1a					514
Contributions, girts, grants and other similar amounts		Membership dues						
£g ⊞o		Fundraising events		403,950				
ara ara		Related organizations						
S, C ⊞		Government grants (contributions)						
ાં કં		All other contributions, gifts, grants		67,195			 	
e de la composition della com		sımılar amounts not ıncluded above	e					
ğ	g	Noncash contributions included in li	nes 1a-1f \$					
ठ ह	h	Total. Add lines 1a-1f	· · · · · · • • • • • • • • • • • • • •		471,145			
ile Ile				Business Code				
) ver	2a b	REGISTRATION FEES		900099	39,560	39,560		
e Ag	c							
rwc	d							
જુ	e							
Program Service Revenue	f	All other program service re	venue					
<u>ک</u>	g	Total. Add lines 2a-2f	.		39,560			
	3	Investment income (includir			33,300			
		and other similar amounts)			3,315			3,31
	4	Income from investment of tax-ex	empt bond proceeds					
	5	Royalties		T				
	62	Gross Rents	(ı) Real	(II) Personal				
		Less rental						
	c	expenses Rental income						
	d	or (loss) Net rental income or (loss)	<u> </u>	1				
		The second of th	(ı) Securities	(II) O ther				
	7a	Gross amount from sales of						
		assets other than inventory						
	ь	Less cost or						
		other basis and sales expenses						
		Gain or (loss) Net gain or (loss)	<u> </u>					
a a		Gross income from fundraisi		1				
Other Kevenue		(not including	ng or cinc					
ev.		\$ of contributions reported on	line 1c)					
<u>ች</u>		See Part IV, line 18	•					
ĭħ	 -	Less direct expenses .	a b					
,		Net income or (loss) from fu						
			activities See Part IV, line 19 . a					
				ь				
		Net income or (loss) from ga		1				
	TOS	Gross sales of inventory, les returns and allowances) S					
			а					
		Less cost of goods sold .						
	C C	Net income or (loss) from sa Miscellaneous Revenue	mes or inventory F	Business Code				
	11a	MISCELLANEOUS INCOME		900099	761	761		
	ь							
	c	·						
	d	All other revenue	.					
	е	Total. Add lines 11a-11d			761			
	12	Total revenue. See Instructi	ione 🛌					
	+4	iotai ievellue. See Instructi	VII3		E14 701	40 221	I ^	l 2.34

	990 (2010)				Page 10
Par	IX Statement of Functional Expenses				
	Section $501(c)(3)$ and $501(c)(4)$ organizations mus II other organizations must complete column (A) but are not required to c			(D)	
Do no	ot include amounts reported on lines 6b,	(A)	(B) Program service	(C) Management and	(D) Fundraising
7b, 8i	p, 9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	117,801	85,858	28,998	2,945
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	180,040	131,703	43,836	4,501
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	10,563	7,233	3,066	264
9	Other employee benefits	17,409	11,920	5,054	435
10	Payroll taxes	22,786	16,302	5,914	570
а	Fees for services (non-employees) Management	,	,	,	
ь	Legal	480		480	
С	Accounting	11,362		11,362	
d	Lobbying	,		·	
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g g	Other	62,747	58,951	3,796	
12	Advertising and promotion	350	239	111	
13	Office expenses	15,466		3,026	387
14	Information technology	9,028		' +	
15	Royalties	3,020	9,211	2,617	
16	Occupancy	43,229	29,598	12,550	1,081
17	Travel	4,559	<u>'</u>		1,001
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	4,555	3,070	303	
19	Conferences, conventions, and meetings	37,351	35,989	1,362	
20	Interest		,	-,	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,029	1,390	639	
23	Insurance	5,323	3,645	 	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	DUES AND SUBSCRIPTIONS	11,602	8,136	3,466	
b	MISCELLANEOUS	8,598	8,329	269	_
c	EQUIPMENT MAINTENANCE A	6,299	4,314	1,985	
d		,			
e					
f	All other expenses		1		
25	Total functional expenses. Add lines 1 through 24f	567,022	425,741	131,098	10,183
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
	combined educational campaign and idilidialsing solicitation	I	L		

Part X Balance Sheet (A) (B) Beginning of year End of year 1 523.050 457.237 2 Savings and temporary cash investments 2 1,015 3 1,140 3 4 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 Schedule L . . . 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 6 7 8 8 Prepaid expenses and deferred charges 11,594 9 9,758 10a Land, buildings, and equipment cost or other basis Complete Part 27.794 10a VI of Schedule D 10b 21.681 ь Less accumulated depreciation 6.560 10c 6,113 11 11 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 1,460 1,460 15 15 16 543,679 16 475,708 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 27,293 17 11,563 17 Accounts payable and accrued expenses . 18 18 19 19 20 20 Liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D . . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties 25 25 Other liabilities Complete Part X of Schedule D 26 27,293 11,563 26 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 Unrestricted net assets 351,365 27 342,843 Temporarily restricted net assets 165,021 121,302 28 28 Fund 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here 🕨 🥅 and complete lines 30 through 34. 5 30 30 Capital stock or trust principal, or current funds Assets 31 Paid-in or capital surplus, or land, building or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 516,386 33 464,145 33 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 543.679 475,708 34

14 01	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)				
2	Total expenses (must equal Part IX, column (A), line 25)	2			514,78
3	Revenue less expenses Subtract line 2 from line 1	3			-52,24
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		Ę	516,38
5	Other changes in net assets or fund balances (explain in Schedule O)	5			
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		4	164,14
Par	t XIII Financial Statements and Reporting				_
	Check if Schedule O contains a response to any question in this Part XII		•	দ	
		_		Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?	[2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of t audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separated basis	ssued			
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		

DLN: 93493215008111

OMB No 1545-0047

Inspection

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization DELAWARE VALLEY GRANTMAKERS

Department of the Treasury Internal Revenue Service

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

Public Charity Status and Public Support

Attach to Form 990 or Form 990-EZ. See separate instructions.

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

Employer identification number

23-2518417

he • 1	organı —		•	e foundation becaus on of churches, or as	•				•				
2	<u></u>		•	l in section 170(b)(1					~/(~/(^ /(i) ·				
3	<u>'</u>			perative hospital sei				n 170(h)(1)(A)(iii)				
4	ŗ_	A medi	cal research	n organization operat ty, and state						(1)(A)(ii	i). Ente	r the	
5	Γ	An orga	anızatıon op	erated for the benefit	t of a college	or universit	ty owned or o	perated by	a governmen	tal unıt d	lescribe	— ∍d ın	
	_	sect ion	170(b)(1)(A)(iv). (Complete P	art II)								
6				local government or	-								
7	 ~	describ	ed in	at normally receives A)(vi) (Complete P		I part of its	support from	a governm	ental unit or f	rom the	general	public	:
8	Г			described in section	•	A)(vi) (Con	nplete Part II)					
9				at normally receives					ıbutıons, men	nbership	fees, a	nd gro	SS
	•	receipt its sup	s from actıv port from gro	ities related to its exposs investment incorpanization after June	kempt functions me and unrel	ons—subjec ated busine	t to certain ex ss taxable inc	cceptions, come (less	and (2) no mo	ore than	3 3 1/3%	of	
10	Γ	Anorga	anızatıon org	janized and operated	d exclusively	to test for p	oublic safety	Seesectio	n 509(a)(4).				
11 e	Γ	one or in the box a	more publicled that descrived Type I cking this botton foundation 509(a)(2)	ganized and operated by supported organizations the type of supported Type II Type	ations descri orting organi I c organization ner than one	bed in secting the section and continuity of the section is not control or more publication.	ion 509(a)(1) complete lines - Functionall rolled directly blicly supporte	or section s 11e throi ly integrate or indirect ed organiza	n 509(a)(2) S ugh 11h ed tly by one or r ations describ	ee sectio d T more discondinated in sec	on 509(Type III qualified ction 50	a)(3). I - Oth d perso 09(a)(. Check her ons 1) or
g		check t Since A followin	this box august 17, 2 ag persons?	2006, has the organi	zation accep	ted any gıft	or contribution	on from any	y of the		orting o	Yes	No
				governing body of th				sersons de	sembed in (ii)	_	11g(i)	103	110
		•		er of a person descri		_				—	11g(ii)	 	
			•	led entity of a persoi			ıbove?			⊢	y(::/ 11g(iii)	 	
h				ng information about						Ľ			
	(i) Name suppo rganız	e of rted	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organizate col (i) list your gove docume	ion in ted in rning	(v) Did you not organizati col (i) of suppor	ion in your	(vi Is th organiza col (i) org	ne tion in ganized		A mo	/ii) unt of pport
				instructions))	Yes	No	Yes	No	Yes	No			
Tota	ı												

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.)

S	ection A. Public Support		, , , , , , , , , , , , , , , , , , ,					
	endar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2	010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	591,375	592,180	544,138	474,291		471,145	2,673,129
2	Tax revenues levied for the organization's benefit and either paid to or expended on its							
3	behalf The value of services or facilities furnished by a governmental unit to	,						
4	the organization without charge Total. Add lines 1 through 3	591,375	592,180	544,138	474,291		471,145	2,673,129
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included or line 1 that exceeds 2% of the amount shown on line 11, column							394,722
6	(f) Public Support. Subtract line 5 from line 4	1						2,278,407
S	ection B. Total Support	•	•				•	
	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 20)10	(f) Total
7	A mounts from line 4	591,375	592,180	544,138	474,291		471,145	2,673,129
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar	11,245	17,674	11,308	7,876		3,315	51,418
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	1,770	6,272	1,711	10,596		761	21,110
11	Total support (Add lines 7 through 10)							2,745,657
12	Gross receipts from related activiti	es, etc (See instr	uctions)			12		175,100
13	First Five Years If the Form 990 is check this box and stop here	for the organizatio	n's first, second,	third, fourth, or fi	fth tax year as a	501(c)(3	3) organız	
S	ection C. Computation of Pul	olic Support Pe	ercentage					
14	Public Support Percentage for 2010			l 1 column (f))		14		82 980 %
15	Public Support Percentage for 2009	•	•			15		81 510 %
	33 1/3% support test—2010. If the and stop here. The organization qua 33 1/3% support test—2009. If the	alifies as a publicly	supported organ	nization				▶ ▼
17a	box and stop here. The organization 10%-facts-and-circumstances test is 10% or more, and if the organization meeorganization	—2010. If the organ tion meets the "fa	nization did not c cts and circumst	heck a box on line ances" test, chec	k this box and st	op here.	Explain	►C ed ►C
	10%-facts-and-circumstances test 15 is 10% or more, and if the organ Explain in Part IV how the organiza supported organization	nization meets the tion meets the "fa	"facts and circur cts and circumst	nstances" test, c ances" test The	heck this box and organization qual	d stop he ifies as a	ere. a publicly	▶ ┌
18	Private Foundation If the organizat	ion ala not check a	a pox on line 13,	10a, 16b, 1/a or	1/D, cneck this	ox and	see	▶ □

Schedule A (Form 990 or 990-EZ) 2010 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 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 (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total ın) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified **b** A mounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning **(e)** 2010 (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (f) Total ın) 9 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b c Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage

15	Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15	
16	Public support percentage from 2009 Schedule A, Part III, line 15	16	
S	ection D. Computation of Investment Income Percentage		
17	Investment income percentage for 2010 (line 10c column (f) divided by line 13 column (f))	17	
18	Investment income percentage from 2009 Schedule A , Part III, line 17	18	

19a 33 1/3% support tests—2010. 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

33 1/3% support tests—2009. 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

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

Schedule A (Fo	orm 990 or 990-EZ) 2010	Pag
Part IV	Supplemental Information. Supplemental Information. Complete this required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. additional information. (See instructions).	•

Facts And	Circumstances	Test

Schedule A (Form 990 or 990-EZ) 2010

Additional Data

Software ID: Software Version:

EIN: 23-2518417

Name: DELAWARE VALLEY GRANTMAKERS

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services	4d.	Othe	rprogram	services
----------------------------	-----	------	----------	----------

(Code) (Expenses \$ 35,454 including grants of \$) (Revenue \$

DVG UTILIZED GRANT FUNDING TO SUPPLEMENT THE ORGANIZATION'S CORE OPERATING BUDGET, ENHANCING ITS CAPACITY TO SERVE MEMBERS AND THE PUBLIC THROUGH SPECIAL INITIATIVES IN THE AREAS OF TECHNOLOGY UPGRADES, PHILANTHROPIC RESEARCH AND MEMBER DEVELOPMENT ADDITIONAL EXPENSES TOTALING \$10,000 ARE RELATED TO THE PENNSYLVANIA HEALTH FUNDERS COLLABORATIVE, WHICH DVG ADMINISTERS THE COLLABORATIVE LEVERAGES FUNDING FROM 13 FOUNDATIONS IN ORDER TO ADVOCATE AND BUILD PUBLIC AWARENESS REGARDING PUBLIC POLICY AND SYSTEM REFORMS IN HEALTHCARE DELIVERY, ESPECIALLY RELATED TO THE INTEGRATION OF BEHAVIORAL HEALTH AND PRIMARY HEALTH CARE

DLN: 93493215008111

OMB No 1545-0047

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities),

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- ◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- ◆ Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

	ction 501(c)(4), (5), or (6) organi me of the organization			Employer	ıdentıfıcatıon number
	AWARE VALLEY GRANTMAKERS				
ari	I-A Complete if the or	ganization is exempt und	er section 501(23-2518 c) or is a section	
	•				
1 2		ganızatıon's dırect and ındırect po	ontical campaign act	ivities in Part IV	
3	Political expenditures Volunteer hours			•	\$
_	v oluliteer flours				
ar	t I-B Complete if the or	ganization is exempt und	er section 501(c)(3).	
1	Enter the amount of any excise	e tax incurred by the organizatior	under section 4955	;	> \$
2	Enter the amount of any excise	e tax incurred by organization ma	nagers under sectio	n 4955	- \$
3	If the organization incurred a s	ection 4955 tax, did it file Form	4720 for this year?		☐ Yes ☐ No
4a	Was a correction made?				☐ Yes ☐ No
b	If "Yes," describe in Part IV				
ar	-	ganization is exempt und			501(c)(3).
1		ended by the filing organization fo			- \$
2	Enter the amount of the filing of exempt funtion activities	organization's funds contributed t	o other organizations	s for section 527	b -
,	·	tures Add lines 1 and 2 Enter h	ore and an Earm 117	0 DOL line 17h	·
3		tures Add lines 1 and 2 Enter h	ere and on Form 112	.U-POL, line 176	*
	•	nd employer identification numbe	• •		
	Enter the names, addresses an organization made payments l amount of political contribution		r the amount paid frond frond directly delivered	om the filing organization to a separate political	tions to which the filing on's funds Also enter the organization, such as a
	Enter the names, addresses an organization made payments l amount of political contribution	nd employer identification numbe For each organization listed, ente ns received that were promptly ai	r the amount paid frond frond directly delivered	om the filing organization to a separate political	tions to which the filing on's funds Also enter the organization, such as a primation in Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political
	Enter the names, addresses all organization made payments of amount of political contribution separate segregated fund or a	nd employer identification numbe For each organization listed, ente ns received that were promptly a political action committee (PAC)	r the amount paid frond directly delivered If additional space	om the filing organization to a separate political is needed, provide info	tions to which the filing on's funds Also enter the organization, such as a primation in Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
	Enter the names, addresses all organization made payments of amount of political contribution separate segregated fund or a	nd employer identification numbe For each organization listed, ente ns received that were promptly a political action committee (PAC)	r the amount paid frond directly delivered If additional space	om the filing organization to a separate political is needed, provide info	tions to which the filing on's funds Also enter the organization, such as a primation in Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
	Enter the names, addresses all organization made payments of amount of political contribution separate segregated fund or a	nd employer identification numbe For each organization listed, ente ns received that were promptly a political action committee (PAC)	r the amount paid frond directly delivered If additional space	om the filing organization to a separate political is needed, provide info	tions to which the filing on's funds Also enter the organization, such as a primation in Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
	Enter the names, addresses all organization made payments of amount of political contribution separate segregated fund or a	nd employer identification numbe For each organization listed, ente ns received that were promptly a political action committee (PAC)	r the amount paid frond directly delivered If additional space	om the filing organization to a separate political is needed, provide info	tions to which the filing on's funds Also enter the organization, such as a primation in Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
	Enter the names, addresses all organization made payments of amount of political contribution separate segregated fund or a	nd employer identification numbe For each organization listed, ente ns received that were promptly a political action committee (PAC)	r the amount paid frond directly delivered If additional space	om the filing organization to a separate political is needed, provide info	tions to which the filing on's funds Also enter the organization, such as a primation in Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
	Enter the names, addresses all organization made payments of amount of political contribution separate segregated fund or a	nd employer identification numbe For each organization listed, ente ns received that were promptly a political action committee (PAC)	r the amount paid frond directly delivered If additional space	om the filing organization to a separate political is needed, provide info	tions to which the filing on's funds Also enter the organization, such as a primation in Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
	Enter the names, addresses all organization made payments of amount of political contribution separate segregated fund or a	nd employer identification numbe For each organization listed, ente ns received that were promptly a political action committee (PAC)	r the amount paid frond directly delivered If additional space	om the filing organization to a separate political is needed, provide info	tions to which the filing on's funds Also enter the organization, such as a primation in Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
	Enter the names, addresses all organization made payments of amount of political contribution separate segregated fund or a	nd employer identification numbe For each organization listed, ente ns received that were promptly a political action committee (PAC)	r the amount paid frond directly delivered If additional space	om the filing organization to a separate political is needed, provide info	tions to which the filing on's funds Also enter the organization, such as a primation in Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
	Enter the names, addresses all organization made payments of amount of political contribution separate segregated fund or a	nd employer identification numbe For each organization listed, ente ns received that were promptly a political action committee (PAC)	r the amount paid frond directly delivered If additional space	om the filing organization to a separate political is needed, provide info	tions to which the filing on's funds Also enter the organization, such as a primation in Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
	Enter the names, addresses all organization made payments of amount of political contribution separate segregated fund or a	nd employer identification numbe For each organization listed, ente ns received that were promptly a political action committee (PAC)	r the amount paid frond directly delivered If additional space	om the filing organization to a separate political is needed, provide info	tions to which the filing on's funds Also enter the organization, such as a primation in Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
5	Enter the names, addresses all organization made payments of amount of political contribution separate segregated fund or a	nd employer identification numbe For each organization listed, ente ns received that were promptly a political action committee (PAC)	r the amount paid frond directly delivered If additional space	om the filing organization to a separate political is needed, provide info	tions to which the filing on's funds Also enter the organization, such as a primation in Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,

section 4911 tax for this year?

┌ Yes ┌ No

Ρ	art II-A Complete if the organization under section 501(h)).	is exempt under section 501(c)(3) ar	nd filed Form 5768	(election
	Check If the filing organization belongs to	<u> </u>		
В	Check If the filing organization checked bo	x A and "limited control" provisions apply	1	
	Limits on Lobbying E (The term "expenditures" means a		(a) Filing Organization's Totals	(b) A ffiliated Group Totals
1 a	Total lobbying expenditures to influence public o	opinion (grass roots lobbying)		
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)		
c	Total lobbying expenditures (add lines 1a and 1	b)		
d	Other exempt purpose expenditures		567,022	
е	Total exempt purpose expenditures (add lines 1	c and 1d)	567,022	
f	Lobbying nontaxable amount Enter the amount columns	from the following table in both	110,053	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of lir	ne 1f)	27,513	
h	Subtract line 1g from line 1a If zero or less, ent	er -0-	0	
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -	o	

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting

	Lobbying Expen	ditures During 4	-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
_2a	Lobbying non-taxable amount	100,187	111,176	112,431	110,053	433,847
ь	Lobbying ceiling amount (150% of line 2a, column(e))					650,771
c	Total lobbying expenditures	1,327	1,059	824		3,210
_d	Grassroots non-taxable amount	25,047	27,794	28,108	27,513	108,462
е 	Grassroots ceiling amount (150% of line 2d, column (e))					162,693
f	Grassroots lobbying expenditures					

art II-B	Complete if the organization is exempt under section 501(c)(3) and has	NOT filed Fo	rm 5768
	(election under section 501(h)).		

		1.	a)		(b)	
		Yes	No		\ moun	nt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?			_		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			-		
c	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities? If "Yes," describe in Part IV					
j	Total lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
	** THE A. Commisse if the every instinction is every medical exception FA4/s\/4\ exception [n
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6).	501(c)(5), (or se		
	501(c)(6).	501(c)(5), « 		Yes	No
1	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members?	501(c)(5), (1		
1 2	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less?	501(c)(5), (1 2		
1 2 3	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year?			1 2 3	Yes	No
1 2 3	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less?	501(c)(5), (1 2 3	Yes	No
1 2 3	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **III-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I	501(c)(5), (1 2 3	Yes	No
1 2 3 Par	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **III-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".	501(c II-A,)(5), (1 2 3	Yes	No
1 2 3 Par	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **TII-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes". Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political	501(c II-A,)(5), (1 2 3	Yes	No
1 2 3 Par 1 2	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes". Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	501(c II-A,)(5), (1 2 3	Yes	No
1 2 3 Par 1 2	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **TII-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes". Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year	501(c II-A,)(5), (1 2 3	Yes	No
1 2 3 Par 1 2	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **TII-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes". Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year	501(c II-A, 1 2a 2b)(5), (1 2 3	Yes	No
1 2 3 Par 1 2 a b	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes". Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	501(c II-A, 1 2a 2b 2c)(5), (1 2 3	Yes	No
1 2 3 Par 1 2 a b c	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **TIII-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes". Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	2a 2b 2c 3)(5), (1 2 3	Yes	No

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1 Also, complete this part for any additional information

Ident if ier Return Reference | Explanation efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493215008111

OMB No 1545-0047

Open to Public

Inspection

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions.

Name of the organization

Employer identification number

JELAWAI	RE VALLEY GRANIMAKERS		23-3	2518417		
Part I					s. Complet	e if the
	organization answered "Yes" to Form 99			(I.) F		
Tai	tal number at and af year	(a) Donor advised funds	(b) Funds and (otner accour	its
	tal number at end of year					
-	gregate contributions to (during year)					
_	gregate grants from (during year)					
	gregate value at end of year					
	d the organization inform all donors and donor advinds are the organization's property, subject to the		nor advi	sed	☐ Yes	┌ No
us	d the organization inform all grantees, donors, and ed only for charitable purposes and not for the ben nferring impermissible private benefit				☐ Yes	┌ No
	I Conservation Easements. Complete	ıf the organization answered "Yes" t	o Forn	n 990, Part I'	V, line 7.	
	rpose(s) of conservation easements held by the or Preservation of land for public use (e g , recreating Protection of natural habitat Preservation of open space Omplete lines 2a-2d if the organization held a quali	on or pleasure) Preservation of ar Preservation of a	certifie	d historic struc	•	ì
ea	sement on the last day of the tax year					
т.	tal number of conservation easements		<u> </u>	Held at the	End of the	Year
			2a			
	tal acreage restricted by conservation easements		2b			
	imber of conservation easements on a certified his	` ,	2c			
Nu	ımber of conservation easements ıncluded ın (c) ad	cquired aπer 8/1//06	2d			
	ımber of conservatıon easements modıfıed, transfe e taxable year ▶	rreu, releaseu, extiliguistieu, or terminate	eu by th	ie organizacion	uaring	
Nu	ımber of states where property subject to conserva	ation easement is located 🗠				
	pes the organization have a written policy regarding forcement of the conservation easements it holds?		dling of	violations, and	☐ Yes	┌ No
Sta	aff and volunteer hours devoted to monitoring, insp	pecting and enforcing conservation easen	nents d	uring the year	-	
A n	nount of expenses incurred in monitoring, inspectii	ng, and enforcing conservation easement:	s during	g the year ►\$		
	pes each conservation easement reported on line 2 0(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of sec	tion		☐ Yes	┌ No
ba	Part XIV, describe how the organization reports collance sheet, and include, if applicable, the text of the organization's accounting for conservation easen	the footnote to the organization's financia		•		
rt II	Organizations Maintaining Collection Complete if the organization answered '	ons of Art, Historical Treasures, "Yes" to Form 990, Part IV, line 8.	or Otl	her Similar	Assets.	
art	the organization elected, as permitted under SFAS t, historical treasures, or other similar assets held ovide, in Part XIV, the text of the footnote to its fin	for public exhibition, education or resear	ch ın fu			,
hıs	the organization elected, as permitted under SFAS storical treasures, or other similar assets held for j ovide the following amounts relating to these items	public exhibition, education, or research i			•	
(i)	Revenues included in Form 990, Part VIII, line 1			► \$		
(ii)) Assets included in Form 990, Part X			► \$		
	the organization received or held works of art, histo lowing amounts required to be reported under SFA		or finan	cıal gaın, provi	de the	
Re	venues included in Form 990, Part VIII, line 1			► \$		

b Assets included in Form 990, Part X

Par	•••• Organizations Maintaining Co	llections of Art	t, His	tori	<u>cal Tı</u>	reasur	<u>es, or 0</u>	the	r Similar <i>i</i>	Asset	ts (cc	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	ne foll	lowing	that are	a sıgnıfıca	nt us	se of its coll	ection		
а	Public exhibition		d	Γ	Loan	or excha	ange progr	ams				
b	Scholarly research		e	Γ	Other	r						
c	Preservation for future generations											
4	Provide a description of the organization's co Part XIV	ollections and expla	ain hov	w the	y furthe	er the or	ganızatıon	's ex	empt purpos	e ın		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t								ılar	┌ ʏ	es	┌ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an						answere	d "Ye	es" to Form	า 990,	,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterme	ediary	for c	ontribu	itions or	other ass	ets n	ot	Гγ	'es	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ing t	able		Г			A mour	nt	
c	Beginning balance							1c				
d	Additions during the year							1d				
e	Distributions during the year							1e				
f	Ending balance							1f				
2a	Did the organization include an amount on Fo	orm 990, Part X. lin	e 21?				L				es es	┌ No
	If "Yes," explain the arrangement in Part XIV										-	,
	rt V Endowment Funds. Complete		n ans	were	ed "Ye	s" to Fo	orm 990.	Part	IV, line 1	0.		
		(a)Current Year		Prior `			Years Back		hree Years Ba		Four Ye	ears Back
1a	Beginning of year balance											
b	Contributions											
c	Investment earnings or losses											
d	Grants or scholarships											
e	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the yea	r end balance held	as									
а	Board designated or quasi-endowment 🕨											
b	Permanent endowment 🕨											
с	Term endowment 🕨											
3a	Are there endowment funds not in the posses	ssion of the organiz	ation	that a	are held	d and ad	mınıstered	d for t	:he	-		
	organization by								Γ.)- (!)	Yes	No
	(i) unrelated organizations			•				•	_	Ba(i) Ba(ii)		
ь	(ii) related organizations If "Yes" to 3a(ii), are the related organizatio							• •	· · [3	3b		<u> </u>
4	Describe in Part XIV the intended uses of th	•				•		•				<u> </u>
	t VI Investments—Land, Buildings					90, Par	t X, line	10.				
						or other	(b)Cost or		(c) Accumu	lated	/4\ ^	
	D			ما ا		estment)	basis (oth	ner)	depreciat			
	Description of investment			De	isis (inve		245.5 (51.		чергески	on	(a) b	ook value
1a	Description of investment			De	isis (inve	esument)	Busis (et.		чергески	on	(d) B	ook value
	·		•	De	isis (inve		545.5 (64.		чергески	on	(а) в	ook value
b	Land	· · · · · · · · · · · · · · · · · · ·	•		isis (inve	esumenty	243.5 (6.1		<u>асргение</u>	ion	(d) b	ook value
b c	Land	· · · · · · · · · · · · · · · · · · ·	· · ·		isis (inve	esumenty		7,794		21,681	(d) b	6,113
b c d	Land	· · · · · · · · · · · · · · · · · · ·		De	isis (inve	esument)					(d) B	

Investments—Other Securities. See	Form 990, Part X, line 12		
(a) Description of security or category	(b)Book value		d of valuation
(including name of security)	(2)2001111111	Cost or end-o	f-year market value
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
Other			
T-1-1 (C-1 (h) -h C COO D+ V (C) h (2)			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See	Form 990, Part X, line	13.	
		(c) Metho	d of valuation
(a) Description of investment type	(b) Book value		f-year market value
	1		
	1		
	1		
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Total. (Column (b) should equal Form 990, Part X, col (B) line 13) Part IX Other Assets. See Form 990, Part X, lin			
	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
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Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
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Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, Im (a) Descrip	e 15. tion		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip (b) Should equal Form 990, Part X, col.(B) line 1:	e 15. tion 5.)		(b) Book value
Part IX Other Assets. See Form 990, Part X, Im (a) Descrip	e 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	e 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
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Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	5.)		(b) Book value

للنكسي	Reconcination of Change in Net Assets from Form 990 to Financial Statemen	ILS	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	514,781
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	567,022
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-52,241
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	0
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-52,241
	XII Reconciliation of Revenue per Audited Financial Statements With Revenue p		1
1	Total revenue, gains, and other support per audited financial statements	1	514,781
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		,
а	Net unrealized gains on investments 2a		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	514,781
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	514,781
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial	1	567,022
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
_ а	Donated services and use of facilities		
ь	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	567,022
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	567,022
Day	t XIV Supplemental Information		

Complete this part to 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 XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information

Ident if ier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48		MANAGEMENT HAS REVIEWED THE TAX POSITIONS FOR EACH OF THE OPEN TAX YEARS (2007-2009) OR EXPECTED TO BE TAKEN IN THE ORGANIZATION'S 2010 TAX RETURN AND HAS CONCLUDED THAT THERE ARE NO SIGNIFICANT UNCERTAIN TAX POSITIONS THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS

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DLN: 93493215008111

OMB No 1545-0047

2010

Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

Name of the organization
DELAWARE VALLEY GRANTMAKERS

Employer identification number

23-2518417

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		A COPY OF FORM 990 IS GIVEN TO THE BOARD OF DIRECTORS AFTER IT HAS BEEN REVIEWED BY THE AUDIT COMMITTEE AFTER THE BOARD OF DIRECTORS HAS REVIEWED IT, IT THEN IS FILED

ldentifier	Return Reference	Explanation
	, ,	THE BOARD OF DIRECTORS AND THE STAFF ARE REQUIRED TO COMPLETE A CONFLICT OF INTEREST POLICY FORM ON AN ANNUAL BASIS

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	IN SEPTEMBER 2007, THE ORGANIZATION COMMISSIONED A PROFESSIONAL, INDEPENDENT SALARY STUDY THE STUDY EXAMINED COMPARABILITY DATA FOR ALL ORGANIZATION POSITIONS AND RECOMMMENDED A SALARY RANGE PROGRAM BASED ON THE DATA THE BOARD OF DIRECTORS USED THE STUDY FINDINGS TO DELIBERATE AND DECIDE THE STAFF SALARY PROGRAM OFFERED BEGINNING IN 2008 THE EXECUTIVE DIRECTOR'S BASE SALARY HAS NOT BEEN CHANGED SINCE BEING HIRED THAT YEAR THE ORGANIZATION HAS ENGAGED AN INDEPENDENT CONSULTANT TO "MARKET PRICE" SELECTED STAFF POSITIONS SINCE THAT TIME

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 18	THE ORGANIZATION MAKES ITS 990 AVAILABLE ON THEIR OWN WEBSITE AS WELL AS WWW GUIDESTAR ORG

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY AVAILABLE UPON REQUEST THEIR FINANCIAL STATEMENTS ARE AVAILABLE THROUGH A LINK ON THEIR WEBSITE

ldentifier	Return Reference	Explanation
AUDIT COMMITTEE AND SELECTION OF INDEPENDENT ACCOUNTANT	PART XII, LINE 2C	THE PROCESS BY WHICH THE ORGANIZATION APPOINTS A COMMITTEE THAT ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENT AND SELECTION OF AN INDEPENDENT ACCOUNTANT HAS NOT CHANGED FROM THE PRIOR YEAR