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## Form 990-PF

## **Return of Private Foundation**

or Section 4947(a)(1) Nonexempt Charitable Trust

Treated as a Private Foundation

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service Note. The foundation may	reated as a Privat be able to use a copy of this		ntina requirements	ZUIU
	L 1, 2010	, and ending	JUN 30, 2011	· <del> </del>
G Check all that apply Initial return	<del> </del>	ormer public charity	Final return	
Amended return	Address char	ige 🔲	Name change	
Name of foundation			A Employer identification i	number
POTTSTOWN AREA HEALT	H AND WELLNES	S		
FOUNDATION	<u></u>		23-2344729	
Number and street (or P O box number if mail is not delivered to street	•	Room/suite	B Telephone number	
152 EAST HIGH STREET	, SUITE 500		(610) 323-2	2006
Crty or town, state, and ZIP code POTTSTOWN, PA 19464			C If exemption application is per	
<u> </u>			D 1. Foreign organizations,	check here
H Check type of organization X Section 501(c)(3) (C)(3) (C)(3) (C)(4) Section 4947(a)(1) nonexempt charitable trust	exempt private roundation Other taxable private found:	ation.	Foreign organizations meet check here and attach com	
I Fair market value of all assets at end of year J Accoun		X Accrual	E If private foundation statu under section 507(b)(1)(A	s was terminated
	Other (specify)	[21] Accidal	1 ' '' ''	•
▶\$ 79,432,225. (Part I, coll	umn (d) must be on cash i	basis)	F If the foundation is in a 60 under section 507(b)(1)(E	
Doet 1 Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) )	expenses per books	income	income	for chantable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received			N/A	
2 Check X if the foundation is not required to attach Sch B				
3 Interest on savings and temporary cash investments	1 050 066	4 0=0		······
4 Dividends and interest from securities	1,850,866.	1,850,866.	S	TATEMENT 1
5a Gross rents  h Net rental income or (loss)				······································
b Net tental income of (1055)	1,166,279.			TATEMENT 2
b Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all 19,831,249.	1,100,279.		i d	TATEMENT 2
6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all 19,831,249. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain		1,166,171.		
8 Net short-term capital gain		2,200,212		
			"- " "	<del></del>
Gross sales less retums and allowances		***************************************		
9 Income modifications 10a Gross sales less returns and allowances  b Less Cost of goods sold c Gross profit or (loss)				
c Gross profit or (loss)				
(I) Other income	19,405.	0.	S	TATEMENT 3
12 Total. Add lines 1 through 11	3,036,550.	3,017,037.		100 000
13 Compensation of officers, directors, trustees, etc	181,703. 351,020.	72,800. 112,509.		109,200.
14 Other employee salaries and wages 15 Pension plans, employee benefits	132,180.	38,305.		238,327.
	17,289.	17,289.		98,428.
b Accounting fees STMT 5	22,750.	4,550.		18,200.
c Other professional fees STMT 6	89,753.	70,163.		21,930.
§ 17 Interest	,			
b Accounting fees STMT 4  b Accounting fees STMT 5  c Other professional fees STMT 6  17 Interest  18 Taxes STMT 7  19 Depreciation and depiction Occupancy Travel, conferences and meetings  Printing and publications STMT 8  24 Total operating and administrative expenses Add lines 13 through 23	50,000.	50,000.		0.
18 Taxes STMT 7	23,001.	23,001.		
Occupancy Traver, Conferences Qand meetings Printing and publications	97,800.	19,560.		60,302.
Travel, Conferences Dand meetings	25,822.	5,164.		20,287.
Printing and publications	20,089.	4,018.		13,049.
23 Other expenses STMT 8	301,008.	30,778.		216,182.
24:-Total-operating and administrative expenses Add lines 13 through 23	1,312,415.	448,137.		705 005
25 Contributions, gifts, grants paid	2,299,964.	440,137.		795,905.
26 Total expenses and disbursements	2,200,004.			2,000,041.
Add lines 24 and 25	3,612,379.	448,137.		3,730,946.
27 Subtract line 26 from line 12	, , , , , , ,			., ,
Excess of revenue over expenses and disbursements	-575,829.			
b Net investment Income (if negative, enter -0-)		2,568,900.		
c Adjusted net income (if negative, enter -0-)			N/A	
023501 12-07-10 LHA For Paperwork Reduction Act Notice, see	the instructions		-	Form <b>990-PF</b> (2010)

23-234472,9

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Da	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	End of year		
Ра	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value		
$\overline{}$	1 Cash - non-interest-bearing	13,840.	85,428.	85,428.		
	2 Savings and temporary cash investments	161,679.	71,864.	71,864.		
	3 Accounts receivable ►					
	Less allowance for doubtful accounts ▶					
İ	4 Pledges receivable					
	Less allowance for doubtful accounts					
1	5 Grants receivable		,			
	6 Receivables due from officers, directors, trustees, and other					
	disqualified persons					
	7 Other notes and loans receivable					
	Less allowance for doubtful accounts					
Siess	8 Inventories for sale or use	10.000				
2	9 Prepaid expenses and deferred charges	10,870.	11,904.	11,904.		
<sup>{</sup>  1	Oa Investments - U S and state government obligations					
	b Investments - corporate stock STMT 10	59,632,518.	66,916,851.	66,916,851.		
1	c Investments - corporate bonds			·		
1	1 Investments - land, buildings, and equipment basis					
	Less. accumulated depreciation					
1	2 Investments - mortgage loans					
	3 Investments - other STMT 11	10,544,308.	12,335,795.	12,335,795.		
1	220 671		• • •			
	Less: accumulated depreciation 220,288.	23,671.	10,383.	10,383.		
1	5 Other assets (describe ►					
1.	o other assets (assettible)					
	6 Total assets (to be completed by all filers)	70.386.886	79 432 225	79 432 225		
$\overline{}$		1 015 999	953 286	79,432,225.		
- 1	7 Accounts payable and accrued expenses	838,700.	212,075.			
1		030,700.	212,013.			
1	_					
2						
2		26 207 467	10 546 034			
2	2 Other liabilities (describe ► STATEMENT 12)	26,287,467.	18,546,034.			
		20 142 166	10 211 205			
_ 2	3 Total liabilities (add lines 17 through 22)	28,142,166.	19,711,395.			
	Foundations that follow SFAS 117, check here					
,	and complete lines 24 through 26 and lines 30 and 31					
2	1 Unrestricted	42,244,720.	59,720,830.			
2	5 Temporanly restricted					
2	6 Permanently restricted					
	Foundations that do not follow SFAS 117, check here					
	and complete lines 27 through 31.					
2	7 Capital stock, trust principal, or current funds		-			
2: 2: 2: 2: 2: 2: 3:	3 Paid-in or capital surplus, or land, bldg, and equipment fund					
29	Retained earnings, accumulated income, endowment, or other funds					
30	Total net assets or fund balances	42,244,720.	59,720,830.			
			· · · · · · · · · · · · · · · · · · ·			
3	Total liabilities and net assets/fund balances	70,386,886.	79,432,225.			
			<u>, , , , , , , , , , , , , , , , , , , </u>			
ar	t III Analysis of Changes in Net Assets or Fund B	alances				
To	tal net assets or fund balances at beginning of year - Part II, column (a), line	30				
	ust agree with end-of-year figure reported on prior year's return)		1	42,244,720.		
-	ter amount from Part I, line 27a		<del>  </del>	-575,829.		
	_ ·	ረፑፑ ሮጥአ	TEMENT 9 3	18,051,939.		
	ner increases not included in line 2 (itemize)	SEE SIA	<del></del>	59,720,830.		
	d lines 1, 2, and 3		4	39,720,830.		
	creases not included in line 2 (itemize)		5			
10	tal net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	iurnn (b), line 30	6	59,720,830.		
				Form <b>990-PF</b> (2010)		

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	artiv Capital Gallis	and Los	See TOI TOX OIT III	ACSUITED	it income						
	(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.)				P	How a - Puro - Don			e acquired day, yr )	(d) Date sold (mo , day, yr )	
1a TOO VOLUMINOUS TO LIST - DETAILS AVAILABLE				<del>                                     </del>	- 5011	ation	•				
	AT TAXPAYER'S			DO AVE	TIADID	+-		P			<del> </del>
		01110	<u> </u>			+					
_			<del></del>			+					
_ <u>d</u>			<del></del>		-	1					<del></del>
	(e) Gross sales price		epreciation allowed (or allowable)		st or other basis expense of sale					Gain or (los us (f) minus	
_a	10 000 600			1	8,664,52	28.					1,166,171
				<del></del>	-,,						2,200,2.2
d	-	<del></del>	<del></del> -								
e											
	Complete only for assets showing	g gain in co	olumn (h) and owned by t	he foundation	on 12/31/69			(1	Gains (	Col (h) gai	n minus
	(i) F M V as of 12/31/69		Adjusted basis is of 12/31/69		cess of col (i)				(k), but	not less th (from col	an -0-) or
a				-							· ·
b					-				•		1,166,171
d											
е											
2	Capital gain net income or (net ca	pital loss)	If gain, also enter If (loss), enter -0-	ın Part I, line ın Part I, line	7 7	}	2				1,166,171
3	Net short-term capital gain or (los	s) as define	d in sections 1222(5) and	d (6)							
	If gain, also enter in Part I, line 8,	column (c)				•				27/7	
	If (loss), enter -0- in Part I, line 8 Part V Qualification U	ndor Co	ction 4940(e) for	Dadusas	Toy on Not	1	3			N/1	4
Wa <u>If "</u>	ection 4940(d)(2) applies, leave the sect section 4940(d)(2) the foundation liable for the sect yes, the foundation does not qualified.	ion 4942 ta fy under se	x on the distributable amo	nplete this pa	ırt						Yes X No
1	Enter the appropriate amount in e	ach column	for each year, see instru	ctions before	making any entri						(d)
	(a) Base period years Calendar year (or tax year beginnir	ıg ın)	(b) Adjusted qualifying disti		Net value of no					Dıstrı (col (b) dı	(d) bution ratio vided by col (c))
	2009			3,437.				9,936			.055990
_	2008		4,345	5,702.		69,	<u>,58</u>	9,804	•	,,	.06244
	2007								ļ		
	2006		<del></del>						_		
	2005	i_							-		
2	Total of line 1, column (d)								2		.118437
3	Average distribution ratio for the 5	-year base	period - divide the total oi	n line 2 by 5,	or by the number	of yea	ars				
	the foundation has been in existen	ice if less th	an 5 years						3		.059219
4	Enter the net value of noncharitable	le-use asset	s for 2010 from Part X, III	ne 5					4	7	5,306,900
5	Multiply line 4 by line 3								5		4,459,599
6	Enter 1% of net investment incom	e (1% of Pa	ut I, line 27b)						6		25 <b>,</b> 689.
7	Add lines 5 and 6								7		4,485,288.
8	Enter qualifying distributions from	Part XII, lin	e 4						8		3,730,946.
	If line 8 is equal to or greater than See the Part VI instructions	line 7, chec	k the box in Part VI, line 1	b, and comp	lete that part using	g a 1%	6 tax r	ate			

	POTTSTOWN AREA HEALTH AND WEL	TINE	55					
Forr	m 990-PF (2010) FOUNDATION ,					344729		Page 4
Pa	art VI Excise Tax Based on Investment Income (Section 494	40(a),	4940(b), 4940(e)	, or 4	948 - s	see instr	uctic	ns)
18	Exempt operating foundations described in section 4940(d)(2), check here  and	enter "N	/A" on line 1		i			
•	Date of ruling or determination letter (attach copy of letter if no	ecessar	y-see instructions)					
t	Domestic foundations that meet the section 4940(e) requirements in Part V, check here		and enter 1%	}	1		51,3	378.
	of Part I, line 27b							
(	: All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4	% of Pa	rt I, line 12, col (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only	Others e	nter -0-)		2			0.
3	Add lines 1 and 2				3		51,3	378.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only	Others e	enter -0-)		4			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-				5		1,3	378.
6	Credits/Payments				[			
a	2010 estimated tax payments and 2009 overpayment credited to 2010	6a	55,6	53.	[			
b	Exempt foreign organizations - tax withheld at source	6b			1			
C	Tax paid with application for extension of time to file (Form 8868)	60						
d	Backup withholding erroneously withheld	6đ						
7	Total credits and payments Add lines 6a through 6d				7	-	55,6	553.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is att	ached		j	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			▶	9			
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			▶	10		4,2	75.
11	Enter the amount of line 10 to be Credited to 2011 estimated tax		4,275 . Refund	ed 🕨	11			0.
Pa	art VII-A Statements Regarding Activities				-			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legi	slation (	or did it participate or in	tervene	ın		Yes	No
	any political campaign?					1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpo	oses (se	e instructions for defini	tion)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities an				d or			
	distributed by the foundation in connection with the activities.	•						1
C	Did the foundation file Form 1120-POL for this year?					10		Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during th	e year						
	(1) On the foundation ► \$ 0 • (2) On foundation manager	s <b>&gt;</b> \$		0.				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expend			n				ŧ
	managers ▶ \$0 .							1
2	Has the foundation engaged in any activities that have not previously been reported to the	IRS?	•			2		X
	If "Yes," attach a detailed description of the activities.							<del></del>
3	Has the foundation made any changes, not previously reported to the IRS, in its governing	ınstrum	ent, articles of incorpoi	ation, o	r			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change	ges				3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year	ar?				4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?				N/I	A 4b		<u>L</u> .
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year	?				5		X
	If "Yes," attach the statement required by General Instruction T							İ
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied e	either						ŧ
	By language in the governing instrument, or							1
	By state legislation that effectively amends the governing instrument so that no mandato	ry direct	tions that conflict with t	ne state	law			
	remain in the governing instrument?					6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year?					7	Х	
	If "Yes," complete Part II, col (c), and Part XV							1
8a	Enter the states to which the foundation reports or with which it is registered (see instruction PA	ons) 🕨				-		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	Attornev	General (or designate)			-		
_	of each state as required by General Instruction G? If "No," attach explanation	,	(			8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of se	ection 4	942(j)(3) or 4942(j)(5)	for caler	ndar			

year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

	POITSTOWN AREA HEALTH AND WELLNESS			
orm	990-PF(2010) FOUNDATION , , , 23-2	344729	)	Page 5
Pε	art VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		Х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address WWW.POTTSTOWNFOUNDATION.ORG			
14	The books are in care of ▶ DAVID KRAYBILL, EXECUTIVE DIRECTOR Telephone no ▶610	-323-2	006	
		▶19464		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		<b></b>	
	and enter the amount of tax-exempt interest received or accrued during the year	N	I/A	
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22 1. If "Yes," enter the name of		-	
	the foreign country ►			
Pa	rt VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?	No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	No		
		No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?	No	1	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		1 1	
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days )	No		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?	1 b		X
	Organizations relying on a current notice regarding disaster assistance check here			
£	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2010?	10		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2010? Yes X	No		
	If "Yes," list the years >			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions ) N/	A 2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	<b>&gt;</b>			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	ŀ		
	during the year? $\qquad \qquad	No		
þ	If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2010.)	A 3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u>X</u>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that		1 1	

had not been removed from jeopardy before the first day of the tax year beginning in 2010?

Form 990-PF (2010) FOUNDATION			<u>23-23447</u>	29 Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be I	Required (contil	nued)	
5a During the year did the foundation pay or incur any amount to				
(1) Carry on propaganda, or otherwise attempt to influence legislation (sectio	n 4945(e))?	Y	es X No	
• (2) Influence the outcome of any specific public election (see section 4955), of	ectly,	1	1 1	
any voter registration drive?	Y	es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	32	Y	es X No	1 1
(4) Provide a grant to an organization other than a charitable, etc., organization	in described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?		Г	es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	. or educational purposes, or t			
the prevention of cruelty to children or animals?	,		es X No	1 1
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described i			
section 53 4945 or in a current notice regarding disaster assistance (see instru		rogalations	N/A	5b
Organizations relying on a current notice regarding disaster assistance check h	,		▶ □	
c. If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		inad		
expenditure responsibility for the grant?		. —	es 🔲 No	1 1
If "Yes," attach the statement required by Regulations section 53.494		.,,,,	ES	1 1
6a Did the foundation, during the year, receive any funds, directly or indirectly, to				
a personal benefit contract?	pay premiums on		es X No	
·	annonal banafit anatront?		T .	6b X
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		-	6b X
If "Yes" to 6b, file Form 8870.	. h . l h		es X No	
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y(		
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highl	y	
List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	hours per week devoted	(If not paid,	employee benefit plans and deferred	account, other
	to position	enter -0-)	compensation	allowances
SEE STATEMENT 13		181,703.	25,117.	0.
DEE STATEMENT 13		101,703.	25,117.	0.
· · · · · · · · · · · · · · · · · · ·				
O	luded on time 4) 16			
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to	(a) Evnance
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit plans and deferred	(e) Expense account, other
150	devoted to position	.,	compensation	allowances
	PROGRAM OFFIC	1		_
500, POTTSTOWN, PA 19464	32.00	92,037.	17,568.	0.
	CONTROLLER	-		
STE. 500, POTTSTOWN, PA 19464	40.00	94,344.	3,343.	0.
ROSEMARIE CREWS - 152 E. HIGH ST.,	OFFICE MANAGE	R		
STE. 500, POTTSTOWN, PA 19464	40.00	54,413.	16,878.	0.
KIM MANSUR - 152 E. HIGH ST., STE.	PROGRAM ASST			
00, POTTSTOWN, PA 19464	40.00	44,581.	15,387.	0.
			<b> </b>	
otal number of other employees paid over \$50,000			<b>&gt;</b>	0

Form 990-PF (2010)	POTTSTOWN AREA HEALTH AND WELLN FOUNDATION		2344729 Page 7
Part VIII Info	ormation About Officers, Directors, Trustees, Found d Employees, and Contractors (continued)	ation Managers, Highly	
3. Five highest-paid	d independent contractors for professional services. If none, enter	er "NONE."	
(a)	Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
		<u> </u>	
<del> </del>		<del> </del>	
	receiving over \$50,000 for professional services		▶ 0
Part IX-A Sun	nmary of Direct Charitable Activities		
	our largest direct charitable activities during the tax year. Include relevant stati		Expenses
N/A	ns and other beneficiaries served, conferences convened, research papers pro	aucea, etc	
N/A			l
			l
<u> </u>			
3			
Part IX-B Sumi	mary of Program-Related Investments		
Describe the two larges	t program-related investments made by the foundation during the tax year on	lines 1 and 2	Amount
N/Δ			

All other program-related investments. See instructions

Total. Add lines 1 through 3

Form **990-PF** (2010)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndation	is, see instructions)
1.	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities	1a	76,254,005.
b	Average of monthly cash balances	1b	182,005.
C	Fair market value of all other assets	10	17,696.
d	Total (add lines 1a, b, and c)	1d	76,453,706.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	76,453,706.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,146,806.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	75,306,900.
6	Minimum investment return. Enter 5% of line 5	6	3,765,345.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here  and do not complete this part )	nd certai	n
1	Minimum investment return from Part X, line 6	1 1	3,765,345.
	Tax on investment income for 2010 from Part VI, line 5 2a 51, 378.		<u> </u>
b	Income tax for 2010 (This does not include the tax from Part VI)	1 1	
C	Add lines 2a and 2b	20	51,378.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	3,713,967.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	3,713,967.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	3,713,967.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	3,730,946.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	3,730,946.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	3,730,946.
	Note. The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the foundation of	malifies	for the section

Form **990-PF** (2010)

4940(e) reduction of tax in those years

## Part XIII Undistributed Income (see instructions)

•	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI, line 7				3,713,967
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only			0.	
b Total for prior years		0.		
3 Excess distributions carryover, if any, to 2010				
a From 2005			1	
b From 2006			1	
c From 2007			1	
d From 2008 879,976.			1	
e From 2009 444,523.			1	
f Total of lines 3a through e	1,324,499.		1	
4 Qualifying distributions for 2010 from	1,021,133.			
Part XII, line 4 > \$ 3,730,946.			Ī	
a Applied to 2009, but not more than line 2a	1		0.	
<b>b</b> Applied to undistributed income of prior			<u>``</u>	
years (Election required - see instructions)		0.	1	
c Treated as distributions out of corpus				······································
(Election required - see instructions)	0.		‡	
d Applied to 2010 distributable amount				3,713,967.
e Remaining amount distributed out of corpus	16,979.			3/113/3017
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount	0.			0.
must be shown in column (a) )  6 Enter the net total of each column as			#	
indicated below:	1 2/1 /70		<u> </u>	•
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,341,478.			
b Prior years' undistributed income Subtract		0.	1	
line 4b from line 2b		0.		······································
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.	1	
e Undistributed income for 2009 Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2010 Subtract				
lines 4d and 5 from line 1. This amount must	-		1	
be distributed in 2011		l		0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005				
not applied on line 5 or line 7	0.		1	
9 Excess distributions carryover to 2011.				······································
Subtract lines 7 and 8 from line 6a	1,341,478.		1	
O Analysis of line 9				
a Excess from 2006				
b Excess from 2007	1		-	
c Excess from 2008 879,976.	[		Į.	
d Excess from 2009 444,523.	1			
e Excess from 2010 16,979.				<u></u>
				" OOO DE (00.0)

POTTSTOWN AREA HEALTH AND WELLNESS FOUNDATION 23-2344729 Form 990-PF (2010) Page 10 Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2010, enter the date of the ruling 4942(j)(3) or 4942(j)(5) b Check box to indicate whether the foundation is a private operating foundation described in section Prior 3 years 2 a Enter the lesser of the adjusted net Tax year (b) 2009 (c) 2008 (d) 2007 (a) 2010 (e) Total income from Part I or the minimum investment return from Part X for each year listed b 85% of line 2a c Qualifying distributions from Part XII, line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon "Assets" alternative test - enter (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year c "Support" alternative test - enter (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III) (3) Largest amount of support from an exempt organization (4) Gross investment income Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see the instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2)) NONE b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here 🕨 🔛 if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d a The name, address, and telephone number of the person to whom applications should be addressed SEE STATEMENT 14 b The form in which applications should be submitted and information and materials they should include c Any submission deadlines

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Part XV Supplementary Information (continued)

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3 Grants and Contributions Paid During the Y	If recipient is an individual	Foundation	Purpose of grant or	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	UI SUUSIAIRIAI CONTIIDUOI	Тестрієн		
SEE STATEMENT 15				
Total			▶ 3a	2,935,041
b Approved for future payment BOYERTOWN AREA YMCA 301 W. SPRING STREET BOYERTOWN, PA 19512		PUBLIC CHARITY	SAVE OUR Y RENOVATIONS TO GYMNASIUM	10,000
Total			<b>▶</b> 3b	10,000.

Part XVI-A **Analysis of Income-Producing Activities** 

Enter gross amounts unless otherwise indicated		usiness income	(c)	ed by section 512, 513, or 514	(e)
1 Program service revenue	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
a					
b			1-1		
C					
d			<b>-</b>		
е	1 1		<del>  </del> -		
1					<del></del>
g Fees and contracts from government agencies			1 1		
2 Membership dues and assessments			+ +		
3 Interest on savings and temporary cash			+		
-			1 1	i	
Investments			14	1 050 066	
4 Dividends and interest from securities		<del></del>	14	1,850,866.	
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					<del></del>
6 Net rental income or (loss) from personal			1		
property _					
7 Other investment income			$\perp$		
8 Gain or (loss) from sales of assets other					
than inventory			18	1,166,279.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a OTHER REVENUE	_				19,405.
b	_				
C	_				
d					
e					
12 Subtotal Add columns (b), (d), and (e)		0.		3,017,145.	19,405.
13 Total. Add line 12, columns (b), (d), and (e)				13	19,405. 3,036,550.
(See worksheet in line 13 instructions to verify calculations.)				• • • •	<del></del>
Part XVI-B Relationship of Activities	to the Accom	plishment of E	xempt	Purposes	
Line No. Explain below how each activity for which inc	ome is reported in co	olumn (e) of Part XVI-A	A contribut	ted importantly to the accomp	lishment of
the foundation's exempt purposes (other than				to the document	
11A OTHER REVENUE USED TO			RGANT	ZATION'S EXEM	PT PURPOSE
		<u></u>			
	•				
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				· · · · · · · · · · · · · · · · · · ·	
	<u> </u>			<del></del>	

Part XVI	Information R Exempt Organ		nsfers To	and Transactions	and Relations	ships With Nonc	haritable	9	<u> </u>
1 Did the	organization directly or indi		v of the follows	no with any other organiza	tion described in sec	tion 501/c) of		Yes	No
	e (other than section 501(c			• •		11011 30 1(0) 01		163	110
	s from the reporting found								
(1) Cas	• •			<b>3</b>			1a(1)	1	Х
(2) Oth	er assets						1a(2)		Х
b Other tra	ansactions						1.3(2)		
(1) Sale	es of assets to a noncharita	ible exempt organiza	ation				16(1)	[ ]	Х
(2) Pur	chases of assets from a no	ncharitable exempt	organization				1b(2)		Х
( <b>3</b> ) Ren	tal of facilities, equipment,	or other assets					1b(3)		Х
(4) Reir	mbursement arrangements	:					16(4)		Х
( <b>5)</b> Loa	ns or Ioan guarantees						1b(5)		Х
(6) Perf	formance of services or me	embership or fundra	using solicitatio	ons	-	-	1b(6)		Х
_	of facilities, equipment, ma	-	-	· •			1c		X
	swer to any of the above is							ets,	
	es given by the reporting f			ed less than fair market va	ilue in any transaction	n or sharing arrangemer	it, show in		
	(d) the value of the goods,					··			
(a) Line no	(b) Amount involved	(c) Name o		e exempt organization	(d) Description	n of transfers, transactions,	and shanng an	angeme	nts
			N/A						
		<del></del>							
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			······································	<del></del>					
						··			
	indation directly or indirect n 501(c) of the Code (other	•			nizations described		Yes	X	 ] No
b If Yes, c	complete the following sche			1	<del>,</del>		······································		
	(a) Name of org	anization		(b) Type of organization		(c) Description of relatio	nship		
······································	N/A					.,			
					+				
			· · ·	<del> </del>		<del></del>			
							<del></del> -		
Und	er penalties of perjury, I declare	that I have examined to	his return, includi	ng accompanying schedules a	nd statements, and to the	e best of my knowledge and	helief it is tru	e correc	
	complete Declaration of prepar						_		7
	Signature of officer or tru	stee		Date		itle			
	Print/Type preparer's na	me	Preparer's si	gnature	Date	Check If PTI	V		
_			1	11 11-		self- employed			
Paid	STEVEN W.		Mou	W. King COR	11/14/11				
Preparer Use Only	Firm's name ► TAI	T, WELLER	& BAK	ER L <b>L</b> P		Firm's EIN			
OSE OINY	Firm's address ► 1 Q	18 марктт	י קיים קרים	T; SUITE 240	00	<del> </del>			
		ILADELPHI		= -		Phone no (21)	5) 979	9-88	300

POTTSTOWN AREA HEALTH AND WELLNE	SS FOUND		23-2344729
	•		
FORM 990-PF DIVIDENDS AND	INTEREST FROM	SECURITIES	STATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
VARIOUS - DETAILS AVAIL AT TAXPAYERS OFFICE	1,850,866.	0.	1,850,866.
TOTAL TO FM 990-PF, PART I, LN 4	1,850,866.	0.	1,850,866.

	STOWN AREA HEAL	TH AND	WELLNESS	FOUND				23-234472
FORM 99	00-PF	GAIN C	R (LOSS)	FROM SALE	OF	ASSETS	STA	TEMENT
DESCRIE	(A) PTION OF PROPER'	TY				MANNER ACQUIRED	DATE ACQUIRED	DATE SOI
DETAILS	JUMINOUS TO LIS'S AVAILABLE AT	 T –				PURCHASED		
	(B) GROSS SALES PRICE	CO	(C) ST OR R BASIS	(D) EXPENSE SALE		(E) DEPREC	CATN	(F) OR LOSS
	19,830,699		,664,528.		0		<del></del>	1,166,171
	(A) TION OF PROPERS TION OF EQUIPME	<del></del>				MANNER ACQUIRED PURCHASED	DATE ACQUIRED VARIOUS	DATE SOI
	TION OF PROPER	ENT CO	(C) ST OR R BASIS	(D) EXPENSE SALE	OF	ACQUIRED	ACQUIRED ———— VARIOUS	
	TION OF PROPERS TION OF EQUIPMI  (B) GROSS	ENT CO OTHE	ST OR	EXPENSE	OF 0.	ACQUIRED PURCHASED (E) DEPREC	ACQUIRED ———— VARIOUS	VARIOUS
DISPOSI	TION OF PROPERS TION OF EQUIPMI  (B)  GROSS SALES PRICE	CO OTHE	ST OR R BASIS 442.	EXPENSE		ACQUIRED PURCHASED (E) DEPREC	ACQUIRED VARIOUS GAIN	VARIOUS (F) OR LOSS
DISPOSI	TION OF PROPERS TION OF EQUIPMI  (B) GROSS SALES PRICE	CO OTHE	ST OR R BASIS 442. F ASSETS	EXPENSE		ACQUIRED PURCHASED (E) DEPREC	ACQUIRED VARIOUS GAIN	VARIOUS  (F)  OR LOSS
DISPOSI  NET GAI  CAPITAL	TION OF PROPERS TION OF EQUIPMI  (B) GROSS SALES PRICE  550  N OR LOSS FROM	CO OTHE SALE O	ST OR R BASIS  442.  F ASSETS  PART IV	EXPENSE SALE		ACQUIRED PURCHASED (E) DEPREC	ACQUIRED VARIOUS GAIN  O.	VARIOUS  (F)  OR LOSS  108

(A)

REVENUE

PER BOOKS

19,405.

19,405.

DESCRIPTION

OTHER REVENUE

TOTAL TO FORM 990-PF, PART I, LINE 11

(B)

NET INVEST-

MENT INCOME

0.

0.

(C)

ADJUSTED

NET INCOME

FORM 990-PF	LEGAL	FEES	S	TATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES	17,289.	17,289.		0.
TO FM 990-PF, PG 1, LN 16A =	17,289.	17,289.		0.
FORM 990-PF	ACCOUNTI	NG FEES	S	PATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
AUDIT	22,750.	4,550.		18,200.
TO FORM 990-PF, PG 1, LN 16B	22,750.	4,550.		18,200.
FORM 990-PF C	THER PROFES			FATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT MANAGEMENT AND ADVISORY FEES CONSULTING	70,163. 19,590.	70,163.		0. 21,930.
TO FORM 990-PF, PG 1, LN 16C =	89,753.	70,163.		21,930.
FORM 990-PF	TAX	ES	St	PATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
EXCISE TAX	50,000.	50,000.		0.
- TO FORM 990-PF, PG 1, LN 18	50,000.	50,000.		0.

DESCRIPTION    EXPENSES   NET INVEST	FORM 990-PF OTHER EXPENSES				STATEMENT
COMMUNICATION AND EDUCATIONAL PROGRAMS 86,608. 17,322. 77,00FFICE EXPENSE 7,940. 1,588. 77,00FFICE EXPENSE 7,940. 1,588. 77,00ES AND MEMBERSHIPS 14,515. 2,903. 11,10SURANCE 25,786. 5,157. 20,00STAGE 1,541. 308. 11,00SURANCE 1,541. 308. 11,00SURANCE 1,541. 308. 11,00SURANCE 5,046. 0. 4,00SURANCE 6,00SURANCE 7,046. 0. 4,0SURANCE 7,046. 0. 4,0SURANCE 7,0SURANCE 7,	DESCRIPTION	EXPENSES	NET INVEST-	ADJUSTEI	
EDUCATIONAL PROGRAMS 86,608. 17,322. 77,00FICE EXPENSE 7,940. 1,588. 77, DUES AND MEMBERSHIPS 14,515. 2,903. 11, INSURANCE 25,786. 5,157. 20, POSTAGE 1,541. 308. 11, WEBSITE LINK AND MAINTENANCE FEES 5,046. 0. 4, EQUIPMENT RENTAL AND SOFTWARE MAINTENANCE 12,710. 2,542. 10, MISCELLANEOUS 4,183. 837. 3, PROGRAM EXPENSES 41,695. 0. 56, NOMPROFIT EVENTS SUPPORT 22,822. 0. 23, ACCOUNTING CARRYOVER 12,126. 0. PENSION PLAN - PMMC 65,221. 0. COLLECTION FEES 211. 0.  TO FORM 990-PF, PG 1, LN 23 301,008. 30,778. 216,  FORM 990-PF OTHER INCREASES IN NET ASSETS OR FUND BALANCES STATEMENT  DESCRIPTION AMOUNT  UNREALIZED GAIN ON INVESTMENTS PENSION BENEFIT - NONOPERATING INCOME 6,952, TOTAL TO FORM 990-PF, PART III, LINE 3 18,051,  FORM 990-PF CORPORATE STOCK STATEMENT  DESCRIPTION BOOK VALUE FAIR MARK  VALUE  TO FORM 990-PF CORPORATE STOCK STATEMENT  FAIR MARK  VALUE	BANK FEES	604.	121	•	404
OFFICE EXPENSE 7,940. 1,588. 7, DUES AND MEMBERSHIPS 14,515. 2,903. 11, INSURANCE 25,786. 5,157. 20, POSTAGE 1,541. 308. 1, WEBSITE LINK AND MAINTENANCE FEES 5,046. 0. 4, EQUIPMENT RENTAL AND SOFTWARE MAINTENANCE 12,710. 2,542. 10, MISCELLANEOUS 4,183. 837. 3, PROGRAM EXPENSES 41,695. 0. 56, NONPROFIT EVENTS SUPPORT 22,822. 0. 23, ACCOUNTING CARRYOVER 12,126. 0. PENSION PLAN - PAMC 65,221. 0. COLLECTION FEES 211. 0. TO FORM 990-PF, PG 1, LN 23 301,008. 30,778. 216,  FORM 990-PF OTHER INCREASES IN NET ASSETS OR FUND BALANCES STATEMENT  DESCRIPTION AMOUNT UNREALIZED GAIN ON INVESTMENTS PENSION BENEFIT - NONOPERATING INCOME 6,952, TOTAL TO FORM 990-PF, PART III, LINE 3 18,051,  FORM 990-PF CORPORATE STOCK STATEMENT  DESCRIPTION BENEFIT - NONOPERATING INCOME 6,952,  TOTAL TO FORM 990-PF, PART III, LINE 3 FAIR MARK  DESCRIPTION BOOK VALUE FAIR MARK  DESCRIPTION BOOK VALUE FAIR MARK  DESCRIPTION BOOK VALUE FAIR MARK  DESCRIPTION BOOK VALUE FAIR MARK  VALUE  FORM 990-PF CORPORATE STOCK STATEMENT  FAIR MARK  VALUE	COMMUNICATION AND				
OFFICE EXPENSE 7,940. 1,588. 7, DUES AND MEMBERSHIPS 14,515. 2,903. 11, INSURANCE 25,786. 5,157. 20, POSTAGE 1,541. 308. 1, WEBSITE LINK AND MAINTENANCE FEES 5,046. 0. 4, EQUIPMENT RENTAL AND SOFTWARE MAINTENANCE 12,710. 2,542. 10, MISCELLANEOUS 4,183. 837. 3, PROGRAM EXPENSES 41,695. 0. 56, NOMPROFIT EVENTS SUPPORT 22,822. 0. 23, ACCOUNTING CARRYOVER 12,126. 0. PENSION PLAN - PMMC 65,221. 0. COLLECTION FEES 211. 0. TO FORM 990-PF, PG 1, LN 23 301,008. 30,778. 216,  FORM 990-PF OTHER INCREASES IN NET ASSETS OR FUND BALANCES STATEMENT  DESCRIPTION AMOUNT UNREALIZED GAIN ON INVESTMENTS PENSION BENEFIT - NONOPERATING INCOME 6,952,  TOTAL TO FORM 990-PF, PART III, LINE 3 18,051,  FORM 990-PF CORPORATE STOCK STATEMENT  DESCRIPTION BENEFIT - NONOPERATING INCOME 6,952,  TOTAL TO FORM 990-PF, PART III, LINE 3 FAIR MARK DESCRIPTION BOOK VALUE FAIR MARK  DESCRIPTION BOOK VALUE FAIR MARK  DESCRIPTION BOOK VALUE FAIR MARK  DESCRIPTION BOOK VALUE FAIR MARK  DESCRIPTION BOOK VALUE FAIR MARK  DESCRIPTION BOOK VALUE FAIR MARK  DESCRIPTION BOOK VALUE FAIR MARK  VALUE	EDUCATIONAL PROGRAMS	86,608.	17,322	•	77,366
DUES AND MEMBERSHIPS 14,515. 2,903. 11 INSURANCE 25,786. 5,157. 20, POSTAGE 1,541. 308. 1, WEBSITE LINK AND MAINTENANCE FEES 5,046. 0. 4, EQUIPMENT RENTAL AND SOFTWARE MAINTENANCE 12,710. 2,542. 10, MISCELLANEOUS 4,183. 837. 3, PROGRAM EXPENSES 41,695. 0. 56, NOMPROFIT EVENTS SUPPORT 22,822. 0. 23, ACCOUNTING CARRYOVER 12,126. 0. PENSION PLAN - PMMC 65,221. 0. COLLECTION FEES 211. 0.  TO FORM 990-PF, PG 1, LN 23 301,008. 30,778. 216,  FORM 990-PF OTHER INCREASES IN NET ASSETS OR FUND BALANCES STATEMENT UNREALIZED GAIN ON INVESTMENTS PENSION BENEFIT - NONOPERATING INCOME 6,952, TOTAL TO FORM 990-PF, PART III, LINE 3 18,051,  FORM 990-PF CORPORATE STOCK STATEMENT DESCRIPTION BOOK VALUE FAIR MARK DESCRIPTION BOOK VALUE FAIR MARK DESCRIPTION BOOK VALUE FAIR MARK DESCRIPTION BOOK VALUE FAIR MARK DESCRIPTION BOOK VALUE FAIR MARK DESCRIPTION BOOK VALUE FAIR MARK DESCRIPTION BOOK VALUE FAIR MARK DESCRIPTION BOOK VALUE FAIR MARK DESCRIPTION BOOK VALUE FAIR MARK DESCRIPTION BOOK VALUE VALUE	OFFICE EXPENSE				7,576
INSURANCE 25,786. 5,157. 20, POSTAGE 1,541. 308. 1, WEBSITE LINK AND MAINTENANCE FEES 5,046. 0. 4, EQUIPMENT RENTAL AND SOFTWARE MAINTENANCE 12,710. 2,542. 10, MISCELLANEOUS 4,183. 837. 3, PROGRAM EXPENSES 41,695. 0. 56, NOMPROFIT EVENTS SUPPORT 22,822. 0. 23, ACCOUNTING CARRYOVER 12,126. 0. PENSION PLAN - PMMC 65,221. 0. COLLECTION FEES 211. 0.  TO FORM 990-PF, PG 1, LN 23 301,008. 30,778. 216,  FORM 990-PF OTHER INCREASES IN NET ASSETS OR FUND BALANCES STATEMENT UNREALIZED GAIN ON INVESTMENTS PENSION BENEFIT - NONOPERATING INCOME 6,952, TOTAL TO FORM 990-PF, PART III, LINE 3 18,051,  FORM 990-PF CORPORATE STOCK STATEMENT DESCRIPTION BENEFIT - NONOPERATING INCOME 6,952, TOTAL TO FORM 990-PF, PART III, LINE 3 FAIR MARK DESCRIPTION BOOK VALUE FAIR MARK DESCRIPTION BOOK VALUE FAIR MARK DESCRIPTION BOOK VALUE FAIR MARK DESCRIPTION BOOK VALUE FAIR MARK DESCRIPTION BOOK VALUE FAIR MARK VALUE	DUES AND MEMBERSHIPS				11,612
POSTAGE					20,922
WEBSITE LINK AND MAINTENANCE FEES 5,046. 0. 4.  FEES 5,046. 0. 4.  EQUIPMENT RENTAL AND  SOFTWARE MAINTENANCE 12,710. 2,542. 10.  MISCELLANEOUS 4,183. 837. 3.  PROGRAM EXPENSES 41,695. 0. 566.  NONPROFIT EVENTS SUPPORT 22,822. 0. 23,  ACCOUNTING CARRYOVER 12,126. 0.  PENSION PLAN - PMMC 65,221. 0.  COLLECTION FEES 211. 0.  TO FORM 990-PF, PG 1, LN 23 301,008. 30,778. 216.  FORM 990-PF OTHER INCREASES IN NET ASSETS OR FUND BALANCES STATEMENT DESCRIPTION AMOUNT 11,099,  PENSION BENEFIT - NONOPERATING INCOME 6,952,  TOTAL TO FORM 990-PF, PART III, LINE 3 18,051,  FORM 990-PF CORPORATE STOCK STATEMENT 18,051,  FORM 990-PF CORPORATE STOCK STATEMENT 18,051,	POSTAGE		•		1,254
### FEES		-,			-,
EQUIPMENT RENTAL AND SOFTWARE MAINTENANCE 12,710. 2,542. 10, MISCELLANEOUS 4,183. 837. 3, PROGRAM EXPENSES 41,695. 0. 56, NONPROFIT EVENTS SUPPORT 22,822. 0. 23, ACCOUNTING CARRYOVER 12,126. 0. PENSION PLAN - PMMC 65,221. 0. COLLECTION FEES 211. 0.  TO FORM 990-PF, PG 1, LN 23 301,008. 30,778. 216,  FORM 990-PF OTHER INCREASES IN NET ASSETS OR FUND BALANCES STATEMENT  DESCRIPTION AMOUNT  UNREALIZED GAIN ON INVESTMENTS PENSION BENEFIT - NONOPERATING INCOME 6,952,  TOTAL TO FORM 990-PF, PART III, LINE 3 18,051,  FORM 990-PF CORPORATE STOCK STATEMENT  DESCRIPTION BOOK VALUE FAIR MARK  DESCRIPTION BOOK VALUE FAIR MARK  TOTAL TO FORM 990-PF, PART III, LINE 3 FAIR MARK  DESCRIPTION BOOK VALUE VALUE		5.046.	0.		4,038
SOFTWARE MAINTENANCE   12,710.   2,542.   10,		3,0100	•		2,000
MISCELLANEOUS 4,183. 837. 3, PROGRAM EXPENSES 41,695. 0. 56, NONPROFIT EVENTS SUPPORT 22,822. 0. 23, ACCOUNTING CARRYOVER 12,126. 0. PENSION PLAN - PMMC 65,221. 0. COLLECTION FEES 211. 0.  TO FORM 990-PF, PG 1, LN 23 301,008. 30,778. 216,  FORM 990-PF OTHER INCREASES IN NET ASSETS OR FUND BALANCES STATEMENT  DESCRIPTION AMOUNT  UNREALIZED GAIN ON INVESTMENTS 11,099, PENSION BENEFIT - NONOPERATING INCOME 6,952, TOTAL TO FORM 990-PF, PART III, LINE 3 18,051,  FORM 990-PF CORPORATE STOCK STATEMENT  DESCRIPTION BOOK VALUE FAIR MARK  DESCRIPTION BOOK VALUE FAIR MARK	<del>17</del>	12.710.	2.542.		10,046
PROGRAM EXPENSES 41,695. 0. 56, NONPROFIT EVENTS SUPPORT 22,822. 0. 23, ACCOUNTING CARRYOVER 12,126. 0. PENSION PLAN - PMMC 65,221. 0. COLLECTION FEES 211. 0.  TO FORM 990-PF, PG 1, LN 23 301,008. 30,778. 216,  FORM 990-PF OTHER INCREASES IN NET ASSETS OR FUND BALANCES STATEMENT  DESCRIPTION AMOUNT  UNREALIZED GAIN ON INVESTMENTS 11,099, PENSION BENEFIT - NONOPERATING INCOME 6,952,  TOTAL TO FORM 990-PF, PART III, LINE 3 18,051,  FORM 990-PF CORPORATE STOCK STATEMENT  DESCRIPTION BOOK VALUE FAIR MARK  DESCRIPTION BOOK VALUE FAIR MARK  OUT TO FORM 990-PF CORPORATE STOCK STATEMENT					3,510
NONPROFIT EVENTS SUPPORT  ACCOUNTING CARRYOVER  12,126.  PENSION PLAN - PMMC  COLLECTION FEES  211.  TO FORM 990-PF, PG 1, LN 23  301,008.  30,778.  216,  FORM 990-PF  OTHER INCREASES IN NET ASSETS OR FUND BALANCES  STATEMENT  DESCRIPTION  AMOUNT  UNREALIZED GAIN ON INVESTMENTS PENSION BENEFIT - NONOPERATING INCOME  TOTAL TO FORM 990-PF, PART III, LINE 3  11,099, 6,952, TOTAL TO FORM 990-PF, PART III, LINE 3  18,051,  FORM 990-PF  CORPORATE STOCK  STATEMENT  DESCRIPTION  BOOK VALUE  FAIR MARK  VALUE					56,095
ACCOUNTING CARRYOVER PENSION PLAN - PMMC COLLECTION FEES  TO FORM 990-PF, PG 1, LN 23  TO FORM 990-PF OTHER INCREASES IN NET ASSETS OR FUND BALANCES  DESCRIPTION  UNREALIZED GAIN ON INVESTMENTS PENSION BENEFIT - NONOPERATING INCOME  TOTAL TO FORM 990-PF, PART III, LINE 3  DESCRIPTION  TOTAL TO FORM 990-PF, PART III, LINE 3  DESCRIPTION  TOTAL TO FORM 990-PF, PART III, LINE 3  DESCRIPTION  BOOK VALUE  FAIR MARK VALUE					23,359
PENSION PLAN - PMMC COLLECTION FEES 211. 0.  TO FORM 990-PF, PG 1, LN 23 301,008. 30,778. 216,  FORM 990-PF OTHER INCREASES IN NET ASSETS OR FUND BALANCES STATEMENT  DESCRIPTION AMOUNT  UNREALIZED GAIN ON INVESTMENTS 11,099, PENSION BENEFIT - NONOPERATING INCOME 6,952,  TOTAL TO FORM 990-PF, PART III, LINE 3 18,051,  FORM 990-PF CORPORATE STOCK STATEMENT  DESCRIPTION BOOK VALUE FAIR MARK VALUE					· · · · · · · · · · · · · · · · · · ·
TO FORM 990-PF, PG 1, LN 23 301,008. 30,778. 216,  FORM 990-PF OTHER INCREASES IN NET ASSETS OR FUND BALANCES STATEMENT  DESCRIPTION AMOUNT  UNREALIZED GAIN ON INVESTMENTS 11,099, PENSION BENEFIT - NONOPERATING INCOME 6,952,  TOTAL TO FORM 990-PF, PART III, LINE 3 18,051,  FORM 990-PF CORPORATE STOCK STATEMENT  DESCRIPTION BOOK VALUE FAIR MARK  VALUE					0
TO FORM 990-PF, PG 1, LN 23 301,008. 30,778. 216,  FORM 990-PF OTHER INCREASES IN NET ASSETS OR FUND BALANCES STATEMENT  DESCRIPTION AMOUNT  UNREALIZED GAIN ON INVESTMENTS PENSION BENEFIT - NONOPERATING INCOME 6,952,  TOTAL TO FORM 990-PF, PART III, LINE 3 18,051,  FORM 990-PF CORPORATE STOCK STATEMENT  DESCRIPTION BOOK VALUE FAIR MARK  VALUE		•			0
FORM 990-PF OTHER INCREASES IN NET ASSETS OR FUND BALANCES  DESCRIPTION  UNREALIZED GAIN ON INVESTMENTS PENSION BENEFIT - NONOPERATING INCOME  TOTAL TO FORM 990-PF, PART III, LINE 3  18,051,  FORM 990-PF  CORPORATE STOCK  STATEMENT  FAIR MARK VALUE	COLLECTION FEES		0.	·	0
DESCRIPTION  UNREALIZED GAIN ON INVESTMENTS PENSION BENEFIT - NONOPERATING INCOME  TOTAL TO FORM 990-PF, PART III, LINE 3  18,051,  FORM 990-PF  CORPORATE STOCK  STATEMENT DESCRIPTION  BOOK VALUE	TO FORM 990-PF, PG 1, LN 23	301,008.	30,778.		216,182
UNREALIZED GAIN ON INVESTMENTS PENSION BENEFIT - NONOPERATING INCOME  TOTAL TO FORM 990-PF, PART III, LINE 3  FORM 990-PF  CORPORATE STOCK  FAIR MARK VALUE	FORM 990-PF OTHER INCREASES	IN NET ASS	ETS OR FUND E	BALANCES	STATEMENT
PENSION BENEFIT - NONOPERATING INCOME  TOTAL TO FORM 990-PF, PART III, LINE 3  FORM 990-PF  CORPORATE STOCK  STATEMENT DESCRIPTION  BOOK VALUE  FAIR MARK VALUE	DESCRIPTION				AMOUNT
FORM 990-PF CORPORATE STOCK STATEMENT  DESCRIPTION BOOK VALUE VALUE					11,099,687 6,952,252
FAIR MARK DESCRIPTION BOOK VALUE VALUE	TOTAL TO FORM 990-PF, PART II	I, LINE 3			18,051,939
FAIR MARK DESCRIPTION BOOK VALUE VALUE					
DESCRIPTION BOOK VALUE VALUE	FORM 990-PF	CORPORAT	E STOCK	<u> </u>	STATEMENT 1
MUTUAL FUNDS 66,916,851. 66,916,	DESCRIPTION		вс	OOK VALUE	FAIR MARKET VALUE
	MUTUAL FUNDS		6	66,916,851.	66,916,851
TOTAL TO FORM 990-PF, PART II, LINE 10B 66,916,851. 66,916,	TOTAL TO FORM 990-PF, PART II	, LINE 10B	6	66,916,851.	66,916,851

FORM 990-PF	OTHER	INVESTMENTS		STATEMENT 11
DESCRIPTION		VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
OTHER INVESTMENTS		FMV	12,335,795.	12,335,795.
TOTAL TO FORM 990-PF, PART II,	LINE 1	3	12,335,795.	12,335,795.
FORM 990-PF	OTHER :	LIABILITIES		STATEMENT 12
FORM 990-PF  DESCRIPTION	OTHER :	LIABILITIES	BOY AMOUNT	STATEMENT 12 EOY AMOUNT
DESCRIPTION  ACCRUED SELF INSURANCE CLAIMS	OTHER :	LIABILITIES	208,557.	EOY AMOUNT 208,557.
DESCRIPTION	OTHER :	LIABILITIES		EOY AMOUNT

FORM 990-PF	PART VIII - LIST OF OFFICERS, DIRECTORS	STATEMENT	13
•	TRUSTEES AND FOUNDATION MANAGERS		

NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE
DAVID KRAYBILL 152 EAST HIGH STREET, SUITE 500 POTTSTOWN, PA 19464	EXECUTIVE DIREC		25,117.	0.
SHARON L. WEAVER 152 EAST HIGH STREET, SUITE 500 POTTSTOWN, PA 19464	PRESIDENT 5.00	0.	0.	0.
D. SCOTT DETAR, CPA 152 EAST HIGH STREET, SUITE 500 POTTSTOWN, PA 19464	VICE PRESIDENT 5.00	0.	0.	0.
KENNETH E. PICARDI 152 EAST HIGH STREET, SUITE 500 POTTSTOWN, PA 19464	SECRETARY 5.00	0.	0.	0.
ROBERT W. BOYCE 152 EAST HIGH STREET, SUITE 500 POTTSTOWN, PA 19464	TREASURER 5.00	0.	0.	0.
TODD ALDERFER 152 EAST HIGH STREET, SUITE 500 POTTSTOWN, PA 19464	DIRECTOR 5.00	0.	0.	0.
EDWARD BARDOWSKI 152 EAST HIGH STREET, SUITE 500 POTTSTOWN, PA 19464	DIRECTOR 5.00	0.	0.	0.
JAMES R. BUSH 152 EAST HIGH STREET, SUITE 500 POTTSTOWN, PA 19464	DIRECTOR 5.00	0.	0.	0.
JONATHAN CORSON 152 EAST HIGH STREET, SUITE 500 POTTSTOWN, PA 19464	DIRECTOR 5.00	0.	0.	0.
KAY DOUGHERTY 152 EAST HIGH STREET, SUITE 500 POTTSTOWN, PA 19464	DIRECTOR 5.00	0.	0.	0.
MYRA GEHRET FORREST, ED.D. 152 EAST HIGH STREET, SUITE 500 POTTSTOWN, PA 19464	DIRECTOR 5.00	0.	0.	0.

POTTSTOWN AREA HEALTH AND WELLNE	SS FOUND		. 23	-2344729
P. RICHARD FRANTZ, AIA 152 EAST HIGH STREET, SUITE 500 POTTSTOWN, PA 19464	DIRECTOR 5.00	0.	0.	0.
ART GREEN 152 EAST HIGH STREET, SUITE 500 POTTSTOWN, PA 19464	DIRECTOR 5.00	0.	0.	0.
KEITH HARRISON, DO, FAAFP 152 EAST HIGH STREET, SUITE 500 POTTSTOWN, PA 19464		0.	0.	0.
PHYLLIS L. HARWOOD 152 EAST HIGH STREET, SUITE 500 POTTSTOWN, PA 19464	DIRECTOR 5.00	0.	0.	0.
PASTOR BURLINGTON B. LATSHAW, III 152 EAST HIGH STREET, SUITE 500 POTTSTOWN, PA 19464		0.	0.	0.
JAMES J. LENNON, CPA 152 EAST HIGH STREET, SUITE 500 POTTSTOWN, PA 19464		0.	0.	0.
LINDA D. LIGNELLI 152 EAST HIGH STREET, SUITE 500 POTTSTOWN, PA 19464	DIRECTOR 5.00	0.	0.	0.
MILTON D. MARTYNY 152 EAST HIGH STREET, SUITE 500 POTTSTOWN, PA 19464	DIRECTOR 5.00	0.	0.	0.
	DIRECTOR 5.00	0.	0.	0.
CHARLES F. PALLADINO 152 EAST HIGH STREET, SUITE 500 POTTSTOWN, PA 19464	DIRECTOR 5.00	0.	0.	0.
WILLIAM S. TADDONIO, MD 152 EAST HIGH STREET, SUITE 500 POTTSTOWN, PA 19464	DIRECTOR 5.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VIII	181,703.	25,117.	0.

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FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

ANNA BRENDLE, PROGRAM OFFICER 152 EAST HIGH STREET, SUITE 500 POTTSTOWN, PA 19464

TELEPHONE NUMBER

610-323-2006

FORM AND CONTENT OF APPLICATIONS

GRANT APPLICATIONS ARE TO BE COMPLETED AND POTENTIAL GRANTEES NEED TO PROVIDE AN ORGANIZATION BUDGET, A PROGRAM BUDGET, AN IRS DETERMINATION LETTER, MOST RECENT AUDIT REPORT AND/OR FORM 990.

#### ANY SUBMISSION DEADLINES

SUBMISSION DEADLINES VARY BASED ON EACH FALL AND SPRING GRANT ROUND.

### RESTRICTIONS AND LIMITATIONS ON AWARDS

A POTENTIAL GRANTEE ORGANIZATION MUST BE A NON-PROFIT ORGANIZATION LOCATED WITHIN 10 MILES OF THE BOROUGH OF POTTSTOWN. THE GRANT MUST FALL WITHIN ONE OF THE ORGANIZATION'S FOUR CORE PRIORITIES OF: (1) REDUCE BEHAVIORAL RISKS; (2) INCREASE ACCESS TO MEDICAL SERVICES AND SUPPORT THE OPERATIONAL COSTS FOR POTTSTOWN'S NEW HEALTH CENTER, COMMUNITY HEALTH & DENTAL CARE, INC.;(3) ENHANCE INFORMAL AND FORMAL SUPPORTS AND (4) IMPROVE PHYSICAL AND SOCIAL ENVIRONMENT.

FORM 990-PF

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STATEMENT

RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
ACLAMO 512 W. MARSHALL STREET NORRISTOWN, PA 19401	CONEXIONES POR SALUD - COMMUNITY HEALTH PROJECTS	PUBLIC CHARITY	51,750.
BCS YES! P.O. BOX 851 VALLEY FORGE, PA 19482-0851	HEALTH, FITNESS AND NUTRITION PROGRAMS	PUBLIC CHARITY	5,000.
BLESSED TERESA OF CALCUTTA PARISH P.O. BOX 229 LIMERICK, PA 19468	PHYSICAL EDUCATION AND HEALTH PROGRAM	CATHOLIC SCHOOL	3,500.
BOYERTOWN AREA COMMUNITY WELLNESS COUNCIL P.O. BOX 87 GILBERTSVILLE, PA 19525	PROMOTE HEALTHY LIFESTYLES FOR ALL	PUBLIC CHARITY	25,000.
BOYERTOWN AREA SCHOOL DISTRICT 911 MONTGOMERY AVENUE BOYERTOWN, PA 19512	BASD BRAIN BODY CONNECTION	GOVERNMENT ENTITY	55,000.
BOYERTOWN AREA SCHOOL DISTRICT 901 RIDGE ROAD BOYERTOWN, PA 19512	BRAIN BODY CONNECTION CONTINUED	GOVERNMENT ENTITY	60,017.
BOYERTOWN AREA YMCA 301 W. SPRING STREET BOYERTOWN, PA 19512	SAVE OUR Y	PUBLIC CHARITY	10,000.
BROOKESIDE MONTESSORI 1075 ROUTE 100 BECHTELSVILLE, PA 19505	GROWING UP FIT WELLNESS PROGRAM	SCHOOL	9,310.

GRANTS AND CONTRIBUTIONS

PAID DURING THE YEAR

POTTSTOWN AREA HEALTH AND WELLN	NESS FOUND		23-2344729
CAMPHILL VILLAGE KIMBERTON HILLS P.O. BOX 1045 KIMBERTON, PA 19442	AGING IN COMMUNITY PROGRAM	PUBLIC CHARITY	5,000.
CARSON VALLEY CHILDREN'S AID 1419 BETHLEHEM PIKE FLOURTOWN, PA 19031	WOMEN'S VOICES, HEALTHY CHOICES PROGRAM	PUBLIC CHARITY	20,000.
CENTRO CULTURAL LATINO UNIDOS, INC. BOX 613, 19 S. KEIM ST. POTTSTOWN, PA 19464	FITNESS & SOCIAL ENVIRONMENT	PUBLIC CHARITY	10,000.
CHESTER COUNTY 4H 601 WESTTOWN ROAD WEST CHESTER, PA 19380	AFTER SCHOOL PROGRAM	GOVERNMENT ENTITY	10,000.
CHILD ADVOCACY CENTER OF MONTGOMERY COUNTY P.O. BOX 706 NORRISTOWN, PA 19404	INITIATIVE FOR RESEARCH AND DEVELOPMENT OF INFRASTRU	PUBLIC CHARITY	10,000.
CHILD, HOME & COMMUNITY 144 WOOD STREET DOYLESTOWN, PA 18901	ADOLESCENT, PRENATAL, PARENTING AND SUPPORT CONTINUU	PUBLIC CHARITY	7,500.
COMMUNITY HEALTH AND DENTAL CARE, INC. 11 ROBINSON STREET, SUITE 100 POTTSTOWN, PA 19464	COMMUNITY BASED HEALTHCARE CENTER- SUSTAINABILITY	PUBLIC CHARITY	1100000.
COVENTRY CHRISTIAN SCHOOL 699 NORTH PLEASANTVIEW RD. POTTSTOWN, PA 19464	KEEP 'EM MOVING PROGRAM & CONSTRUCTION OF EVENTS CEN	SCHOOL	25,000.
CREATIVE HEALTH SERVICES 11 ROBINSON STREET POTTSTOWN, PA 19464	OPERATIONAL SUPPORT	PUBLIC CHARITY	160,000.
DANIEL BOONE AREA SCHOOL DISTRICT 321 N. FURNACE ST., SUITE 200 BIRDSBORO, PA 19508	COORDINATED SCHOOL HEALTH PROGRAM	GOVERNMENT ENTITY	51,000.

POTTSTOWN AREA HEALTH AND WELLI	NESS FOUND	_	23-2344729
FALKNER SWAMP NURSERY SCHOOL 1809 HOFFMANSVILLE ROAD SASSAMANSVILLE, PA 19472		SCHOOL	4,500.
FAMILY SERVICES OF MONTGOMERY COUNTY 3125 RIDGE PIKE EAGLEVILLE, PA 19403	PROJECT HEARTH - HELPING ELDERLY REMAIN IN THEIR HOM		20,000.
FELLOWSHIP FARM 2488 SANATOGA RD. POTTSTOWN, PA 19464	HEALTHY OPTIONS FOR THE PEOPLE OF POTTSTOWN REGION PROGRAM	PUBLIC CHARITY	40,000.
FREEDOM VALLEY YMCA 2460 BLVD. OF THE GENERALS WEST NORRITON, PA 19403	SPECIALIZED AQUATIC WHEELCHAIRS	PUBLIC CHARITY	3,500.
FRIENDSHIP HOUSE P.O. BOX 3778 SCRANTON, PA 18505	THE PARENT-CHILD HOME PROGRAM	SCHOOL	10,000.
MATERNAL AND CHILD HEALTH CONSORTIUM OF CHESTER COUNTY 30 W. BARNARD ST., STE. 1 WEST CHESTER, PA 19382		PUBLIC CHARITY	20,000.
MONTGOMERY COUNTY COMMUNITY COLLEGE 101 COLLEGE DRIVE POTTSTOWN, PA 19464	DENTAL SEALANT DAY BUILDING THE CAPACITY OF COMMUNIT	COLLEGE	22,654.
MONTGOMERY COUNTY HEAD START 151 W. MARSHALL STREET NORRISTOWN, PA 19401	SUMMER EXTENDED YEAR PROGRAM	GOVERNMENT ENTITY	5,000.
NATIONAL ASSOCIATION FOR THE ADVANCEMENT OF COLORED PEOPLE P.O. BOX 13 POTTSTOWN, PA 19464	YOUTH HDAV PREVENTION PROGRAM	PUBLIC CHARITY	2,500.
OLIVET BOYS & GIRLS CLUB 1161 PERSHING BLVD. READING, PA 19611	HEALTH & FITNESS PROGRAMS FOR YOUTH, ADULTS & FAMILIES	PUBLIC CHARITY	48,000.

POTTSTOWN AREA HEALTH AND WELLN	IESS FOUND	2	23-2344729
OWEN J. ROBERTS SCHOOL DISTRICT 901 RIDGE ROAD POTTSTOWN, PA 19465	FIT FOR LIFE PROGRAM	GOVERNMENT ENTITY	53,000.
OWEN J. ROBERTS SCHOOL DISTRICT 901 RIDGE ROAD POTTSTOWN, PA 19465	FIT FOR LIFE PROGRAM	GOVERNMENT ENTITY	60,000.
PERKIOMEN VALLEY SCHOOL DISTRICT 3 IRON BRIDGE DRIVE COLLEGEVILLE, PA 19426	COMPREHENSIVE SCHOOL HEALTH PROGRAMS	GOVERNMENT ENTITY	9,900.
POPE JOHN PAUL II HIGH SCHOOL 181 RITTENHOUSE ROAD ROYERSFORD, PA 19468	PROGRAM, EQUIPMENT AND FORMATION OF WELLNESS COUNCIL	CATHOLIC SCHOOL	33,960.
POTTSTOWN AREA POLICE ATHLETIC LEAGUE P.O. BOX 176 POTTSTOWN, PA 19464	ADMINISTRATIVE AND OPERATING SUPPORT	PUBLIC CHARITY	45,000.
POTTSTOWN AREA SENIORS' CENTER 724 N. ADAMS ST. POTTSTOWN, PA 19464	SAVE OUR COLLABORATION & ENHANCING PRIME TIME HEALTH	PUBLIC CHARITY	69,950.
POTTSTOWN CLUSTER OF RELIGIOUS COMMUNITIES 137 WALNUT ST. POTTSTOWN, PA 19464	CAPACITY BUILDING INITIATIVE & WALK-IN FREEZER	PUBLIC CHARITY	82,000.
POTTSTOWN KARATE CLUB 21 N. HANOVER ST. POTTSTOWN, PA 19464	LEVEL 1 CROSSFIT CERTIFICATIONS	PUBLIC CHARITY	2,000.
POTTSTOWN SCHOOL DISTRICT 230 BEECH STREET POTTSTOWN, PA 19464	PEAK READINESS INITIATIVE & HEALTH SCHOOL COMMUNITIE	GOVERNMENT ENTITY	268,000.
POTTSTOWN SCHOOL DISTRICT 230 BEECH STREET POTTSTOWN, PA 19464	PCTV WELLNESS CAMPAIGN	GOVERNMENT ENTITY	6,000.

POTTSTOWN AREA HEALTH AND WELLNESS FOUND			23-2344729
ROYERSFORD OUTREACH, INC. 350 MAIN ST. ROYERSFORD, PA 19468	GENERAL OPERATING EXPENSES	PUBLIC CHARITY	7,000.
SACRED HEART SCHOOL LEWIS RD. & WASHINGTON AVE. ROYERSFORD, PA 19468	PLAYGROUND EQUIPMENT & C.A.T.C.H. PROGRAM & GYMNASIUM DIVIDER	CATHOLIC SCHOOL	11,000.
SCHUYKILL RIVER GREENWAY ASSOCIATION 140 COLLEGE DRIVE POTTSTOWN, PA 19464	BIKE POTTSTOWN PROGRAM	GOVERNMENT ENTITY	20,000.
SPRING-FORD AREA SCHOOL DISTRICT 857 S. LEWIS ROAD ROYERSFORD, PA 19468	HEALTHY CHOICES PROGRAM	GOVERNMENT ENTITY	119,000.
ST. ALOYSIUS SCHOOL 220 N. HANOVER STREET POTTSTOWN, PA 19464	STEPS TO A HEALTHIER YOU - FITNESS AND NUTRITION	CATHOLIC SCHOOL	10,000.
ST. COLUMBKILL 200 INDIAN SPRING ROAD BOYERTOWN, PA 19512	HEALTH & WELLNESS PROGRAM	CATHOLIC SCHOOL	2,500.
THE GROWING CENTER, INC. 1908 HOFFMANSVILLE RD FREDERICK, PA 19435	HORTICULTURAL THERAPY	PUBLIC CHARITY	3,000.
THE TENNIS FARM 19 WATERLOO AVENUE BERWYN, PA 19312	PSD ELEMENTARY SCHOOL CHILDREN LEARN LIFETIME SPORT OF TENNIS	PUBLIC CHARITY	11,000.
THE TRISKELES FOUNDATION 707 EAGLEVIEW BLVD., SUITE 105 EXTON, PA 19341	FOOD FOR THOUGHT NUTRITION EDUCATION FOR YOUTH	PUBLIC CHARITY	24,000.
THE WYNDCROFT SCHOOL 1395 WILSON STREET POTTSTOWN, PA 19464	COOKING FOR REAL	SCHOOL	2,500.

POTTSTOWN AREA HEALTH AND WELLNESS FOUND 23-23447			
TOWNSHIP OF UPPER POTTSGROVE 1409 FARMINGTON AVE. POTTSTOWN, PA 19464	SPROGUL'S RUN	GOVERNMEN ENTITY	6,000.
TRICOUNTY COMMUNITY NETWORK 260 HIGH STREET POTTSTOWN, PA 19464	COMMUNITY COLLABORATIVE TO IMPROVE HEALTH, SOCIAL & ENVIRONMENTAL	PUBLIC CHARITY	83,000.
UNITED WAY OF BOYERTOWN P.O. BOX 213 BOYERTOWN, PA 19512	MATCHING GRANT FOR ANNUAL CAMPAIGN	PUBLIC CHARITY	15,000.
UNITED WAY OF SOUTHEASTERN PA 11 ROBINSON STREET, SUITE 100 POTTSTOWN, PA 19464	MATCHING GRANT FOR ANNUAL CAMPAIGN	PUBLIC CHARITY	50,000.
VISITING NURSE ASSOCIATION 1963 E. HIGH ST. POTTSTOWN, PA 19464	PERSONAL NAVIGATOR PROGRAM WITH EXPANDED LEGAL SUPPO	PUBLIC CHARITY	25,000.
WEST-MONT CHRISTIAN ACADEMY 873 SOUTH HANOVER ST. POTTSTOWN, PA 19465	HEALTHY EATING INITIATIVE	SCHOOL	10,000.
YWCA TRI-COUNTY AREA 315 KING STREET POTTSTOWN, PA 19464	HEALTHY CHOICES PROGRAM	PUBLIC CHARITY	35,000.
YWCA TRI-COUNTY AREA 315 KING STREET POTTSTOWN, PA 19464	HEALTHY PATHWAYS	PUBLIC CHARITY	77,000.
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A	<del></del>	2,935,041.

# (Rev January 2011)

## Application for Extension of Time To File an **Exempt Organization Return**

OMB No 1545-1709

Department of the Treasury File a separate application for each return. **►** X • If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs gov/efile and click on e-file for Charities & Nonprofits. Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time Employer identification number Name of exempt organization Type or POTTSTOWN AREA HEALTH AND WELLNESS print 23-2344729 FOUNDATION File by the Number, street, and room or suite no. If a P O. box, see instructions. filing your 152 EAST HIGH STREET, SUITE 500 return See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions POTTSTOWN, 0 4 Enter the Return code for the return that this application is for (file a separate application for each return) **Application** Return **Application** Return Code Is For Code Is For Form 990-T (corporation) Form 990 01 07 Form 990-BL 02 Form 1041-A 80 Form 990-EZ 03 Form 4720 09 04 Form 5227 10 Form 990-PF Form 6069 Form 990-T (sec. 401(a) or 408(a) trust) 05 11 Form 990-T (trust other than above) 06 Form 8870 DAVID KRAYBILL, EXECUTIVE DIRECTOR • The books are in the care of ▶ 152 E. HIGH STREET, SUITE 500 - POTTSTOWN, PA 19464 Telephone No ► 610-323-2006 FAX No ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until FEBRUARY 15, 2012, to file the exempt organization return for the organization named above. The extension is for the organization's return for.

If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 51,378. nonrefundable credits. See instructions За If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 55,653. estimated tax payments made. Include any prior year overpayment allowed as a credit 3b \$ Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions

, and ending JUN 30,

Initial return

2011

Final return

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

► X tax year beginning JUL 1, 2010

Change in accounting period

If the tax year entered in line 1 is for less than 12 months, check reason:

calendar year