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Form **990-PF**

Department of the Treasury

Internal Revenue Service

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

2011

, 20 For calendar year 2011 or tax year beginning , 2011, and ending A Employer identification number Name of foundation 38-3674460 Herman O. West Foundation Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) 610 594-2905 101 Gordon Drive City or town, state, and ZIP code C If exemption application is pending, check here ▶ Lionville, PA 19341 Initial return of a former public charity Check all that apply: Initial return D 1. Foreign organizations, check here Amended return Final return Foreign organizations meeting the 85% test, Address change □ Name change check here and attach computation ▶□ Check type of organization: Section 501(c)(3) exempt private foundation E If private foundation status was terminated under Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation section 507(b)(1)(A), check here ▶ 🔲 Fair market value of all assets at J Accounting method: ✓ Cash ☐ Accrual If the foundation is in a 60-month termination end of year (from Part II, col. (c), Other (specify) under section 507(b)(1)(B), check here ▶□ line 16) ► \$ 2,588,354 (Part I. column (d) must be on cash basis.) Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (c) Adjusted net (b) Net investment amounts in columns (b), (c), and (d) may not necessarily equal expenses per purposes (cash basis only) income income books the amounts in column (a) (see instructions)) Contributions, gifts, grants, etc., received (attach schedule) 600,000 1 2 Check ▶ ☐ if the foundation is **not** required to attach Sch. B 3 Я Interest on savings and temporary cash investments 4 Dividends and interest from securities 24.071 24,071 Gross rents Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 6a Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) . . . 8 Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances Less: Cost of goods sold . . . Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) . . 624,079 24,079 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc. Operating and Administrative Expenses 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) Accounting fees (attach schedule) Other professional fees (attach schedule) Interest . . . RECEIVED Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion 19 Occupancy MAY 14 ZUIZ
Travel, conferences, and meetings 20 21 Printing and publications - \. 718 718 Other expenses (attach schedule) 10,150 10,150 Total operating and administrative expenses. Add lines 13 through 23 10,868 10,868 25 Contributions, gifts, grants paid 684,435 684,435 26 Total expenses and disbursements. Add lines 24 and 25 695,303 695,303 27 Subtract line 26 from line 12: Excess of revenue over expenses and disbursements (71,224)**Net investment income** (if negative, enter -0-) . 24,079 Adjusted net income (if negative, enter -0-)

Q Q

Part II		Attached schedules and amounts in the description column	Beginning of year	End o	t year
Pe	irc II	Balance Sheets Anached screedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
_	1	Cash—non-interest-bearing			
	2	Savings and temporary cash investments			•
	3	- · · · ·			
	"	Accounts receivable ► Less: allowance for doubtful accounts ►			
	4				
	*	Pledges receivable ►			
	_	Less: allowance for doubtful accounts ▶	-		
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	_	disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less: allowance for doubtful accounts ▶			<u> </u>
Assets	8	Inventories for sale or use			
SSE	9	Prepaid expenses and deferred charges			
Ä	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	2,076,522	2,588,354	2,588,354
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments other (attach schodule)			
	14	Land, buildings, and equipment: basis ▶			
	•				
	15	Other assets (describe ►			
	16	Total assets (to be completed by all filers—see the			
		instructions. Also, see page 1, item I)	2,076,522	2,588,354	2 500 254
	17	Accounts payable and accrued expenses	477.324		2,588,354
		· · · · · · · · · · · · · · · · · · ·	4/1,324	1,175,870	
es	18	Grants payable			
iti	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Lia	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ►)			
	23	Total liabilities (add lines 17 through 22)	477,324	1,175,870	
S		Foundations that follow SFAS 117, check here			
Ce		and complete lines 24 through 26 and lines 30 and 31.			
au	24	Unrestricted			
3a	25	Temporarily restricted			
Б	26	Permanently restricted			
5		Foundations that do not follow SFAS 117, check here ▶ ☑			
Net Assets or Fund Balances		and complete lines 27 through 31.			
0	27	Capital stock, trust principal, or current funds	1,599,198	1,412,484	
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
SS	29	Retained earnings, accumulated income, endowment, or other funds			
Y	30	Total net assets or fund balances (see instructions)	1,599,198	1,412,484	}
Ę	31	Total liabilities and net assets/fund balances (see			
_		instructions)	2,076,522	2,588,354	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances	,		
1		I net assets or fund balances at beginning of year-Part II, colur			
	end-	of-year figure reported on prior year's return)		1	1,599,198
2	Ente	r amount from Part I, line 27a		2	(71,224)
3		er increases not included in line 2 (itemize) ▶			
4	Add	lines 1, 2, and 3		4	1,527,974
5	_			-	115,490
6	Tota	reases not included in line 2 (itemize) I net assets or fund balances at end of year (line 4 minus line 5)—F	Part II, column (b), line	30 6	1,412,484
_					.,,

Part	(a) List and describe the	Losses for Tax on Investment kind(s) of property sold (e g , real estate,	Income	(b) How acquired P-Purchase		Date acquired	(d) Date sold
	2-story brick warehouse		D-Donation	(m	o, day, yr)	(mo , day, yr)	
<u>1a</u>	 				ļ		
b							
<u>c</u>				 			
d							
<u>e</u>	(e) Gross sales price	(f) Depreciation allowed (or allowable)	10,	other basis			n or (loss) (f) minus (g)
а							
b							
c							
<u>d</u>							
<u> e</u>							
	Complete only for assets show	ing gain in column (h) and owned by th					(h) gain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any			t less than -0-) or rom col (h))
<u>a</u>			<u> </u>				
<u>b</u>					_		
<u>d</u>			_				
		If gain, also	enter in Pa	rt L line 7			<u> </u>
2	Capital gain net income or (net capital loss) { If (loss), ent	er -0- ın Pa	rt I, line 7	2		
3	If gain, also enter in Part I,	or (loss) as defined in sections 122 line 8, column (c) (see instruction	s). If (loss)				
Pari		r Section 4940(e) for Reduced		lot Investment	3		
Was t	s," the foundation does not q	ection 4942 tax on the distributable ualify under section 4940(e). Do no	t complete	this part.			Yes No
		nt in each column for each year; so	ee the instru	uctions before ma	aking	any entries.	
Cal	(a) Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value o	(c) f noncharitable-use as	ssets		(d) iribution ratio divided by col (c))
	2010	669,661			0		0.0
	2009	1,348,941		· · · · · · · · · · · · · · · · · · ·	0		0.0
	2008	430,051	+		0		0.0
	2007				0		0.0
	2006		<u>'L</u>		0		0.0
2	Total of line 1, column (d)					2	0.0
3		r the 5-year base period—divide the	 he total on l		the l		0.0
		tion has been in existence if less the				3	0.0
	, , , , , , , , , , , , , , , , , , , ,		, , , , , , , , , , , , , , , , , , , ,		•	-	0.0
4	Enter the net value of nonch	naritable-use assets for 2011 from	Part X, line	5	.	4	0
5	Multiply line 4 by line 3 .				.	5	0
6	Enter 1% of net investment	income (1% of Part I, line 27b)			.	6	241
7	Add lines 5 and 6				.	7	241
8	Enter qualifying distributions	s from Part XII, line 4			. [8	695,303
	If line 8 is equal to or greate Part VI instructions.	er than line 7, check the box in Par	τ VI, line 1b	, and complete t	hat pa	art using a 1	% tax rate. See the

Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see in	nstru	ictioi	าร)	
1a	Exempt operating foundations described in section 4940(d)(2), check here ► □ and enter "N/A" on line 1.				
b	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions) Domestic foundations that meet the section 4940(e) requirements in Part V, check 1		241	00	
-	here ▶ ✓ and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				
3	Add lines 1 and 2		241	00	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		241	00	
6	Credits/Payments:				
a b	2011 estimated tax payments and 2010 overpayment credited to 2011				
C	Tax paid with application for extension of time to file (Form 8868) . 6c				
d	Backup withholding erroneously withheld 6d		İ		
7	Total credits and payments. Add lines 6a through 6d		0		
8	Enter any penalty for underpayment of estimated tax. Check here uf Form 2220 is attached 8		0		
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9		241	00	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10]		
11	Enter the amount of line 10 to be: Credited to 2012 estimated tax ▶ Refunded ▶ 11				
	VII-A Statements Regarding Activities During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	 -	Yes	No	
1a	participate or intervene in any political campaign?	1a	162	No ✓	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19	la			
_	of the instructions for definition)?	1ь		1	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				
	published or distributed by the foundation in connection with the activities.			į	
С	Did the foundation file Form 1120-POL for this year?	1c		✓	
d					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		✓	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3			
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		-/	
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		$\overline{}$	
	If "Yes," attach the statement required by General Instruction T.				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			İ	
	By language in the governing instrument, or				
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?				
7	· · ·	6 7	√		
7 8a	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV Enter the states to which the foundation reports or with which it is registered (see instructions)		✓		
J a	Pennsylvania		1	ļ	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	1		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or				
	4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes,"				
10	Complete Part XIV	9	/		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	40	_		

Par	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		1
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶	13	✓	
14	The books are in care of ► West Pharmaceutical Services, Inc. Telephone no. ► 61	0 594	2905	
	Located at ► 101 Gordon Dr., Lionville, PA ZIP+4 ► 19	9341-0		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the year 15			▶ □
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No ✓
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country ▶		•	
Par	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
1a	During the year did the foundation (either directly or indirectly):	<u></u>		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes Vo (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes (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)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" 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.)			
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 instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2011?	1c		
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)):	- 1 -		
а	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2011?			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	····		
	all years listed, answer "No" and attach statement—see instructions.)	2b		✓_
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 20, 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2011 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 2011.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		✓
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?	4b		
	, , , , , , , , , , , , , , , ,			

n	c
Page	C

Par	VII-B Statements Regarding Activities	for V	Vhich Form	4720	May Be R	equire	ed (contii	nued)			
5a	During the year did the foundation pay or incur a	-									
	(1) Carry on propaganda, or otherwise attempt to		-	-		-	☐ Yes	✓ No			
	(2) Influence the outcome of any specific public		· · · · · · · · · · · · · · · · · · ·		•	-	,				
	directly or indirectly, any voter registration dri						Yes	☑ No			
	(3) Provide a grant to an individual for travel, study, or other similar purposes?										
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)										
							Yes	✓ No			
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?										
h	b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in										
	Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?								5b		
	Organizations relying on a current notice regarding	-	-		-				30		
С	If the answer is "Yes" to question 5a(4), does to	-						· –			
	because it maintained expenditure responsibility							□ No			
	If "Yes," attach the statement required by Regula	tions s	ection 53.49	45–5(d)	•						
6a	Did the foundation, during the year, receive any	funds,	directly or in-	directly	, to pay pre	emiums	;				Ì
							☐ Yes	_			
b	Did the foundation, during the year, pay premium	ns, dire	ctly or indire	ctly, on	a personal	benefi	t contract	? .	6b		✓
_	If "Yes" to 6b, file Form 8870.						_	_			
	At any time during the tax year, was the foundation a						∐ Yes				
	If "Yes," did the foundation receive any proceeds VIII Information About Officers, Direct								7b		
r ar	and Contractors	tors, i	i i ustees, r	ounua	LIOII Walle	iyeis,	migrily F	alu El	прюу	ees,	
1	List all officers, directors, trustees, foundation	n mana	agers and th	eir con	npensation	ísee i	nstruction	ns).			
		(b) Title	e, and average	(c) Co	mpensation	(d)	Contributions	s to	(e) Expe	nse acc	Count
	(a) Name and address			(If not			loyee benefit plans ferred compensation		(e) Expense according other allowance		
Richa	rd Luzzi	Truste	e		0		· ·			_	
101 G	ordon Dr., Lionville, PA 19341			0							
	je Bennyhoff	Chairn	nan	0					_		
	alley Road, Strafford, PA 19087			U U							
	A. Johnson, MD, MPH	Truste	e	0							
101 G	ordon Dr., Lionville, PA 19341						.				
								ļ			
2	Compensation of five highest-paid employee	e (oth	er than tho	se incl	uded on li	ne 1_	see instri	uctions) If no	200 4	enter
_	"NONE."	, (OLII	or aran aro	30 11101	adea on in		occ mon	uctions	y. 11 110	Jile, t	SIICI
			(b) Title, and a				(d) Contribu	itions to			
	(a) Name and address of each employee paid more than \$50,00	0	hours per v	veek	(c) Comper	sation	employee plans and c	benefit leferred	(e) Exper	nse acc	
			devoted to p	osition			compens			_	
						_					
NONE	<u> </u>			-	<u> </u>	-					
									-		
			<u> </u>				_		-		
Total	number of other employees paid over \$50,000 .							. ▶			

Par	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid En and Contractors (continued)	nployees,
3	Five highest-paid independent contractors for professional services (see instructions). If none, enter "NON	IE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NON	E	
		<u> </u>
ota	number of others receiving over \$50,000 for professional services	
Par	t IX-A Summary of Direct Charitable Activities	
Lis	t the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ganizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1		
2		
3		
4		
		<u> </u>
	t IX-B Summary of Program-Related Investments (see instructions)	
De	scribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1		
2		
	other program-related investments. See instructions	
3		
	Add the add Aboursh O	ļ
ota	. Add lines 1 through 3	L

Form 9	90-PF (2011)		Page 8
Part	X Minimum Investment Return (All domestic foundations must complete this part. Fore	ign fol	indations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	0
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	0
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	_3	0
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see		
	instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0
6	Minimum investment return. Enter 5% of line 5	6	0
Part			
	foundations and certain foreign organizations check here ▶ ☐ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2011 from Part VI, line 5 2a 241]	
b	Income tax for 2011. (This does not include the tax from Part VI.) 2b		
C	Add lines 2a and 2b	2c	241
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	(241)
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	(241)
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	1 1	
	line 1	7	(241)
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	695,303
b	Program-related investments—total from Part IX-B	1b	093,303
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	695,303
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 (see instructions)	5	241
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	695,062
-	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating		
	qualifies for the section 4940(e) reduction of tax in those years.	9 ****	nor the loundation

Part	XIII Undistributed Income (see instruction	ons)			
	•	(a)	(b)	(c)	(d)
1	Distributable amount for 2011 from Part XI,	Corpus	Years prior to 2010	2010	2011
	line 7				(241)
2	Undistributed income, if any, as of the end of 2011:				
а	Enter amount for 2010 only		•		
b	Total for prior years: 20 ,20 ,20				
3	Excess distributions carryover, if any, to 2011:				
а	From 2006				
b	From 2007				
C	From 2008				
d	From 2009				
e	From 2010				
f	Total of lines 3a through e				
4	Qualifying distributions for 2011 from Part XII,				
7	line 4: ► \$ 695,303				
_	Applied to 2010, but not more than line 2a.				
a b	Applied to 2010, but not more than line 2a. Applied to undistributed income of prior years				
D	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election				
U	required—see instructions)				
d	Applied to 2011 distributable amount				
	Remaining amount distributed out of corpus	695,303			
е 5	Excess distributions carryover applied to 2011	093,303			
5	(If an amount appears in column (d), the same				
	amount must be shown in column (a), the same				
6	Enter the net total of each column as				
J	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	···			
b	Prior years' undistributed income. Subtract				
	line 4b from line 2b				
_	Enter the amount of prior years' undistributed			······································	
С	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable		····································	<u></u>	
-	amount—see instructions				
е	Undistributed income for 2010. Subtract line				
C	4a from line 2a. Taxable amount—see				
	instructions				
f	Undistributed income for 2011. Subtract lines				
•	4d and 5 from line 1. This amount must be				
	distributed in 2012				(241)
7	Amounts treated as distributions out of corpus				(277)
-	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see instructions) .	695,303			
8	Excess distributions carryover from 2006 not	200,000			-
	applied on line 5 or line 7 (see instructions).				
9	Excess distributions carryover to 2012.				
	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9:				
a	Excess from 2007				
b	Excess from 2008				
c	Excess from 2009				
ď	Excess from 2010				
e	Excess from 2011				

Part :	XIV Private Operating Founda	tions (see instru	ctions and Part	VII-A, question 9)	· · · · · · · · · · · · · · · · · · ·
1a	If the foundation has received a ruling foundation, and the ruling is effective for	•		, , ,		
b	Check box to indicate whether the fou		•		ction [] 4942(i)	(3) or 4942(j)(5)
	Enter the lesser of the adjusted net	Tax year		Prior 3 years	4942()	3) 01 <u>4942()(3)</u>
20	income from Part I or the minimum	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
	investment return from Part X for	(a) 2011	(5) 2010	(6) 2009	(u) 2008	
h	each year listed			 -		
	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					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"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 listed					
С	"Support" alternative test-enter:					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
Part	XV Supplementary Information	n (Complete th	is part only if th	ne foundation h	ad \$5,000 or m	ore in assets at
	any time during the year-	-see instruction	ıs.)			
1	Information Regarding Foundation					
а	List any managers of the foundation	who have contribu	ited more than 2%	of the total contr	ibutions received	by the foundation
	before the close of any tax year (but o	only if they have co	ontributed more th	an \$5,000). (See se	ection 507(d)(2).)	
NONE						
b	List any managers of the foundation ownership of a partnership or other e					rge portion of the
NONE						
2	Information Regarding Contribution					
	Check here ▶ ☐ if the foundation unsolicited requests for funds. If the f	oundation makes	ibutions to presel gifts, grants, etc. (ected charitable of see instructions) to	organizations and o individuals or or	does not accept ganizations under
	other conditions, complete items 2a,		. 		 	
	The name, address, and telephone nu		n to whom applica	ations should be a	ddressed:	
Herma	n O. West Foundation, 101 Gordon Dr.,	Lionville, PA 19341			_	
b	The form in which applications should	l be submitted and	information and r	naterials they show	uld include:	
Sampl	e Attached					
	Any submission deadlines: ry 28th					
	Any restrictions or limitations on aw	ards, such as by	/ geographical are	eas, charitable fie	lds, kinds of inst	itutions or other
	factors:	,		,	, 1	

Scholarship recipients must be dependents of West Pharmaceutical Services, Inc.

Part XV

Supplementary Information (continued)

Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation show any relationship to any foundation manager or substantial contributor Purpose of grant or status of Amount contribution recipient Name and address (home or business) a Paid during the year **United Way** 212,801 **Community Service** 157,806 Education 118,600 Hospital / Health Care 90,705 **Scholarship Payments** 72,083 **Matching Gifts** 17,940 Cultural 14,500 Total За 684,435 Approved for future payment Total

_	gross amounts unless otherwise indicated.		siness income	Excluded by secti	on 512, 513, or 514	1
	,	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
1 1	Program service revenue:					(CCC IIICII CCIICII)
•	<u> </u>					
ı	·					
(·					<u> </u>
•	<u> </u>					
•	e					
1						
9	Fees and contracts from government agencies					
2	Membership dues and assessments		<u> </u>			
3	nterest on savings and temporary cash investments					8
4 [Dividends and interest from securities					24,071
5 I	Net rental income or (loss) from real estate:					
á	a Debt-financed property					<u> </u>
ı	Not debt-financed property					
6	Net rental income or (loss) from personal property					
	Other investment income		<u>-</u>			
8	Gain or (loss) from sales of assets other than inventory					
	Net income or (loss) from special events					
10 (Gross profit or (loss) from sales of inventory					
11 (Other revenue: a					
ı	o					
•	>					
•	d					
(e					
	Subtotal. Add columns (b), (d), and (e)			<u> </u>		24,079
13	Total. Add line 12, columns (b), (d), and (e)				13	
13 · See <u>v</u>	Fotal. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculation	s.)	· · · · · ·		13	
13 See v Part	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes		24,079
13 See v Part Line	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes		24,079
13 See v Part	rotal. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A No. Explain below how each activity for which	s.) ccomplishm	ent of Exemp	ot Purposes		24,079
13 See v Part Line	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes		24,079
13 See v Part Line	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes		24,079
13 See v Part Line	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes		24,079
13 See v Part Line	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes		24,079
13 See v Part Line	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes		24,079
13 See v Part Line	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes		24,079
13 See v Part Line	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes		24,079
13 See v Part Line	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes		24,079
13 See v Part Line	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes		24,079
13 See v Part Line	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes		24,079
13 See v Part Line	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes		24,079
13 See v Part Line	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes		24,079
13 See v Part Line	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes		24,079
13 See v Part Line	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes		24,079
13 See v Part Line	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes		24,079
13 See v Part Line	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes		24,079
13 See v Part Line	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes		24,079
13 See v Part Line	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes		24,079
13 See v Part Line	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes		24,079
13 See v Part Line	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes		24,079
13 See v Part Line	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes		24,079
13 See v Part Line	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes		24,079 24,079 mportantly to the ctions)

		Exempt Or	ganizations									
1	ın sed			ngage in any of the follo ection 501(c)(3) organiza							Yes	No
а	Trans	sfers from the rer	norting foundation to	a noncharitable exempt	organization	of:				ŀ		l
~		-	-	•	_					4 - (4)		
	• •									1a(1)		✓
	(2) O	ther assets .								1a(2)		_ <
b	Other	r transactions:								-		1
	(1) S	ales of assets to	a noncharitable exer	mpt organization						1b(1)		1
				• -						_ · ·		
				ble exempt organization						1b(2)		
	(3) R	ental of facilities,	, equipment, or other	assets						1b(3)		✓
	(4) R	eimbursement ar	rrangements							1b(4)		✓
			_							1b(5)		1
		_		p or fundraising solicitat								
				-						1b(6)		✓
				ts, other assets, or paid						1c	L	✓
d	If the	answer to any	of the above is "Yes	," complete the followin	ig schedule.	Column (b) :	should	d alwa	iys sho	w the	fair m	arket
	value	of the goods, or	ther assets, or servic	es given by the reporting	g foundation	. If the found	dation	receiv	ved les	s than	fair m	arket
				ement, show in column (
(a) L (p)		b) Amount involved		aritable exempt organization		ription of transfe						
(a) Line	no (b) Amount involved	(c) Name of noncha	aritable exempt organization	(a) Desci	iption of transfe	ers, trans	sactions	s, and sr	naring arr	angeme	∌nts ——
	- 1											
								_				
	-			 				-				
							_				_	
	_											
		 						_	_			
					1							
						-				_		
								_				
	desci	ribed in section 5	ectly or indirectly affi 501(c) of the Code (of e following schedule.	liated with, or related to ther than section 501(c)(o, one or mo 3)) or in section	re tax-exem on 527? .	pt org	anıza	tions · · [Yes		No
		(a) Name of organ		(b) Type of organiza	ition T		(c) Des	crintion	of relation	onship		
	-	(a) Hame or organ	- Lation	(b) Type of organize			(C) Desi	cription	Orrelatio	Onsinp		
		<u> </u>										
				·						-		
						-						
_		· -										
	Undo	r nenalties of Jerun. I	de are that I have evamined	I this return, including accompany	(ing schedules c=	1 etatemente end	to the h	noct of -	ny kaomin	ndac c=d	haliaf :	10 4- :-
2i~-	corre	ct, and complete Decl	aration of preparer tother than	i this return, including accompany i taxpayer) is based on all informa	ation of which are:	a staternents, and parer has any kno	i io ine D wledae	Jesioin E	iy Knowle	euge and	oeiler, it	is true,
Sign		1/1 1		_ \						IRS discu		
Here	11/	Technel 1	/ Xun	5/1/2012	TRUSTEE					preparer		
		ature of officer or trus	stee /		lle	,			(see instr	uctions)?	Yes[_IN0
		Print/Type preparer	's name	Preparer's signature		Date	\neg		_	PTIN		
Paid		Alexander	····			1		Check		•		
repa	arer							self-en	nployed			
Jse (Firm's name ►					Firm's	EIN ►				
		Firm's address ▶			-		Phone	no				

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

2011

Name of	the organization			Employer identification number					
Herman	O. West Foundation			38-3674460					
Organiz	ation type (check or	ıe).		<u> </u>					
Filers o	f:	Se	ction:						
Form 99	00 or 990-EZ		501(c)() (enter number) organization						
			4947(a)(1) nonexempt charitable trust not treated as a private for	undation					
			527 political organization						
Form 99	00-PF	V	501(c)(3) exempt private foundation						
			4947(a)(1) nonexempt charitable trust treated as a private foundation						
			501(c)(3) taxable private foundation						
	nly a section 501(c)(7		ered by the General Rule or a Special Rule. , or (10) organization can check boxes for both the General Rule a	and a Special Rule. See					
Genera	l Rule								
V			Form 990, 990-EZ, or 990-PF that received, during the year, \$5,0 contributor. Complete Parts I and II.	000 or more (in money or					
Special	Rules								
	under sections 509(a)(1) ,000	rganization filing Form 990 or 990-EZ that met the 33½ % suppor and 170(b)(1)(A)(vi) and received from any one contributor, during or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Fo	the year, a contribution of					
	during the year, tota	l con	3), or (10) organization filing Form 990 or 990-EZ that received fron tributions of more than \$1,000 for use exclusively for religious, character or the prevention of cruelty to children or animals. Complete Part	arıtable, scientific, literary,					
	during the year, con not total to more that year for an exclusive	tribu an \$1 ely re nizati	3), or (10) organization filing Form 990 or 990-EZ that received fro tions for use exclusively for religious, charitable, etc., purposes, b, 000. If this box is checked, enter here the total contributions tha ligious, charitable, etc., purpose. Do not complete any of the part on because it received nonexclusively religious, charitable, etc., c	out these contributions did t were received during the is unless the General Rule					
990-EZ,	or 990-PF), but it mu	ı st a	ot covered by the General Rule and/or the Special Rules does no nswer "No" on Part IV, line 2, of its Form 990; or check the box or to certify that it does not meet the filing requirements of Schedule	n line H of its Form 990-EZ or on					

Schedule B (Form 990, 990-EZ, or 990-PF) (2011) Name of organization Employer identification number Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (c) (a) (b) (d) Total contributions No. Name, address, and ZIP + 4 Type of contribution West Pharmaceutical Services, Inc. Person $\boxed{}$ 1 **Payroll** 600,000 101 Gordon Drive Noncash (Complete Part II if there is a noncash contribution.) Lionville, PA 19341 (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II if there is a noncash contribution) (c)
Total contributions (a) (b) (d) Name, address, and ZIP + 4 No. Type of contribution Person **Payroll** Noncash (Complete Part II if there is a noncash contribution) (b) (c) (d) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) Name, address, and ZIP + 4 No. **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) Total contributions No. Name, address, and ZIP + 4 Type of contribution Person Payroll Noncash (Complete Part II if there is

a noncash contribution)

THE H. O. WEST FOUNDATION 101 GORDON DRIVE, LIONVILLE, PA 19341

DEAR HIGH SCHOOL SENIOR

Congratulations on reaching your senior year of high school! We know this is an exciting time for you

Attached is the three-part application form for The H. O. West Foundation's current Scholarship Program competition The completed application must be returned to The H O West Foundation, 101 Gordon Drive, Lionville, PA 19341 by the 28th day of February of the year that you will graduate

The Foundation will award up to seven college scholarships, valued at up to \$2,500 per year for four successive years toward tuition costs only, at an accredited college or university of your choice. One of the seven scholarships, the William S West Scholarship, is made possible through a gift to the Foundation from Mr. West's family in memory of our former Chairman and Chief Executive Officer. Initially, a student may choose to attend a two-year accredited college and later transfer to a four-year college or university to complete a baccalaureate degree The basic rules of eligibility require you to be a high school senior who will be pursing an undergraduate degree and the son, daughter or other qualifying dependent of a U.S., full-time employee of West Children of executive officers, West's Board of Directors, and the Foundation's Board of Trustees are ineligible.

The selection of recipients of the scholarships is determined by a committee composed of secondary school or college administrators who will consider each applicant on the basis of his/her character. maturity, leadership, extracurricular activities, motivation, interest and desire, patriotism, predicted success in college and academic achievement

The attached forms include (1) an Eligibility Verification to be completed by you and signed by the Human Resources person at the location at which your parent is employed, (2) a four-page Scholarship Application to be completed by you, and (3) a High School Certification to be completed by a representative of your high school Each application must include the results of a College Entrance Examination, either the Scholastic Aptitude Test (SAT) or the American College Testing Program (ACT) We request that you include at least three recommendations from teachers, a guidance counselor or principal

It is also important for you to know that if you are selected as a recipient of a scholarship, you must enter college by the fall of the year in which the scholarship is awarded and continue for four successive years in college without interruption, except for usual vacation periods or active duty military training or service.

We suggest you read all of the instructions at the top of the forms and carefully check all dates and information you have entered on the forms. Should you have any questions, you may contact Maureen Goebel at (610) 594-2945.

We wish you much success as you select the college of your choice! Good luck!

Sincerely,

Richard D Luzzi

Trustee

HERMAN O. WEST FOUNDATION SCHOLARSHIP APPLICATION ELIGIBILITY VERIFICATION

Please enter all information requested. All forms must be mailed directly to The Herman O. West Foundation, 101 Gordon Drive, Lionville, PA 19341 before February 28

I hereby apply for a scholarship under the Scholarship Program of The Herman O. West Foundation and submit the following verified information:

1.	Name:	Mr. Mıss							
		- ,	Last			First			Mıddle
2.	Home Ad	ldress:	_						
				Street					
			-	City		State			Zıp
3.	Birth Dat	te:	Month		Day	Year			
					Day				
4	Indicate	on who	se emp	oloyment statu	ıs you wish	to base you	ur applicat	ion for a schol	arship
	Father	M	other	Ste	p-father	Step	-mother	Legal (Guardian
5.	Full Nam	e of thi	s Pare	nt: Mr. Mrs.					
					Last Name	•	First N	lame	Middle
6.	Full Hom	e Addre	ess of	this Parent:					
					Street				
					City			State	Zıp
7.	This pare	ent is en	nploye	d at this West	t location.	_			
	This para	nt starts	od oon	nacutwa amni	ovmont with		City		State
ο.	ins pare	iii Starte	eu con:	secutive empl	Oyment with	i vvest on	Month	Day	Year
9.	Full nam			s Mr. Mrs.					
	. ,			•	Last Name		Fir	st Name	Middle Initial
					Street				
					City			State	Zıp
SI	GNED:								
				Appli	cant			Date	
VE	ERIFIED:			11	on Bonnier	Manager			
				Hum	an Resources	wanager			

HERMAN O. WEST FOUNDATION

SCHOLARSHIP APPLICATION

Please enter all information requested in items 1-18 All forms must be mailed directly to The Herman O. West Foundation, 101 Gordon Drive, Lionville, PA 19341 before February 28

I hereby apply for a scholarship under the Scholarship Program of The Herman O. West Foundation and submit the following verified information

1.	Name:	Mr Miss							
		IVIISS	Last		Fırst	Mide	dle		
2.	Home Ad	ddress:		Street			 -		
			_	City	State	Ž	ın.		
•	Diath Day	4			2-2-10	_	•		
3.	Birth Dat	te:	Month	Day	Year				
					work activities during the me or for outside employ		nd the number of		
5. List all High Schools and Secondary Schools attended: Name of School City and State Attendance Graduation Name of									
					<u>Dates</u>	<u>Date</u>	<u>Principal</u>		
1					То				
2									
					То				
3					To To				
	attende	d) be su	re that	all grades and credits	·	e high school record	v attending (or last to be submitted to		
3	attended The Hea	d) be su rman O.	re that West F	all grades and credits Foundation Scholarsh	To n high schools other than s earned are included in the	e high school record ent school principal	v attending (or last to be submitted to		
3	attended The Hed What so	d) be su rman O.	re that West F	all grades and credits Foundation Scholarsh	To n high schools other than s earned are included in the ip Committee by your presen	e high school record ent school principal	v attending (or last to be submitted to		
3 6.	attended The Hell What sets:	d) be su rman O. ubjects feel tha	re that West F have y	all grades and credits Foundation Scholarsh ou found most inter high school grades	To n high schools other than s earned are included in the lip Committee by your preseresting in your high school	e high school record ent school principal of work? your ability? Ye	to be submitted to		
6. Fire	attended The Hell What sets:	d) be su rman O. ubjects feel tha	re that West F have y	all grades and credits Foundation Scholarsh ou found most inter high school grades	n high schools other than s earned are included in the processing in your high schools second:	e high school record ent school principal of work? your ability? Ye	to be submitted to		

· · · · · · · · · · · · · · · · · · ·			
<u>EXAM</u>	<u>Date Taken</u>	Score Received (Will be verified	i)
SAT			
ACT			
9. Indicate your co	llege preference: (These must l	be accredited colleges/universities.)	
First Choice		Third Choice	
At which college have	you already applied?		
NOTE: Your cho	ice of college will in no way affect	your chances of receiving a scholarship	
10. What general co	urse of study do you plan to tak	ke?	
	counselor advised you that he/ r high school subjects and the g		dy upon
		Yes No	
12. What special re scholarships?	cognition have you received fo	or outstanding school work such as honors, p	rizes or
			_
orchestra, athlet number in right	tics, dramatics, debate or orato t-hand column the high schoo shman, 2 - Sophomore, 3 - Ju	ool activities such as class or school offices, bry, school publications, pep club, etc. Desigol year in which you participated in each actunior, 4 - Senior. Use back page or attach a s	nate by tivity as
Activity	Position Held	<u>Hours Spent</u> <u>Year o</u> <u>Per Week</u> <u>Participa</u>	
			
-			
			

8. Which college entrance examination did you take? Do you plan to retake?

<u>Activity</u>	Position Held	Hours Spent Per	Year of Particip
		<u>Week</u>	
	··· - · · · · · · · · · · · · · · · · ·		
· · · · · · · · · · · · · · · · · · ·			
Control of the last of the las			
List your hobbies in orde	er ot preterence:		
			
			
	special recognition in conne	ection with your recreation	nal activities or hob
	special recognition in conne	ection with your recreation	nal activities or hob
If you have received any describe briefly.	special recognition in conne	ection with your recreation	nal activities or hob
	special recognition in conne	ection with your recreation	nal activities or hob
	special recognition in conne	ection with your recreation	nal activities or hob
	special recognition in conne	ection with your recreation	nal activities or hob
	special recognition in conne	ection with your recreation	nal activities or hob
describe briefly.	special recognition in conne		
describe briefly.			
describe briefly.			

14. Specify what part you have played in organized out-of-school activities such as rank attained as Boy

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·	
<u>CI</u>	<u>ERTIFICATION</u>
ol to send a certification of my gra	West Foundation Scholarship application and I have requested my high ades to The Herman O. West Foundation. I certify that all statements are true and correct, and that I believe myself eligible to apply for a
ature	Date

HERMAN O. WEST FOUNDATION HIGH SCHOOL CERTIFICATION

As an applicant for a Herman O. West Foundation Scholarship, I hereby request that you, as my high school representative, complete this form and mail it by February 28 to The Herman O West Foundation, 101 Gordon Drive, Lionville, PA 19341. Attaching transcripts to this form is acceptable.

							Signa	ature of Applica	int	Date	
Studen	t's	_				School	Name			Phone No.	:
Name						and A	ddress:				
	Last	First	Mid	dle							
Home											
Addres	s:						!!a L	() State		n-public	
<u> </u>							lited by:		ed. Assoc. () Pu		
Previou	is Secondary Scho	ol Attended:	:	Da	te Left:	Enroll 11 - 12	ment in (· 4	Grades -Year College:	Percer	nt Graduates Ent 2-Year College	
				_				Tun comege.		and other:	
Birth D	ate:	Sex:	:	Date G	raduated:	Pass. N		 			
						Honor	s Mark:		Circle Lowest N A B C		
Expla	nation of Honors (Courses:				I.			_		
•											
	·		1 "				ı				
<u>CL</u>	ASS RECORD			Ma	arks		RANK	IN CLASS	Based on _	Semesters	_
							Rank b	ased on:	-	in Class of	
) All Subjects Give		All Students	
			l I				') Major Subject C	only ()	College Prep. St	tudy Only
		 Identity			,		Explair	Weighting of Mar	ks in Determining	Rank -	
Include subjects Failed or repeated		Honors		Final	Cred.	State					
	ranco or repeated		1 st Sem.	2nd Sem.	or Unit	Exam. Score					
		Etc.	Sciii.	Stin.	1 Omit	Score	1				
Year	Subjects	-					┨				
Fr.					 		1				
							TEST	RECORD			-
Soph.								Name of	Raw or Standard	Percentile	Norm
							Date	Test	Score	Score	Group
					1				1		
		†		<u> </u>	<u> </u>				 		
Jr.		ļ						<u> </u>			
							OUTST	ANDING ACTIVI	TIES, HONORS.	AWARDS:	
-									,		
	<u> </u>	1			 						
Sr.		 			 		Į .				
		 _									
		<u> </u>									
							ll .				

Teacher observations will be used only by the Herman O. West Foundation officials in making Scholarship Award decisions.

	Summary descriptions made by teachers of Grade((specify number at each level)
- - -	Participation in Discussion (Self-Initiated) always involved, often initiates discussion usually participates often participates occasionally participates seldom participates not applicable	2	Involvement in Classroom Activities very high in all activities active, usually shows genuine interest mild, politely attentive languid, attention often wanders distracted, does other things during class vacillates greatly
- - -	Pursuit of Independent Study considerable study and major project(s) considerable study or major project(s) some study and minor project(s) some study or minor project(s) no evidence of independent study not applicable	4	Evenness of Performance exceptionally consistent even, varies no more than one mark slightly uneven, often varies one mark uneven, often varies two marks erratic, performance fluctuates greatly
5 (Critical and Questioning Attitude often challenges sometimes challenges occasionally is skeptical sometimes probes rarely questions not applicable	6	Depth of Understanding excellent insight good understanding some insight little insight poor understanding not applicable
7 I	Personal Responsibility always accepts fully usually accepts fully partially accepts sometimes refuses often refuses	8	Consideration for Others always considerate of others' rights and feelingsusually consideratecourteous, little evidence of consideration sometimes inconsiderateoften inconsiderateinadequate opportunity to observe
COM	MENTS OR OTHER PERTINENT OBSERVATION	NS:	
REC	OMMENDATION TO SELECTION COMMITTEE:		
 D:	ate Signature		Title

THE H. O. WEST FOUNDATION DETAILED SCHEDULE OF MATCHING GIFTS TO EDUCATION FROM January 1, 2011 THRU December 31, 2011

MATCHING GIFTS

Date	Institution	Name	Amount
1/3/2011	Mansfield University	T. Meyer	100.00
1/3/2011	Millersville University	K. Werley	50.00
1/17/2011	Virginia Tech	H. Poff	150.00
1/17/2011	Penn State University	T. Meyer	200.00
1/25/2011	University of Notre Dame	K. Flynn	250.00
1/25/2011	University of Delaware	T. Hofmann	1000.00
1/25/2011	University of Pennsylvania	S. Heumann	125.00
1/25/2011	St. Joseph's Preparatory School	S. Heumann	500.00
1/25/2011	Comell University	J. Neafsey	1000.00
2/11/2011	DeSales University	J. Weiland	1000.00
3/28/2011	University of Pennsylvania	J. Mueller	200.00
3/28/2011	Mount Saint Marys University	A. Bracther	250.00
3/28/2011	Bucknell University	M. Peterson	75.00
4/18/2011	East Stroudsburg University	G. Bennyhoff	200.00
4/18/2011	LaSalle College High School	J. Abbott	500.00
4/18/2011	St. Genevieve School	J. Abbott	500.00
4/18/2011	Lock Haven University	A. Straka	75.00
5/24/2011	Cross Lanes Christian School	S. Young	25.00
5/24/2011	Episcopal Academy, The	G. Worden	1000.00
5/24/2011	Gettysburg College	D. Labresco	50.00
5/24/2011	Dartmouth College	R. Simpson	1000.00
5/24/2011	Delaware County Christian School	R. Mueller	1000.00
6/15/2011	Morehouse School of Medicine	A. Welters	1,000
6/15/2011	Catawba College	B. Nase	1,000
6/15/2011	Noble & Greenough School	P. Johnson	1,000
7/13/2011	William Penn Charter School	G. Hauptfuhrer	700
7/13/2011	Fairleigh Dickinson University	P. Zenner	1,000
7/13/2011	Bloomsburg University	D. Grove	25
7/26/2011	Hillsdale College	E. Jones	500
7/26/2011	Drexel University	S. Heumann	40
8/1/2011	Grove City College	E. Jones	500
9/30/2011	St. Peters College	R. Readdy	55
10/28/2011	The Pennsylvania State University	T Meyer	300
10/28/2011	The Pennsylvania State University	D. Freeston-Smith	25
10/28/2011	Phillips Exeter Academy	M Stearns	1,000
10/28/2011	St. Joseph's University	D. Labresco	25
	St. Joseph's Preparatory School	S. Heumann	300
	The Williamson Free School	H. Brown	500
11/29/2011	Bucknell University	M. Peterson	100
	William Penn Charter School	G. Hauptfuhrer	300
	Mansfield University	T. Meyer	200
	Colgate University	S. Heumann	35
	Ursinus College	S. Ruoff	60
12/23/2011	Ursinus College	D. Freeston-Smith	25

\$ 17,940.00

Per M. Goebel Sch 17,940 00 Variance -

THE H. O. WEST FOUNDATION DETAILED SCHEDULE OF SCHOLARSHIP PROGRAM FROM January 1, 2011 THRU December 31, 2011

SCHOLARSHIPS

School	Name	Amount
Arizona State University	A Russell	1,250 00
Arizona State University	Z Wicklund	1,250 00
Anzona State University	Z Wicklund	1,250 00
Case Western Reserve University	J Braun	1,250 00
Case Western Reserve University	J Braun	1,250 00
Cedarville University	M Lovell	1,250 00
Columbia University	D Smith	1,250 00
Columbia University	D Smith	1,250 00
East Carolina University	C Hardison	1,250 00
East Carolina University	C Hardison	1,250 00
East Carolina University	C Hardison	1,250 00
Ferns State University	M Acosta	1,250 00
Franklin & Marshall College	S Fuga	1,250 00
Hope College	C Earles	1,250 00
Hope College	C Earles	1,250 00
Ithaca College Lock Haven University	H Thorpe	1,250 00
Lycoming College	N Longnecker T Hostelley	1,250 00
Lycoming College	T Hostelley	1,250 00 1,250 00
Pennsylvania State University, The	C Dunez	1,250 00
Roger Williams University	S Pitt	1,250 00
Roger Williams University	S Pitt	2,500 00
Savannah College of Art & Design	K Smith	833 33
Savannah College of Art & Design	K Smith	833 34
Savannah College of Art & Design	K Smith	1,666 67
Stevens Institute of Technology	E McGrath	1,250.00
Stevens Institute of Technology	E McGrath	1,250 00
The George Washington University	T Leventhal	2,500 00
The Pennsylvania State University	C Dunez	1,250 00
The Pennsylvania State University	G Alicknavitch	1,250 00
The Pennsylvania State University	G Alicknavitch	1,250 00
The University of Iowa	A Diono	1,250 00
University of Anzona	A Byme	1,250 00
University of Arizona	A Byrne	1,250 00
University of Arizona	C Russell	1,250 00
University of Delaware University of Delaware	A Diorio A Diorio	1,250 00
University of Delaware	L Alicknavitch	1,250 00 1,250 00
University of Florida	K Keene	1,250 00
University of Florida	S Ilic	1,250 00
University of Miami	H Durkee	1,250 00
University of Miami	H Durkee	1,250 00
University of Michigan	B Ward	1,250 00
University of Michigan	B Ward	1,250 00
University of Nebraska - Lincoln	K Wright	1,250 00
University of Nebraska at Keamey	S Campbell	1,250 00
University of Nebraska Lincoln	K Wright	1,250 00
University of North Carolina - Chapel Hill	L Player	1,250 00
University of North Carolina - Chapel Hill	L Player	1,250 00
University of North Carolina - Chapel Hill	L Player	1,250 00
University of South Florida	S Ilic	1,250 00
University of Vermont	S Marks	1,250 00
Ursinus College	C Layman	1,250 00
Ursinus College	C Layman	1,250 00
West Chester University	J Swier S Wilson	1,250 00
West Chester University	O WILSON	1,250 00
	Total Scholarships	\$ 72,083.34

Per M Goebel Sch Variance 72,083

THE H.O. WEST FOUNDATION COMPARATIVE REPORT OF DISBURSEMENTS UNITED WAY FROM January 1, 2011 THRU December 31, 2011

	12 MOS	2011 REMAINING				
UNITED WAY	2007	2008	2009	2010	2011	COMMITMENTS
PAID TO						
CHESTER COUNTY	70,775.22	80,903 08	102,584 44	101,847.95	108,964 28	(\$0.02)
CLINTON COUNTY - INDIANA	625.50	636.48	647 92	-	3,439 00	\$0.00
ERIE	1,658.00	1,418.00	-	-	-	\$0.00
KEARNEY	8,264 00	6,174.00	2,807 00	4,364 00	4,276.04	(\$0.02)
LANCASTER COUNTY	208 00	233 00	208.00	208.00	-	\$0.00
LENOIR COUNTY	29,543.65	34,114.20	20,789.80	42,860.94	37,301 28	\$0.00
LYCOMING COUNTY	21,682 80	24,161.88	17,485.25	22,559.38	28.572 40	\$0.00
SOUTHEASTERN PA	1,884.00	1,470.00	1,064.00	1,166 00	1,612 00	\$0.00
TAMPA BAY	30,276.80	27,208 00	19,993.59	20,666.48	6,735.72	\$0.00
VALLEY OF THE SUN	4,388.10	3,526.00	4,922.00	1,088.00	4,759.00	\$0.00
PUERTO RICO	4,719.26	6,331 00	5,941.00	5,304.00	4,407.00	\$0.00
MICHIGAN		·	1,258 00	12,506.00	12,734.00	\$0.00
INDIANA			3,254.52	3,199 80	=1. ••	\$0.00
TOTAL	\$ 174,025 33	\$ 186,175 64	\$ 180,955 52	\$ 215,770 55	\$ 212,800.72	(0 04)

THE H.O. WEST FOUNDATION COMPARATIVE REPORT OF DISBURSEMENTS CULTURAL FROM January 1, 2011 THRU December 31, 2011

CULTURAL	12 MOS 2007	12 MOS 2008	12 MOS 2009	12 MOS 2010	12 MOS 2011	2011 REMAINING COMMITMENTS
PAID TO:						
CHESTER COUNTY HISTORICAL SOCIETY	\$ -	\$ -	\$ -	\$ 500	\$ -	_
LENOIR COUNTY COMM. COUNCIL FOR THE ART	rs				2,500	-
PEOPLE'S LIGHT & THEATRE COMPANY	2,000	•	2,000	2,000	2,000	-
PHILADELPHIA HOSPITALITY, INC.	-	2,500	-	•	2,500	-
PHILA MUSEUM OF ART	-	5,000	10,000	5,000	5,000	•
PHILA YOUTH ORCHESTRA	2,000	1,000	1,000	1,000	1,000	•
KENNEDY CENTER HONORS GALA	1,500	1,000	1,500	1,500	1,500	-
TOTAL	\$ 5,500	\$ 9,500	\$ 14,500	\$ 10,000	\$ 14,500	\$ -

Per M Goebel Sch \$14,500 00 Variance -

THE H O WEST FOUNDATION COMPARATIVE REPORT OF DISBURSEMENTS COMMUNITY SERVICE FROM January 1, 2011 THRU December 31, 2011

COMMUNITY SERVICE	12 MOS 2007	12 MOS 2008	12 MOS 2009	12 MOS 2010	12 MOS 2011	REMAINING COMMITMENT
PAID TO						
ADULT CARE OF CHESTER COUNTY	\$ 500	\$ 1000	s .	S 1 000	s .	s .
AFRICA HEALTH PLACEMENTS	•		25 000	-		•
AMERICAN CANCER SOCIETY (PHOENIXVILLE)			-	1 000		•
AMERICAN RED CROSS - WWB CAMPAIGN	5 000	10,000	-	12 346	35 006	•
AMERICAN RED CROSS (TAMPA BAY) ANGEL FLIGHT EAST		500	:	1 000 2 000	2 000	:
ANTI DEFAMATION LEAGUE	-	1 500	-			
ARC OF CHESTER COUNTY	-	1,000	7 500	1 000	1 000	-
ASSOCIATED SERVICES FOR THE BLIND	1,000	1,000	1 000	1,000		
ASSOCIATION FOR THE COLONIAL THEATER	-	-	-	500	500	-
BAKER INDUSTRIES	2 000	2 000	2 000	2,000	2,000	-
BOY SCOUTS OF AMERICA	1 000	1 000	1 500	1 000	1 500	
BRAILLE WITHOUT BORDERS	2 500	25 000	•	•		-
BRANDYWINE HEALTH FOUNDATION		500	1 000	•	1,000	-
BRIDGES BV RACE FOR AUTISM	12 500	1 000 1,000	2 500 1 000	-	2 500	-
CAMP VICTORY	58 250	1,000			5 000	
CANINE PARTNERS FOR LIFE - WWB CAMPAIGN	~ 200	-	_	_	1 000	
CHESTER C C OF B S A			-	2 500		
CHESTER COUNTY FUTURES		1 000	1,000	1 000	1 000	
CHESTER COUNTY SPCA			-	1 000		
CHILDREN'S COUNTRY WEEK ASSOCIATION	500	500	500	500	-	-
COATESVILLE FAMILY FUND	-	-	1 000	•	-	•
CONVOY OF HOPE	•	•	-	1 000	•	-
COMMUNITY INFORMATION & REFERRAL		-	-		1 000	
CRADLE OF LIBERTY COUNCIL - B/S OF AMERICA	1 000		1,000	3 000	3 000	•
DAEMION HOUSE	1 000 1 301	1 000 1 340	1,000	1 000	1 000	-
DAILY LOCAL NEWS DELAWARE VALLEY HABITAT FOR HUMANITY	1 301	1,000	1 000	•	•	-
DELAWARE VALLEY HABITAT FOR HUMANITY DRAGONFLY FOREST	•	-,000	1000		2 500	-
EMPLOY+ABILITY	2,500		-		-	
FAMILY SERVICE OF CHESTER COUNTY	500		-		-	
FOLDS OF HONOR FOUNDATION		1 000	1 000	2,500	2 500	-
FOUNDATION, MARY KATE'S LEGACY		-	-	2 500	-	-
FOUNDATION, NICHOLAS WOLFF	•	-	•	5 000	-	-
FREEDOM VALLEY YMCA	10 000	10 000	10 000	10 000	10 000	•
FRENCH & PICKERING CREEKS CONSERVATION	2 500	2 500	1 000	-	2 000	-
GOLF TOURNA CHESTER CO SPEC OLYMPICS	3 000	•	•	-		-
GREAT GUYS GROUP	-	•	2 000	3 000	2 000	-
GREAT VALLEY NATURE CENTER GREEN VALLEYS ASSOCIATION	1 000	1 000	2 000	1 000	1 000	•
HANDI-CRAFTERS INC	1 000	2 000	2 000	2 000	2,000	
HBA				-	1 800	
HEART FOR AFRICA	-	_	1 000	1 000	1,000	-
HEPHZIBAH CHILDREN'S HOME	2 500		-		-	-
HOME OF THE SPARROW	2,500	5,000	5,000	5 000	5,000	-
INGLIS HOUSE		1,000	1 000	1,000	1 000	
JAMES V BROWN LIBRARY OF	-	-	2,000	1 000	-	
JASON GOTSCHALL MEMORIAL FOUNDATION	1 000	1,000	1,000	1 000	1 000	-
JENKINS ARBORETUM	1,000	1 000	•	1 000	1 000	
JOINT CENTER FOR POLITICAL AND ECONOMIC ST	ı	5,000 5,000		E 000	E 000	-
KEARNEY PUBLIC LIBRARY FOUNDATION LENOIR COUNTY COMMUNITY Council FOR THE AR		5 000	5,000 1 000	5,000	5,000	•
LENOIR COUNTY COMMONITY COUNCILFOR THE AN MARCH FOR BABIES	•	•	1 000	2,000	:	•
MARY KATES LEGACY FOUNDATION		•		2,500	2 500	•
MIRACLE LEAGUE OF NORTHAMPTON TOWNSHIP		-	5 000		-	
NEBRASKA FOUND FOR VIS IMP CHILDREN	-	8,000			_	-
NEW HANOVER UNITED METHODIST CHURCH		1 000	-		-	-
NEW YORK CITY OUTWARD BOUND CENTER	10 000	10 000	10,000	10 000	10 000	-
NHS KEY CLUB - ADOPT A CHILD FOR CHRISTMAS		1 400	1,000	•	-	-
NICHOLAS WOLFF FOUNDATION (CAMP VICTORY)		-	-	-	2,500	-
PASTEUR FOUNDATION	•	1 000	-	•	•	-
PCCY	•	-	-	•	1,500	
PHILABUNDANCE	1 000		1 000		1,000	•
PHILADELPHIA ZOO	•	5 000	5 000	5,000	5 000	-
PHOENIXVILLE AREA SENIOR CENTER PHOENIXVILLE PUBLIC LIBRARY	•	1 000	1 000	1,000 1,000	1 000 1,000	-
PHOENIXVILLE PUBLIC LIBRARY PLANNED PARENTHOOD	4 000	-	3 000	1,000	1,000	-
PLANNED PARENTHOOD POLICE ATHLETIC LEAGUE OF PHILADELPHIA	4 000		3000	1 000	-	-
PROJECT HEALING WATERS	2,500				-	-
RONALD MCDONALD HOUSE	-,	-	1 000		3 000	-
SAFE HARBOR	•	1 000	-		-	-
SAINT ANTHONY'S CHARITABLE FOUNDATION		-	5 000	5 000	5 000	
SAINT MARY'S FOOD BANK ALLIANCE		-	2,300		-	-
SAINTS SIMON AND JUDE PARISH		-	-		1 000	-
SALVATION ARMY	2 500		-	•	-	-
SELECT GREATER PHILADELPHIA	2,500	2 500			-	-
SPECIAL EQUESTRIANS	3 000	1 000	2 000	2 000		-
STEPPING STONES MUSEUM FOR CHILDREN	•	10 000	10,000	10 000	20,000	•
SURREY SERVICES FOR SENIORS	•	1 000	1 000	1 000	1,000	•
TACA	1 000	1 000	1,000	1 000	1 000	-
THORNCROFT U.S. FUND FOR UNICEF		1,000 2 500	1,000	1 000	2 000	-
	•	2 500	5 000	•	•	•
UNITED WAY Greater Triangle URBAN LEAGUE OF PHILADELPHIA	•	•	1 500		-	•
UWCHLAN TOWNSHIP	2 500	2,500	2 500	2 500	2,500	•
WBDC		2,000	2 500	2 500	2,500	-
WEST CHESTER PUBLIC LIBRARY	-	1 000			. 500	
WEST WITHOUT BORDERS			-	25 000		
WORLD AFFAIRS COUNCIL OF PHILADELPHIA	3,000	-		-		
WORLD TEAM SPORTS		•		5 000		-
WOUNDED WARRIORS	1,000	•		-	-	-

THE H. O WEST FOUNDATION COMPARATIVE REPORT OF DISBURSEMENTS HOSPITAL/HEALTH CARE & EDUCATIONAL FROM January 1, 2011 THRU December 31, 2011

HOSPITAL/HEALTH CARE PAID TO	2 MOS 2007	2 MOS 2008	12 MOS 2009		12 MOS 2010		2 MOS 2011		2011 MAINING IMITMENTS
PAID TO									
AMERICAN CANCER SOCIETY	\$ 6,156	\$ 5,033	\$ 4,000	\$	8,500	\$	2,685	\$	-
AMERICAN CANCER SOCIETY - RELAY FOR LIFE	2,500	-	-		1,000		3,500		-
AMERICAN DIABETES ASSOCIATION	-	-	1,000		1,000		2,500		-
AMERICAN HEART ASSOCIATION	-	3.000	2.000		2.000		2,500		-
BRYN MAWR REHAB BCASC - BV Race for Autusm	•	3,000	2,000		1,000		1,000 1.000		-
CANCER CARE INC	5,000	5,000	5.000		5,000		5,000		-
CLINIC, THE	5,000	0,000	5.000		1,200		1,200		-
DRMIII	_	1.000	1,000		1,000		1,000		_
EVANGELICAL COMMUNITY HOSPITAL	-	10,000	.,		5,000		5.000		-
FOX CHASE CANCER CENTER	50,000	51,077	85.612		50.050		50,320		-
GEISINGER HEALTH SYSTEM			5,000		2,500		-		-
KOMEN FOR THE CURE, PHILA AFFILIATE	-	2,000	-		500		4,000		-
THE MYOSITIS ASSOCIATION	-	5,000	5,000		5,000		5,000		-
NICRF	-	1,000	3,000		4,000		3,000		-
NATIONAL BRAIN TUMOR SOCIETY	-	•	-		2,000		-		-
NEMOURS PARTNERSHIP FOR CHILDREN'S HEALTH	-	-			1,000		-		-
SUSQUEHANNA HEALTH FOUNDATION	-	•	3,000		3,000		-		-
PDBA	-	4 000	-		1,938		-		-
PHILIP A BRYANT MELANOMA FOUNDATION PITT MEMORIAL HOSPITAL	-	1,000 10,000	1,000		2,000		2,000		-
PSAA - PHILADELPHIA CHAPTER	-	10,000	1,000		5,000		1,000		-
FSAX - PHILADELPHIA CHAPTER	-	•	1,000		•		1,000		-
TOTAL	\$ 115,856	\$ 117,110	\$ 130,362	\$	102,688	\$	90,705	\$	
	 	 		-				<u> </u>	
			Pe	rM (Goebel Sch	\$9	0,705 34		
					Vапапсе	:	-		
EDUCATIONAL									
DAID TO									
PAID TO									
ACADEMY OF NATURAL SCIENCES, THE	\$ 5,000	\$ 5,000	\$ 10,000	\$	5,000	\$	5,000	\$	_
ASSOC OF INDEPENDENT COLLEGES & UNIVS OF PA			5,000		5,000		5,000	•	-
AUTISM SPEAKS	-		-		•		10,000		-
CHEMICAL HERITAGE FOUNDATION	-	-	-		-		2,500		-
DELAWARE VALLEY SCIENCE FAIRS	-	1,000	1,000		1,000		-		-
DOWNINGTOWN COMM EDUCATION FOUNDATION	-	-	-		-		5,000		-
EASTER SEAL SOCIETY	1,000	1,000			1,000		1,000		-
FINANCIAL EXECUTIVES RESEARCH FOUNDATION	-	•	2,100		•				-
FOUNDATION FOR FREE ENTERPRISE	1,050	2,100	1,050		2,100		2,100		-
FOUNDATION FOR STUDENT COMMUNICATIONS, INC	400.000	-	2,500		-		-		-
FRANKLIN INSTITUTE SCIENCE MUSEUM, THE GLOBALIZATION OF PHARMACEUTICS EDUCATION NETWORK	100,000	85,000	85,000		85,000		85,000		-
KENWOOD ELEMENTARY SCHOOL	-	2,500	-		3,500 5,000		•		-
MARINE CORPS SCHOLARSHIP FOUNDATION	3,500	•	3.500		3,500		-		-
PENNSYLVANIA SCHOOL FOR THE DEAF	1,000	1,000	2.000		1,000		1,000		-
ST JOSEPH'S UNIVERSITY	-	-	-		2,500		-		-
STARFINDER FOUNDATION	-	-			1,000				-
TIMOTHY SCHOOL	-	-			-,000		1,000		-
UNITED NEGRO COLLEGE FUND	1,000	1,000	1,000		1,000		1,000		-
TOTAL	\$ 153,050	\$ 113,600	\$ 113,150	\$	116,600	\$	118,600	\$	

Per M Goebel Sch \$118,600 00 Variance \$0 00

THE H. O. WEST FOUNDATION COMPARATIVE REPORT OF DISBURSEMENTS HONORARIUM FROM January 1, 2011 THRU December 31, 2011

HONORARIUM	-	2 MOS 2007	 2 MOS 2008	12 MOS 2009	 2 MOS 2010	2 MOS 2011	2011 REMAINING COMMITMENTS
PAID TO:							
HILL SCHOOL WEST CHESTER UNIVERSITY CHURCH FARM SCHOOL	\$	1,000 1,000 1,000	\$ 1,000 1,000 1,000	\$1,000 1,000 1,000	\$ 1,000 1,000 1,000	\$ 1,000 1,000 1,000	- - -
TOTAL	\$	3,000	\$ 3,000	\$3,000	\$ 3,000	\$ 3,000	\$ -

Per M Goebel Sch \$3,000 00 Variance

THE H.O. WEST FOUNDATION DETAILED SCHEDULE OF OTHER EXPENDITURES FROM January 1, 2011 THRU December 31, 2011

INTERNAL REVENUE SERVICE	AMOUNT
EXCISE TAX LEGAL FEES	\$ 243.00
LEGALTELO	\$ 243.00
PRINTING & OTHER EXPENSES	AMOUNT
TRINTING & OTHER EXPENSES	AWOONT
FILING FEES	\$ -
DAILY LOCAL NEWS OFFICE SUPPLIES	59.18
PRINTING EXPENSE	659.30
UPS EXPENSE	-
GIFT CARD	-
	\$ 718.48
BANK FEES	\$ -