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

OMB No	1545-0052
20	10

Department of the Treasury Internal Revenue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

For c	alend	ar year 2010, or tax year beginning , a	and e	ending				
<b>G</b> C	heck a			of a former public o		change	Final return	
— Na	ne of fo	Amended return Add	iess	criange	Name	change A Empl	loyer identification num	oer
ITGI	ile oi io	Midduoii					-1403629	
N	ORTI	HWEST CHARITABLE FOUNDATION				B Telep	hone number (see page 1	0 of the instructions)
Nu	nber an	nd street (or P O box number if mail is not delivered to street address	i)	Ro	oom/suite	814	4-728-7260	
_1	00 1	LIBERTY STREET				C If exe	mption application is pend	ing, check here
		n, state, and ZIP code				D 1. Fo	oreign organizations, check	here
	ARRI					1	preign organizations meetir	- —
		ype of organization $X$ Section 501(c)(3) exempt private					i% test, check here and at	
		T'		vate foundation		1	rate foundation status was on 507(b)(1)(A), check here	L
		ket value of all assets at J Accounting method	Δ	Cash Acc	ruai			
	e 16) 🌡	ear (from Part II, col. (c), Uther (specify)  ▶ \$ 16,476,933 (Part I, column (d) must be	ne on	caeh haeie )		I	foundation is in a 60-mont r section 507(b)(1)(B), che	
	irt l	Analysis of Revenue and Expenses (The total of	ſ	a) Revenue and				(d) Disbursements
	<u> </u>	amounts in columns (b), (c), and (d) may not necessarily equal	'	expenses per	(b) Net in		(c) Adjusted net	for charitable
		the amounts in column (a) (see page 11 of the instructions))		books	inco	ome	ıncome	purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)						
	2	Check ► X if the foundation is <b>not</b> required to attach Sch. B						
	3	Interest on savings and temporary cash investments		21		21	···-	
	4	Dividends and interest from securities		530,704	5	30,704		
	5a	Gross rents						
ne	b	Net rental income or (loss)	<u> </u>	1.0				
eū	6a	Net gain or (loss) from sale of assets not on line 10 STMT 1	-	12				-
Revenue	b	Gross sales price for all assets on line 6a 4,700  Capital gain net income (from Part IV, line 2)				0	<del></del>	
œ	8	Net short-term capital gain					0	
	9	· · · · · · · · · · · · · · · · · · ·	H				•	
	10a	Income modifications RECEIVED  Gross sales less returns & allowances	П					
	ь	Less Cost of goods sold	S					
	C	Gross profit or (loss) (attacheschedule) 2 3 2011	이					
	11	Other income (attach schedule)	RS					مد
	12	Total. Add lines 1 through 11 OGDEN UT		530,737	5	30,725	0	
Ø	13	Compensation of officers, directors, trustees, etc		.0				
enses	14	Other employee salaries and wages	<u> </u>		<u> </u>			
pen	15	Pension plans, employee benefits						
	16a	Legal fees (attach schedule) SEE STMT 2		5,701				5,701
ē	b	Accounting fees (attach schedule)					<u> </u>	
aţi	C	Other professional fees (attach schedule) Interest						·
SCANOPERING and Administrative Ex	17   18	Taxes (attach schedule) (see page 14 of the instructions) STMT 3		10,525				125
ini.	19	Depreciation (attach schedule) and depletion						
37	20	Occupancy						
٧ď	21	Travel, conferences, and meetings						
, 2, 2, 3, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	22	Printing and publications						
Ġ	23	Other expenses (att. sch.) STMT 4	<u></u>	14,597	ļ	14,597		ļ
itik	24	Total operating and administrative expenses.		_	[		_	
er.		Add lines 13 through 23	⊨	30,823		14,597	0	<del></del>
ģ	25	Contributions, gifts, grants paid	-	77,950	1	14 507		77,950
72	26	Total expenses and disbursements. Add lines 24 and 25	$\vdash$	108,773	-	14,597		83,776
Š	27	Subtract line 26 from line 12 <sup>-</sup> Excess of revenue over expenses and disbursements		421,964	1			
<b>(</b> (2)	a b	Net investment income (if negative, enter -0-)	$\vdash$	321, 304		16,128		
	6	Adjusted net income (if negative, enter -0-)			Ĭ	,_,0	0	
For		work Reduction Act Notice, see page 30 of the instruction	ons.		•		-	Form 990-PF (2010)
DAA				0000 1,40	4 7494		Э	<u>ጌ</u>
							9	

	Part I	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
	Part I	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
П	1	Cash—non-interest-bearing		42,845	42,845
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶			
		Less allowance for doubtful accounts ▶			
ı	4	Pledges receivable ▶			
	•	Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	٠	disqualified persons (attach schedule) (see page 15 of the			
		Instructions)			
	7	Other notes and loans receivable (att. schedule)			
	7	Less allowance for doubtful accounts   0			
"					·
et	8	Inventories for sale or use			<del></del>
Assets	9	Prepaid expenses and deferred charges			<del></del>
٩	10a	Investments—U.S. and state government obligations (attach schedule)	12 775 650	12 775 650	15 046 522
	b	Investments—corporate stock (attach schedule) SEE STMT 5	12,775,650	12,775,650	15,046,522
l	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis			<u></u>
		Less accumulated depreciation (attach sch.)			
	12	Investments—mortgage loans	1 222 222		4 000 566
	13	Investments—other (attach schedule) SEE STATEMENT 6	1,000,000	1,379,119	1,387,566
- [	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach sch.) ▶			
	15	Other assets (describe ▶ )			
	16	Total assets (to be completed by all filers—see the			
┙		instructions. Also, see page 1, item l)	13,775,650	14,197,614	16,476,933
	17	Accounts payable and accrued expenses			
ß	18	Grants payable			
<u>ë</u>	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
<u>a</u>	21	Mortgages and other notes payable (attach schedule)			,
_	22	Other liabilities (describe ▶ )			
	23	Total liabilities (add lines 17 through 22)	0	0	
П		Foundations that follow SFAS 117, check here		-	
Ś		and complete lines 24 through 26 and lines 30 and 31.			
ces	24	Unrestricted	13,775,650	14,197,614	
ar	25	Temporanly restricted			
Ba	26	Permanently restricted			
p		Foundations that do not follow SFAS 117, check here ▶			
'n		and complete lines 27 through 31.			
-	27	Capital stock, trust principal, or current funds			
Net Assets or Fund Balan	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
ets	29	Retained earnings, accumulated income, endowment, or other funds			
SS	30	Total net assets or fund balances (see page 17 of the			
t A	30	instructions)	13,775,650	14,197,614	
Se	24	,	13,773,030	14,157,014	
	31	Total liabilities and net assets/fund balances (see page 17	13,775,650	14,197,614	
	Dort	of the instructions)	13,773,630	14,137,014	<del></del>
	Part_		agrae with		
1		I net assets or fund balances at beginning of year—Part II, column (a), line 30 (must	agree with		12 775 650
_		of-year figure reported on prior year's return)		1 1	13,775,650
_		r amount from Part I, line 27a		2	421,964
3		er increases not included in line 2 (itemize)		3	74 77 77
4		fines 1, 2, and 3		. 4	14,197,614
5		reases not included in line 2 (itemize)		5	
_6	Tota	I net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b),	line 30	6	14,197,614
					Form 990-PF (2010)

PartilV Capital Gains a	nd Losses for Tax on Investme	ent Income				
(a) List and descrit 2-story brick ward	be the kind(s) of property sold (e.g., real estate ehouse, or common stock, 200 shs. MLC Co.)	9,	(b) How acquired P—Purchase D—Donation	(c) Date ac (mo , day		(d) Date sold (mo , day, yr )
1a N/A						
b						
c						
d	-15		<u> </u>	ļ		
Θ		<del> </del>				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	107	r other basis ense of sale			or (loss) ) minus (g)
a						
						<del></del>
С		-		ļ		
d				ļ	<del></del>	<u>-</u>
Ө		10/04/00	<del> </del>	<u> </u>		<del></del>
Complete only for assets showing	gain in column (h) and owned by the for					(h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (i) l (j), if any			less than -0-) or om col (h))
_a				ļ		
b						<del></del>
С				<del> </del>		
d				<u> </u>		
е		<u> </u>				
2 Capital gain net income or (net ca	If gain, also enter in If (loss), enter -0- in	•		2		
	s) as defined in sections 1222(5) and (6)					
If gain, also enter in Part I, line 8,	column (c) (see pages 13 and 17 of the	instructions)				
If (loss), enter -0- in Part I, line 8				] 3		
PartiV Qualification Ur	nder Section 4940(e) for Reduc	ed Tax on Net Ir	nvestment Incon	ne		
(For optional use by domestic private	foundations subject to the section 4940(	(a) tax on net investme	ent income )			
If section 4940(d)(2) applies, leave thi	s part blank					
Mas the foundation liable for the secti	ion 4942 tax on the distributable amount	of any year in the has	se negod?			Yes X No
	ify under section 4940(e) Do not comple		se periou:			163 [21] 140
	each column for each year, see page 18		ore making any entre	<u> </u>		
(a)		of the instructions ber	•	:5		(d)
Base period years	(b) Adjusted qualifying distribution	ons Net value	(c) e of nonchantable-use as	sets		nbution ratio
Calendar year (or tax year beginning	11)		15.167.		(00) (0) (	aivided by cor (c))
2009			13,107,	100		<u></u> .
2008		-				
2006						
2005						
2 Total of line 1, column (d)				2	1	
	5-year base period—divide the total on lii	ne 2 by 5, or by the		- <del></del>	<del> </del>	
=	as been in existence if less than 5 years			3		
namber of years are realisation.	30 300n m 0xi0tonoo n 1000 m.a.n o yaano				<u> </u>	
4 Enter the net value of noncharital	ole-use assets for 2010 from Part X, line	5		4		15,698,302
	,					
5 Multiply line 4 by line 3				5		
· · · · · · · · · · · · · · · · · · ·						
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)			6		5,163
	,					<del></del>
7 Add lines 5 and 6				7	<u>L</u>	5,163
•						
8 Enter qualifying distributions from	ı Part XII, line 4			8	<u>L</u>	83,776
	n line 7, check the box in Part VI, line 1b,	and complete that pa	art using a 1% tax rate	See the		
Part VI instructions on page 18						

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Form 990-PF (201	0) NORTHWEST CHARITABLE FOUNDATION	27-1403629		Page 7
Part VIII	Information About Officers, Directors, Trustees, Foundation	ation Managers, Highly Paid Emplo	oyees,	
	and Contractors (continued)			
3 Five highes	st-paid independent contractors for professional services (see page 2	3 of the instructions). If none, enter "NONE	E."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Comp	ensation
NONE				
•				
·				
Total number of o	thers receiving over \$50,000 for professional services		<b>•</b>	<u> </u>
PartIX-A	Summary of Direct Charitable Activities			
	's four largest direct chantable activities during the tax year. Include relevant statistical other beneficiaries served, conferences convened, research papers produced, etc.	information such as the number of	Expe	enses
1 N/A	· <del></del>			
,				
2				
3				
-				
4				
		<del></del>		
®PartiX-B	Summary of Program-Related Investments (see page			
	argest program-related investments made by the foundation during the tax year on line	s 1 and 2	Amour	<u>it</u>
1 N/A				
2		İ		
All ash as a second	related as real parts. See a see 24 of the restrictions			
	related investments. See page 24 of the instructions			
3				

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Total. Add lines 1 through 3

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

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

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

Adjusted qualifying distributions. Subtract line 5 from line 4

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

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6

5,161

5

_ Pa	rt XIII Undistributed Income	(see page 26 of the	ne instructions)			
			(a)	(b)	(c)	(d)
1	Distributable amount for 2010 from Part X	ı,	Corpus	Years pnor to 2009	2009	2010
	line 7					779,754
2	Undistributed income, if any, as of the end	l of 2010:				
а	Enter amount for 2009 only					 
b	Total for prior years 20 , 20	. 20				
3	Excess distributions carryover, if any, to 2			-		
a	From 2005					
ь	From 2006					
c	From 2007					į
	From 2008					
d	· · ·					•
8	From 2009					
f	Total of lines 3a through e	VII				
4	Qualifying distributions for 2010 from Part	XII,				
	line 4 ▶ \$ 83,776				·	
а	Applied to 2009, but not more than line 2a					
b	Applied to undistributed income of prior ye					
	(Election required—see page 26 of the ins					
С	Treated as distributions out of corpus (Ele					Ì
	required—see page 26 of the instructions)	)				
d	Applied to 2010 distributable amount					83,776
θ	Remaining amount distributed out of corpu	us				
5	Excess distributions carryover applied to 2	2010				
	(If an amount appears in column (d), the s	same				
	amount must be shown in column (a))					
6	Enter the net total of each column as					
	indicated below:					
а	Corpus Add lines 3f, 4c, and 4e Subtract	line 5				
b	Prior years' undistributed income Subtract	et				
	line 4b from line 2b					
С	Enter the amount of pnor years' undistribu	ıted				
	income for which a notice of deficiency ha					
	been issued, or on which the section 4942	2(a)				
	tax has been previously assessed					
d	Subtract line 6c from line 6b. Taxable					-
_	amount—see page 27 of the instructions					!
0	Undistributed income for 2009. Subtract li	ne				
·	4a from line 2a. Taxable amount—see pa					
	27 of the instructions	9-				
f	Undistributed income for 2010. Subtract li	nes				
•	4d and 5 from line 1 This amount must be					
	distributed in 2011					695,978
7	Amounts treated as distributions out of co	rmue				03073.10
•	to satisfy requirements imposed by section					
	170(b)(1)(F) or 4942(g)(3) (see page 27 of					
		or the				
	instructions)					
8	Excess distributions carryover from 2005					
	applied on line 5 or line 7 (see page 27 of	tne				
_	instructions)			<del> </del>		
9	Excess distributions carryover to 2011	•				
	Subtract lines 7 and 8 from line 6a					
10	Analysis of line 9	ı				
а	Excess from 2006					
b	Excess from 2007					
С	Excess from 2008					:
d	Excess from 2009					
A	Excess from 2010	1	I	i	1	

策Ρā	rt XIV. Private Operating Fou	ndations (see pa	ge 27 of the instru	ictions and Part V	II-A, question 9)	
1a	If the foundation has received a ruling or o		<del></del>	_		
	foundation, and the ruling is effective for 2			<b>•</b>		
ь	Check box to indicate whether the founda	tion is a private operation	ng foundation described	d in section 49	42(j)(3) or 4942	2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Pnor 3 years		(e) Total
	income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
	investment return from Part X for					
	each year listed	<u> </u>				
b	85% of line 2a					
С	Qualifying distributions from Part XII,					
	line 4 for each year listed					
ď	Amounts included in line 2c not used directly					
	for active conduct of exempt activities					
0	Qualifying distributions made directly					
	for active conduct of exempt activities					
•	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
а	alternative test relied upon.  "Assets" alternative test—enter					
•	(1) Value of all assets					
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(j)					
b	"Endowment" alternative test—enter 2/3					
	of minimum investment return shown in					
	Part X, line 6 for each year listed					
С	"Support" alternative test—enter	**************************************				
	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on					
	securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public	•				
	and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii)			 		
	(3) Largest amount of support from					
	an exempt organization (4) Gross investment income					
推Pa	Supplementary Inform	nation (Complete	this part only if th	e foundation had	\$5 000 or more i	n assets at
	any time during the ye	•	-		<b>40,000</b> 01 111010 11	
1	Information Regarding Foundation Mar	•	<u>_</u>			, , , , , , , , , , , , , , , , , , ,
а	List any managers of the foundation who l	-	than 2% of the total cor	ntributions received by t	he foundation	
	before the close of any tax year (but only	of they have contributed	more than \$5,000). (S	ee section 507(d)(2))		
	N/A					
b	List any managers of the foundation who	own 10% or more of the	e stock of a corporation	(or an equally large po	rtion of the	
	ownership of a partnership or other entity)	of which the foundatio	n has a 10% or greater	interest		
	N/A					
2	Information Regarding Contribution, G					
	-			organizations and doe		
	unsolicited requests for funds. If the found		· · · · · ·	f the instructions) to ind	ividuals or	
	organizations under other conditions, com				-	
а	The name, address, and telephone numbers / A	er of the person to who	m applications should t	be addressed.		
	N/A					
	The form in which applications should be	submitted and informat	on and materials they	should include		<del> </del>
b	N/A	submitted and informat	ion and materials they	SHOULD HICHULE		
	Any submission deadlines					
·	N/A					
	Any restrictions or limitations on awards,	such as by geographica	al areas, chantable field	ls, kinds of institutions.	or other	<del></del>
-	factors	· / G · · G· F· · · · ·				
	N/A					
						000 DE

Form 990-PF (2010) NORTHWEST CHARITABLE FOUNDATION 27-1403629 Page 11 Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to Foundation Recipient Purpose of grant or status of **Amount** any foundation manager or substantial contributor contribution recipient Name and address (home or business) Paid during the year SEE STATEMENT 8 77,950 77,950 Total **▶** 3a **b** Approved for future payment N/A

**▶** 3b

Total

	•	Analysis of income-Producing Activ	T		T		
		unts unless otherwise indicated	(a) Business code	d business income (b) Amount	(c) Exclusion code	d by section 512, 513, or 514 (d) Amount	(e) Related or exempt function income (See page 28 of the instructions)
1	Program ser			, <u> </u>	+		uic manacaona y
					<del> </del>		
					<del>  </del>		· · · · · · · · · · · · · · · · · · ·
					<del> </del>		
	f						
		d contracts from government agencies					
2		dues and assessments					
	•	avings and temporary cash investments			14	21	
		nd interest from securities			14	530,704	
5	Net rental in	come or (loss) from real estate			1		
		anced property					
		i-financed property					
6		come or (loss) from personal property					
	Other invest						
8	Gain or (loss	s) from sales of assets other than inventory			18	12	
		or (loss) from special events					
		or (loss) from sales of inventory					
11	Other reveni	Je: a					
		1.4.1348					
	θ						
12	Subtotal Ad	d columns (b), (d), and (e)		(		530,737	
		ne 12, columns (b), (d), and (e)				13	530,737
		n line 13 instructions on page 29 to verify calculations					
	Part XVI-B						
	Line No. ▼	Explain below how each activity for which income is accomplishment of the foundation's exempt purposi instructions)					the
_	N/A	non delicite y					
_	21/21						
						· ·	
	· -		•				
				• •			
				<del>-</del> -			
_							
						<del> </del>	
	····						
			<u></u>				
_							<u>.                                    </u>
_							
_			_				
<del></del>		<u> </u>					Form 990-PF (2010)
DA	`						- i oini +34-i-i- (2010)

Under penalties of perjury, I declare that I have exa	amiped this return, including accompanying	ng schedules and statements, and to the best of my knowledge and

Sign Here eef, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge

Signature of officer or trustee

Print/Type preparer's name

Preparer's signature

Paid
Preparer
Use Only
Prim's name HAINES &

Racaines CPA

Date	Check If
11/15/11	self-employed

Use Only Firm's name ► Firm's address ►

HAINES & COMPANY
PO BOX 767

WARREN, PA 16365-0767

Phone no 814-723-7741

Firm's EIN ▶ 25-1635425

PTIN

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27-1403629		Federal S	ederal Statements			
	Statement	Statement 1 - Form 990-PF, Part I, Line 6a - Sale of Assets	Part I, Line 6a - 9	sale of Assets		
Description		How Received	ņ			
Whom Date Sold Acquired	Date Sold	Sale Price	Cost	Expense	Depreciation	Net ion Gain / Loss
EDERATED ULTRASHOR VARIOUS	T BOND \$	DONATIO 4,700	N \$ 4,688	₩.	\$÷	\$ 12
		4,700	4,	φ.	\$ 0	
	Statement 2	12 - Form 990-PF, Part I,		Line 16a - Legal Fees		
Description		Total	Net Investment		Adjusted Net	Charitable Purpose
LEGAL FEES	ا ٍ ٍ ا	5,701	w			\$ 5,701
TOTAL	w W	5,701	w	φ   	0	\$ 5,701
	Statement 3		- Form 990-PF, Part I, Line 18 - Taxes	8 - Taxes		
Description		Total	Net Investment		Adjusted Net	Charitable Purpose
EXCISE TAX	<b>ω</b>	10,400	\$	<b>₩</b>		\$ 125
	ω. 	10,525	w	°	0	\$ 125
S)1	Statement 4	- Form 990-PF,	Part I, Line 23 - Other Expenses	ther Expenses		
Description		Total	Net Investment	ىد	Adjusted Net	Charitable Purpose
EXPENSES	\ \ !		w	 •		w
INVESTMENT FEES	Į	14,597	14,6	597		
IOIAL	<u>α</u>	14,397	, h			
						4

a 1 9

		Fair Market Value	\$ 15,046,522	\$ 15,046,522		Fair Market
	vestments	Basis of Valuation			ents	Basis of
ements	90-PF, Part II, Line 10b - Corporate Stock Investments	End of Year	\$ 12,775,650	\$ 12,775,650	Line 13 - Other Investm	End of
Federal Statements	Statement 5 - Form 990-PF, Part II, Line 1	Beginning of Year	\$ 12,775,650	\$ 12,775,650	Statement 6 - Form 990-PF, Part II, Line 13 - Other Investments	Beainning
27-1403629	Stateme	Description	NORTHWEST BANCSHARES INC.	TOTAL	15	

Fair Market Value	\$ 258,807 1,128,759	\$ 1,387,566
Basis of Valuation		
End of Year	\$ 258,807 1,120,312	\$ 1,379,119
Beginning of Year	\$ 1,000,000	\$ 1,000,000
Description	FEDERATED PRIME CASH OBLIGATION FUND FEDERATED ULTRASHORT BOND #108	TOTAL

27-1403629	Federal St	ederal Statements	8		
Statement 7 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees, Etc.	0-PF, Part VIII, Line	1 - List of Off	icers, Directors, Trus	tees, Etc.	•
Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
GREGORY C. LAROCCA 100 LIBERTY STREET WARREN PA 16365	PRESIDENT	00.0	0	0	
VICKI L. STEC 100 LIBERTY STREET WARREN PA 16365	VICE PRESIDE	0.00	0	0	0
DONALD E. REED 100 LIBERTY STREET WARREN PA 16365	TREASURER	00.0	0	0	0
JESSIE L. THOMAS 100 LIBERTY STREET WARREN PA 16365	SECRETARY	0.00	0	0	0
WILLIAM J. WAGNER 100 LIBERTY STREET WARREN PA 16365	DIRECTOR	0.00	0	0	0
RICHARD E. MCDOWELL 100 LIBERTY STREET WARREN PA 16365	DIRECTOR	00.0	0	0	0
PHILIP M. TREDWAY 100 LIBERTY STREET WARREN PA 16365	DIRECTOR	0.00	0	0	0
SONIA M. PROBST 100 LIBERTY STREET WARREN PA 16365	DIRECTOR	00.00	0	0	0
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27-1403629

## Federal Statements

## Statement 8 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

	•																															
	Amount	1,500	4,100	700	1	1,700	1,000		T,000	925		1,600		3,200	, t	1,450	002 0	200	850		4,500	C C	7,500	1.500		3,000		1,900	1	15,000	009	) )
	Purpose	TO PROVIDE SUPPORT TO NON-PROFIT ORG	TO PROVIDE SUPPORT TO NON-PROFIT ORG	TO PROVIDE SUPPORT TO NON-PROFIT ORG		TO PROVIDE SUPPORT TO NON-PROFIT ORG	TO PROVIDE SUPPORT TO NON-PROFIT ORG	חדמי מת איניא כח חתים מתונים מתדנים מת	IO PROVIDE SUPPORT IO NON-PROFIT ORG	TO PROVIDE SUPPORT TO NON-PROFIT ORG		TO PROVIDE SUPPORT TO NON-PROFIT ORG		TO PROVIDE SUPPORT TO NON-PROFIT ORG		TO PROVIDE SUPPORT TO NON-PROFIT ORG	TO DROVING SIIDDORF TO NON-DROFT ORC	ENCLUDE SOFF CITY TO THE THE THE	TO PROVIDE SUPPORT TO NON-PROFIT ORG		TO PROVIDE SUPPORT TO NON-PROFIT ORG	Hitchia Charles Charle	IO PROVIDE SUPPORT TO NON-PROFIT ORG	TO PROVINE SIIPPORT TO NON-PROFIT ORG		TO PROVIDE SUPPORT TO NON-PROFIT ORG		TO PROVIDE SUPPORT TO NON-PROFIT ORG		TO PROVIDE SUPPORT TO NON-PROFIT ORG	TO DECENTINE STEPPORT TO NON-DROKETT ORG	
	Status	CHARITY	CHARITY	CHARITY		CHARITY	CHARITY	, e	CHAKLII AVENITE	CHARITY		CHARITY		CHARITY		CHARITY	VTTARHO	CILCULTIT	CHARITY		CHARITY		CHAKLIY	CHAPTTV	1	CHARITY		CHARITY		CHARITY	NY CHAPITY	
Address	Relationship	PO BOX 134  NONE CE COND CTBEET	NONE NONE	134 EAST MAIN STREET NONE	223 S. JARED STREET	NONE	NONE	206 MAIN STREET	NONE 91 SOITH DROGBESS AV	NONE	44 ST. MARYS STREET	NONE	531 1/2 MAIN STREET	Öz;	208 W. SPRING STREET	NONE	1250 FENN AVE #1	2801 C COURT		93 MAIN STREET	NONE	323 NORTH 3RD STREET	NONE DO DOV 134		PO BOX 554		2235 MILLENNIUM WAY	NONE	420 WEST 6TH STREET	NONE	9285 PROGRESS PARKWAY	MONE
Name	Address	CAMERON COUNTY COMMUNITY EMPORIUM PA 15834	CLEARFIELD PA 16803	CORRY AREA UNITED WAY CORRY PA 16407	DUBOIS AREA UNITED WAY	DU BOIS PA 15801	HUNTINGDON COUNTY ONLIED HUNTINGDON PA 16652	NORTHERN MERCER COUNTY	GREENVILLE PA 16125 SCUIVIVILII IMITTEN WAV	POTISVILLE PA 17901	ST. MARYS AREA UNITED WAY		THE UNITED WAY OF CLARION	CLARION PA 16214	TITUSVILLE AREA UNITED	TITUSVILLE PA 16354	UNITED WAY OF ALLEGHENY	FILISBOAGH FA 19222	ASHTUBULA OH 44004	UNITED WAY OF BRADFORD,		UNITED WAY OF BUTLER	HAMILTON OH 45011		INITED WAY OF CRAWFORD		UNITED WAY OF DAUPHIN	17025	UNITED WAY OF ERIE COUNTY	ERIE PA 16507	UNITED WAY OF LAKE COUNTY	MENIOR OR 44000

Statements	
Federal	

27-1403629

Statement 8 - Form 99	0-PF, Part XV, Line 3a - Grants and Contributions Paid During the	Year (continued)
	Statement 8 - Form 990-PF, Part XV, Lin	Year

•																			
	Amount		3,725		4,700		550		3,725		2,000		4,500		2,500		3,725	77,950	
	Purpose		TO PROVIDE SUPPORT TO NON-PROFIT ORG		TO PROVIDE SUPPORT TO NON-PROFIT ORG		TO PROVIDE SUPPORT TO NON-PROFIT ORG		TO PROVIDE SUPPORT TO NON-PROFIT ORG		TO PROVIDE SUPPORT TO NON-PROFIT ORG		TO PROVIDE SUPPORT TO NON-PROFIT ORG		TO PROVIDE SUPPORT TO NON-PROFIT ORG		TO PROVIDE SUPPORT TO NON-PROFIT ORG		Ц
	Status		CHARITY	8	CHARITY	ET #1	CHARITY	ET. #2	CHARITY	ET	CHARITY		CHARITY	, STE	CHARITY	H	CHARITY		
Address	Relationship	630 JANET AVENUE	NONE	422 MAIN STREET #203	NONE	223 N MERCER STREET	NONE	801 CUMBERLAIN STREET. #2	NONE	413 NORTH MAIN STREET	NONE	1999 ALLEGHENY BLVD	NONE	33 W. FRANKLIN ST.	NONE	800 EAST KING STREET	NONE		
Name	Address	UNITED WAY OF LANCASTER	LANCASTER PA 17601	UNITED WAY OF LAUREL	JOHNSTOWN PA 15901	UNITED WAY OF LAWRENCE	NEW CASTLE PA 16101	UNITED WAY OF LEBANON	LEBANON PA 17042	UNITED WAY OF SOUTHERN	JAMESTOWN NY 14701	UNITED WAY OF VENAGO	RENO PA 16343	UNITED WAY OF WASHINGTON	HAGERSTOWN MD 21740	UNITED WAY OF YORK COUNTY	YORK PA 17403	TOTAL	

Form 88	68 (Rev 1-2011)				Page 2
• If y	ou are filing for an Additional (Not Automatic)	3-Month E	Extension, complete only Part II a	and check this box	<b>▶</b> 🗙
	Only complete Part II if you have already been				
<ul> <li>If ye</li> </ul>	ou are filing for an Automatic 3-Month Extensi	on, comp	lete only Part I (on page 1).	· ·	
Part				(no copies needed).	
Туре	or Name of exempt organization			Employer identification	n number
print	NORTHWEST CHARITABLE FOUNDATI	ION		27-1403629	
File by the		. box, see ir	nstructions.		
extended due date	INTERNATIONAL CONTRACT CANDAINS CONTRACTOR AND AND	LIBERTY	STREET		
filing you	City, town or post office, state, and ZIP code.	For a foreig	n address, see instructions.		
retum Se <u>instructio</u>				PA	16365
Enter	the Return code for the return that this application	on is for (fil	le a separate application for each r	return)	. 04
Appli	ication	Return	Application		Return
Is Fo	r	Code	is For		Code
Form	990	01		A METALTICAL PROPERTY.	12 00 00 00 00 00 00 00 00 00 00 00 00 00
Form	990-BL	02	Form 1041-A		08
Form	990-EZ	03	Form 4720		09
Form	990-PF	04	Form 5227		10
Form	990-T (sec. 401(a) or 408(a) trust)	05	Form 6069		11
Form	990-T (trust other than above)	06	Form 8870		12
STOPI	Do not complete Part II if you were not already gr	ranted an a	utomatic 3-month extension on a pre	eviously filed Form 8868	•
Tel If the	e books are in the care of  GREGORY C. L. lephone No. (814) 728-7260 he organization does not have an office or place his is for a Group Return, enter the organization whole group, check this box	. of busine 's four digi If it is for p	FAX No. ► (814) 728-7128 ss in the United States, check this t Group Exemption Number (GEN) part of the group, check this box.	box	▶ ☐ If this is and attach a
4	I request an additional 3-month extension of tin				
5	For calendar year 2010 , or other tax year b			d ending	
	If the tax year entered in line 5 is for less than				··································
	Change in accounting period	NITIONIAL S		2010175 0571011	
7	State in detail why you need the extension ADD	DITIONAL	I IME IS NECESSARY FILE AN AC	CURATE RETURN.	
	Makin and Vicalian in factors 200 DL 200 DT	200 T 470	0 0000	1	<del></del>
8a	If this application is for Form 990-BL, 990-PF, 9	990-1,472	o, or 6069, enter the tentative tax,	* ! !	
	nonrefundable credits. See instructions.	700 000	0	8a \$	
b	If this application is for Form 990-PF, 990-T, 47				
	estimated tax payments made. Include any pricamount paid previously with Form 8868.			8b \$	<u> </u>
C	Balance due. Subtract line 8b from line 8a. Inc		• •		
	EFTPS (Electronic Federal Tax Payment Syste			8c \$	0
ıt is true	penalties of perjury, I declare that I have examined this form, ir e, correct, and complete, and that I am authorized to prepare the	ncluding accor his form.		he best of my knowledge and	belief,
Signatu	The second second	Title ► C			368 (Rev. 1-2011)
				, 5 91	1