



See a Social Security Number? Say Something!  
Report Privacy Problems to <https://public.resource.org/privacy>  
Or call the IRS Identity Theft Hotline at 1-800-908-4490



**Return of Organization Exempt From Income Tax**  
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code  
(except black lung benefit trust or private foundation)

OMB No 1545-0047

**2011**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

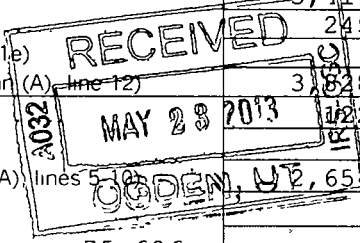
▶ The organization may have to use a copy of this return to satisfy state reporting requirements

**A For the 2011 calendar year, or tax year beginning** Jul 1, 2011, **and ending** Jun 30, 2012

<p><b>B</b> Check if applicable:</p> <p><input type="checkbox"/> Address change</p> <p><input type="checkbox"/> Name change</p> <p><input type="checkbox"/> Initial return</p> <p><input type="checkbox"/> Terminated</p> <p><input type="checkbox"/> Amended return</p> <p><input type="checkbox"/> Application pending</p>	<p><b>C</b> Name of organization <u>Taylor Community Foundation</u></p> <p>Doing Business As _____</p> <p>Number and street (or P O box if mail is not delivered to street addr) _____ Room/suite _____</p> <p><u>P.O. Box 227</u> _____</p> <p>City, town or country _____ State ZIP code + 4 _____</p> <p><u>Ridley Park PA 19078</u></p> <p><b>F</b> Name and address of principal officer _____</p> <p><u>Kurt Slenn 300 Johnson Avenue Ridley Park PA 19078</u></p>	<p><b>D</b> Employer Identification Number</p> <p><u>23-2354770</u></p> <p><b>E</b> Telephone number</p> <p><u>(610) 521-5822</u></p> <p><b>G</b> Gross receipts \$ <u>5,070,930.</u></p>
<p><b>I</b> Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527</p>		<p><b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'No,' attach a list (see instructions)</p>
<p><b>J</b> Website: ▶ <u>taylorcommfdn.org</u></p>		<p><b>H(c)</b> Group exemption number ▶ _____</p>
<p><b>K</b> Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶ _____</p>		<p><b>L</b> Year of Formation <u>1985</u> <b>M</b> State of legal domicile <u>PA</u></p>

**Part I Summary**

	<p><b>1</b> Briefly describe the organization's mission or most significant activities <u>Promote health and wellness</u> <u>Taylor Community Foundation is committed to initiate and support programs and organizations that advance health, wellness, education, and community spirit within the TCF Service Area. Our primary program is the operation of Taylor Hospice.</u></p>		
Activities & Governance	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	12
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	12
	<b>5</b> Total number of individuals employed in calendar year 2011 (Part V, line 2a)	<b>5</b>	56
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	92
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	0.
	<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	
Revenue	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>	<b>Current Year</b>
	<b>9</b> Program service revenue (Part VIII, line 2g)	163,499.	154,302.
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,419,944.	3,173,552.
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	245,061.	285,692.
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,828,504.	3,613,546.
	Expenses	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	222,021.
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)			
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-8)		2,654,658.	2,575,960.
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)			
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶		75,696.	
<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,216,624.	1,130,387.
<b>18</b> Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	3,993,303.	3,846,627.	
<b>19</b> Revenue less expenses Subtract line 18 from line 12	-164,799.	-233,081.	
Net Assets or Fund Balances	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>21</b> Total liabilities (Part X, line 26)	11,063,176.	10,247,329.
	<b>22</b> Net assets or fund balances Subtract line 21 from line 20	993,791.	676,857.
		10,069,385.	9,570,472.



**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b>	<p>Signature of officer: <u>[Signature]</u></p> <p><u>Kurt Slenn</u> Type or print name and title</p>	<p>Date: <u>05-09-2013</u></p>
<b>Paid Preparer Use Only</b>	<p>Print/Type preparer's name _____ Preparer's signature _____ Date _____</p> <p>Check <input type="checkbox"/> if self employed <input type="checkbox"/> PTIN _____</p>	
	<p>Firm's name ▶ _____</p> <p>Firm's address ▶ _____</p>	<p>Firm's EIN ▶ _____</p> <p>Phone no _____</p>

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

**BAA For Paperwork Reduction Act Notice, see the separate instructions.**

TEEA0101 07/05/11

Form **990** (2011)

SCANNED JUN 20 2013

617 5

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

Input box for Schedule O check

1 Briefly describe the organization's mission

Promote health and wellness

Taylor Community Foundation is committed to initiate and support

See Form 990, Page 2, Part III, Line 1 (continued)

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes No (X) No

If 'Yes,' describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes No (X) No

If 'Yes,' describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code ) (Expenses \$ 2,552,422. including grants of \$ 0.) (Revenue \$ 2,520,281.)

Taylor Hospice - home based operations

Taylor Hospice provides physical, emotional, and spiritual care for terminally ill patients and their families. Taylor Hospice served a total of 282 patients in their homes in 2011-2012.

Every patient's unique needs are assessed on an ongoing basis. Nurses, home health aides, and allied health professionals provide for the patient's clinical and other physical needs. We assist families in obtaining medicines and medical equipment and attend to patient's grooming and hygiene. All of our clinical care providers are fully See Form 990, Page 2, Part III, Line 4a (continued)

4b (Code ) (Expenses \$ 828,706. including grants of \$ 0.) (Revenue \$ 754,954.)

Taylor Hospice - residence operations

Taylor Hospice Residence provides a comfortable, home-like environment for hospice patients to enjoy during their final phase of life. Located in Ridley Park, Pennsylvania, the residence offers affordable assisted living to hospice patients and their families needing additional support. While receiving care from an interdisciplinary team of hospice professionals, families and friends are comforted in knowing that their loved ones are receiving quality care 24 hours a day in a beautiful and warm environment. Taylor Hospice Residence served a total of 170 patients in 2011-2012.

See Form 990, Page 2, Part III, Line 4b (continued)

4c (Code ) (Expenses \$ 140,280. including grants of \$ 140,280.) (Revenue \$ 0.)

Allied Health Scholarships and Community Grants program

Scholarships - TCF typically awards multiple 4-year scholarships with an aggregate value of \$7,000 to \$10,000 over the course of the recipient's matriculation. Critical criteria for selection includes: (a) Undergraduate collegiate major in an allied health course of study, (b) Recipient must reside in the TCF Service Area at time of application for scholarship, (c) Recipient must exhibit an intent to return to the geographic area served by TCF to perform work that will enhance the quality of life for persons in the TCF Service Area.

See Form 990, Page 2, Part III, Line 4c (continued)

4d Other program services (Describe in Schedule O )

(Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses 3,521,408.

**Part IV Checklist of Required Schedules**

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I		X
4 <b>Section 501(c)(3) organizations</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	X	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III		X
9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V		X
11 If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	X	
b Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII		X
c Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX		X
e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III		X
20 a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H		X
b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?		

**Part IV Checklist of Required Schedules (continued)**

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If 'Yes,' complete Schedule I, Parts I and II</i>	X	
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If 'Yes,' complete Schedule I, Parts I and III</i>		X
23 Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? <i>If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?		
25a <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If 'Yes,' complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If 'Yes,' complete Schedule L, Part I</i>		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If 'Yes,' complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a A current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If 'Yes,' complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If 'Yes,' complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If 'Yes,' complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>		X
36 <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	X	

BAA

Form 990 (2011)

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

Check if Schedule O contains a response to any question in this Part V

		Yes	No
<b>1 a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.		
<b>1 b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
<b>1 c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
<b>2 a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.		
<b>2 b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	X	
<b>3 a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
<b>3 b</b>	If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O.		
<b>4 a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If 'Yes,' enter the name of the foreign country: _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		X
<b>5 a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
<b>5 b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
<b>5 c</b>	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		
<b>6 a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		X
<b>6 b</b>	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>			
<b>7 a</b>	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
<b>7 b</b>	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	X	
<b>7 c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
<b>7 d</b>	If 'Yes,' indicate the number of Forms 8282 filed during the year.		
<b>7 e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>7 f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
<b>7 g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
<b>7 h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		X
<b>9 Sponsoring organizations maintaining donor advised funds.</b>			
<b>9 a</b>	Did the organization make any taxable distributions under section 4966?		X
<b>9 b</b>	Did the organization make a distribution to a donor, donor advisor, or related person?		X
<b>10 Section 501(c)(7) organizations.</b> Enter			
<b>10 a</b>	Initiation fees and capital contributions included on Part VIII, line 12.		
<b>10 b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
<b>11 Section 501(c)(12) organizations.</b> Enter			
<b>11 a</b>	Gross income from members or shareholders.		
<b>11 b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
<b>12 a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
<b>12 b</b>	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year.		
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>			
<b>13 a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.		
<b>13 b</b>	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.		
<b>13 c</b>	Enter the amount of reserves on hand.		
<b>14 a</b>	Did the organization receive any payments for indoor tanning services during the tax year?		X
<b>14 b</b>	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O.		

**Part VI Governance, Management and Disclosure** For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response to any question in this Part VI

**Section A. Governing Body and Management**

		Yes	No
<b>1 a</b>	Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
	12		
<b>1 b</b>	Enter the number of voting members included in line 1a, above, who are independent.		
	12		
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee?		X
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
<b>6</b>	Did the organization have members or stockholders?		X
<b>7 a</b>	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
<b>7 b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?		X
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>8 a</b>	The governing body?	X	
<b>8 b</b>	Each committee with authority to act on behalf of the governing body?	X	
<b>9</b>	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O.		X

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
<b>10 a</b>	Did the organization have local chapters, branches, or affiliates?		X
<b>10 b</b>	If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
<b>11 a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		X
<b>11 b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12 a</b>	Did the organization have a written conflict of interest policy? If 'No,' go to line 13.	X	
<b>12 b</b>	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
<b>12 c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done.	X	
<b>13</b>	Did the organization have a written whistleblower policy?	X	
<b>14</b>	Did the organization have a written document retention and destruction policy?	X	
<b>15</b>	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
<b>15 a</b>	The organization's CEO, Executive Director, or top management official.	X	
<b>15 b</b>	Other officers of key employees of the organization.	X	
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions).		
<b>16 a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
<b>16 b</b>	If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed ▶ See Form 990, Page 6, Line 17 (continued)
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  
 Own website  Another's website  Upon request
- 19** Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization.  
 ▶ Edward J. Urban, Jr. 300 Johnson Avenue Ridley Park PA 19078 (610) 521-5822

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

Check if Schedule O contains a response to any question in this Part VII

**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Patrick F. O'Brien Chairperson/Director	1.00	X		X				0.	0.	0.
(2) Jeffrey D. MacIntyre Vice Chair/Director	1.00	X		X				0.	0.	0.
(3) Christina M. Costanzo-Clark Vice Chair/Director	1.00	X		X				0.	0.	0.
(4) Robert M. Barbacane Treasurer/Director	1.00	X		X				0.	0.	0.
(5) Horace Griffith, Jr. Secretary/Director	1.00	X		X				0.	0.	0.
(6) Henry A. Eberle, Jr. Director	1.00	X						0.	0.	0.
(7) Dennis Cronin, M.D. Director	1.00	X						0.	0.	0.
(8) William H. Erb, Jr., M.D. Director	1.00	X						0.	0.	0.
(9) J. Mervyn Harris Director	1.00	X						0.	0.	0.
(10) Richard Raup Director	1.00	X						0.	0.	0.
(11) Michael Stewart Director	1.00	X						0.	0.	0.
(12) Ann Swan Director	1.00	X						0.	0.	0.
(13) Kurt J. Slenn President/CEO	32.00				X			90,894.	0.	25,052.
(14) Ellen Arnold Executive Director-Hospice	40.00				X			128,784.	0.	13,614.

**Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (cont)**

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Sch O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W 2/1099 MISC)	(E) Reportable compensation from related organizations (W 2/1099 MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(15) Edward J. Urban, Jr. Controller	40.00				X		73,467.	0.	10,729.
(16) -----									
(17) -----									
(18) -----									
(19) -----									
(20) -----									
(21) -----									
(22) -----									
(23) -----									
(24) -----									
(25) -----									
<b>1 b Sub-total</b>							293,145.	0.	49,395.
<b>c Total from continuation sheets to Part VII, Section A</b>									
<b>d Total (add lines 1b and 1c)</b>							293,145.	0.	49,395.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **▶ 1**

	Yes	No
3 Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If 'Yes,' complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If 'Yes' complete Schedule J for such individual</i>		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If 'Yes,' complete Schedule J for such person</i>		X

**Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **▶**

**Part VIII Statement of Revenue**

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
<b>CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS</b>	<b>1 a</b> Federated campaigns	<b>1 a</b>				
	<b>b</b> Membership dues	<b>1 b</b>				
	<b>c</b> Fundraising events	<b>1 c</b> 585.				
	<b>d</b> Related organizations	<b>1 d</b>				
	<b>e</b> Government grants (contributions)	<b>1 e</b>				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1 f</b> 153,717.				
	<b>g</b> Noncash contributions included in lns 1a-1f	\$ 7,674.				
<b>h Total.</b> Add lines 1a-1f		154,302.				
<b>PROGRAM SERVICE REVENUE</b>	<b>Business Code</b>					
	<b>2 a</b> Medicare/Medicaid	621610	2,938,154.	2,938,154.	0.	0.
	<b>b</b> Net patient service revenue	621610	235,398.	235,398.	0.	0.
	<b>c</b> -----					
	<b>d</b> -----					
	<b>e</b> -----					
	<b>f</b> All other program service revenue					
<b>g Total.</b> Add lines 2a-2f		3,173,552.				
<b>OTHER REVENUE</b>	<b>3</b> Investment income (including dividends, interest and other similar amounts)		221,581.	0.	0.	221,581.
	<b>4</b> Income from investment of tax-exempt bond proceeds					
	<b>5</b> Royalties					
	<b>6 a</b> Gross rents	(i) Real				
		(ii) Personal				
		<b>b</b> Less rental expenses				
		<b>c</b> Rental income or (loss)				
	<b>d</b> Net rental income or (loss)					
	<b>7 a</b> Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
		<b>b</b> Less cost or other basis and sales expenses				
		<b>c</b> Gain or (loss)				
	<b>d</b> Net gain or (loss)		64,111.	0.	0.	64,111.
	<b>8 a</b> Gross income from fundraising events (not including \$ 585. of contributions reported on line 1c) See Part IV, line 18	<b>a</b>				
		<b>b</b> Less direct expenses				
<b>c</b> Net income or (loss) from fundraising events						
<b>9 a</b> Gross income from gaming activities See Part IV, line 19	<b>a</b>					
	<b>b</b> Less direct expenses					
	<b>c</b> Net income or (loss) from gaming activities					
<b>10 a</b> Gross sales of inventory, less returns and allowances	<b>a</b>					
	<b>b</b> Less cost of goods sold					
	<b>c</b> Net income or (loss) from sales of inventory					
<b>Miscellaneous Revenue</b>		<b>Business Code</b>				
<b>11 a</b> -----						
<b>b</b> -----						
<b>c</b> -----						
<b>d</b> All other revenue						
<b>e Total.</b> Add lines 11a-11d						
<b>12 Total revenue.</b> See instructions			3,613,546.	3,173,552.	0.	285,692.

**Part IX Statement of Functional Expenses**

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

Check if Schedule O contains a response to any question in this Part IX

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States See Part IV, line 21	139,280.	139,280.		
2 Grants and other assistance to individuals in the United States See Part IV, line 22	1,000.	1,000.		
3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	342,540.	171,270.	145,435.	25,835.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,760,262.	1,708,979.	34,804.	16,479.
8 Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)	47,174.	46,527.	378.	269.
9 Other employee benefits	271,763.	261,118.	7,884.	2,761.
10 Payroll taxes	154,221.	139,362.	11,973.	2,886.
11 Fees for services (non-employees)				
a Management				
b Legal	26,634.	23,933.	2,701.	0.
c Accounting	18,000.	12,000.	6,000.	0.
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees	34,448.	0.	34,448.	0.
g Other				
12 Advertising and promotion	17,652.	17,652.	0.	0.
13 Office expenses	49,544.	29,726.	14,863.	4,955.
14 Information technology	16,711.	13,627.	3,084.	0.
15 Royalties				
16 Occupancy				
17 Travel	44,228.	44,228.	0.	0.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	2,138.	2,138.	0.	0.
20 Interest	4,594.	2,297.	2,297.	0.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	69,882.	41,929.	27,953.	0.
23 Insurance	108,282.	54,141.	54,141.	0.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <u>Medical supplies and drugs</u>	269,655.	269,655.	0.	0.
b <u>Rental-durable medical equipment</u>	147,820.	147,820.	0.	0.
c <u>Third party payor reimbursement claim</u>	0.	0.	0.	0.
d <u>Maintenance and repairs</u>	76,608.	76,608.	0.	0.
e All other expenses	244,191.	202,702.	18,978.	22,511.
25 Total functional expenses Add lines 1 through 24e	3,846,627.	3,405,992.	364,939.	75,696.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year
ASSETS	1	Cash – non-interest-bearing		1
	2	Savings and temporary cash investments	675,464.	2 523,185.
	3	Pledges and grants receivable, net		3
	4	Accounts receivable, net	356,764.	4 240,220.
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6
	7	Notes and loans receivable, net		7
	8	Inventories for sale or use		8
	9	Prepaid expenses and deferred charges	63,777.	9 55,395.
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 2,907,883.	
	b	Less accumulated depreciation	10b 820,494.	10c 2,087,389.
	11	Investments – publicly traded securities	7,826,613.	11 7,341,140.
	12	Investments – other securities See Part IV, line 11		12
	13	Investments – program-related See Part IV, line 11		13
	14	Intangible assets		14
	15	Other assets See Part IV, line 11		15
16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	11,063,176.	16 10,247,329.	
LIABILITIES	17	Accounts payable and accrued expenses	532,321.	17 314,887.
	18	Grants payable	421,470.	18 286,970.
	19	Deferred revenue		19
	20	Tax-exempt bond liabilities		20
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22
	23	Secured mortgages and notes payable to unrelated third parties	40,000.	23 75,000.
	24	Unsecured notes and loans payable to unrelated third parties		24
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		25
	26	<b>Total liabilities.</b> Add lines 17 through 25	993,791.	26 676,857.
NET ASSETS OR FUND BALANCES	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29 and lines 33 and 34.</b>			
	27	Unrestricted net assets	9,969,180.	27 9,449,393.
	28	Temporarily restricted net assets	100,205.	28 121,079.
	29	Permanently restricted net assets		29
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.</b>			
	30	Capital stock or trust principal, or current funds		30
	31	Paid-in or capital surplus, or land, building, or equipment fund		31
	32	Retained earnings, endowment, accumulated income, or other funds		32
	33	<b>Total net assets or fund balances</b>	10,069,385.	33 9,570,472.
	34	<b>Total liabilities and net assets/fund balances</b>	11,063,176.	34 10,247,329.

BAA

Form 990 (2011)

**Part XI Reconciliation of Net Assets**

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,613,546.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,846,627.
3	Revenue less expenses Subtract line 2 from line 1	3	-233,081.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	10,069,385.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-265,832.
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	9,570,472.

**Part XII Financial Statements and Reporting**

Check if Schedule O contains a response to any question in this Part XII

1 Accounting method used to prepare the Form 990  Cash  Accrual  Other \_\_\_\_\_

If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

b Were the organization's financial statements audited by an independent accountant?

c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both

Separate basis  Consolidated basis  Both consolidated and separate basis

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

BAA

Form 990 (2011)

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**  
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

**2011**

**Open to Public Inspection**

<b>Name of the organization</b> Taylor Community Foundation	<b>Employer identification number</b> 23-2354770
--	---

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

The organization is not a private foundation because it is (For lines 1 through 11, check only one box.)

- 1  A church, convention of churches or association of churches described in **section 170(b)(1)(A)(i)**.
- 2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9  An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions – subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
  - a  Type I      b  Type II      c  Type III – Functionally integrated      d  Type III – Other
- e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f  If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box.
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
<b>11 g (i)</b>		
<b>11 g (ii)</b>		
<b>11 g (iii)</b>		

- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
- (ii) A family member of a person described in (i) above?
- (iii) A 35% controlled entity of a person described in (i) or (ii) above?

**h** Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in column (i) listed in your governing document?		(v) Did you notify the organization in column (i) of your support?		(vi) Is the organization in column (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
<b>Total</b>									

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')	162,034.	171,340.	181,974.	163,499.	154,302.	833,149.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 <b>Total.</b> Add lines 1 through 3	162,034.	171,340.	181,974.	163,499.	154,302.	833,149.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						0.
6 <b>Public support.</b> Subtract line 5 from line 4						833,149.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4	162,034.	171,340.	181,974.	163,499.	154,302.	833,149.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	408,809.	197,036.	143,249.	193,260.	221,581.	1,163,935.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 <b>Total support.</b> Add lines 7 through 10						1,997,084.
12 Gross receipts from related activities, etc (see instructions)					12	16,675,218.
13 <b>First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> ▶ <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))	14	41.72%
15 Public support percentage from 2010 Schedule A, Part II, line 14	15	38.56%
16a <b>33-1/3% support test – 2011.</b> If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization ▶ <input checked="" type="checkbox"/>		
b <b>33-1/3% support test – 2010.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
17a <b>10%-facts-and-circumstances test – 2011.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b <b>10%-facts-and-circumstances test – 2010.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
18 <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>		

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal yr beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>1</b> Gifts, grants, contributions and membership fees received (Do not include any 'unusual grants'.)						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
<b>c</b> Add lines 7a and 7b						
<b>8 Public support</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal yr beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>9</b> Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

**14 First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	%
<b>16</b> Public support percentage from 2010 Schedule A, Part III, line 15	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	%
<b>18</b> Investment income percentage from 2010 Schedule A, Part III, line 17	<b>18</b>	%

**19a 33-1/3% support tests – 2011.** If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**b 33-1/3% support tests – 2010.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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



**SCHEDULE D  
(Form 990)**

Department of the Treasury  
Internal Revenue Service  
Name of the organization

**Supplemental Financial Statements**

▶ Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.  
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545 0047

**2011**

**Open to Public Inspection**

Taylor Community Foundation

Employer identification number

23-2354770

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 6

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	4.	2.
2 Aggregate contributions to (during year)	6,981.	16,080.
3 Aggregate grants from (during year)	7,240.	4,121.
4 Aggregate value at end of year	1,943.	14,220.

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?  Yes  No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?  Yes  No

**Part II Conservation Easements.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ \_\_\_\_\_

4 Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Yes  No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?  Yes  No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.

1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ▶ \$ \_\_\_\_\_

(ii) Assets included in Form 990, Part X ▶ \$ \_\_\_\_\_

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ \$ \_\_\_\_\_

b Assets included in Form 990, Part X ▶ \$ \_\_\_\_\_

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)**

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a  Public exhibition
- b  Scholarly research
- c  Preservation for future generations
- d  Loan or exchange programs
- e  Other \_\_\_\_\_

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

b If 'Yes,' explain the arrangement in Part XIV and complete the following table

	Amount
1c	
1d	
1e	
1f	

- c Beginning balance
- d Additions during the year
- e Distributions during the year
- f Ending balance

2a Did the organization include an amount on Form 990, Part X, line 21?  Yes  No

b If 'Yes,' explain the arrangement in Part XIV

**Part V Endowment Funds.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

- a Board designated or quasi-endowment  \_\_\_\_\_ %
- b Permanent endowment  \_\_\_\_\_ %
- c Temporarily restricted endowment  \_\_\_\_\_ %

The percentages in lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

- (i) unrelated organizations
- (ii) related organizations

b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		
3a(ii)		
3b		

4 Describe in Part XIV the intended uses of the organization's endowment funds

**Part VI Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		1,169,096.		1,169,096.
b Buildings		200,000.	163,177.	36,823.
c Leasehold improvements		1,242,520.	375,460.	867,060.
d Equipment		272,329.	257,919.	14,410.
e Other		23,938.	23,938.	0.

**Total.** Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))  2,087,389.

BAA

**Part VII Investments – Other Securities.** See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) -----		
(B) -----		
(C) -----		
(D) -----		
(E) -----		
(F) -----		
(G) -----		
(H) -----		
(I) -----		
<b>Total</b> (Column (b) must equal Form 990 Part X, column (B) line 12) ▶		

**Part VIII Investments – Program Related.** See Form 990, Part X, line 13

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
<b>Total</b> (Column (b) must equal Form 990, Part X, column (B) line 13) ▶		

**Part IX Other Assets.** See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
<b>Total</b> (Column (b) must equal Form 990, Part X, column (B), line 15) ▶	

**Part X Other Liabilities.** See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
<b>Total</b> (Column (b) must equal Form 990, Part X, column (B) line 25) ▶	

2 FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

**Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements**

1	Total revenue (Form 990, Part VIII, column (A), line 12)		3,613,546.
2	Total expenses (Form 990, Part IX, column (A), line 25)		3,846,627.
3	Excess or (deficit) for the year Subtract line 2 from line 1		-233,081.
4	Net unrealized gains (losses) on investments		-265,832.
5	Donated services and use of facilities		
6	Investment expenses		
7	Prior period adjustments		
8	Other (Describe in Part XIV)		
9	Total adjustments (net) Add lines 4 through 8		-265,832.
10	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9		-498,913.

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

1	Total revenue, gains, and other support per audited financial statements		1	3,347,714.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
	a Net unrealized gains on investments	2a	-265,832.	
	b Donated services and use of facilities	2b		
	c Recoveries of prior year grants	2c		
	d Other (Describe in Part XIV)	2d		
	e Add lines 2a through 2d	2e	-265,832.	
3	Subtract line 2e from line 1		3	3,613,546.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	b Other (Describe in Part XIV)	4b		
	c Add lines 4a and 4b	4c		
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	3,613,546.

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

1	Total expenses and losses per audited financial statements		1	3,846,627.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
	a Donated services and use of facilities	2a		
	b Prior year adjustments	2b		
	c Other losses	2c		
	d Other (Describe in Part XIV)	2d		
	e Add lines 2a through 2d	2e		
3	Subtract line 2e from line 1		3	3,846,627.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	b Other (Describe in Part XIV)	4b		
	c Add lines 4a and 4b	4c		
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	3,846,627.

**Part XIV Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

-----

-----

-----

-----

-----

-----

-----

-----

-----

-----



**SCHEDULE I**  
**(Form 990)**

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**

OMB No 1545 0047

**2011**

Department of the Treasury  
Internal Revenue Service

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 21 or 22.  
▶ Attach to Form 990.

**Open to Public  
Inspection**

Name of the organization

Taylor Community Foundation

Employer identification number

23-2354770

**Part I General Information on Grants and Assistance**

- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Yes  No

**Part II Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000.

Part II can be duplicated if additional space is needed

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non cash assistance	(h) Purpose of grant or assistance
(1) Drexel University 3201 Arch Street Philadelphia PA 19104	23-1352630	501 (c) (3)	7,500.				Scholarships
(2) Gwynedd-Mercy College 1325 Summerytown Pike Gwynedd Valley PA 19437	23-1352613	501 (c) (3)	7,500.				Scholarships
(3) Philadelphia University School House Lane & Henry Philadelphia PA 19144	23-1352294	501 (c) (3)	7,500.				Scholarships
(4) University of the Science 600 S. 43rd Street Philadelphia PA 19104	23-1352668	501 (c) (3)	15,000.				Scholarships
(5) University of Pittsburgh 116 Atwood St., Ste 201 Pittsburgh PA 15213	25-0965591	501 (c) (3)	12,500.				Scholarships
(6) Ridley School District 901 Morton Avenue Folsom PA 19033	23-1668220	govt entity	8,621.				Grants
(7) -----							
(8) -----							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

**BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.**

TEEA3901 06/01/11

Schedule I (Form 990) (2011)

**Part III Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
2					
3					
4					
5					
6					
7					

**Part IV Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information

Pt I Line 2 TCF funds specific program expenses and/or makes purchases on behalf of our  
 Pt I Line 2 grantees. In addition to restricting the use of our donations via written  
 Pt I Line 2 correspondence that accompanies grant awards, TCF also employs a program of  
 Pt I Line 2 regular announced and unannounced site visits to observe programs in action.  
 Pt I Line 2 Where not appropriate, TCF reviews grantee Form 990 filings to ensure such programs are active.

-----

-----

-----

-----

-----

-----

-----

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

**Supplemental Information to Form 990 or 990-EZ**

OMB No 1545 0047

**2011**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.  
▶ Attach to Form 990 or 990-EZ.

Name of the organization

Taylor Community Foundation

Employer identification number

23-2354770

Pt VI, Line 11a Form 990 is drafted by the organization's Controller  
and President. It is then saved as an electronic  
file and transferred to a visual media presentation.  
The draft Form 990 is then electronically delivered  
to the three-member Audit Committee. Questions and answers  
are coordinated with the President and Controller.  
The audit committee approves the filing of the 990,  
reports on such approval to the Board, and ensures that each board member  
is aware that the 990 is available for their own personal review.

Pt VI, Line 12c Each new board member undergoes an initiation process  
with the President and a fellow board member. As part  
of that process, the written Conflict of Interest  
policy is reviewed with the new member, who is then  
requested to complete the conflict of interest questionnaire  
for submission at or prior to his/her first active  
board meeting. Active board members are required to  
update their personal conflict of interest questionnaire  
at an annual board meeting. The Chairperson of the Board  
and President review the completed questionnaires,  
and the Chair routinely reminds board members of the  
need or suggestion to abstain from related votes, if  
warranted.

Pt VI, Line 15 The President of the organization prepares an annual  
review of the Taylor Hospice Executive Director, the  
Controller, and the Foundation Operations Manager, and  
shares the review content with the Compensation Committee.

Name of the organization

Employer identification number

Taylor Community Foundation

23-2354770

The Compensation Committee is comprised of a cross-section of board members, yet operates independently of the Board under budget constraints that may be imposed by the Board's Finance Committee. As part of the review of each individual, the President submits salary history, inflation statistics, internal budgetary information, and comparability data to committee members, and makes recommendations for consideration in the area of gross compensation and employer-funded retirement and health benefit contributions. The Chairperson of the Board prepares an independent assessment of the President to the Compensation Committee members, collects comparability data, and utilizes some of the data presented by the President related to other key employees with the objective of achieving committee agreement on appropriate levels of compensation for the President.

Pt VI, Line 19 Governing documents, conflict of interest policy, and financial statements are available to the public upon request.

Pt XI Unrealized losses - marketable securities = (265,832)

TAYLOR COMMUNITY FOUNDATION

Report on Audits of Financial Statements

Years Ended June 30, 2012 and 2011

---

TAYLOR COMMUNITY FOUNDATION

Table of Contents

---

Financial Statements

Independent Auditors' Report .....	1
Statements of Financial Position .....	2
Statements of Activities .....	3
Statements of Functional Expenses .....	4
Statements of Cash Flows .....	5
Notes to Financial Statements .....	6-15

---

BOARD OF DIRECTORS  
TAYLOR COMMUNITY FOUNDATION  
RIDLEY PARK, PENNSYLVANIA

Independent Auditors' Report

We have audited the accompanying statements of financial position of TAYLOR COMMUNITY FOUNDATION as of June 30, 2012 and 2011, and the related statements of activities, functional expenses and cash flows for the years then ended. These financial statements are the responsibility of the Foundation's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of TAYLOR COMMUNITY FOUNDATION as of June 30, 2012 and 2011, and the changes in its net assets and its cash flows for the years then ended, in conformity with accounting principles generally accepted in the United States of America.

*Master, Sidlow & Associates, P.A.*

October 25, 2012

TAYLOR COMMUNITY FOUNDATION  
STATEMENTS OF FINANCIAL POSITION  
June 30, 2012 and 2011

ASSETS	<u>2012</u>	<u>2011</u>
<b>CURRENT ASSETS</b>		
Cash and equivalents	\$ 499,023	\$ 661,636
Accounts receivable, net.		
Estimated third-party settlements	240,220	356,764
Prepayments and other assets	<u>55,395</u>	<u>63,777</u>
Total current assets	794,638	1,082,177
<b>INVESTMENTS AT FAIR VALUE</b>	7,341,140	7,826,613
<b>CASH RESTRICTED TO INVESTMENT IN PROPERTY AND EQUIPMENT</b>	24,162	13,828
<b>PROPERTY AND EQUIPMENT, NET</b>	<u>2,087,389</u>	<u>2,140,558</u>
<b>TOTAL ASSETS</b>	<u>\$10,247,329</u>	<u>\$11,063,176</u>
<b>LIABILITIES AND NET ASSETS</b>		
<b>CURRENT LIABILITIES</b>		
Accounts payable	\$ 51,900	\$ 76,140
Accrued expenses	262,987	456,181
Line of credit	75,000	40,000
Pledges payable	..	100,000
Current maturities of scholarship commitments	<u>150,470</u>	<u>136,470</u>
Total current liabilities	540,357	808,791
<b>LONG-TERM LIABILITIES</b>		
Scholarship commitments, less current maturities	<u>136,500</u>	<u>185,000</u>
Total long-term liabilities	136,500	185,000
<b>TOTAL LIABILITIES</b>	<u>676,857</u>	<u>993,791</u>
<b>NET ASSETS</b>		
Unrestricted:		
Undesignated	376,864	374,009
Designated for pledges payable	...	100,000
Designated for long-term investment	6,985,140	7,354,613
Invested in property and equipment	<u>2,087,389</u>	<u>2,140,558</u>
Total unrestricted	9,449,393	9,969,180
Temporarily restricted	<u>121,079</u>	<u>100,205</u>
Total net assets	9,570,472	10,069,385
<b>TOTAL LIABILITIES AND NET ASSETS</b>	<u>\$10,247,329</u>	<u>\$11,063,176</u>

See accompanying notes

**TAYLOR COMMUNITY FOUNDATION**  
**STATEMENTS OF ACTIVITIES**  
Years Ended June 30, 2012 and 2011

	2012		2011	
	Unrestricted	Temporarily Restricted	Unrestricted	Temporarily Restricted
	Total	Total	Total	Total
<b>REVENUE, GAINS AND OTHER SUPPORT</b>				
Net patient service revenue	\$ 3,173,552	\$ 3,173,552	\$ 3,419,244	\$ 3,419,244
Contributions	70,360	154,302	65,514	163,400
Interest and dividends	221,439	221,581	192,956	193,260
<b>Total revenue and gains</b>	<u>3,465,351</u>	<u>3,549,435</u>	<u>3,678,714</u>	<u>3,776,703</u>
Net assets released from restriction	(63,210)	(63,210)	(139,887)	(139,887)
<b>Total revenue, gains and other support</b>	<u>3,528,561</u>	<u>3,519,435</u>	<u>3,818,301</u>	<u>3,776,703</u>
<b>EXPENSES</b>				
Program services	3,406,490	3,406,490	3,539,275	3,539,275
Supporting services.	364,442	364,442	361,080	361,080
Management and general	75,695	75,695	92,944	92,944
Fundraising	3,846,527	3,846,627	3,992,303	3,992,302
<b>Total expenses</b>	<u>(3,18,066)</u>	<u>(20,874)</u>	<u>(175,002)</u>	<u>(41,598)</u>
<b>CHANGE IN NET ASSETS BEFORE NON-OPERATING INCOME (EXPENSE)</b>	( 519,787)	( 20,874)	( 175,002)	( 41,598)
<b>NON-OPERATING INCOME (EXPENSE)</b>				
Realized investment gain	64,111	64,111	51,801	51,801
Unrealized investment gain (loss)	(265,832)	(265,832)	(1,237,602)	(1,237,602)
<b>Total non-operating income (expense)</b>	<u>(201,721)</u>	<u>(201,721)</u>	<u>(1,289,410)</u>	<u>(1,289,410)</u>
<b>CHANGE IN NET ASSETS</b>	( 519,787)	( 20,874)	( 1,114,400)	( 41,598)
<b>NET ASSETS</b>				
Beginning of year	9,269,180	100,205	8,854,772	141,803
End of year	<u>\$ 9,442,393</u>	<u>\$ 121,079</u>	<u>\$ 9,570,472</u>	<u>\$ 2,269,180</u>
				<u>\$ 10,069,355</u>

See accompanying notes

**TAYLOR COMMUNITY FOUNDATION**  
**STATEMENTS OF FUNCTIONAL EXPENSES**  
 Years Ended June 30, 2012 and 2011

	2012				2011			
	Total Program Services	Management and General	Fund Raising	Total Expenses	Total Program Services	Management and General	Fund Raising	Total Expenses
<b>EXPENSES</b>								
Salaries	\$ 1,855,551	\$ 159,410	\$ 38,446	\$ 2,053,407	\$ 1,913,664	\$ 164,403	\$ 39,650	\$ 2,117,717
Employee other benefits	280,367	24,086	5,810	310,263	293,914	25,750	6,090	325,254
Employee retirement benefits	52,474	4,508	1,087	58,069	53,406	4,588	1,106	59,100
Payroll taxes	139,362	11,973	2,886	154,221	137,885	11,946	2,856	152,587
<b>Total personnel costs</b>	<b>2,327,754</b>	<b>199,977</b>	<b>48,229</b>	<b>2,575,960</b>	<b>2,338,862</b>	<b>206,087</b>	<b>42,702</b>	<b>2,587,651</b>
Advertising	17,652			17,652	10,917			10,917
Bad debt expense	11,557			11,557	21,828			21,828
Community relations & education	39,368			39,368	39,822			39,822
Computer and cable expense	13,627	3,084		16,711	11,928	2,157		14,085
Consultants	4,258			4,258	950			950
DME rental	147,820			147,820	125,315			125,315
Dues and subscriptions	2,371	1,258		3,629	6,212	1,387		7,599
Employee physicals	3,135			3,135	5,839			5,839
Equipment rentals	798			798	686			686
Fundraising expense			16,302	16,302			31,437	31,437
Fundraising general	8,100			8,100	10,000			10,000
Investment fees	54,141	34,448		88,589	52,961	33,073		86,034
Insurance	2,297	54,141		56,438	2,248	52,060		54,308
Interest expense	21,605	2,297		23,902	23,580	3,117		26,697
Janitorial and linens	35,933	8,701		44,634	18,000	922		18,922
Legal and accounting	76,608			76,608	70,335			70,335
Maintenance, repairs and utilities	269,655			269,655	287,883			287,883
Medical supplies	29,726	14,863	4,955	49,544	30,765	15,382	5,126	51,273
Office supplies and expense		6,463		6,463		4,814		4,814
Payroll services	75,880			75,880	77,241			77,241
Physician fees	1,306	652	1,306	3,264	1,528	764	1,528	3,820
Postage	140,280			140,280	122,021			122,021
Scholarships and grants	34,324	9,807	4,903	49,034	36,040	10,297	5,140	51,477
Telephone					89,935			89,935
Third party reimbursement	2,138			2,138	4,290			4,290
Training and transportation	44,228			44,228	44,470			44,470
Travel	1,036,807	136,512	27,466	1,200,785	1,094,794	134,582	43,242	1,272,618
<b>Total other expenses</b>	<b>3,364,561</b>	<b>336,489</b>	<b>75,695</b>	<b>3,776,745</b>	<b>3,493,663</b>	<b>330,416</b>	<b>91,944</b>	<b>3,916,023</b>
<b>TOTAL EXPENSES BEFORE DEPRECIATION</b>	<b>41,929</b>	<b>27,953</b>		<b>69,882</b>	<b>45,612</b>	<b>30,108</b>		<b>76,071</b>
Depreciation	\$ 3,406,490	\$ 364,442	\$ 75,695	\$ 3,846,627	\$ 3,539,275	\$ 361,084	\$ 92,244	\$ 3,992,603
<b>TOTAL EXPENSES</b>								

See accompanying notes

TAYLOR COMMUNITY FOUNDATION  
STATEMENT OF CASH FLOWS  
Years Ended June 30, 2012 and 2011

	2012	2011
<b>CASH FLOWS FROM OPERATING ACTIVITIES</b>		
Cash received from patients and third party payors	\$ 3,290,096	\$ 3,305,402
Cash received from contributors	136,486	139,931
Cash paid to employees and suppliers	( 4,120,297)	( 3,960,530)
Interest and dividends received	221,531	193,260
Net cash used by operating activities	<u>( 472,134)</u>	<u>( 321,937)</u>
<b>CASH FLOWS FROM INVESTING ACTIVITIES</b>		
Purchase of property and equipment	( 16,713)	( 52,899)
Purchase of investments	( 1,344,120)	( 469,356)
Proceeds from sale of investments	1,627,872	685,774
Net cash provided by investing activities	<u>267,039</u>	<u>163,519</u>
<b>CASH FLOWS FROM FINANCING ACTIVITIES</b>		
Proceeds from contributions restricted to investment in property and equipment	17,816	23,568
Proceeds from line of credit	35,000	40,000
(Increase) decrease in assets restricted to investment in property and equipment	( 10,334)	38,132
Net cash provided by financing activities	<u>42,482</u>	<u>101,700</u>
<b>NET DECREASE IN CASH AND EQUIVALENTS</b>	<b>( 162,613)</b>	<b>( 56,718)</b>
<b>CASH AND EQUIVALENTS</b>		
Beginning of year	<u>661,636</u>	<u>718,354</u>
End of year	<u>\$ 499,023</u>	<u>\$ 661,636</u>
<b>RECONCILIATION OF CHANGE IN NET ASSETS TO NET CASH USED BY OPERATING ACTIVITIES</b>		
Change in net assets	<u>(\$ 498,913)</u>	<u>\$ 1,072,810</u>
Adjustments to reconcile change in net assets to net cash used by operating activities		
Depreciation	69,882	76,020
Realized investment gain	( 64,111)	( 51,801)
Unrealized investment (gain) loss	265,832	( 1,237,609)
Contributions restricted to investment in property and equipment	( 17,816)	( 23,568)
Changes in assets and liabilities:		
Receivables, net:		
Estimated third-party settlements	116,544	( 114,542)
Pledges payable	( 100,000)	..
Prepayments and other assets	8,382	( 6,913)
Accounts payable	( 24,240)	29,121
Accrued expenses	( 193,194)	2,045
Scholarships payable	( 34,500)	( 67,500)
Total adjustments	<u>26,779</u>	<u>( 1,394,747)</u>
Net cash used by operating activities	<u>(\$ 472,134)</u>	<u>(\$ 321,937)</u>
See accompanying notes		

TAYLOR COMMUNITY FOUNDATION  
NOTES TO FINANCIAL STATEMENTS  
YEARS ENDED JUNE 30, 2012 AND 2011

---

NOTE 1 - NATURE OF THE ORGANIZATION

The Taylor Community Foundation (the "Foundation" or "TCF"), is a nonprofit corporation. The Foundation's mission is to provide support, education and funding to other nonprofit organizations, institutions, and individuals to promote health and wellness in the Foundation's service area ("TCF Service Area"). The overriding objective of any TCF scholarship or grant is to enhance the quality of life for community members of the TCF Service Area.

Taylor Hospice (the "Hospice") and Taylor Hospice Residence (the "Residence") are operated as divisions of the Foundation, providing direct services to the community.

The mission of the Hospice and the Residence is to provide a quality program of physical, spiritual, and emotional care for patients with a terminal illness and their family members.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The significant accounting policies followed are described below to enhance the usefulness of the financial statements to the reader. The basic financial statements and notes are representations of management, who is responsible for their integrity and objectivity.

Basis of Presentation

Financial statement presentation follows the recommendations of the Financial Accounting Standards Board regarding financial statements for not-for-profit organizations. Accordingly, the Foundation is required to report information regarding its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets.

Basis of Accounting

The Foundation's policy is to prepare the financial statements on the accrual basis of accounting and accordingly, reflect significant receivables, payables, and other liabilities.

Use of Estimates

The preparation of the financial statements in conformity with U.S. generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

TAYLOR COMMUNITY FOUNDATION  
NOTES TO FINANCIAL STATEMENTS  
YEARS ENDED JUNE 30, 2012 AND 2011  
(Continued)

---

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Cash and Equivalents

The Foundation considers all unrestricted highly liquid investments with an initial maturity of three months or less to be cash equivalents.

Accounts Receivable

Accounts receivable are recognized based on a gross market-based fee for services reduced by a contractual allowance to reflect reduced expected payments from major third-party providers. The contractual allowance at June 30, 2012 and 2011 is \$107,469 and \$189,217, respectively.

Bad debts are provided on the allowance method based on historical experience and management's evaluation of outstanding accounts receivable. At June 30, 2012 and 2011, the allowance for doubtful accounts is \$6,566 and \$15,797, respectively.

Unconditional Promises to Give

Unconditional promises to give are recognized as revenue or gains in the period received and as assets. Allowances for estimated uncollectibles are based on an analysis of the collectibility of the individual pledges.

Conditional promises to give are recognized when the conditions on which they depend are substantially met. At June 30, 2012 and 2011, the Foundation had no conditional promises to give.

Property and Equipment

Property and equipment is carried at cost and consists of land, building and improvements, furniture and equipment, and computer software. Expenditures for maintenance and repairs are charged to expense as incurred; costs of renewals and betterments are capitalized. When assets are sold or otherwise disposed of, the cost and related depreciation are removed from the accounts, and any gain or loss is included in the statement of activities. The Foundation follows the practice of capitalizing all expenses for capital assets having an initial, individual cost of \$1,000 or more. Depreciation is computed using the straight-line method over the estimated useful lives of the assets, ranging from 3 to 40 years.

TAYLOR COMMUNITY FOUNDATION  
NOTES TO FINANCIAL STATEMENTS  
YEARS ENDED JUNE 30, 2012 AND 2011  
(Continued)

---

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Investments

Investments in marketable securities with readily determinable fair values and all investments in debt securities are reported at their fair values in the statement of financial position. Unrealized gains and losses are included in the statement of activities.

Investment income and gains restricted by donors are reported as increases in unrestricted net assets if the restrictions are met (either a stipulated time period ends or a purpose restriction is accomplished) in the reporting period in which the income and gains are recognized.

Donated Assets

Donated marketable securities and other noncash donations are recorded as contributions at their estimated fair values at the date of donation.

Donated Property and Equipment

Donations of property and equipment are recorded as support at their estimated fair value at the date of donation. Such donations are reported as unrestricted support unless the donor has restricted the donated asset to a specific purpose. Assets donated with explicit restrictions regarding their use, and contributions of cash that are used to acquire property and equipment, are reported as restricted support. Absent donor stipulations regarding how long those donated assets must be maintained, the Foundation reports expirations of donor restrictions when the donated or acquired assets are placed in service as instructed by the donor. The Foundation reclassifies temporarily restricted net assets to unrestricted net assets at that time.

Donated Services

The Foundation recognizes donated services that create or enhance nonfinancial assets or that require specialized skills, are provided by individuals possessing those skills, and would typically need to be purchased if not provided by donation. The Foundation did not receive donated services that met this criteria for fiscal years 2012 and 2011.

Contributions

Contributions are considered available for unrestricted use, unless specifically restricted by the donor. Bequests are recorded as support at the time the Foundation has an established right to the bequest and the proceeds are measurable.

---

TAYLOR COMMUNITY FOUNDATION  
NOTES TO FINANCIAL STATEMENTS  
YEARS ENDED JUNE 30, 2012 AND 2011  
(Continued)

---

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Advertising

The Foundation uses advertising to promote its programs. The costs for advertising are expensed the first time the advertising takes place. The Foundation incurred advertising costs of \$17,652 and \$10,917 for the years ended June 30, 2012 and 2011, respectively.

Expense Allocation

The costs of providing program services and other activities have been summarized on a functional basis in the statement of activities. Accordingly, certain costs have been allocated among the programs and supporting services benefited. Such allocations are included in the statement of functional expenses.

Income Taxes

Taylor Community Foundation is exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code. However, income from certain activities not directly related to the Foundation's tax exempt purpose is subject to taxation as unrelated business income. In addition, the Foundation qualifies for the charitable contribution deduction under Section 170(b)(1)(A) and has been classified as an organization that is not a private foundation under Section 509(a)(2).

The Foundation follows professional standards which clarify the accounting for uncertainty in income taxes recognized in the Foundation's financial statements and prescribe a recognition threshold and measurement attribute for the financial statement recognition and measurement of a tax position taken or expected to be taken on a tax return. The standards also provide guidance on derecognition and measurement of a tax position taken or expected to be taken on a tax return.

The Foundation files information tax returns in the U.S. federal jurisdiction. The Foundation's federal tax returns for tax years 2009 and beyond remain subject to examination by the Internal Revenue Service.

The Foundation did not have any unrecognized tax benefits as of June 30, 2012 and does not expect this to change significantly over the next twelve months. The Foundation will recognize interest and penalties accrued on any unrecognized tax benefits as a component of income tax expense. As of June 30, 2012, the Foundation has not accrued interest or penalties related to uncertain tax provisions.

TAYLOR COMMUNITY FOUNDATION  
NOTES TO FINANCIAL STATEMENTS  
YEARS ENDED JUNE 30, 2012 AND 2011  
(Continued)

---

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Fair Value - Definition and Hierarchy

The Foundation follows professional standards regarding fair value measurements. Fair value is defined as the price that would be received to sell an asset or paid to transfer a liability (i.e. the "exit price") in an orderly transaction between market participants at the measurement date.

The standards establish a fair value hierarchy for inputs used in measuring fair value that maximizes the use of observable inputs and minimizes the use of unobservable inputs by requiring that the most observable inputs be used when available. Observable inputs are those that market participants would use in pricing the asset or liability based on market data obtained from sources independent of the reporting entity. Unobservable inputs reflect the reporting entity's assumptions about the inputs market participants would use in pricing the asset or liability developed based on the best information available in the circumstances. The fair value hierarchy is categorized into three levels based on the inputs as follows:

Level 1 - Unadjusted quoted prices in active markets for identical assets or liabilities that the reporting entity has the ability to access at the measurement date.

Level 2 - Quoted prices in markets that are not active or for which all significant inputs are observable, either directly or indirectly

Level 3 - Prices or valuations that require inputs that are both unobservable and significant to the fair value measurement.

Reclassifications

Certain amounts in the prior year financial statements have been reclassified for comparative purposes to conform with the presentation in the current year financial statements.

NOTE 3 - CONCENTRATION OF CREDIT RISK

At June 30, 2012 and 2011, the Foundation's cash deposits are held by two financial institutions. These deposits are insured by the Federal Deposit Insurance Corporation (FDIC) up to \$250,000. The June 30, 2012 and 2011 deposits totaling \$599,649 and \$692,714 held by the financial institution are in excess of FDIC limits in amounts of \$181,904 and \$288,980, respectively.

TAYLOR COMMUNITY FOUNDATION  
 NOTES TO FINANCIAL STATEMENTS  
 YEARS ENDED JUNE 30, 2012 AND 2011  
 (Continued)

**NOTE 4 - NET PATIENT REVENUE**

The Hospice and Residence have agreements with Medicare and Medicaid that provide for reimbursement of items according to a fixed rate schedule. The Medicare agreement requires submission of an annual cost report by the Hospice and Residence to the Medicare fiscal intermediary. Medicare third party reimbursement represents 91% and 93% of net patient service revenue during the years ended June 30, 2012 and 2011, respectively.

**NOTE 5 - INVESTMENTS**

At June 30, the investments are presented in the financial statements at fair value, and consist of the following:

Description	2012		2011	
	Cost	Fair Value	Cost	Fair Value
Money market funds	\$ 150,753	\$ 150,753	\$ 6,695	\$ 6,695
Mutual funds				
Fixed income funds	2,261,209	2,380,149	2,622,952	2,684,442
Growth funds	1,138,239	1,544,587	1,319,970	1,833,127
Value funds	1,878,893	1,857,486	2,199,108	2,282,873
Blended funds	649,870	663,596		
International funds	721,637	670,337	879,257	941,105
Emerging markets funds	63,413	74,232	55,574	78,371
Total investments	<u>\$ 6,864,014</u>	<u>\$ 7,341,140</u>	<u>\$ 7,083,656</u>	<u>\$ 7,826,613</u>

The schedule summarizes investment return and its classification in the statement of activities for years ended June 30:

Description	2012	2011
Interest and dividend income	\$ 221,581	\$ 193,260
Realized investment gain	64,111	51,801
Unrealized investment gain (loss)	( 265,832)	1,237,609
Investment fees	( 34,448)	( 33,073)
Total investment return	<u>(\$ 14,588)</u>	<u>\$ 1,449,597</u>

The Foundation reports interest and dividends on investments as operating revenue. Net realized and unrealized gains and losses on investment securities are classified as non-operating revenue.

TAYLOR COMMUNITY FOUNDATION  
NOTES TO FINANCIAL STATEMENTS  
YEARS ENDED JUNE 30, 2012 AND 2011  
(Continued)

NOTE 5 - INVESTMENTS (Continued)

June 30, 2012:

<u>Description</u>	<u>Fair Value</u>	<u>Level 1</u>
Money market funds	\$ 150,753	\$ 150,753
Mutual funds		
Fixed income funds	2,380,149	2,380,149
Growth funds	1,544,587	1,544,587
Value funds	1,857,486	1,857,486
Blended funds	663,596	663,596
International funds	670,337	670,337
Emerging markets funds	74,232	74,232

June 30, 2011:

<u>Description</u>	<u>Fair Value</u>	<u>Level 1</u>
Money market funds	\$ 6,695	\$ 6,695
Mutual funds		
Fixed income funds	2,684,442	2,684,442
Growth funds	1,833,127	1,833,127
Value funds	2,282,873	2,282,873
International funds	941,105	941,105
Emerging markets funds	78,371	78,371

NOTE 6 - PROPERTY AND EQUIPMENT

The following is a summary of changes in property and equipment:

<u>Description</u>	<u>Year Ended June 30, 2012</u>			
	<u>Beginning Balances</u>	<u>Additions</u>	<u>Deletions</u>	<u>Ending Balances</u>
Land	\$ 1,169,096	\$ ...	\$ ...	\$ 1,169,096
Building and improvements	1,427,986	14,534	...	1,442,520
Furniture and equipment	270,150	2,179	...	272,329
Computer software	23,938	...	...	23,938
Total book value	2,891,170	16,713	...	2,907,883
Accumulated depreciation	750,612	69,882	...	820,494
Net book value	<u>\$ 2,140,558</u>	<u>(\$ 53,169)</u>	<u>\$ ...</u>	<u>\$ 2,087,389</u>

TAYLOR COMMUNITY FOUNDATION  
NOTES TO FINANCIAL STATEMENTS  
YEARS ENDED JUNE 30, 2012 AND 2011  
(Continued)

NOTE 6 - PROPERTY AND EQUIPMENT (Continued)

The following is a summary of changes in property and equipment:

Description	Beginning Balances	Year Ended June 30, 2011		Ending Balances
		Additions	Deletions	
Land	\$1,169,096	\$ .	\$ .	\$1,169,096
Building and improvements	1,378,337	49,649	.	1,427,986
Furniture and equipment	268,714	3,250	..	270,150
Computer software	23,938	..	..	23,938
Total book value	2,840,085	52,899	.	2,891,170
Accumulated depreciation	676,406	76,020	..	750,612
Net book value	\$2,163,679	(\$ 23,121)	\$ ..	\$2,140,558

NOTE 7 - RESTRICTION ON NET ASSETS

At June 30, temporarily restricted net assets are available for the following purposes:

Description	2012	2011
Hospice Residence Care	\$ 73,392	\$ 74,553
Memorial Walkway	24,162	13,828
Personal Care grant	7,362	7,362
Scholarships and grants	16,163	4,462
Total temporarily restricted net assets	\$ 121,079	\$ 100,205

Net assets were released from the following restrictions for the years ended June 30:

Description	2012	2011
Hospice Residence Care	\$ 35,545	\$ 54,368
Memorial Walkway	8,767	61,700
Marketing	..	3,382
Scholarships and grants	18,898	20,437
Net assets released from restriction	\$ 63,210	\$ 139,887

NOTE 8 - PENSION PLAN

The Foundation has a defined contribution 401(k) plan that covers substantially all employees who qualify as to length of service. The Foundation makes a matching contribution of 2% for those employees who contribute 4% or more to the plan. In addition the Board of Directors may authorize discretionary contributions. Total pension expense amounted to \$58,069 and

TAYLOR COMMUNITY FOUNDATION  
NOTES TO FINANCIAL STATEMENTS  
YEARS ENDED JUNE 30, 2012 AND 2011  
(Continued)

---

NOTE 8 - PENSION PLAN (Continued)

\$59,100 for the years ended June 30, 2012 and 2011, respectively.

NOTE 9 - COMMITMENTS

In the normal course of business, there are outstanding various commitments and contingencies in addition to the normal purchases of goods and services. The Foundation does not anticipate losses as a result of these commitments and contingencies.

Line of Credit

The Foundation has available a \$250,000 secured revolving line of credit bearing interest at prime (3.25% at June 30, 2012) or at a minimum rate of interest. Effective May 18, 2010, a minimum interest rate of 4.25% is assessed against amounts drawn on the line of credit. There were \$75,000 and \$40,000 outstanding on the line of credit as of June 30, 2012 and 2011, respectively. The line of credit expires May 17, 2013.

Accrued Expenses

As of June 30, 2011, Taylor Hospice, a division of Taylor Community Foundation, had accrued a \$191,935 liability, included with accrued expenses. The liability represented a claim from Medical Assistance to recapture previously recognized revenues. The claim appeal process is complete. Resolution of the liability totaling \$191,935 was achieved during the year ended June 30, 2012.

Pledges Payable

On June 30, 2005, the Foundation committed \$500,000 to Taylor Hospital (an unrelated third party) for the "Growth and Expansion Project". The commitment (grant award) was contingent upon Taylor Hospital remaining a not-for-profit "acute care" hospital with an active emergency department. The grant was payable in five \$100,000 installments with the first to be paid on July 6, 2005, and the remaining four equal installments to be paid on June 1 of each subsequent year. The pledge was fulfilled during 2012 and no further pledge payable remains as a liability as of June 30, 2012.

TAYLOR COMMUNITY FOUNDATION  
NOTES TO FINANCIAL STATEMENTS  
YEARS ENDED JUNE 30, 2012 AND 2011  
(Continued)

---

NOTE 9 - COMMITMENTS (Continued)

Scholarship Awards Program

The Foundation sponsors an academic scholarship awards program for college students enrolled in an allied health profession major. In years prior to 2012, the scholarship provided up to \$2,500 per year for college expenses for up to four consecutive academic years. Effective in 2012, the scholarship provides up to \$3,500 for the student's first year and up to \$3,500 for the final year of undergraduate education. The renewal of the scholarship is dependent upon submission of evidence of continued matriculation in an allied health profession major and suitable academic performance and progress. The Foundation reserves the sole discretion in establishing the conditions by which suitable academic performance and progress are defined. The Foundation is able to effectively measure suitable academic performance related to scheduled scholarship payments and accrues for those anticipated disbursements. Due to the history of recipients achieving the renewal conditions, the Foundation has accrued the remaining potential commitment as follows:

2013	\$ 150,470
2014	62,500
2015	25,000
2016	49,000
Total	<u>\$ 286,970</u>

The total scholarship award expense was \$95,300 and \$81,450 for the years ended June 30, 2012 and 2011, respectively

NOTE 10 - SUBSEQUENT EVENTS

The Foundation has evaluated all subsequent events through October 25, 2012, the date the financial statements were available to be issued.

---

Schedule O (Form 990), Supplemental Information to Form 990  
**Form 990, Page 2, Part III, Line 1 (continued)**

---

Briefly describe the organization's mission  
programs and organizations that advance health, wellness, education,  
and community spirit within the TCF Service Area. Our primary program is the operation of Taylor Hospice.

---

---

Schedule O (Form 990), Supplemental Information to Form 990  
**Form 990, Page 2, Part III, Line 4a (continued)**

---

licensed and trained in the discipline of hospice care. Personal care  
plans are developed and emergency services are available 24-hours-a-day,  
seven-days-a-week.

---

Taylor Hospice social workers are available to help individuals cope  
with the many challenges that accompany the terminal illness of a loved  
one. We remain on hand to provide emotional support and to assist the  
family in completing forms for insurance companies and financial institutions.  
In addition, our social workers can identify resources in the community  
that may provide further assistance, if needed.

---

Our chaplain will work with the family's designated clergy person, if  
desired. In this way, the patient and family receive spiritual support  
consistent with the traditions of their chosen faith. Guidance and  
counseling services are available throughout the duration of the illness  
and bereavement services are offered to help ease the pain of loss  
following the death of a loved one.

---

Hospice volunteers provide companionship and respite care. This may  
enable family members to run errands and attend to other personal  
matters.

---

Taylor Hospice maintains an ongoing commitment to the community at large.  
Speaking engagements can be arranged to provide information on issues  
relative to disease management as well as personal finance, insurance  
coverage and advance directives. Crisis intervention is also  
available to schools and community groups who are dealing with  
traumatic or sudden deaths.

---

---

Schedule O (Form 990), Supplemental Information to Form 990  
**Form 990, Page 2, Part III, Line 4b (continued)**

---

Sevices provided by Taylor Hospice Residence include private and  
semi-private rooms, meals and laundry, 24-hour personal care, staff  
ratio of 1:2 or 3, daily activities, transportation assistance,  
medication supervision, cable TV, and alternative therapies,  
including music, pet, and aromatherapy.

---

---

Schedule O (Form 990), Supplemental Information to Form 990  
**Form 990, Page 2, Part III, Line 4c (continued)**

---

Ultimate award winners are chosen via the use of a  
vigorous and independent process by a 15-member committee of board and  
community volunteers. Merit is measured on the basis of high school academic

---

Schedule O (Form 990), Supplemental Information to Form 990  
**Form 990, Page 2, Part III, Line 4c (continued)**

Continued

performance, academic aptitude as measured by standardized testing scores, concentration of experience and academic course selection and rigor in the allied health fields, and the breadth and depth of extracurricular and social service experiences. The Scholarship Committee also focuses on achieving geographic representation across the TCF Service Area, as well as representation in a variety of allied health fields.

Community Service Grants are also subject to a defined grant application and evaluation process by staff and board committee representatives. Funding recommendations are made to the Board to support organizations with an emphasis on health, safety and wellness objectives and/or to promote education that advance those objectives.

The total number of students receiving collegiate scholarship funding during 2011-2012 was 54, and total number of grants awarded in 2011-2012 was 44.

Taylor Community Foundation also leads community-based programming in the arena of health through the planning and execution of the annual Health Awareness Day, believed to be the largest health fair in Delaware County. Free health screenings, health, wellness, and safety education and implementation, and a variety of healthy activities in the gymnasium, pool, and track are conducted throughout the day. TCF also offers frequent "Teddy Bear Checkups" throughout the year helping the youngest members of the community learn to be comfortable with and communicate effectively with their health care providers.

TCF assists individuals and groups to raise funds for charity in an organized way by offering to assist with marketing, administration, and treasury and bookkeeping operations for events designed to raise funds that benefit TCF programs or that will be distributed to TCF's supported charities for use in the TCF Service Area.

Schedule O (Form 990), Supplemental Information to Form 990  
**Form 990, Page 6, Line 17 (continued)**

Pennsylvania

New Jersey