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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

OMB No 1545-0047 2010 Open to Public Inspection

<u>A</u>	For the 2010 ca	lendar year, or tax year beginning $07/01/10$, and ending $06/30/11$			
В	Check if applicable	C Name of organization FOUNDATION FOR PENNSYLVANIA		D Emplo	yer identification number
∐.	Address change	WATERSHEDS			_
	Name change	Doing Business As		20-	8746105
$\bar{\sqcap}$	Initial return	Number and street (or P O box if mail is not delivered to street address)	Room/suite		one number
\equiv		116 MARKET STREET, SUITE 4		814	-536-7741
	Terminated	City or town, state or country, and ZIP + 4			
	Amended return	JOHNSTOWN PA 15901	Τ	G Gross rece	pts\$ 1,960,786
	Application pending	F Name and address of principal officer	H(a) Is this a	group return for a	ffiliates? Yes X No
			1		
			1 ' '	affiliates includ	st (see instructions)
_			┤ " "	io, attacina ii	st (see mandedons)
÷	Tax-exempt statu		1,,,		
		WW. PENNSYLVANIAWATERSHEDS.ORG		exemption nur	
_	Form of organization		ear of formation 2	000	M State of legal domicile PA
		ummary			
	1	escribe the organization's mission or most significant activities	MIRIC &	NTC.	
Sce	L	ORGANIZATION HAS BEEN FORMED FOR CHARITABLE, SCIENTATIONAL PURPOSES, WITH A PARTICULAR FOCUS ON WORKING			10
nar	1	ATIONAL PURPOSES, WITH A PARTICULAR FOCUS ON WORRING. R AND WATERSHEDS.	ig TO PRO	TECT PA	. · S
Activities & Governance			0/ -5-44		
တိ	t .	his box > if the organization discontinued its operations or disposed of more than 25	% of its net as		6
රේ ග	1	of voting members of the governing body (Part VI, line 1a)		3	6
itie	1	of independent voting members of the governing body (Part VI, line 1b)		4	5
_``		mber of individuals employed in calendar year 2010 (Part V, line 2a)		5	0
₹	1	mber of volunteers (estimate if necessary)		 	
N		related business revenue from Part VIII, column (C), line 12		7a 7b	0
_	b Net unre	lated business taxable income from Form 990-T, line 34	Prior Ye		Current Year
	8 Contribu	tions and grants (Part VIII, line 1h)		9,075	1,957,096
CAST SERVENUE REVENUE		Lservice-revenue (Part-VIII, line 2g)			
Ş	- 1	ent income (Rart VIII-column (A), lines 3, 4, and 7d)	-	1,361	3,690
ijĸ		venue (Part VIII, column (A),(lines 5, 6d, 8c, 9c, 10c, and 11e)			
<u> </u>		enuel add lines 8 friough 11 (must equal Part VIII, column (A), line 12)	1,28	0,436	1,960,786
		ind similar amounts paid (Part IX, column (A), lines 1–3)		6,138	1,021,395
1,0		paid to or for members (Part IX column (A), line 4)			
		other compensation, employee benefits (Part IX, column (A), lines 5–10)	20	3,867	358,129
kpenses	16a Professi	onal fundraising fees (Part IX, column (A), line 11e)			
þe	b Total fur	ndraising expenses (Part IX, column (D), line 25) ▶ 62,218			
Ж		openses (Part IX, column (A), lines 11a–11d, 11f–24f)	34	8,001	501,834
		penses Add lines 13–17 (must equal Part IX, column (A), line 25)		8,006	1,881,358
	19 Revenue	e less expenses Subtract line 18 from line 12	-21	7,570	79,428
Net Assets or	8		Beginning of Cu		End of Year
seets	ਊ 20 Total as	sets (Part X, line 16)		1,493	633,963
F. A.	21 Total ka	bilities (Part X, line 26)		9,508	433,082
		ets or fund balances Subtract line 21 from line 20	11	1,985	200,881
		ignature Block			
		perjury I declare that I have examined this return, including accompanying schedules and statements,		of my knowled	ge and belief, it is
	rue, correct, and c	omplete Declaration of preparer (other than officer) is based on all information of which preparer has a	any knowledge	. , 	
		L for fan			
Si	- 1.	Signature of officer		Date	,
He	еге	Michael Kone Executive Director			
_		Type or print name and title		1 101 1	
0-	1/	ype preparer's name ORG: AND PETRILLA PROPARA ELITIEM ORG: AND PETRILLA	14 Date	Check	$\boldsymbol{\leftarrow}$
Pai		Direction of do			nployed 25 110005
	eparer Firm's			Firm's EIN	25-1188995
US	e Only	950 E MAIN ST	ļ		814-445-8961
_		address > SOMERSET, PA 15501-2005		Phone no	
		iss this return with the preparer shown above? (see instructions)			Yes No Form 990 (2010)
Fo DA	r raperwork R A	eduction Act Notice, see the separate instructions.			rom 330 (2010)

	990 (2010) FOUNDATION FOR		20-8/46103	Page 2
Pai	_	Service Accomplishments	n this Bort III	
4		ontains a response to any question i	n this Part III	
	Briefly describe the organization's missic	BEEN FORMED FOR CHARI	TABLE SCIENTIFIC AND)
		WITH A PARTICULAR FOC		
	ATER AND WATERSHEDS.			
_				
2	Did the organization undertake any signi	ficant program services during the year which	were not listed on the	
	pnor Form 990 or 990-EZ?			Yes X No
	If "Yes," describe these new services on			
	· · · · · · · · · · · · · · · · · · ·	or make significant changes in how it conducts	s, any program	
	services?	- 1.1. O		Yes X No
	If "Yes," describe these changes on Sch	edule O ents for each of the organization's three larges	t program capucae by expanses. Section	
		id section 4947(a)(1) trusts are required to rep		
		if any, for each program service reported		
		,, , , , , , , , , , , , , , , , ,		
4a	(Code.) (Expenses \$	1,715,071 including grants of \$	1,021,395) (Revenue \$)
		NNSYLVANIA WATERSHEDS		,
I	S DEFINDED AS A TYPE	1 SUPPORTING ORGANIZA	TION, UNDER	
I	NTERNAL REVENUE CODE	SECTION 509(A)(3), TO	THE COMMUNITY	
	DUNDATION OF GREATER		IZATION HAS	
	•	T PENNSYLVANIA'S WATER	RESOURCES AND	
W	ATERSHEDS			
4b	(Code.) (Expenses \$	including grants of \$) (Revenue \$)
		• •		·
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4d	Other program services (Describe in Se	chedule O)		
	(Expenses \$	including grants of \$) (Revenue \$	
<u>4e</u>	Total program service expenses ▶	1,715,071		
DAA				Form 990 (2010)

	n 990 (2010) FOUNDATION FOR PENNSYLVANIA 20-8746105		P	age 3
<u> </u>	art IV Checklist of Required Schedules			
			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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)		X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			42
	candidates for public office? If "Yes," complete Schedule C, Part I	_ 3		X
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	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			ĺ
	assessments, or similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C,			7.
•	Part III		\vdash	X
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,"		[]	- T
_	complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	1 _		₹.
	complete Schedule D, Part III	8		X
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,"			.,
46	complete Schedule D, Part IV	9		X
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		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	j		
_	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	144-	x	l
	complete Schedule D, Part VI	11a	<u> </u>	\vdash
D	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	445	} :	x
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	-	_^
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	44.		x
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u> </u>
a	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	44.4		x
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	x	<u> </u>
6	- · · · · · · · · · · · · · · · · · · ·	11e	-	├──
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			x
120	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	111	 	<u> </u>
120	Schedule D, Parts XI, XII, and XIII	12a		x
b	and the second s		$\vdash \vdash$	-
b	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	x	1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	 	X
14a		14a	t^-	X
b		144		
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b	l	x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	149	-	
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	<u> </u>		
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	Ì	x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	<u> </u>		
••	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17]	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		T^{-}	
	If "Yes," complete Schedule G, Part III	19	1	X
20a	The state of the s	20a		X
b	and the second of the second o			
_	Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b	<u> </u>	

	art IV Checklist of Required Schedules (continued)				<u>P</u>	age 2
	oneckist of Nequired Defieuties (Continued)				Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations				103	
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II			21	x	l
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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the					
	organization's current and former officers, directors, trustees, key employees, and highest compensated					l
	employees? If "Yes," complete Schedule J			23		x
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			Į.		
	through 24d and complete Schedule K. If "No," go to line 25			24a		x
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			1270		
·	to defease any tax-exempt bonds?			24c		ĺ
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?			24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			240		
LJa	with a disqualified person during the year? If "Yes," complete Schedule L, Part I			25a		X
				23a	-	
þ	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?			254		~
26	If "Yes," complete Schedule L, Part I			25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or					₹.
2-	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II			26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			1		İ
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?					•
00	If "Yes," complete Schedule L, Part III			27	<u> </u>	X
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)			.	[
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			28a	├	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete					
	Schedule L, Part IV			28b		X
С	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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M			29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			l		
	conservation contributions? If "Yes," complete Schedule M			30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,				ŀ	i
	Part I			31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"					l
	complete Schedule N, Part II			32	├	X
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	ļ	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,					1
	IV, and V, line 1			34	X	<u> </u>
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			35		X
а	Did the organization receive any payment from or engage in any transaction with a			ļ		ł
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R,	r				
	Part V, line 2	Yes	X No	1		i
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable				ļ	ļ
	related organization? If "Yes," complete Schedule R, Part V, line 2			36	<u> </u>	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization					1
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			j]]
	Part VI			37		X
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	X	<u>L_</u>

DAA

	Check if Schedule O contains a response to any question in this Part V	<u> </u>				
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	12			
b	Enter the number of Forms W-2G included in line 1a Enter -0 if not applicable	_1b_	0		L	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and					
	reportable gaming (gambling) winnings to prize winners?			1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		_	1	}	}
	Statements, filed for the calendar year ending with or within the year covered by this return	_2a	5			}
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return			2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)		}	}	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			_3a	 	X
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			_3b_	 	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a		ty	Ì	ĺ	
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial)	anciai		140	İ	x
	account)? If "Yes," enter the name of the foreign country ▶			4a		
Ь	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial	A ~ ~ ~ ~	nte			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	Accou	1115	5a	ļ	x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year.	tion?		5b	 	X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	aon.		5c	 	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e		30		_
	organization solicit any contributions that were not tax deductible?	_		6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contributio	ns or				
	gifts were not tax deductible?			6Ь		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for g	oods		ļ]
	and services provided to the payor?			7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			_7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	s				
	required to file Form 8282?		•	7c	ļ	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			}	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co		17	7e	Ь	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra			7f	├	X
9	If the organization received a contribution of qualified intellectual property, did the organization file Fo			<u>7g</u>	 	X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	tion fil	e a Form 1098-C?	7h	├	X
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting				}	ļ
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			١.		v
•	organization, have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds.			8	-	 ^
9	Did the organization make any taxable distributions under section 4966?			9a)	x
a b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b	╁╾╴	X
10	Section 501(c)(7) organizations. Enter.			10		† -
а	Initiation fees and capital contributions included on Part VIII, line 12	10a	ı			1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				1
11	Section 501(c)(12) organizations. Enter]	}
а	Gross income from members or shareholders	11a			1	
b	Gross income from other sources (Do not net amounts due or paid to other sources	·			ł	
	against amounts due or received from them)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	10417	,	12a	<u> </u>	<u> </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	<u></u>			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				↓	↓
а	Is the organization licensed to issue qualified health plans in more than one state?			13a	ـ	
	Note. See the instructions for additional information the organization must report on Schedule O.					1
b	Enter the amount of reserves the organization is required to maintain by the states in which	l	ı	[1	
	the organization is licensed to issue qualified health plans	13b		 		
C	Enter the amount of reserves on hand	13c	L <u>.</u>		+	x
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a	+	 ^
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule	<u> </u>		14b		(2010)
DAA				ron		- (4UIU)

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI X Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 6 1b b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 X any other officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct X 3 supervision of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Does the organization have members or stockholders? 6 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7a Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X 8a The governing body? X Each committee with authority to act on behalf of the governing body? 8b 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No X 10a 10a Does the organization have local chapters, branches, or affiliates? 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 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the X 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give 12b X rise to conflicts? c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," X describe in Schedule O how this is done 12c X Does the organization have a written whistleblower policy? 13 13 X 14 Does the organization have a written document retention and destruction policy? 14 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? a The organization's CEO, Executive Director, or top management official 15a X Other officers or key employees of the organization 15b 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 X b 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 16b organization's exempt status with respect to such arrangements? Section C. Disclosure PA List the states with which a copy of this Form 990 is required to be filed ▶ Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available 18 for public inspection. Indicate how you make these available. Check all that apply Own website X Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, 19 and financial statements available to the public State the name, physical address, and telephone number of the person who possesses the books and records of the 20 organization > MICHAEL KANE 116 MARKET STREET PA 15901 814-536-7741 **JOHNSTOWN**

Form 990 (2010	FOUNDATION	FOR	PENNSYLVANIA	20-8746105	Page 7
Part VII.	Compensation of	Office	rs, Directors, Trustees	, Key Employees, Highest Compensated Emp	loyees,
	and Independent				•
	Check if Schedule	O con	tains a response to an	v question in this Part VII	

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

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"

Section A.

DAA

- 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

(A) Name and Title	(B) Average	Posi	tion ((C	C) k all f	that ap	(vlac	(D) Reportable	(E) Reportable	(F) Estimated		
	hours per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer			Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations		
(1) R. JOHN DAWES	40.00							121 256				
DIR. & ADMIN (2) SCOTT ROBERTS	40.00	X		-	_			131,356	0			
DIRECTOR	0.15	x						o	0	1		
(3) H.W. (SKIP) WIEL	ER, JR.	 			<u> </u>	$\vdash \dashv$		<u> </u>				
SECRETARY	0.50	x		x				ol	0			
(4) CAREN GLOTFELTY												
DIRECTOR	0.60	X						0	0			
(5) BRIAN HILL												
TREASURER	0.50	X		X	<u> </u>	\sqcup		0	0			
(6) DR. NEIL KOROSTO				ĺ	ĺ							
OIRECTOR (7) MICHAEL KANE	0.15	X	-		\vdash	$\vdash \vdash$		0	0			
(7) MICHAEL RANE PRESIDENT	1.15	x		X				o	0			
(8)	2.10			_			-					
(9)		\vdash			_				222			
10)		-				-				 		
11)		-		-								
12)		-		-		-						
13)			-									
14)						†						
15)			-	-		-						
(16)		+-			-	\dagger						

Form 990 (2010)

	` (A) Name and Title	(B) Average	Posi	tion (C) k all t	hat a	pply)	(D) Reportable	(E) Reportable	(i Estın	F) nated	
		hours per week (describe			Officer		Highest employe		compensation from the	compensation from related organizations	amor otl compe	unt of ner nsation	
		hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	7	Key employee	st compensated	-	organization (W-2/1099-MISC)	(W-2/1099-MISC)	organ and n	the zation elated zations	
7)				-									
8)				i i									
9)		-		_									
D)													
1)									-				
2)			T										
3)		<u> </u>				-		-					
4)							!				-		
(5)				_		<u> </u>							
6)													
7)		-											
.8)													
	ub-total otal from continuation she	ets to Part VII. S	ecti	on A	•			>	131,35	6			_
d To	otal (add lines 1b and 1c) otal number of individuals (in					عرا ه	tori s	▶	131,35				_
	portable compensation from	•										Yes	T
	d the organization list any fo								oyee, or highest compens	ated	3	103	
4 Fo	or any individual listed on linganization and related organization	e 1a, is the sum	of re	port	able	соп	npens	satio					T
5 D	dividual id any person listed on line									or individual	4	+	+
ŧΛ	r services rendered to the on B. Independent Contract		es,	con	plet	e Sc	hedu	ile J	for such person			<u> </u>	<u>_</u>
	omplete this table for your fi		ensa	eted	ınde	pend	dent (conf				 	
Sectio 1 C	ompensation from the organ							╁	Desc	(B) Inption of services		(C) Compens	atio
Sectio 1 C		(A) d business address						1					
Sectio 1 C		(A) d business address											
Sectio 1 C		(A) d business address											_
Sectio 1 C		(A) d business address											_
Sectio 1 C		(A) d business address											

<u>Pa</u>	<u>rt VI</u>	II Statem	<u>rent of Reve</u>	nue						
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
တ္ဆ		Fodorated com		4-				Tevenue		312, 313, 01 314
		Federated carr		1a						
<u> </u>		Membership di		1b						
aj ts		Fundraising ev		1c						
<u>.</u>	d	Related organi	zations	1d]]	
SΕ	е	Government grants (contributions)	1e						
흥합	f	All other contributions	s, gifts, grants,							
喜		and similar amounts	not included above	1f	1,	957,096				
눌	a	Noncash contribution	is included in lines 1a-							
유	_	Total. Add line				▶ 1	1,957,096		1	
Program Service Revenue Contributions, gifts, grants and other similar amounts		TOGALITY COLOR INTO	<u> </u>			Busn. Code				
盲	2a					Busin. Oduc				
ا چُ	b									
8										
<u> </u>	C									
Š	d									
ᇤ	е									
g		. •	am service reve	nue		L				
_		Total. Add line							 	-
	3		ome (including	dıvıden	ds, intere	st,				
1		and other simil	lar amounts)			▶	2,350			2,350
· {	4	Income from in	nvestment of tax	exem _l	ot bond pi	roceeds 🕨				
Ì	5	Royalties				•				
			(ı) Real		(n) P	ersonal				
	6a	Gross Rents								
	b	Less rental exps]		j	
		Rental inc or (loss)					}			
		Net rental inco	me or (loss)		-					
		Gross amount from	(i) Securite		(n)	Other	· · · - · · · · · · · · · · · · · · · ·			
		sales of assets	 	,145	("/	71				
		other than inventory	39	,143						
	b	Less cost or other	27	076						
Ì		basis & sales exps		876						
		Gain or (loss)		,269		71				
		Net gain or (lo					1,340			1,340
an.	8a		om fundraising eve	ents						
		(not including \$,		
9		of contributions r	reported on line 1c)						
Other Reve		See Part IV, line	18	a						
the	b	Less direct ex	penses	ь		_				
0	С	Net income or	(loss) from fund	draising	events	•				
	1		om gaming activitie							
		See Part IV, line		а						
	b	Less direct ex		ь						
			(loss) from gan	_ ,	hvities	<u> </u>				
			f inventory, less					·		
	IVA	returns and all								
				a	-					
		Less cost of g		, b						
	င		(loss) from sale		ventory	Duran Ouda		 		
		Misc	ellaneous Revenu	-		Busn. Code			İ	
	11a							 		
	b					ļ				
	С					ļ		 		
	d	All other rever				L		ļ <u>.</u>		
	е	Total. Add line				>				
_	12	Total revenue	e. See instructio	ns			1,960,786	<u> </u>	0	3,690

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

	not include amounts reported on lines 6b,	(A) Total expenses	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
-	organizations in the U.S. See Part IV, line 21	1,021,395	1,021,395	Į.	
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22		1		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the	(ļ		
	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	131,356	87,571		43,785
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	173,290	90,000	83,290	
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	10,566	7,900		2,666
9	Other employee benefits	19,303	10,135	4,306	4,862
10	Payroll taxes	23,614	13,765	6,456	3,393
11	Fees for services (non-employees)				
а	Management	ł	Ì		
b	Legal				
С	Accounting	1,000		1,000	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	87,242	87,242		
g	Other				
12	Advertising and promotion				
13	Office expenses	32		32	
14	Information technology				
15	Royalties				
16	Occupancy	4,404	4,404		
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	1,135		1,135	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	4,841		4,841	
23	Insurance	2,759		2,759	
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	PROGRAM SERVICE EXPENSE	266,645	259,133		7,512
b	CONSULTING SERVICES	133,526	133,526		
c	MEMBERSHIPS/DUES/SUBSCRIP	250		250	
d					
е					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	1,881,358	1,715,071	104,069	62,218
26	Joint costs. Check here ▶ ☐ If following				
	SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column	ļ	!		
	(B) joint costs from a combined educational				
	campaign and fundraising solicitation				- 000
DAA					Form 990 (2010)

Pi	art X	. Balance Sheet				
				(A) Beginning of year	_	(B) End of year
	1	Cash—non-interest bearing		1,428	1	1,428
	2	Savings and temporary cash investments		823,824	2	494,721
	3	Pledges and grants receivable, net	į		3	<u> </u>
	4	Accounts receivable, net			4	
	5	Receivables from current and former officers, directors, trustees, key				
		employees, and highest compensated employees. Complete Part II of				ı
		Schedule L			5	
	6	Receivables from other disqualified persons (as defined under section				
	1	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing				1
		employers and sponsoring organizations of section 501(c)(9) voluntary			1	1
	Ì	employees' beneficiary organizations (see instructions)	i		6	
ets	7	Notes and loans receivable, net			7_	
Assets	8	Inventories for sale or use			8	
⋖	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or				
	ļ	other basis. Complete Part VI of Schedule D	42,620			
	ь	Less accumulated depreciation 10b	7,528	16,020	10c	_35,092
	11	Investments—publicly traded securities		46,236	11	100,583
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		3,985	15	2,139
	16	Total assets. Add lines 1 through 15 (must equal line 34)		891,493	16	633,963
	17	Accounts payable and accrued expenses		27,888	17	49,349
	18	Grants payable		25,000	18	
	19	Deferred revenue		723,545	19	378,716
	20	Tax-exempt bond liabilities			20	
S	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
Liabilities	22	Payables to current and former officers, directors, trustees, key				
Ē	Į.	employees, highest compensated employees, and disqualified persons				
Ë	1	Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities Complete Part X of Schedule D		3,075	25	5,017
	26	Total liabilities. Add lines 17 through 25		779,508	26	433,082
Sa		Organizations that follow SFAS 117, check here ▶ X and complete				
Š		lines 27 through 29, and lines 33 and 34.			1	
a	27	Unrestricted net assets		111,985	27	200,881
ä	28	Temporarily restricted net assets			28	
ā	29	Permanently restricted net assets			29	
교		Organizations that do not follow SFAS 117, check here ▶ ☐ and				
5		complete lines 30 through 34.				
Š	30	Capital stock or trust principal, or current funds			30	
se	31	Paid-in or capital surplus, or land, building, or equipment fund			31	
AS	32	Retained earnings, endowment, accumulated income, or other funds			32	
et.	27 28 29 30 31 32 33 34	Total net assets or fund balances		111,985		200,881
ž	34	Total liabilities and net assets/fund balances		891,493	34	633,963

Form **990** (2010)

om	990 (2010) FOUNDATION FOR PENNSYLVANIA 20-8746105			Pag	e 12
	rt XI Reconciliation of Net Assets				
	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)	111	1,96	50,	786
- <u>-</u> -	Total expenses (must equal Part IX; column (A), line 25)	2	1,88		
3	Revenue less expenses Subtract line 2 from line 1	3		79,4	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		11,9	
5	Other changes in net assets or fund balances (explain in Schedule O)	5			468
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	20	00,8	381
Pa	art XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				П
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X 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		X
	Were the organization's financial statements audited by an independent accountant?	•	2b	х	
	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
_	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O				
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were				
	issued on a separate basis, consolidated basis, or both				
	Separate basis X Consolidated basis Both consolidated and separate basis				
3a	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?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any stens taken to undergo such audits		3b		

Form **990** (2010)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

FOUNDATION FOR PENNSYLVANIA WATERSHEDS

20-8746105

Employer identification number

Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h c Type III-Functionally integrated b Type II d Type III-Other X By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and Yes No X (iii) below, the governing body of the supported organization? 11g(i) X (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s) (i) Name of supported (iii) Type of organization (iv) Is the organization (v) Did you notify (vi) Is the (vii) Amount of the organization in anization in col organization (described on lines 1-9) in col (i) listed in your noggue col (i) of your (i) organized in the governing document? above or IRC section US? support? (see instructions)) Yes No Yes No COMMUNITY FOUNDATION OF GREATER JOHNSTOWN 25-1637373 X X 1,868,899 7 (B) (C) (D) (E) 1,868,899 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.)

	tion A. Public Support		, <u></u>	,	,			
Calen	dar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 20	10	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")							
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3							
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							
6	Public support. Subtract line 5 from line 4							
Sec	tion B. Total Support							
Caler	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 20	10	(f) Total
7	Amounts from line 4				<u> </u>			
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
9	Net income from unrelated business activities, whether or not the business is regularly carried on	ı						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)							
11	Total support. Add lines 7 through 10			<u> </u>	<u></u>	<u> </u>		
12	Gross receipts from related activities, etc						12	
13	First five years. If the Form 990 is for the	organization's first	t, second, third, fo	urth, or fifth tax ye	ear as a section 50	1(c)(3)		
_	organization, check this box and stop her							<u> </u>
Sec	tion C. Computation of Public Su							
14	Public support percentage for 2010 (line 6			nn (f))			14	<u>%</u>
15	Public support percentage from 2009 Sch						15	%
16a					33 1/3% or more,	check this		. –
	box and stop here. The organization qual-	•	• •					▶ }
b	33 1/3% support test—2009. If the organ				15 is 33 1/3% or m	iore,		
	check this box and stop here. The organization	•		=		44.		
17a	10%-facts-and-circumstances test—201							
	10% or more, and if the organization mee							
	Part IV how the organization meets the "fa organization							▶ [
b	10%-facts-and-circumstances test—200 15 is 10% or more, and if the organization	meets the "facts-a	and-circumstance	s" test, check this	box and stop here) .		
	Explain in Part IV how the organization me supported organization	ets the "facts-and	-circumstances" t	est The organizat	ion qualifies as a p	oublicly		▶ [
18	Private foundation. If the organization did instructions	i not check a box o	on line 13, 16a, 16	6b, 17a, or 17b, ch	eck this box and s	ee		▶ [

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.)

Sec	tion A. Public Support						
Calen	dar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	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						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b					ļ	
8	Public support (Subtract line 7c from						
	line 6.)			<u> </u>	<u> </u>		
	tion B. Total Support			1	10.000	1	
	idar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)					1	
14	First five years. If the Form 990 is for the	organization's firs	t, second, third, fo	ourth, or fifth tax ye	ar as a section 50	1(c)(3)	
	organization, check this box and stop her	9					>
Sec	tion C. Computation of Public S	upport Percen	tage				
15	Public support percentage for 2010 (line 8	i, column (f) divide	d by line 13, colur	mn (f))		15	%
16_	Public support percentage from 2009 Sch					16	<u>%</u>
Sec	tion D. Computation of Investme					T	
17	Investment income percentage for 2010 (3, column (f))		17	<u>%</u>
18	Investment income percentage from 2009			. 44			
19a							▶ □
L	17 is not more than 33 1/3%, check this b 33 1/3% support tests—2009. If the orga						
Þ	line 18 is not more than 33 1/3%, check the						▶ □
20							>

Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

SCHEDULE C . (Form 990 or 990-EZ)

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.

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Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

- 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

 Section 501(c)(4), (5), or (6) organizations. Complete Part III. Name of organization FOUNDATION FOR PENNSYLVANIA Employer identification number WATERSHEDS 20-8746105 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV Political expenditures Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes 4a Was a correction made? Yes No b If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received and promptly and directly funds If none, enter -0delivered to a separate political organization If none, enter -0-(1) (2) (3) (4)

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

Schedule C (Form 990 or 990-EZ) 2010

(5)

(6)

Schedule C (Form 990 or 990-EZ) 2010 FO	UNDATION FO	R PENNSYLV	ANIA	20-87461	.05 Page 2
Part II-A Complete if the organi				ed Form 5768 (ele	ction under
section 501(h)).					
A Check ► ☐ if the filing organiza					
B Check ▶ ☐ if the filing organiza			ontrol" provisio	ns apply.	·
	bbying Expendit			(a) Filing	(b) Affiliated
(The term "expenditures"				organization's totals	group totals
1a Total lobbying expenditures to influence p			ļ		
b Total lobbying expenditures to influence a		ct lobbying)	ļ		
c Total lobbying expenditures (add lines 1a	and 1b)				
d Other exempt purpose expenditures			<u> </u>		
e Total exempt purpose expenditures (add	•		 		
f Lobbying nontaxable amount Enter the a	mount from the follow	ring table in both			
columns					
If the amount on line 1e, column (a) or (b) is:	The lobbying nonta			1	
Not over \$500,000	20% of the amount o				
Over \$500,000 but not over \$1,000,000		f the excess over \$500,0			
Over \$1,000,000 but not over \$1,500,000		of the excess over \$1,000			
Over \$1,500,000 but not over \$17,000,000		the excess over \$1,500,0	000		
Over \$17,000,000	\$1,000,000				
g Grassroots nontaxable amount (enter 259			 		
h Subtract line 1g from line 1a If zero or les	•				
i Subtract line 1f from line 1c If zero or les		d.d.t	FI- F 4700		
j If there is an amount other than zero on e	ither line 1h or line 1l	, did the organization	Tile Form 4/20		□v □ v-
reporting section 4911 tax for this year?					Yes No
		ng Period Under			
(Some organizations the	at made a sectio	n 501(h) electior	n do not have to	o complete all of t	he five
columns be	low. See the ins	tructions for line	es 2a through 2	f on page 4.)	
Lob	bying Expenditu	res During 4-Ye	ar Averaging P	eriod	
Calendar year (or fiscal year					
beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
			<u> </u>		
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column(e))			<u> </u>		
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount]			
(150% of line 2d, column (e))			<u> </u>		
		1	1		1

Schedule C (Form 990 or 990-EZ) 2010

f Grassroots lobbying expenditures

Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)). (a) (b) Yes No **Amount** 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 X a Volunteers? X b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? X c Media advertisements? X d Mailings to members, legislators, or the public? $\overline{\mathbf{x}}$ e Publications, or published or broadcast statements? X f Grants to other organizations for lobbying purposes? X 12,459 g Direct contact with legislators, their staffs, government officials, or a legislative body? X h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? X i Other activities? If "Yes," describe in Part IV j Total Add lines 1c through 1i X 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 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No 1 1 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? 2 Did the organization agree to carryover lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year 2a b Carryover from last year 2b c Total 2c Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3 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 political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Supplemental Information 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 1i Also, complete this part for any additional information SCHEDULE C, PART II-B, LINE 1I THE FOUNDATION'S LOBBYING ACTIVITIES CONSIST OF LOBBYING FOR THE RENEWAL OF THE COALITION FOR GROWING GREENER INITIATIVE ASSOCIATED WITH PUBLIC EDUCATION OF PENNSYLVANIA'S ENVIRONMENTAL

STEWARDSHIP EFFORTS.

Page 4

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.

OMB No 1545-0047 2010 Open to Public Inspection

	OUNDATION FOR PENNSYLVANIA		Employer	identification number
	ATERSHEDS		20-8	746105
	art I Organizations Maintaining Donor Advised Fu	nds or Other Similar Funds or A		
	organization answered "Yes" to Form 990, Part	IV, line 6.		·
		(a) Donor advised funds	(b) i	Funds and other accounts
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in writing that	the assets held in donor advised		
	funds are the organization's property, subject to the organization's excl			Yes No
6	Did the organization inform all grantees, donors, and donor advisors in			
	only for charitable purposes and not for the benefit of the donor or dono	r advisor, or for any other purpose		
Dr	conferring impermissible private benefit? Int II Conservation Easements. Complete if the organization	prization answered "Vee" to For	~ 000 E	Yes No
1	Purpose(s) of conservation easements held by the organization (check		11 990, F	falt IV, lifte 7.
•	Preservation of land for public use (e.g., recreation or education)	Preservation of an historically im	nortant lan	d area
	Protection of natural habitat	Preservation of a certified historic		u alca
	Preservation of open space	Treservation of a certified historic	Structure	
2		vation contribution in the form of a conse	ervation	
_	easement on the last day of the tax year.			
				Held at the End of the Tax Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
С	Number of conservation easements on a certified historic structure incl	uded ın (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/	1		
	historic structure listed in the National Register	2d		
3	Number of conservation easements modified, transferred, released, ex	tion during	the	
	tax year ▶			
4	Number of states where property subject to conservation easement is I	ocated >		
5	Does the organization have a written policy regarding the periodic mon	toring, inspection, handling of		
_	violations, and enforcement of the conservation easements it holds?			Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforce	ing conservation easements during the y	ear	
7	Amount of avances included in monitoring inspecting and enforcing	concentation accompate during the year		
7	Amount of expenses incurred in monitoring, inspecting, and enforcing of \$\infty\$ \$	conservation easements during the year		
8	Does each conservation easement reported on line 2(d) above satisfy	he requirements of section 170(h)(4)(B)		
_	(i) and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIV, describe how the organization reports conservation easem	ents in its revenue and expense stateme	nt, and	
	balance sheet, and include, if applicable, the text of the footnote to the	organization's financial statements that d	lescribes tl	ne
	organization's accounting for conservation easements			
Pi	art III Organizations Maintaining Collections of Art,	Historical Treasures, or Other	Similar /	Assets.
	Complete if the organization answered "Yes" to	 		
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), n			leet
	works of art, historical treasures, or other similar assets held for public public service, provide, in Part XIV, the text of the footnote to its finance			
	If the organization elected, as permitted under SFAS 116 (ASC 958), to			
D	works of art, historical treasures, or other similar assets held for public			
		eximultion, education, or research in fulfill	oranoe or	
	public service, provide the following amounts relating to these items:		•	\$
	(i) Revenues included in Form 990, Part VIII, line 1		•	\$
2	(ii) Assets included in Form 990, Part XIf the organization received or held works of art, historical treasures, or	other similar assets for financial gain, on	ovide the	▼
-	following amounts required to be reported under SFAS 116 (ASC 958)			
ء	Revenues included in Form 990, Part VIII, line 1		•	\$
	Assets included in Form 990, Part X			\$
	Panerwork Reduction Act Notice see the Instructions for Form 990		-	Schedule D (Form 990) 2010

<u>Sche</u>	dule D (Form 990) 2010 FOUNDATION	FOR PENNSY	LVANIA		20-874	<u>6105</u>	Page 2
Pa	rt III 'Organizations Maintaining C	collections of Art,	Historical Trea	sures, d	or Other S	imilar Asse	ets (continued)
3	Using the organization's acquisition, accession, collection items (check all that apply)	and other records, che	eck any of the follow	ng that ar	e a significan	t use of its	
a	Public exhibition	d 🗍 Loan	or exchange program	ns			
b	Scholarly research	e Other					
С	Preservation for future generations						
4	Provide a description of the organization's collection	ctions and explain how	they further the orga	nization's	exempt purp	ose in Part	
	XIV						
5	During the year, did the organization solicit or re	eceive donations of art,	historical treasures,	or other s	sımılar		
	assets to be sold to raise funds rather than to be						Yes No
Pa	rt IV Escrow and Custodial Arran			ation a	nswered "\	es" to Forr	n 990, Part IV,
	line 9, or reported an amount	on Form 990, Pa	rt X, line 21.				
1a	Is the organization an agent, trustee, custodian	or other intermediary f	or contributions or ot	her asset	s not		
	included on Form 990, Part X?						Yes No
b	If "Yes," explain the arrangement in Part XIV an	d complete the following	ng table [.]				
							Amount
С	Beginning balance					1c	
ď	Additions during the year					1d	
е	Distributions during the year					1e	
f	Ending balance					1f	
	Did the organization include an amount on Form	n 990 Part X line 21?				L	Yes No
	If "Yes," explain the arrangement in Part XIV						_, res <u>:</u> no
	irt V Endowment Funds. Complet	te if organization a	answered "Yes"	to Form	1990, Parl	IV. line 10	
		(a) Current year	(b) Pnor year		years back	(d) Three years	
1a	Beginning of year balance	·		1		<u> </u>	
	Contributions			1			
	Net investment earnings, gains, and						
Ŭ	losses	ļ		1		İ	1
a	Grants or scholarships			 			
u	· • • • • • • • • • • • • • • • • • • •		 	 		 	
e	Other expenditures for facilities and			İ			
	programs			 			
Т	Administrative expenses			 			
g	End of year balance					<u> </u>	_
2	Provide the estimated percentage of the year e						
a	Board designated or quasi-endowment	%					
þ	Permanent endowment ▶ %						
C	Term endowment ▶ %			_			
3a	Are there endowment funds not in the possessi	on of the organization	that are held and adr	nınıstered	for the		<u> </u>
	organization by						Yes No
	(i) unrelated organizations						3a(i)
	(ii) related organizations						3a(ii)
þ	If "Yes" to 3a(II), are the related organizations li	•					3b
4	Describe in Part XIV the intended uses of the o			40	-		
<u> Pa</u>	art VI Land, Buildings, and Equip						
	Description of investment	(a) Cost or other basis	1 ' '	r basis	(c) Accu	1	(d) Book value
		(investment)	(other)		depred	Jauon	
	Land						
	Buildings						
С	Leasehold improvements					7 500	05 000
d	Equipment		42	2,620		7,528	35,092
_	Other						
Tota	il. Add lines 1a through 1e (Column (d) must equ	ual Form 990, Part X, c	olumn (B), line 10(c))		▶	35,092

organization's liability for uncertain tax positions under FIN 48 (ASC 740)

Sche	dule D (Form 990) 2010 FOUNDATION FOR PENNSYLVANIA	2	20-8746105	Page 4
	rt XI Reconciliation of Change in Net Assets from Form 990 to			, ago
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	
3	Excess or (deficit) for the year Subtract line 2 from line 1		3	
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 through 8		9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and	9	10	
Pa	rt XII Reconciliation of Revenue per Audited Financial Stateme	ents With Re	venue per Return	
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		f [
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
C	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIV)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1	_	3	_
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	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	
Pa	Irt XIII Reconciliation of Expenses per Audited Financial Staten	nents With Ex	cpenses per Return	
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIV)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts 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		4b		
C	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	

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 X, line 2, 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.

Part XIV Supplemental Information

Part XIV Supplemental Information (continued)

	_				,			_	OMB No 1545-0047
SCHEDULE I (Form 990)		Grants a	nd Othe	r Assistance I Individuals i	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States	ons, tates			2010
	, g	omplete if the c	organization	answered "Yes" to	Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.	3 21 or 22.		0	Open to Public
Department of the Treasury Internal Revenue Service				▶ Attach to Form 990.	.0.				Inspection
	FOUNDATION FOR PENNS WATERSHEDS	PENNSYLVANIA				Employer i 20-87	Employer identification number 20-8746105	16	
Part General	General Information on Grants and Assistance	ssistance							
1 Does the organization the selection criteria	Does the organization maintain records to substantiate the amount of the gran the selection criteria used to award the grants or assistance?	amount of the gr	rants or assi	stance, the grantees'	nts or assistance, the grantees' eligibility for the grants or assistance, and	or assistance, and	75	X	Yes No
Part II Grants	Crants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Grants and Other Assistance to Governments and Organization of the Complete of the Organization answered "Yes" to Grants and Other Assistance to Governments and Organization answered "Yes" to Grants and Other Assistance to Governments and Organization answered "Yes" to Grants and Other Assistance to Governments and Organization answered "Yes" to Grants and Other Assistance to Governments and Organization answered "Yes" to Grants and Other Assistance to Governments and Organization and Other Assistance to Governments and Other Assistance to Go	rnments an	d Organi	tations in the Ur	lited States. Com	plete if the org	anization answ	vered "Yes"	to 000 Part II
Form 98 can be o	Form 990, Part IV, line 21, for any recipient that received finds that \$2,000. Check this box if no one recipient received finds that the can be duplicated if additional space is needed	pient triat re s needed	ceived III	Jie IIIali 40,000.	Cliech tills box ii				
1 (a) Name and or	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Pur	(h) Purpose of grant or assistance
(1) SEE ATTACHED SCHEDULE	SCHEDULE								
				1,021,395					
(2)									
(3)									
(4)									
(5)									
(9)									
(3)									
(8)									
(6)									
2 Enter total number of Enter total number of	Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations	ganizations						A A	
For Paperwork Reduction	For Paperwork Reduction Act Notice, see the Instructions for Form 990. DAA	Form 990.						Schedule	Schedule I (Form 990) (2010)

Page 2	, line 22.	(f) Description of non-cash assistance					٦. ا	Schedule I (Form 990) (2010)
	m 990, Part IV,	(f) Description of					onal informatio	Schedu
	Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 be duplicated if additional space is needed.	(e) Method of valuation (book, FMV, appraisal, other)					ovide the information required in Part I, line 2, and any other additional information	
20-8746105	olete if the organizati	(d) Amount of non-cash assistance					n required in Part I, li	
IA 2	J nited States. Comp ed.	(c) Amount of cash grant					ovide the information	
OR PENNSYLVAN	Individuals in the Lonal space is neede	(b) Number of recipients	•				plete this part to pro	
	Part III Grants and Other Assistance to Individuals in the Un	(a) Type of grant or assistance					Part IV Supplemental Information. Complete this part to pr	DAA

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 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2010
Open to Public Inspection

OMB No 1545-0047

Attach to Form 99

Name of the organization

FOUNDATION FOR PENNSYLVANIA WATERSHEDS

Employer identification number 20-8746105

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 A DRAFT OF THE FORM 990 WAS FORWARDED TO THE ENTITY FOR REVIEW. ALL INFORMATIONAL QUESTIONS WERE ANSWERED AND DOCUMENTED BY THE APPROPRIATE BOARD MEMBERS OF THE ORGANIZATION. ALL FISCAL INFORMATION WAS REVIEWED PRIOR TO THE FORM 990 BEING FILED.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY
ON AN ANNUAL BASIS THE FOUNDATION SENDS OUT CONFLICT OF INTEREST STATEMENTS
TO ALL ADVISORY MEMBERS AND THEY ASK EACH TO RESPOND APPROPRIATELY. ANY
CONFLICTS ARE REVIEWED AND DOCUMENTED IN THE PERMANENT RECORDS OF THE
ORGANIZATION.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL AN ANNUAL EVALUATION OF THE EXECUTIVE DIRECTOR'S WORK IS PERFORMED BY MEMBERS OF THE ADVISORY BOARD.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION

THE ORGANIZATION'S GOVERNING DOCUMENTS ARE MADE AVAILABLE UPON REQUEST FROM

OUTSIDE PARTIES.

SCHEDULE R	Related Orga	nizations and Unrelated Partnerships	Unrelated F	artnerships			OMB No 1545-0047	5-0047
(Form 990)	► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.	lon answered "Yes" to	Form 990, Part	IV, line 33, 34, 35,	36, or 37.		201(
Department of the Treasury Internal Revenue Service	▶ Attach to	Attach to Form 990. ▶	See separate instructions.	tructions.			Open to Public Inspection	ublic
Name of the organization	FOUNDATION FOR PENNSYLVANIA WATERSHEDS					Employer identific 20-8746105	Employer identification number 20-8746105	mber
Part I Identific	larded Entities (Complete if the	organization answered "Yes" to Form 990, Part IV, line 33.)	ered "Yes" to	Form 990, Par	t IV, line 33.)		_	
Z	(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)		(d) Total income	(e) End-of-year assets	(f) Direct controlling entity	gling
(1)								
(2)								
(3)								
(4)			,					
(5)								
Part II Identific	Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)	Complete if the orgetax year.)	janization ans	wered "Yes" to	Form 990, Par	t IV, line 34 bed	ause it had	
Na Na	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public chanty status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) con- trolled entity?)(13) con- hity? No
(1) COMM. FOUND. 116 MARKET S JOHNSTOWN). OF GREATER JOHNSTOWN 25-1637373 PA 15901	АТТАСНЕБ	PA	501 (C)	7	N/A		×
(2)								
(3)								
(4)								
(5)								
For Paperwork Reduction	For Paperwork Reduction Act Notice, see the Instructions for Form 990.					Schec	Schedule R (Form 990) 2010	90) 2010

Page 2	(k) Percentage ownership						(h) Percentage ownership					990) 2010
, line 34	General or managing partner?					Part IV,	(h) Percent					Schedule R (Form 990) 2010
ı 990, Part IV, li	Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)					s" to Form 990,	(g) Share of end-of-year assets					Schedule
o Form	(h) Disproportionate alloc ?					ad "Yes	соше					
wered "Yes" t	(g) Share of end-of-year assets					ation answere tax year.)	(f) Share of total income					
ganization ans ax year.)	Share of total income Sh					if the organiz	(e) Type of entity (C corp. S corp, or trust)					
6105 omplete if the or rship during the t	Predominant Share income (related, unrelated, excluded from tax under sections 612,514).					Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV not steated as a corporation or trust during the tax year.)	(d) Direct controlling entity					
20-8746105 Partnership (Completed as a partnership	(d) Direct controlling entity					Corporation or one treated as a	(c) Legal domicile (state or foreign country)					
A e as a ns trea	(c) Legal domicile (state or foreign					e as a	ivity					
INSTLVANI ons Taxabl	(b) Primary activity					ons Taxable	(b) Prmary activity					
Schedule R (Form 990) 2010 FOUNDATION FOR PENNSYLVANIA 20-8746105 Part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV because it had one or more related organizations treated as a partnership during the tax year.)	(a) Name, address, and EIN of related organization					Identification of Related Organizations Taxable as a line 34 because it had one or more related organization	(a) Name, address, and EiN of related organization					
Schedule R (I		£	(2)	(3)	(4)	Part IV	Z	£	(2)	(3)	(4)	DAA

Schedule R (Form 990) 2010 FOUNDATION FOR PENNSTLVANIA 20-8746105	ň		Page 3
Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34,	answered "Yes" to F	35,	35a, or 36.)
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	ated organizations listed ir	ı Parts II–IV?	Ves No
			Ta X
b Gift, grant, or capital contribution to other organization(s)			0 7 4 M
f Sale of assets to other organization(s)			1f X
h Exchange of assets i Lease of facilities, equipment or other assets to other organization(s)			4 t
			-
			4
 R Performance of services or membership or fundraising solicitations for other organization(s) I Performance of services or membership or fundraising solicitations by other organization(s) 			¥ =
m Sharing of facilities, equipment, mailing lists, or other assets			-
n Sharing of paid employees			1n X
 Reimbursement paid to other organization for expenses 			10 X
p Reimbursement paid by other organization for expenses			Tp X
q Other transfer of cash or property to other organization(s)			1q ×
r Other transfer of cash or property from other organization(s)			
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this	line, including covered re	who must complete this line, including covered relationships and transaction thresholds	
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of delermining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(9)			
			Schedule R (Form 990) 2010
DAA			

Page 4	۵		al or ging er?	S S											1	2010
ď			(h) General or managing partner?	Yes							-					m 990)
		:	2 2 5 6	-	_				-							Schedule R (Form 990) 2010
			(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)									-				hedule
	37.)	S;	Code amour of Scl												! '	Š
	, line	al assel	onate ns?	S.				<u> </u>								
	art I∖	by tot	(f) Disproportionate allocations?	Yes												
	390, F	easured													1	
	orm (ties (me	(e) Share of end-of-year assets	1												
	s" to F	s activi	Se Se							!					i	
	d "Ye	ent of il	thers 3)	2						-					<u> </u>	
	swere	ve perc	(d) Are all partners section 501(c)(3)	Yes				 								
	on ans	than fi		1.									<u></u>			
2	nizatic	ed more	(c) Legal domicile (state or foreign country)						 							
4610	orgal	onducte	Leg			-										}
20-8746105	if the	ation containin	thrity			}			 	 						
2	nplete	organiz n for ce	(b) Primary activity						ţ		<u> </u>					į
	(Con	ich the	<u> </u>							ļ 						
AIA.	rship	ugh wh			li li											
FOUNDATION FOR PENNSTLVANIA	artne	nip thro					;									
ENNE	as a F	artnersh							ļ							
OR P	cable	as a pa	luty													
ON	ıs Ta	y taxed ization	(a) Name, address, and EIN of entity													
DATI	zatior	ch entit	(a) ss, and E													
FOUR	rgani	for ea	e, addre													4
010	ted 0	rmation	Na E													
2 (066 (Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)	ing info														
3 (Form	ر ا	e follow														
Schedule R (Form 990) 2010	Part VI	Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or moss revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships	2											6	5	
ď.	<u> </u>	la g	<u> </u>		Ξ	2	ල	€	(2)	9	E	(8)	6	(10)	3	i

Supplemental Information
Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

STATEMENT 1 - FORM 990, SCHEDULE I, PART III - GRANTS

Foundation For Pennsylvania Watersheds 20-8746105 Grants Expense For Fiscal Year 2011

ENVIRONMENTAL

Allowhom, Lond Trust	1 500 00
Allegheny Land Trust	1,500.00 5,000.00
Allegheny Mountain Chapter, Trout Unlimited	2,000.00
Alliance for the Chesapeake Bay Anderson Creek	3,260.00
***************************************	130,000.00
Bayer Center for Nonprofit Management	15,000.00
Blackleggs Creek Watershed Association	•
Botanic Garden of Western Pennsylvania	10,000.00
Buffalo Creek Watershed Alliance	-2,188.52
Buffalo Creek Watershed Association	2,000.00
Cambria County Conservation District	10,000.00
Capital Resource Conservation & Development	2,000.00
Central Pennsylvania Conservancy	500.00
Chartiers Creek Watershed Association	2,000.00
Chesapeake Bay Foundation	2,000.00
Chesapeake Bay Trust	27,000 00
Chest Creek Watershed Alliance	2,000.00
The Chestnut Ridge Chapter of Trout Unlimited	2,000 00
Choose Clean Water	2,000.00
Citizens Coal Council	19,000 00
Clearfield County Conservation District	10,000.00
Clearfield Creek Watershed Association	11,400.00
Clearwater Conservancy of Central Pennsylvania	2,000 00
Juniata College	14,500.00
Lycoming College	8,000 00
Susquehanna University	10,000.00
Conewango Creek Watershed Association	4,000 00
Complanter Chapter Trout Unlimited	1,000.00
Energy Conservation Council of Pennsylvania	-10,000.00
Evergreen Conservancy	2,000.00
Fayette County Conservaton District	2,000 00
Friends of the Miguel Angel Asturias Academy	1,000.00
Fulton County Conservation District	1,000 00
Crazing Lands Conservation Initiative	950.00
Greene County Watershed Alliance	2,000.00
Jacobs Creek Watershed Association	12,500.00
Juniata Clean Water Partnership	17,930 00
Kiski-Conemaugh Stream Team	10,077.00
Lackawanna River Corridor Association	15,000.00
Little Juniata River Association	4,000 00
Loyalhanna Watershed Association, Inc	8,800.00
Lycoming County Conservation District	15,000 00
Middle Spring Watershed Association	2,000.00
Morrisville Environmental Advisory Council	2,000.00
Moshannon Creek Watershed Coalition	500 00
Mountain Watershed Association, Inc.	1,500.00

National Wildlife Federation	1,000 00
Natural Biodiversity Conservation Strate	17,000 00
North Area Environmental Council	2,000:00
North Side Industrial Development Company	2,000 00
Octoraro Watershed Association	12,000 00
PA Chapter - American Chestnut Foundation	1,000.00
Penn's Corner Conservancy Charitable Trust	2,000.00
PennEnvironment Research and Policy Center	4,000 00
Pennsylvania Association for Sustainable Energy	2,000.00
Pennsylvania Association of Conservation	20,000.00
Pennsylvania Council of Trout Unlimited	35,000.00
Pennsylvania Environmental Council	37,500.00
Pennsylvania Land Trust Association	1,941 75
Pennsylvania Recreation and Park Society	4,000.00
The Pennsylvania State University	10,000.00
Pittsburgh Community Broadcasting Corporation	12,000 00
Rhiza Labs, LLC	323,600.00
RiverQuest	2,000.00
Schuylkill Conservation District	23,000 00
The Scott Conservancy	-20,000.00
Scrubgrass Creek Watershed Association	2,000.00
Sewickley Creek Watershed Association	15,000.00
Shade Creek Watershed Association	2,000.00
Shenango River Watchers, Inc.	2,000 00
Somerset Conservation District	1,000.00
Stewards of the Lower Susquehanna, Inc.	19,340.00
Stream Restoration, Inc.	24,000.00
The Susquehanna Greenway Partnership	22,500.00
Three Rivers Waterkeeper	1,000.00
Trout Unlimited, Inc.	2,000 00
Venango Area Riding for the Handicapped	2,000 00
Wesley A.M.E. Charities	500 00
Western PA Coalition for Abandoned Mine	17,785.00
Western Pennsylvania Conservancy	17,000.00
Westmoreland County Planning	15,000 00
Yellow Breeches Watershed Association	2,000.00

Total Grants Expense

1,021,395.23