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

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**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4a	(Code ) (Expenses \$ 11,303,725 including grants of \$ 11,303,725 ) (Revenue \$ )
	<p>THE LUZERNE FOUNDATION, YOUR COMMUNITY FOUNDATION, EXISTS TO MAKE OUR REGION A BETTER PLACE TO LIVE THROUGH THE GENEROSITY OF OUR DONORS, THE FOUNDATION SUPPORTS SEVEN KEY AREAS THAT TOGETHER SUPPORT A HEALTHY AND SUSTAINABLE COMMUNITY INCLUDING SOCIAL SERVICES, EDUCATION AND SCHOLARSHIPS, ARTS AND CULTURE, NEIGHBORHOODS AND COMMUNITY DEVELOPMENT, YOUTH ISSUES, HISTORIC PRESERVATION AND THE ENVIRONMENT, AND HEALTH AND WELLNESS THE LUZERNE FOUNDATION IS PRIVILEGED TO FACILITATE THE PHILANTHROPY OF VERY SPECIAL PEOPLE WHO UNDERSTAND THAT QUALITY OF LIFE REQUIRES "GIVING BACK" SO OTHERS MIGHT REALIZE THE BEAUTY OF OUR AREA, HAVE ACCESS TO THE ARTS, EDUCATION, HEALTHCARE, AND ENJOY SAFE NEIGHBORHOODS FOR 18 YEARS, THE LUZERNE FOUNDATION HAS ASSISTED INDIVIDUALS AND FAMILIES, BUSINESSES, CIVIC GROUPS, AND OTHER NONPROFIT ORGANIZATIONS WITH REALIZING THEIR GOALS FOR PHILANTHROPY SO, COLLECTIVELY, THEY CAN IMPROVE THE QUALITY OF LIFE FOR THOSE LIVING AND WORKING IN LUZERNE COUNTY</p>



















[illegible][illegible]

**4d** Other program services (Describe in Schedule O )  
(Expenses \$ including grants of \$ ) (Revenue \$ )

<b>4e</b>	<b>Total program service expenses ▶</b>	<b>11,303,725</b>
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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 	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	2 Yes	
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	3	No
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	4	No
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	5	No
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 	6 Yes	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, 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 	9	No
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 	10 Yes	
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 	11a Yes	
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 	11b	No
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 	11c	No
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 	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	11e Yes	
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 	11f Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	12a Yes	
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 and XII is optional 	12b	No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
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	14b	No
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	15	No
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	16	No
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) 	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 	18 Yes	
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 	19	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> . . . . . 	21	Yes	
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> . . . . . 	22		No
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> . . . . .	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i> . . . . .	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . .	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . .	24d		
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> . . . . .	25a		No
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> . . . . .	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest 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> . . . . .	26		No
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> . . . . .	27		No
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> . . . . .	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28b		No
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> . . . .	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . 	29	Yes	
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> . . . . . 	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .	31		No
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> . . . . .	32		No
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> . . . . .	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> . . . . .	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If "Yes" to line 35a, 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> . . . .	35b		
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> . . . . .	36		No
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>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	38	Yes	

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			
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1a	0			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes			
2a	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.	2a	3			
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).	2b	Yes			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a				No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	3b				
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a				No
b	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.					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a				No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b				No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c				
6a	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 as charitable contributions?	6a				No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b				
7	<b>Organizations that may receive deductible contributions under section 170(c).</b>					
a	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?	7a	Yes			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c				No
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e				No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f				No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g				
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h				
8	<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?	8				No
9	<b>Sponsoring organizations maintaining donor advised funds.</b>					
a	Did the organization make any taxable distributions under section 4966?	9a				No
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b				No
10	<b>Section 501(c)(7) organizations.</b> Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b				
11	<b>Section 501(c)(12) organizations.</b> Enter					
a	Gross income from members or shareholders.	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b				
12a	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	12a				
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b				
13	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>					
a	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.	13a				
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.	13b				
c	Enter the amount of reserves on hand.	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a				No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b				

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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
1a	Enter the number of voting members of the governing body at the end of the tax year . . . . .	24	
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			
b	Enter the number of voting members included in line 1a, above, who are independent . . . . .	24	
2	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? . . . . .	2	No
3	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? . . . . .	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . .	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . .	5	No
6	Did the organization have members or stockholders? . . . . .	6	No
7a	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? . . . . .	7a	No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . . . .	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a	The governing body? . . . . .	8a	Yes
b	Each committee with authority to act on behalf of the governing body? . . . . .	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O . . . . .	9	No

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

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

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	PA
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input checked="" type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O)	
19	Describe in Schedule O whether (and if so, how), the organization made 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 CHARLES M BARBER 140 MAIN STREET 2ND FLOOR LUZERNE, PA (570) 714-1570	

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, or 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 (list any hours for related organizations below dotted line)	(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) CHARIE K APONICK DIRECTOR	10	X						0	0	0
(2) STUART M BELL VICE CHAIRMAN	10	X		X				0	0	0
(3) DAYLENE T BURNSIDE DIRECTOR	10	X						0	0	0
(4) JOSEPH F BUTCHER DIRECTOR	10	X						0	0	0
(5) KATHI FLACK DIRECTOR	10	X						0	0	0
(6) KEVIN FOLEY DIRECTOR	10	X						0	0	0
(7) AUGUST F GENETTI JR DIRECTOR	10	X						0	0	0
(8) LOUIS F GOERINGER DIRECTOR	10	X						0	0	0
(9) SCOTT HENRY DIRECTOR	10	X						0	0	0
(10) THE HONRICHARD M HUGHES III DIRECTOR (TERM END 9/21/12)	10	X						0	0	0
(11) WILLIAM JOYCE DIRECTOR	10	X						0	0	0
(12) JOSEPH E KLUGER ESQ DIRECTOR	10	X						0	0	0
(13) TIFFANY CLOUD DIRECTOR	10	X						0	0	0
(14) MELANIE M LUMIA DIRECTOR	10	X						0	0	0
(15) GERTRUDE C MCGOWAN ESQ SECRETARY	10	X		X				0	0	0
(16) A EDWARD NORK DIRECTOR	10	X						0	0	0
(17) JOSEPH L PERSICO ESQ DIRECTOR	10	X						0	0	0



Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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			
(18) ALEXANDER SLOOT DIRECTOR	10	X						0	0	0
(19) SENATOR JOHN T YUDICHAK DIRECTOR	10	X						0	0	0
(20) TERRENCE W CASEY DIRECTOR	10	X						0	0	0
(21) PHILIP G DECKER BOARD CHAIRMAN	10	X		X				0	0	0
(22) PETER J DANCHAK DIRECTOR	10	X						0	0	0
(23) MICHAEL D WEAVER DIRECTOR	10	X						0	0	0
(24) THOMAS L KENNEDY ESQ TREASURER	10	X		X				0	0	0
(25) WILLIAM JONES DIRECTOR	0 00	X						0	0	0
(26) CHARLES M BARBER PRESIDENT AND CEO	45 00			X				111,092	0	19,979
<b>1b Sub-Total</b>										
<b>c Total from continuation sheets to Part VII, Section A</b>										
<b>d Total (add lines 1b and 1c)</b>								111,092	0	19,979

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>		No
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>		No
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>		No

Section B. Independent Contractors

<b>1</b> 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
<b>2</b> Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 0		

Part VIII

Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . .	1a				
	b	Membership dues . . . . .	1b				
	c	Fundraising events . . . . .	1c	27,747			
	d	Related organizations . . . .	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	11,780,460			
	g	Noncash contributions included in lines 1a-1f \$		186,042			
	h	Total. Add lines 1a-1f . . . . .		11,808,207			
Program Service Revenue	2a		Business Code				
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f . . . . .					
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) . . . . .	560,805			560,805
4		Income from investment of tax-exempt bond proceeds . .					
5		Royalties . . . . .					
6a		Gross rents	(i) Real	(ii) Personal			
		b	Less rental expenses				
		c	Rental income or (loss)				
		d	Net rental income or (loss) . . . . .				
7a		Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
		b	Less cost or other basis and sales expenses				
		c	Gain or (loss)				
		d	Net gain or (loss) . . . . .	214,809			214,809
8a		Gross income from fundraising events (not including \$ 27,747 of contributions reported on line 1c) See Part IV, line 18 . . . . .					
		a	17,533				
		b	Less direct expenses . . . . .	b	38,813		
c		Net income or (loss) from fundraising events . . .		-21,280			-21,280
9a		Gross income from gaming activities See Part IV, line 19 . . . . .					
		a					
		b	Less direct expenses . . . . .	b			
c		Net income or (loss) from gaming activities . . .					
10a		Gross sales of inventory, less returns and allowances . . . . .					
	a						
	b	Less cost of goods sold . . . . .	b				
	c	Net income or (loss) from sales of inventory . . .					
Miscellaneous Revenue		Business Code					
11a							
	b						
	c						
	d	All other revenue . . . . .					
	e	Total. Add lines 11a-11d . . . . .					
12	Total revenue. See Instructions . . . . .		12,562,541	0	0	754,334	

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).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(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.	11,303,725	11,303,725		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22.				
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.	131,071		111,410	19,661
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.	61,156		55,040	6,116
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).				
9	Other employee benefits.	11,007		11,007	
10	Payroll taxes.	16,478		16,478	
11	Fees for services (non-employees):				
a	Management.				
b	Legal.				
c	Accounting.	15,725		15,725	
d	Lobbying.				
e	Professional fundraising services. See Part IV, line 17.				
f	Investment management fees.	268,994		268,994	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	4,417		4,417	
12	Advertising and promotion.	26,701		26,701	
13	Office expenses.	21,991		21,991	
14	Information technology.	8,612		8,612	
15	Royalties.				
16	Occupancy.	3,931		3,931	
17	Travel.	1,496		1,496	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings.	18,817		18,817	
20	Interest.	27		27	
21	Payments to affiliates.				
22	Depreciation, depletion, and amortization.	8,523		8,523	
23	Insurance.	2,358		2,358	
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	SPECIAL ACTIVITIES EXP	252,375			252,375
b	AUTO EXPENSES	10,951		10,951	
c	MINOR EQUIPMENT	4,539		4,539	
d	DUES & SUBSCRIPTIONS	2,793		2,793	
e	All other expenses	10,243		10,243	
25	Total functional expenses. Add lines 1 through 24e.	12,185,930	11,303,725	604,053	278,152
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

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

☐

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing . . . . .			100	1	100
	2	Savings and temporary cash investments . . . . .			2,127,511	2	3,197,750
	3	Pledges and grants receivable, net . . . . .			262,909	3	290,216
	4	Accounts receivable, net . . . . .				4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L . . . . .				5	
	6	Loans and other 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) Complete Part II of Schedule L . . . . .				6	
	7	Notes and loans receivable, net . . . . .				7	
	8	Inventories for sale or use . . . . .				8	
	9	Prepaid expenses and deferred charges . . . . .				9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	42,612	9,174	10c	651
	b	Less accumulated depreciation . . . . .	10b	41,961			
	11	Investments—publicly traded securities . . . . .			18,827,295	11	20,245,582
	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	Total assets. Add lines 1 through 15 (must equal line 34) . . . . .			21,226,989	16	23,734,299	
Liabilities	17	Accounts payable and accrued expenses . . . . .			13,588	17	13,749
	18	Grants payable . . . . .				18	
	19	Deferred revenue . . . . .				19	
	20	Tax-exempt bond liabilities . . . . .				20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D . . . . .				21	
	22	Loans and other 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 . . . . .				23	
	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 . . . . .			2,448,923	25	3,297,486
	26	Total liabilities. Add lines 17 through 25 . . . . .			2,462,511	26	3,311,235
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets . . . . .			18,576,391	27	20,188,587
	28	Temporarily restricted net assets . . . . .			188,087	28	234,477
	29	Permanently restricted net assets . . . . .				29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.						
	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	Total net assets or fund balances . . . . .			18,764,478	33	20,423,064
	34	Total liabilities and net assets/fund balances . . . . .			21,226,989	34	23,734,299

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	12,562,541
2	Total expenses (must equal Part IX, column (A), line 25) . . . . .	2	12,185,930
3	Revenue less expenses Subtract line 2 from line 1 . . . . .	3	376,611
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . . .	4	18,764,478
5	Net unrealized gains (losses) on investments . . . . .	5	1,235,585
6	Donated services and use of facilities . . . . .	6	
7	Investment expenses . . . . .	7	
8	Prior period adjustments . . . . .	8	
9	Other changes in net assets or fund balances (explain in Schedule O) . . . . .	9	46,390
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	20,423,064

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
2c	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	Yes	
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?		No
3b	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		

SCHEDULE A  
(Form 990 or 990EZ)

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

2012

Open to Public Inspection

Name of the organization  
THE LUZERNE FOUNDATION

Employer identification number  
23-2765498

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<sup>1</sup>/<sub>3</sub>% 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<sup>1</sup>/<sub>3</sub>% 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 to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h  

a

☐

Type I 

b

☐

Type II 

c

☐

Type III - Functionally integrated 

d

☐

Type III - Non-functionally integrated
- 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 it 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?  

(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)
- |          | Yes | No |
|----------|-----|----|
| 11g(i)   |     |    |
| 11g(ii)  |     |    |
| 11g(iii) |     |    |
- | (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 col (i) listed in your governing document? |    | (v) Did you notify the organization in col (i) of your support? |    | (vi) Is the organization in col (i) organized in the U S ? |    | (vii) Amount of monetary support |
|------------------------------------|----------|----------------------------------------------------------------------------------------------|------------------------------------------------------------------------|----|-----------------------------------------------------------------|----|------------------------------------------------------------|----|----------------------------------|
|                                    |          |                                                                                              | Yes                                                                    | No | Yes                                                             | No | Yes                                                        | No |                                  |
|                                    |          |                                                                                              |                                                                        |    |                                                                 |    |                                                            |    |                                  |
|                                    |          |                                                                                              |                                                                        |    |                                                                 |    |                                                            |    |                                  |
| Total                              |          |                                                                                              |                                                                        |    |                                                                 |    |                                                            |    |                                  |
- For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990EZ.

Cat No 11285F

Schedule A (Form 990 or 990-EZ) 2012

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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	6,637,682	7,514,474	13,318,257	11,311,025	11,808,207	50,589,645
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	6,637,682	7,514,474	13,318,257	11,311,025	11,808,207	50,589,645
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)						30,357,466
6 Public support. Subtract line 5 from line 4						20,232,179

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	6,637,682	7,514,474	13,318,257	11,311,025	11,808,207	50,589,645
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	333,632	299,911	353,634	503,245	560,805	2,051,227
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 )	713	100				813
11 Total support (Add lines 7 through 10)						52,641,685
12 Gross receipts from related activities, etc (see instructions)					12	83,386
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage		
14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	38 430 %
15 Public support percentage for 2011 Schedule A, Part II, line 14	15	43 330 %
16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
b 33 1/3% support test—2011. 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 stop here. The organization qualifies as a publicly supported organization ▶		
17a 10%-facts-and-circumstances test—2012. 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 stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶		
b 10%-facts-and-circumstances test—2011. 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 stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶		

Part IIISupport 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 year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage		
15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2012. 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—2011. 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 ▶		



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

Facts And Circumstances Test

Explanation

SCHEDULE D  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Supplemental Financial Statements

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization  
THE LUZERNE FOUNDATION

Employer identification number  
23-2765498

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	78	188
2 Aggregate contributions to (during year)	11,005,450	827,757
3 Aggregate grants from (during year)	9,719,175	1,584,550
4 Aggregate value at end of year	9,512,127	13,926,081
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?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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)  
☐ Preservation of land for public use (e g , recreation or education) ☐ Preservation of an historically important land area  
☐ Protection of natural habitat ☐ Preservation of a certified historic structure  
☐ 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

a Total number of conservation easements

b Total acreage restricted by conservation easements

c Number of conservation easements on a certified historic structure included in (a)

d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

	Held at the End of the Year
2a	
2b	
2c	
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 XIII, 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.

1a 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 XIII, 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 XIII

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 XIII and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

☐

Part V

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

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance	18,852,254	19,106,188	11,244,932	8,855,804	11,029,376
b Contributions	680,125	770,826	6,665,380	583,801	1,382,285
c Net investment earnings, gains, and losses	2,169,489	53,620	1,775,504	2,346,563	-2,980,480
d Grants or scholarships	977,262	844,237	394,216	363,887	330,844
e Other expenditures for facilities and programs	120,000	60,000	67,418	85,000	132,335
f Administrative expenses	258,778	174,143	117,994	92,349	112,198
g End of year balance	20,345,828	18,852,254	19,106,188	11,244,932	8,855,804

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

100 000 %

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

3a(i)

Yes

No

(ii) related organizations

3a(ii)

Yes

No

b

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

3b

4

Describe in Part XIII 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				
b Buildings				
c Leasehold improvements		9,349	9,210	139
d Equipment		33,263	32,751	512
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				651

Schedule D (Form 990) 2012



Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return				
1	Total revenue, gains, and other support per audited financial statements . . . . .		1	13,665,553
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains on investments . . . . .	2a	1,235,585	
b	Donated services and use of facilities . . . . .	2b	25,000	
c	Recoveries of prior year grants . . . . .	2c		
d	Other (Describe in Part XIII ) . . . . .	2d	46,390	
e	Add lines 2a through 2d . . . . .		2e	1,306,975
3	Subtract line 2e from line 1 . . . . .		3	12,358,578
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 XIII ) . . . . .	4b	203,963	
c	Add lines 4a and 4b . . . . .		4c	203,963
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12 ) . . . . .		5	12,562,541

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return				
1	Total expenses and losses per audited financial statements . . . . .		1	12,006,967
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities . . . . .	2a	25,000	
b	Prior year adjustments . . . . .	2b		
c	Other losses . . . . .	2c		
d	Other (Describe in Part XIII ) . . . . .	2d	-203,963	
e	Add lines 2a through 2d . . . . .		2e	-178,963
3	Subtract line 2e from line 1 . . . . .		3	12,185,930
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 XIII ) . . . . .	4b		
c	Add lines 4a and 4b . . . . .		4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 ) . . . . .		5	12,185,930

Part XIII 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, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X, LINE 2	THE FOUNDATION ACCOUNTS FOR UNCERTAINTY IN INCOME TAXES BY PRESCRIBING A RECOGNITION THRESHOLD OF MORE-LIKELY-THAN-NOT TO BE SUSTAINED UPON EXAMINATION BY THE APPROPRIATE TAXING AUTHORITY. MEASUREMENT OF THE TAX UNCERTAINTY OCCURS IF THE RECOGNITION THRESHOLD HAS BEEN MET. MANAGEMENT DETERMINED THAT THERE WERE NO TAX UNCERTAINTIES THAT MET THE RECOGNITION THRESHOLD IN 2012. THE FOUNDATION'S FEDERAL FORM 990 "RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX" FOR YEARS PRIOR TO 2009 ARE NO LONGER SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE.
PART XI, LINE 2D - OTHER ADJUSTMENTS		CHANGE IN VALUE OF REMAINDER TRUST 46,390
PART XI, LINE 4B - OTHER ADJUSTMENTS		INVESTMENT INCOME (NETTED WITH EXPENSES ON F/S) 225,243 SPECIAL EVENTS EXPENSES -21,280
PART XII, LINE 2D - OTHER ADJUSTMENTS		INVESTMENT INCOME (NETTED WITH EXPENSES ON F/S) - 225,243 SPECIAL EVENTS EXPENSES 21,280

SCHEDULE G  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Supplemental Information Regarding  
Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Form 990-EZ filers are not required to complete this part.  
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public  
Inspection

Name of the organization  
THE LUZERNE FOUNDATION

Employer identification number  
23-2765498

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a☐ Mail solicitations

b☐ Internet and email solicitations

c☐ Phone solicitations

d☐ In-person solicitations

e☐ Solicitation of non-government grants

f☐ Solicitation of government grants

g☐ Special fundraising events
- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☐ Yes☐ No
- b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total . . . . . ▶						

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

.....

.....

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		ANNUAL MTG & RECEPTION (event type)	ANNUAL GOLF TOURNAMENT (event type)	(total number)	(add col (a) through col (c))
Revenue	1	Gross receipts . . . .	2,260	43,020	45,280
	2	Less Contributions . .	2,000	25,747	27,747
	3	Gross income (line 1 minus line 2) . . . .	260	17,273	17,533
Direct Expenses	4	Cash prizes . . . .			
	5	Noncash prizes . .	195		195
	6	Rent/facility costs . .	4,404	10,861	15,265
	7	Food and beverages .	3,479	5,158	8,637
	8	Entertainment . . . .	4,242		4,242
	9	Other direct expenses .	9,220	1,254	10,474
	10	Direct expense summary Add lines 4 through 9 in column (d) . . . . . ▶			(38,813)
	11	Net income summary Combine line 3, column (d), and line 10 . . . . . ▶			-21,280

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1	Gross revenue . . . . .			
Direct Expenses	2	Cash prizes . . . . .			
	3	Non-cash prizes . . . .			
	4	Rent/facility costs . . . .			
	5	Other direct expenses . . .			
	6	Volunteer labor . . . .	<div><div>Yes</div><div>No</div></div>	<div><div>Yes</div><div>No</div></div>	<div><div>Yes</div><div>No</div></div>
	7	Direct expense summary Add lines 2 through 5 in column (d) . . . . . ▶			
	8	Net gaming income summary Combine lines 1 and 7 in column (d) . . . . . ▶			

9 Enter the state(s) in which the organization operates gaming activities \_\_\_\_\_

a Is the organization licensed to operate gaming activities in each of these states? . . . . . 

Yes

No

b If "No," explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? . . . . . 

Yes

No

b If "Yes," explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No

**12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

**13** Indicate the percentage of gaming activity operated in

<b>a</b> The organization's facility	<b>13a</b>	
<b>b</b> An outside facility	<b>13b</b>	

**14** Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name  .....

Address  .....

**15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

**b** If "Yes," enter the amount of gaming revenue received by the organization  \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party  \$ \_\_\_\_\_

**c** If "Yes," enter name and address of the third party

Name  .....

Address  .....

**16** Gaming manager information

Name  .....

Gaming manager compensation  \$ .....

Description of services provided  .....

☐ Director/officer ☐ Employee ☐ Independent contractor

**17** Mandatory distributions

**a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

**b** Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year  \$ \_\_\_\_\_

**Part IV Supplemental Information.** Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Identifier	Return Reference	Explanation
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Schedule I  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Name of the organization  
THE LUZERNE FOUNDATION

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

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

OMB No 1545-0047

2012

Open to Public  
Inspection

Employer identification number  
23-2765498

Part I General Information on Grants and Assistance

1

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? . . . . .

☒ Yes ☐ No

2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

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. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
See Additional Data Table							

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 . . . . .

▶

**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

Part IV Supplemental Information.		
Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information		
Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 WITH EACH GRANT REQUEST, THE LUZERNE FOUNDATION EXERCISES ITS DUE DILIGENCE TO ASSURE COMPLIANCE WITH IRS STANDARDS THE FOUNDATION REQUESTS AN IRS DETERMINATION LETTER REGARDING EXEMPT STATUS EACH NONPROFIT ORGANIZATION'S 501(C)(3) STATUS AND EIN IS VERIFIED THROUGH THE USE OF GUIDESTAR AND CHARITY CHECK, ONLINE RESOURCES SUITED FOR THAT PURPOSE ADDITIONAL RESEARCH IS DONE VIA THE RECIPIENT ORGANIZATION'S WEBSITE OR VIA DIRECT CONTACT WITH THE EXECUTIVE DIRECTOR OR CEO OF THE ORGANIZATION THE GOAL IS TO OBTAIN INFORMATION RELATING TO MISSION AND PURPOSE SO THAT WE ASCERTAIN THAT THE DONORS' CHARITABLE INTENTS ARE BEING UPHELD

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
ALLIED SERVICES FOUNDATION100 ABINGTON EXECUTIVE PARK CLARKS SUMMIT, PA 18411	23-2523682	501(C)(3)	25,500				GENERAL SUPPORT
ALPHA RELIEFPO BOX 63343 COLORADO SPRINGS, CO 80962	84-1532991	501(C)(3)	5,000				NORTH KOREA PROJECTS
ALZHEIMER'S ASSOCIATION OF GREATER PA71 NORTH FRANKLIN STREET WILKESBARRE, PA 18701	23-2242337	501(C)(3)	10,375				GENERAL SUPPORT
AMERICAN CANCER SOCIETYP.O BOX 2306 HAZLETON, PA 18201	25-1798733	501(C)(3)	7,700				MAKING A DIFFERENCE FUND
BACK MOUNTAIN HARVEST ASSEMBLY340 CARVENTON ROAD TRUCKSVILLE, PA 18708	23-2794476	501(C)(3)	25,000				GENERAL SUPPORT
BACK MOUNTAIN RECREATION INCPO BOX 244 LEHMAN, PA 18627	23-2986991	501(C)(3)	400,000				PROGRAM SUPPORT
BEAR CREEK CAMPP.O BOX 278 BEAR CREEK, PA 18602	23-1726320	501(C)(3)	12,000				GENERAL SUPPORT
BEAR CREEK TOWNSHIPPO BOX 156 BEAR CREEK, PA 18602	23-1893152	501(C)(3)	141,141				FIRE TRUCK PROCUREMENT
BEAR CREEK VOLUNTEER HOSE COMPANYPO BOX 156 BEAR CREEK, PA 18602	23-6295911	501(C)(3)	40,500				NEW EQUIPMENT
BETHANY CHRISTIAN SERVICES7627 OLD YORK ROAD ELKINS PARK, PA 19027	31-1196722	501(C)(3)	35,000				SAFE FAMILIES FOR CHILDREN PROGRAM (MATCHING CHALLENGE)
BLOOMSBURG CHRISTIAN CHURCH107 DEUSSEN DRIVE BLOOMSBURG, PA 17815	23-2155852	501(C)(3)	8,000				DEACON'S CLOSET
BRIDGE42 CHURCH107 CALVIN HEIGHTS MORGANTON, NC 28655	23-2765498	501(C)(3)	18,000				NEW CHURCH SIGN, \$8,000 FOR MISSIONS, REMAINDER FOR GENERAL SUPPORT
BROTHERS IN ARMS FOUNDATION3200 CONGRESS AVENUE STE 203 BOYTON BEACH, FL 33426	27-0962626	501(C)(3)	24,000				GENERAL FUND
CALVARY CHAPEL OF MELBOURNE2955 MINTON ROAD WEST MELBOURNE, FL 32904	59-3163220	501(C)(3)	295,000				PASTOR SIEGE IN HAITI-ORPHANAGE MAINTENANCE, GENERATOR, AIR CONDITIONER, ETC
CAMP ABRACADABRAPO BOX 1536 WILKESBARRE, PA 18703	25-1825116	501(C)(3)	5,000				ANNUAL SUPPORT
CAMP ORCHARD HILLRR 3 BOX 275 DALLAS, PA 18612	23-2265574	501(C)(3)	36,800				CHRISTMAS AT CAMP
CARE AND CONCERN MINISTRIES35 WILLIAM STREET PITTSTON, PA 18640	24-0837323	501(C)(3)	15,500				KID'S CLOTHES CLOSET
CARE NET321 MAIN STREET C NEWPORT NEWS, VA 23601	54-1382723	501(C)(3)	50,000				LUZERNE FOUNDATION GRANT
CASTLE AUDITORIUM COMMUNITY ARTS CENTER 700 NORTH WYOMING STREET HAZLETON, PA 18201	26-3358611	501(C)(3)	120,000				PROGRAM SUPPORT
CATHOLIC YOUTH CENTER OF WILKES-BARRE36 SOUTH WASHINGTON STREET WILKESBARRE, PA 18701	23-7227221	501(C)(3)	16,100				GENERAL SUPPORT
CCAI311 MASSACHUSETTS AVENUE NE WASHINGTON, DC 20002	54-2035617	501(C)(3)	8,600				LOGOS FUND GRANT
CELEBRATION CENTER FOR CONSCIENCE LIVING 5820 OBERLIN DRIVE 108 SAN DIEGO, CA 92121	52-2337798	501(C)(3)	77,634				DECEMBER 2012 GENERAL SUPPORT
CENTER FOR CANCER WELLNESS - CANDY'S PLACE190 WELLES STREET STE 120 FORTY FORT, PA 18704	23-2973385	501(C)(3)	5,500				GENERAL SUPPORT
CENTER FOR LANDSCAPE DESIGN8 SIDEHILL TRI SUGARLOAF, PA 18249	30-0479141	501(C)(3)	6,000				GROWING MARKET INITIATIVE
CHRISTA MINISTRIES 19303 FREMONT AVENUE NORTH SEATTLE, WA 98133	91-6012289	501(C)(3)	120,000				DESIGNATED FOR THE CHRISTIAN VETERINARY MISSION-RHODA BEUTLER/HAITI
COMMISSION ON ECONOMIC OPPORTUNITY PO BOX 1127 WILKESBARRE, PA 18703	23-1693093	501(C)(3)	21,500				VETERAN'S ASSISTANCE PROGRAM
COMMONWEALTH MEDICAL COLLEGE150 NORTH WASHINGTON AVENUE SCRANTON, PA 18503	24-0812968	501(C)(3)	51,000				FALL 2012 SCHOLARSHIP SUPPORT
COMMUNITY SERVICES FOR SIGHT1201 NORTH CHURCH STREET STE 409 HAZLE TWP, PA 18202	24-0795973	501(C)(3)	5,250				EYE CARE FOR YOU VISION PROGRAM
CONCERNED PARENTS OF THE HAZLETON AREA100 WEST BROAD STREET SUITE 114 HAZLETON, PA 18201	22-2608179	501(C)(3)	8,200				PROGRAM SUPPORT
CONSTANCE BELL LIBRARY FUND140 MAIN STREET 2ND FLOOR LUZERNE, PA 18704	23-2765498	501(C)(3)	280,870				PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
CONVOY OF HOPE330 SOUTH PATTERSON SPRINGFIELD,MO 65802	68-0051386	501(C)(3)	260,000				SUPPORT
COVENANT COLLEGE14049 SCENIC HIGHWAY LOOKOUT MOUNTAIN,GA 80550	43-0719506	501(C)(3)	500,000				CAPITAL CAMPAIGN-FINAL GIFT
CRAM WORLDWIDE INC601 LINCLON AVENUE BEDFORD,IN 47421	35-2047209	501(C)(3)	5,000				GENERAL SUPPORT
CROSS CREEK COMMUNITY CHURCH370 CARVERTON ROAD TRUCKSVILLE,PA 18708	23-3011345	501(C)(3)	10,000				\$7,000 FOR FOREIGN MISSIONS, \$3,000 FOR BENEVOLENCE
CURE INTERNATIONAL701 BOSLER AVENUE LEMOYNE,PA 17043	58-2248383	501(C)(3)	203,000				MATCHING GRANT FOR PROGRAM SUPPORT
DALLAS FDN FOR EXCELLENCE IN EDUCATION1000 WYOMING AVENUE FORTY FORT,PA 18704	75-2418432	501(C)(3)	5,250				TRAINING ROOM PROJECT FOR DALLAS HIGH SCHOOL
DAVIS & ELKINS COLLEGE 100 CAMPUS DRIVE ELKINS PARK,WV 26241	55-0357021	501(C)(3)	64,493				WILLIAMS S ROBBINS CHARITABLE FUND GRANT
DIAMOND CITY PARTNERSHIPPO BOX 5340 PUBLIC SQUARE WILKESBARRE,PA 18701	23-3094874	501(C)(3)	78,764				LOGOS FUND FOR DIAMOND CITY GRANT
DIOCESE OF SCRANTON 400 WYOMING AVENUE SCRANTON,PA 18503	24-0798640	501(C)(3)	6,950				ST THERESE'S CHURCH SHAVERTOWN
DISASTER ACCOUNTABILITY PROJECT35 ELIZABETH ROAD HARTFORD,CT 06053	26-1270154	501(C)(3)	30,000				PROGRAM SUPPORT
ECHOCUBA17391 DURRANCE ROAD NORTH FORT MYERS,FL 33917	23-7275283	501(C)(3)	255,000				GENERAL SUPPORT
EPARCHY OF SAINT MARON 109 REMSEN STREET BROOKLYN,NY 11201	11-3233189	501(C)(3)	10,000				SUPPORT
EPIPHANY FELLOWSHIP 1755 NORTH 13TH STREET LOWER LEVEL BOX 167 PHILADELPHIA,PA 19122	20-2422341	501(C)(3)	15,000				GENERAL SUPPORT
EVERY GENERATIONS MINISTRIESPO BOX 891179 TEMECULA,CA 92589	84-1253004	501(C)(3)	40,000				ROMAINIA, BELARUS AND UKRAINE SUMMER CAMPS
EVERY NATION MINISTRIESPO BOX 94564 NORTH LITTLE ROCK,AR 72190	20-1204782	501(C)(3)	5,000				LOGOS FUND GRANT
EXODUS CRY714 MAIN STREET GRANDVIEW,MO 64030	26-2317116	501(C)(3)	30,000				GENERAL SUPPORT
EXPLORATIONS IN ANTIQUITY CENTERPO BOX 3900 LAGRANGE,GA 30241	20-3514441	501(C)(3)	20,000				GENERAL SUPPORT
FM KIRBY CENTER FOR THE PERFORMING ARTS71 PUBLIC SQUARE WILKESBARRE,PA 18701	22-2697004	501(C)(3)	233,798				25TH ANNIVERSARY GIFT TO THE COMMUNITY
FAMILY SERVICE ASSOCIATION31 WEST MARKET STREET WILKESBARRE,PA 18701	24-0795415	501(C)(3)	31,613				ANNUAL CAMPAIGN
FAR REACHING MINISTRIES PMB 137 40335 WINCHESTER ROAD TEMECULA,CA 92591	33-0776828	501(C)(3)	35,000				GENERAL SUPPORT
FISHHOOK INTERNATIONALPO BOX 910691 LEXINGTON,KY 40591	61-0620425	501(C)(3)	60,000				VARIOUS MINISTRIES IN INDIA
FOOD FOR THE HUNGRY 1224 EAST WASHINGTON STREET PHOENIX,AZ 85034	95-2680390	501(C)(3)	25,000				DESIGNATED TOWARDS THE MENTAWAI ISLANDS FUNDING GAP
FOUNDATION FOR FREE ENTERPRISE EDUCATION 3076 WEST 12TH STREET ERIE,PA 16505	25-1394365	501(C)(3)	7,040				PA FREE ENTERPRISE WEEK
FOUNDATIONS IN CHRISTIAN COUNSELING HC 2 2043 BROADHEADSVILLE,PA 18322	11-3675939	501(C)(3)	5,000				GENERAL FUND
GENERATE HOPE INC4025 CAMINO DEL RIO SUITE 300 SAN DIEGO,CA 92108	26-3405689	501(C)(3)	20,000				PROGRAM SUPPORT
GOALS FOUNDATION30 RELIANCE DRIVE WILKESBARRE,PA 18702	25-1885238	501(C)(3)	15,000				YOUTH HOCKEY PROGRAM
GOD'S WORLD PUBLICATIONSPO BOX 20002 ASHEVILLE,NC 28802	56-0538016	501(C)(3)	48,000				WORLD-COMPASSION AWARDS
GRACE EPISCOPAL CHURCH30 BUTLER STREET KINGSTON,PA 18704	24-0816493	501(C)(3)	28,700				MEMORIAL GARDEN PROJECT
GREATER WILKES-BARRE YMCA10 NORTH MAIN STREET PITTSTON,PA 18640	24-0796039	501(C)(3)	11,150				2012 LEADERSHIP DINNER
HABITAT FOR HUMANITY PO BOX 2208 WILKESBARRE,PA 18703	23-2604510	501(C)(3)	15,000				GENERAL PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
HANDS AND FEET PROJECT PO BOX 682105 FRANKLIN,TN 37068	20-1368997	501(C)(3)	100,000				FLOOD WALL & IKNODO FOUNDATION
HANNAH'S HOPE PREGNANCY SHELTER1067 EXETER AVENUE EXETER,PA 18643	26-4448789	501(C)(3)	51,124				PROGRAM SUPPORT
HARMONIOUS ENDEAVORS 100 WEST MARKET STREET DANVILLE,PA 17821	75-3019918	501(C)(3)	17,000				\$5,000 TRACK INITIATIVE
HEAVEN'S FAMILYPO BOX 12854 PITTSBURGH,PA 15241	16-1739329	501(C)(3)	30,000				DISASTER RELIEF
HIGH POINT BAPTIST CHURCH1919 MOUNTAIN ROAD LARKSVILLE,PA 18651	24-0806062	501(C)(3)	10,000				\$7,000 FOR FOREIGN MISSION, \$3,000 FOR BENEVOLENCE
HOUSE OF HIS CREATION 91 NEWPORT PIKE STE 203 GAP,PA 17524	23-1910987	501(C)(3)	25,000				PROGRAM SUPPORT
HOUSE OF REFUGEPO BOX 1371 MORGANTON,NC 28680	20-8977376	501(C)(3)	20,000				PROGRAM SUPPORT
HUNTS FOR THE HEALING INC140 MAIN STREET 2ND FLOOR LUZERNE,PA 18709	23-2765498	501(C)(3)	19,000				GENERAL SUPPORT
ICMOVEMENT2059 EAST HAGERT STREET PHILADELPHIA,PA 19125	14-1966666	501(C)(3)	60,000				SUPPORT
INTERNATIONAL JUSTICE MISSIONPO BOX 58147 WASHINGTON,DC 20037	54-1722887	501(C)(3)	90,000				CAMBODIA
INVISIBLE CHILDREN INC 1600 NATIONAL AVENUE SAN DIEGO,CA 92113	54-2164338	501(C)(3)	10,000				PROGRAM SUPPORT
JEWISH COMMUNITY CENTER60 SOUTH RIVER STREET WILKESBARRE,PA 18702	24-0795437	501(C)(3)	5,375				FRED AND MARGOT SCHWAGER ENDOWMENT FUND
JEWISH FEDERATION OF GREATER WILKES-BARRE60 SOUTH RIVER STREET WILKESBARRE,PA 18702	24-0796936	501(C)(3)	10,250				2012 FRIENDS OF THE JEWISH COMMUNITY
KEYSTONE COLLEGE & JENNIFER LYNN PENCEKPO BOX 50 LAPLUME,PA 18440	24-0795441	501(C)(3)	6,250				2011-2012 SCHOLARSHIP SUPPORT
KIDS FOR THE KINGDOMPO BOX 85 GRATON,CA 95444	68-0421846	501(C)(3)	323,000				ZAMBIA
KING'S COLLEGE AND JAMIE SCARANTINO133 NORTH RIVER STREET WILKESBARRE,PA 18711	24-0804602	501(C)(3)	35,509				SCHOLARSHIP SUPPORT
KORE FOUNDATION695 NASHVILLE PIKE 101 GALLATIN,TN 37066	26-3196544	501(C)(3)	700,000				GENERAL SUPPORT
LIFE CHURCH1401 EAST CEDAR STREET ALLENTOWN,PA 18109	22-3110904	501(C)(3)	538,000				\$30,000 HAITIAN FIRE HOUSE, \$20,000 OUTDOOR CINEMA EQUIPMENT
LOVE A CHILD INCPO BOX 1972 MERRITT ISLAND,FL 32952	29-2677230	501(C)(3)	265,000				SUPPORT FOR MISSIONARY FAMILIES \$3,000, \$50,000 00 GENERAL SUPPORT
LOVE LINK INC7654 CYPRESS ROAD FORT WORTH,TX 76180	75-2556797	501(C)(3)	30,000				EL SALVADOR-WHERE MOST NEEDED
LOXAFAMOSITY MINISTRIES INCPO BOX 9291 MOSCOW,ID 83843	52-2400448	501(C)(3)	15,000				PROGRAM SUPPORT
LUZERNE COUNTY HISTORICAL SOCIETY49 SOUTH FRANKLIN STREET WILKESBARRE,PA 18701	24-0811758	501(C)(3)	34,541				PROGRAM SUPPORT
MANA NUTRITIVE AID344 WEST JOHN STREET MATTHEWS,NC 28105	27-0165743	501(C)(3)	5,000				LOGOS FUND GRANT
MCADOO CATHOLIC ELEMENTARY SCHOOL35 NORTH CLEVELAND STREET MCADOO,PA 18237	23-2091672	501(C)(3)	5,000				SUPPORT
MILES FOR MICHAEL FAMILY ASSISTANCE PROJECT140 MAIN STREET 2ND FLOOR LUZERNE,PA 18709	23-2765498	501(C)(3)	28,250				TRANSPORTATION SUPPORT FOR CANCER PATIENTS
MISERICORDIA UNIVERSITY301 LAKE STREET DALLAS,PA 18612	24-0795406	501(C)(3)	93,445				FIRST LADY'S GARDEN
MISSION PROJECTS FELLOWSHIPPO BOX 209 TELFORD,PA 18969	23-6430639	501(C)(3)	15,000				PROJECT 548 AND 549
MONADNOCK BIBLE CONFERENCE257 DUBLIN ROAD JAFFREY CENTER,NH 03452	02-0268537	501(C)(3)	60,000				HAITI ORPHANAGE
MSNY414 WEST 51ST STREET LOWER LEVEL NEWYORK,NY 10019	20-0490140	501(C)(3)	20,000				PHILLY TITHE AND OFFERING
MT GILEAD CAMP13485 GREEN VALLEY ROAD SEBASTOPOL,CA 95472	23-1673125	501(C)(3)	50,000				LLOYD'S LODGE

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NEPA PHILHARMONIC4101 BIRNEY AVENUE MOOSIC,PA 18507	23-1855655	501(C)(3)	26,160				SUPPORT- BE INSTRUMENTAL CAMPAIGN
NEPA VETERANS MULTICARE ALLIANCE COURTHOUSE SQUARE TOWERS 216 NORTH RIVER STREET WILKESBARRE,PA 18702	61-1578673	501(C)(3)	6,772				ASSISTANCE TO VETERANS
NORTHMORELAND TWP FIRE COMPANY305 SCHOOLHOUSE ROAD TUNKHANNOCK,PA 18657	23-2204025	501(C)(3)	5,000				ANNUAL SUPPORT
ODD FELLOWS CEMETARY ASSOCIATIONPO BOX 296 DANVILLE,PA 17821	24-0619640	501(C)(3)	8,000				MAINTENANCE
ORPHAN INSTITUTE6723 WHITTIER AVENUE SUITE 202 MCCLEAN,VA 22101	26-4339070	501(C)(3)	12,500				GENERAL SUPPORT
OSTERHOUT FREE LIBRARY 71 SOUTH FRANKLIN STREET WILKESBARRE,PA 18701	24-0795971	501(C)(3)	13,125				SUPPORT
PACIFIC BRIDGE MINISTRY 2020 FIELDSTONE PARKWAY FRANKLIN,TN 37069	20-2923854	501(C)(3)	5,000				LOGOS FUND GRANT
PARKER HILL COMMUNITY CHURCH607 NORTH ABINGTON ROAD CLARKS SUMMIT,PA 18411	23-2601749	501(C)(3)	580,000				2013 CHURCH PLANT IN WILKES-BARRE
PARTNERS INTERNATIONAL1117 EAST WESTVIEW COURT SPOKANE,WA 99218	94-1393427	501(C)(3)	45,000				EMERGENCY RELIEF FOR MALI
PEOPLE INTERNATIONAL 140 MAIN STREET 2ND FLOOR LUZERNE,PA 18709	24-0796039	501(C)(3)	10,000				LOGOS FUND GRANT
PITTSTON YMCA10 NORTH MAIN STREET PITTSTON,PA 18640		501(C)(3)	6,550				IN MEMORY OF JAMES L LUKATCH
POCONO COMMUNITY CHURCH2770 MEMORIAL BOULEVARD TOBYHANNA,PA 18466	23-2765498	501(C)(3)	130,000				UNSTOPPABLE CAMPAIGN
PROVIDING HOPE MINISTRIESPO BOX 2013 KINGSTON,PA 18704	23-2070710	501(C)(3)	47,000				LUZERNE COUNTY CORRECTION FACILITIES
QUIET REFLECTIONS RETREAT730 ROCK BOULEVARD BURNSVILLE,NC 28714	65-0013953	501(C)(3)	30,000				LOGOS FUND GRANT
RESTAVEK FREEDOM FOUNDATION11160 KENWOOD ROAD CINCINNATI,OH 45242	20-8334578	501(C)(3)	474,000				GENERAL SUPPORT
RIVERFRONT PARKS COMMITTEE182 NORTH FRANKLIN STREET WILKESBARRE,PA 18701	23-2824928	501(C)(3)	35,502				RIVER COMMON PROGRAMMING SEASON
ROCK SOLID ACADEMYPO BOX 87 DALLAS,PA 18612	27-2392471	501(C)(3)	97,700				PROGRAM SUPPORT
RURAL HEALTH CORPORATION OF NEPA 1084 ROUTE 315 WILKESBARRE,PA 18702	23-1729755	501(C)(3)	5,000				SHICKSHINNY MEDICAL- MEDICAL SUPPLIES AND/OR DURABLE MEDICAL EQUIPMENT
THE SALVATION ARMY OF WYOMING VALLEY17 SOUTH PENNSYLVANIA AVENUE WILKESBARRE,PA 18701	13-5562351	501(C)(3)	9,900				CHRISTMAS CAMPAIGN
SANIBEL SEA SCHOOL3333 SANIBEL-CAPTIVA ROAD SANIBEL,FL 33957	59-1205087	501(C)(3)	120,000				BUILDING CAMPAIGN
SHAOHANNAH'S HOPEPO BOX 647 FRANKLIN,TN 37064	32-0011220	501(C)(3)	125,000				CHARLOTTE RADIO MATCH
SPRUCE HILL CHRISTIAN SCHOOL4115 BALTIMORE AVENUE PHILADELPHIA,PA 19104	23-2073123	501(C)(3)	140,000				STAFF ENHANCEMENTS AND STUDENT SCHOLARSHIPS
STORM WARRIORS INTERNATIONAL27 LINDEN LANE CAMDEN,ME 04843	27-0201059	501(C)(3)	400,000				BURT AND SQUIRT PROJECT
SUMMIT ADVENTUREPO BOX 498 BASS LAKE,CA 93604	77-0199441	501(C)(3)	10,000				GENERAL SUPPORT
SUSQUEHANNA UNIVERSITY& LAUREN GAVINSKY514 UNIVERSITY AVENUE SELINGSGROVE,PA 17870	23-1353385	501(C)(3)	25,500				SCHOLARSHIP SUPPORT
SUSQUEHANNA VALLEY CENTER OF HOPE309 ELYSBURG ROAD DANVILLE,PA 17821	65-1192283	501(C)(3)	7,000				COUNSELING CENTER AND NEW SIGN
TEEN CHALLENGEPO BOX 1015 SPRINGFIELD,MO 65801	43-1353323	501(C)(3)	30,000				DESIGNATED FOR UNITED TO THE RESCUE
TEMPLE UNIVERSITY AND BRANDEN OTT1801 NORTH BROAD STREET PHILADELPHIA,PA 19122	23-1365971	501(C)(3)	7,459				SCHOLARSHIP SUPPORT
THE LANDS AT HILLSIDE FARMS65 HILLSIDE ROAD SHAVERTOWN,PA 18708	20-2975553	501(C)(3)	1,200,000				\$100,000 00 FOR MORTGAGE REDUCTION FINAL
THE VERITAS FORUM INC ONE BROADWAY 14TH FLOOR CAMBRIDGE,MA 02138	20-5616941	501(C)(3)	60,000				LOGOS FUND GRANT

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TIM TEBOW FOUNDATION 5082 EAST HAMPDEN AVENUE DENVER, CO 80222	27-4345913	501(C)(3)	5,000				LOGOS FUND GRANT
TOUCH MINISTRIES INC C/O SHAROL J STINE 417 REBECCA STREET NEW MARTINSVILLE, WV 26155	30-0600735	501(C)(3)	60,000				SUPPORT FOR HAITI
UNITARIAN UNIVERSALIST CONGREGATION OF WYO VALLEY82 SOUTH MAIN STREET WILKESBARRE,PA 18701	23-2664557	501(C)(3)	5,000				CONSTELLATION FUND GRANT
UNITED WAY OF WYOMING VALLEYWEST MARKET STREET WILKESBARRE,PA 18701	24-0831490	501(C)(3)	54,956				GENERAL SUPPORT
UNIVERSITY OF PENNSYLVANIA3451 WALNUT STREET PHILADELPHIA,PA 19104	23-1352685	501(C)(3)	25,000				JAMES E AND CONSTANCE BELL PT FUND GRANT
UNIVERSITY OF SCRANTON800 LINDEN STREET SCRANTON,PA 18510	24-0795495	501(C)(3)	6,750				2012-2013 SCHOLARSHIP SUPPORT
VALLEY WITH A HEART FAMILY ASSISTANCE PROJECT140 MAIN STREET 2ND FLOOR LUZERNE,PA 18709	23-2765498	501(C)(3)	29,092				FAMILY ASSISTANCE PROJECT
VASCULAR BIRTHMARK FOUNDATIONPO BOX 106 LATHAM,NY 12110	16-1515227	501(C)(3)	30,000				ANNUAL CONFERENCE
VISION TRUSTPO BOX 50524 COLORADO SPRINGS,CO 80949	84-1397081	501(C)(3)	5,000				PRIME SYSTEM SCHOOL-LIBERIA
VOLUNTEERS IN MEDICINE 190 NORTH PENNSYLVANIA AVENUE WILKESBARRE,PA 18701	20-3531527	501(C)(3)	42,900				GENERAL SUPPORT
WEST PITTSTON LIBRARY CORNER OF WARNER EXETER AVENUE WEST PITTSTON,PA 18643	24-0822845	501(C)(3)	8,639				PROGRAM SUPPORT
WILKES UNIVERSITY AND KAYLA EATON84 WEST SOUTH STREET WILKESBARRE,PA 18706	24-0795506	501(C)(3)	20,350				SCHOLARSHIP SUPPORT
WILKES-BARRE FAMILY YMCA40 WEST NORTHAMPTON STREET WILKESBARRE,PA 18701	24-0795638	501(C)(3)	64,340				ANNUAL FUND
WILLIAM JEANES MEMORIAL LIBRARY4051 JOSHUA ROAD LAFAYETTE HILL,PA 19444	23-7018956	501(C)(3)	95,000				LUZERNE FOUNDATION GRANT
WORLD RELIEF7 EAST BALTIMORE STREET BALTIMORE,MD 21202	23-6393344	501(C)(3)	110,000				FOR RWANDA
WYOMING SEMINARY201 NORTH SPRAGUE AVENUE KINGSTON,PA 18704	24-0795509	501(C)(3)	233,469				LEONARD AND LITA INSALACO CHARITABLE FUND
WYOMING VALLEY CHILDREN'S ASSOCIATION 1133 WYOMING AVENUE FORTY FORT,PA 18704	24-0795510	501(C)(3)	5,750				CAMPAIGN SUPPORT

SCHEDULE M  
(Form 990)

Noncash Contributions

OMB No 1545-0047

2012

Open to Public Inspection

►Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.  
► Attach to Form 990.

Name of the organization  
THE LUZERNE FOUNDATION

Employer identification number  
23-2765498

Part I

Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art . . . . .				
2 Art—Historical treasures . . . . .				
3 Art—Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .	X	11	186,042	QUOTED MARKET PRICE
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests . . . . .				
12 Securities—Miscellaneous . . . . .				
13 Qualified conservation contribution—Historic structures . . . . .				
14 Qualified conservation contribution—Other . . . . .				
15 Real estate—Residential . . . . .				
16 Real estate—Commercial . . . . .				
17 Real estate—Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ► ( )				
26 Other ►( )				
27 Other ►( )				
28 Other ► ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . .29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . .

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . .

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

Yes

No

No

Yes

Yes



Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
METHOD FOR DETERMINING NUMBER OF CONTRIBUTORS	PART I, COLUMN (B)	THE NUMBER IN PART I, COLUMN B REPRESENTS THE NUMBER OF ITEMS RECEIVED
THIRD PARTY USE	PART I, LINE 32B	THE ORGANIZATION USES INVESTMENT MANAGERS TO SELL THE PUBLICLY TRADED SECURITIES THAT ARE DONATED TO THE FOUNDATION

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization

THE LUZERNE FOUNDATION

Employer identification number

23-2765498

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	CHARLES BARBER,PRESIDENT & CEO, BOB KORJESKI,CFO,, AND EXECUTIVE COMMITTEE REVIEW THE FULL FORM 990 IN ITS ENTIRETY PRIOR TO FILING A PUBLIC INSPECTION COPY IS PROVIDED TO THE FULL BOARD OF DIRECTORS FOR REVIEW PRIOR TO THE FILING
	FORM 990, PART VI, SECTION B, LINE 12C	ANNUALLY, THE LUZERNE FOUNDATION DISTRIBUTES CONFLICTS OF INTEREST FORMS TO THE BOARD OF DIRECTORS SO THAT THE INFORMATION HELD ON FILE IS CURRENT EACH DIRECTOR, PRINCIPAL OFFICER AND MEMBER OF A COMMITTEE WITH BOARD-DELEGATED POWERS IS REQUIRED TO SIGN A STATEMENT WHICH AFFIRMS THAT THEY HAVE RECEIVED A COPY OF THE CONFLICT OF INTEREST POLICY, HAVE READ AND UNDERSTANDS THE POLICY, HAVE AGREED TO COMPLY WITH THE POLICY, UNDERSTANDS THE DUTY OF EACH OFFICER OR DIRECTOR TO MAINTAIN AND PRESERVE THE CONFIDENTIALITY OF BOARD AND COMMITTEE DISCUSSIONS AND PROTECT PRIVACY AT ALL TIMES, AND UNDERSTANDS THAT THE CORPORATION IS A CHARITABLE ORGANIZATION AND THAT TO MAINTAIN ITS TAX-EXEMPT STATUS IT MUST ENGAGE PRIMARLY IN ACTIVITIES THAT ACCOMPLISH ONE OR MORE OF ITS TAX-EXEMPT PURPOSES THESE FORMS ARE REVIEWED BY THE AUDIT AND GOVERNANCE COMMITTEES ANY CONFLICT OF INTEREST THAT IS IDENTIFIED IS REVIEWED AT THE BOARD OF DIRECTORS MEETING ON A CASE BY CASE BASIS AND IS DOCUMENTED IN THE BOARD MEETING MINUTES
	FORM 990, PART VI, SECTION B, LINE 15	ANNUAL COMPENSATION REVIEWS ARE CONDUCTED BY THE PRESIDENT & CEO, DIRECTOR OF OPERATIONS AND ADMINSTRATIVE SUPPORT STAFF THE PRESIDENT & CEO, AND THE DIRECTOR OF OPERATIONS WERE REVIEWED IN 2011 AS A MATTER OF PRACTICE, THE FOUNDATION'S EXECUTIVE COMMITTEE SETS THE PRESIDENT'S SALARY AND BENEFITS, THE PRESIDENT AND CEO THEN SET THE SUPPORT STAFF'S SALARY AND BENEFITS IN ADVANCE OF THE PRESIDENT AND CEO REVIEW, THE EXECUTIVE COMMITTEE RECEIVES A COMPREHENSIVE CEO REVIEW FORM THAT SURVEYS SEVEN KEY AREAS OF PERFORMANCE BOARD RELATIONS, STAFF PLANNING AND OVERSIGHT, PUBLIC RELATIONS AND FOUNDATION DEVELOPMENT, GRANTS MANAGEMENT, FISCAL MANAGEMENT, PERSONAL CHARACTERISTICS AND INSTITUTIONAL VISION EACH EXECUTIVE COMMITTEE MEMBER RATES THE CANDIDATE ON A SCALE OF CONSISTENTLY EXCELLENT TO BELOW EXPECTATIONS, AND IS ENCOURAGED TO PROVIDE ADDITIONAL FEEDBACK IN THE COMMENTS SECTION OF THE REVIEW FORM IN ADDITION, GENERAL OBSERVATION QUESTIONS ARE POSED TO SOLICIT FEEDBACK AND PROPOSED NEW IDEAS FOR THE FUTURE THE INFORMATION OBTAINED ON THE FORMS IS COMPILED AND DISCUSSED AMONG THE EXECUTIVE COMMITTEE MEMBERS ONCE A COLLECTIVE DECISION IS REACHED BY THE EXECUTIVE COMMITTEE, THE CHAIRMAN OF THE EXECUTIVE COMMITTEE REPORTS AND DISCUSSES THE OUTCOME WITH THE PRESIDENT AND CEO TO ASSIST IN THE DETERMINATION OF THE CEO COMPENSATION PACKAGE, ADDITIONAL MATERIALS AND HANDOUTS ARE PROVIDED THROUGH THE COUNCIL ON FOUNDATIONS, (A RESOURCE FOR COMMUNITY FOUNDATIONS AND PHILANTHROPIC ENTITIES ) THESE HANDOUTS INCLUDE COMPARABLE SALARIES FOR OTHER COMMUNITY FOUNDATIONS
	FORM 990, PART VI, SECTION C, LINE 19	GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND AUDITED FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST, IN ADDITION, A STATEMENT OF FINANCIAL POSITION IS MADE AVAILABLE IN THE ANNUAL "COMMUNITY GUIDE" OF THE FOUNDATION THE 990 IS AVAILABLE TO THE PUBLIC ON THE WEBSITE OR UPON REQUEST
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 9	CHANGE IN VALUE OF REMAINDER TRUST 46,390
	FORM 990, PART XI, LINE 2C	THE PROCESSES USED BY THE COMMITTEE THAT ASSUMES RESPONSIBILITY FOR THE OVERSIGHT OF THE AUDIT OF THE ORGANIZATION'S FINANCIAL STATEMENTS AND THE SELECTION OF AN INDEPENDENT ACCOUNTANT HAVE NOT CHANGED FROM THE PRIOR YEAR