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Form **990-PF**Department of the Treasury
Internal Revenue Service**Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation**

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

OMB No 1545-0052

2012

Open to public inspection

For calendar year 2012 or tax year beginning

, and ending

Name of foundation THE FIRST HOSPITAL FOUNDATION		A Employer identification number 23-2904262
Number and street (or P O box number if mail is not delivered to street address) 230 SOUTH BROAD STREET	Room/suite 402	B Telephone number 215-546-4290
City or town, state, and ZIP code PHILADELPHIA, PA 19102		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 39,661,545.	J Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received				N/A	
2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B					
3 Interest on savings and temporary cash investments		232.	232.		STATEMENT 1
4 Dividends and interest from securities		326,651.	632,775.		STATEMENT 2
5a Gross rents					
b Net rental income or (loss)					
6a Net gain or (loss) from sale of assets not on line 10		2,698,093.			
b Gross sales price for all assets on line 6a		15,602,092.			
7 Capital gain net income (from Part IV, line 2)			3,258,509.		
8 Net short-term capital gain					
9 Income modifications					
10a Gross sales less returns and allowances					
b Less Cost of goods sold					
c Gross profit or (loss)					
11 Other income		235,637.	45,697.		STATEMENT 3
12 Total. Add lines 1 through 11		3,260,613.	3,937,213.		
13 Compensation of officers, directors, trustees, etc.		0.	0.		0.
14 Other employee salaries and wages					
15 Pension plans, employee benefits					
16a Legal fees		2,345.	117.		2,531.
b Accounting fees		52,474.	1,624.		49,617.
c Other professional fees		64,636.	47,610.		6,431.
17 Interest			3,278.		
18 Taxes		30,500.	13,943.		0.
19 Depreciation and depletion		2,184.	0.		
20 Occupancy		11,130.	557.		11,522.
21 Travel, conferences, and meetings		9,459.	0.		10,356.
22 Printing and publications					
23 Other expenses		262,504.	195,962.		256,797.
24 Total operating and administrative expenses. Add lines 13 through 23		435,232.	263,091.		337,254.
25 Contributions, gifts, grants paid		1,399,800.			1,484,067.
26 Total expenses and disbursements. Add lines 24 and 25		1,835,032.	263,091.		1,821,321.
27 Subtract line 26 from line 12		1,425,581.			
a Excess of revenue over expenses and disbursements			3,674,122.		
b Net investment income (if negative, enter -0-)					
c Adjusted net income (if negative, enter -0-)				N/A	

Part II Balance Sheets

Attached schedules and amounts in the description column should be for end-of-year amounts only

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing	2,690.	3,057.	3,057.
	2 Savings and temporary cash investments	373,192.	444,404.	444,404.
	3 Accounts receivable ▶			
	Less: allowance for doubtful accounts ▶	46,000.		
	4 Pledges receivable ▶			
	Less: allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable ▶			
	Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges	3,883.	3,408.	3,408.
	10a Investments - U.S. and state government obligations STMT 9	2,122,507.	2,009,231.	2,009,231.
	b Investments - corporate stock			
	c Investments - corporate bonds			
Liabilities	11 Investments - land, buildings, and equipment basis ▶			
	Less: accumulated depreciation ▶			
	12 Investments - mortgage loans			
	13 Investments - other STMT 10	32,176,775.	32,774,072.	32,774,072.
	14 Land, buildings, and equipment basis ▶ 11,667.			
	Less: accumulated depreciation ▶ 10,003.	3,847.	1,664.	1,664.
	15 Other assets (describe ▶ STATEMENT 11)	1,677,828.	4,425,709.	4,425,709.
	16 Total assets (to be completed by all filers)	36,406,722.	39,661,545.	39,661,545.
	17 Accounts payable and accrued expenses	49,572.	39,794.	
	18 Grants payable	406,557.	331,750.	
Net Assets or Fund Balances	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶ STATEMENT 12)	63,000.	97,000.	
	23 Total liabilities (add lines 17 through 22)	519,129.	468,544.	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> X			
	and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted	35,887,593.	39,193,001.	
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/>			
	and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds			
Net Assets or Fund Balances	28 Paid-in or capital surplus, or land, bldg, and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
	30 Total net assets or fund balances	35,887,593.	39,193,001.	
31 Total liabilities and net assets/fund balances		36,406,722.	39,661,545.	

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	35,887,593.
2 Enter amount from Part I, line 27a	2	1,425,581.
3 Other increases not included in line 2 (itemize) ▶ UNREALIZED GAIN ON INVESTMENTS	3	1,913,827.
4 Add lines 1, 2, and 3	4	39,227,001.
5 Decreases not included in line 2 (itemize) ▶ DEFERRED FEDERAL EXCISE TAX EXPENSE	5	34,000.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	39,193,001.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a PUBLICLY TRADED SECURITIES	P	VARIOUS	VARIOUS
b NON-PUBLIC SECURITIES - SEE ATTACHMENT B	P	VARIOUS	VARIOUS
c CAPITAL GAINS DIVIDENDS			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 9,976,666.		8,810,291.	1,166,375.
b			1,791,058.
c 301,076.			301,076.
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			1,166,375.
b			1,791,058.
c			301,076.
d			
e			

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	3,258,509.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) If (loss), enter -0- in Part I, line 8	{ }	3	N/A

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2011	1,715,436.	38,584,616.	.044459
2010			
2009			
2008			
2007			

2 Total of line 1, column (d)	2	.044459
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	.044459
4 Enter the net value of noncharitable-use assets for 2012 from Part X, line 5	4	38,406,888.
5 Multiply line 4 by line 3	5	1,707,532.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	36,741.
7 Add lines 5 and 6	7	1,744,273.
8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions	8	1,821,321.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary-see instructions)		1	36,741.
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b			
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	0.
3 Add lines 1 and 2		3	36,741.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	36,741.
6 Credits/Payments			
a 2012 estimated tax payments and 2011 overpayment credited to 2012	6a	55,830.	
b Exempt foreign organizations - tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c		
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d	7	55,830.	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	19,089.	
11 Enter the amount of line 10 to be Credited to 2013 estimated tax <input checked="" type="checkbox"/> 19,089. Refunded <input type="checkbox"/>	11	0.	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation <input checked="" type="checkbox"/> \$ 0. (2) On foundation managers <input checked="" type="checkbox"/> \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input checked="" type="checkbox"/> \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	X	
b If "Yes," has it filed a tax return on Form 990-T for this year?	X	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?		X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV.	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input checked="" type="checkbox"/> PA		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

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Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► WWW.FIRSTHOSPITALFDN.ORG	13	X	
14	The books are in care of ► ANN MARIE HEALY, EXECUTIVE DIRECTOR Telephone no ► 215-546-4290 Located at ► 230 SOUTH BROAD STREET, SUITE 402, PHILADELPHIA, ZIP+4 ► 19102			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year	15	N/A	
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes," enter the name of the foreign country ►	16	Yes	No X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year did the foundation (either directly or indirectly)		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here ► <input type="checkbox"/>	1b	X
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2012?	1c	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2012? If "Yes," list the years ►	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions)	N/A	2b
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ►		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2012.)	N/A	3b
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?		X

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Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**5a** During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)?

☒ Yes ☐ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No**b** If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

Organizations relying on a current notice regarding disaster assistance check here

▶ ☐

5b

X

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

SEE STATEMENT 14

☒ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?☐ Yes ☒ No**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If "Yes" to 6b, file Form 8870

6b

X

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?☐ Yes ☒ No**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

7b

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1** List all officers, directors, trustees, foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 13		0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000

▶ 0

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Part VIII**Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** (continued)**3 Five highest-paid independent contractors for professional services. If none, enter "NONE."**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
HEALTH FEDERATION OF PHILADELPHIA - 1211 CHESTNUT STREET, SUITE 801, PHILADELPHIA, PA	EMPLOYMENT SERVICES	240,038.
COLONIAL CONSULTING, LLC - 750 THIRD AVENUE, 20TH FLOOR, NEW YORK, NY 10017	INVESTMENT ADVISORS	57,866.

Total number of others receiving over \$50,000 for professional services

0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 N/A	
2	
3	
4	

Part IX-B Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

	Amount
1 N/A	
2	
All other program-related investments See instructions	
3	

Total. Add lines 1 through 3

0.

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Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities	1a	38,900,063.
b	Average of monthly cash balances	1b	91,701.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	38,991,764.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	38,991,764.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	584,876.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	38,406,888.
6	Minimum investment return. Enter 5% of line 5	6	1,920,344.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part)

1	Minimum investment return from Part X, line 6	1	1,920,344.
2a	Tax on investment income for 2012 from Part VI, line 5	2a	36,741.
b	Income tax for 2012 (This does not include the tax from Part VI)	2b	
c	Add lines 2a and 2b	2c	36,741.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,883,603.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1,883,603.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	1,883,603.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	1,821,321.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	1,821,321.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	36,741.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,784,580.

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI, line 7				1,883,603.
2 Undistributed income, if any, as of the end of 2012				
a Enter amount for 2011 only			194,526.	
b Total for prior years		0.		
3 Excess distributions carryover, if any, to 2012				
a From 2007				
b From 2008				
c From 2009				
d From 2010				
e From 2011				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2012 from Part XII, line 4 ▶ \$ 1,821,321.				
a Applied to 2011, but not more than line 2a			194,526.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2012 distributable amount				1,626,795.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable amount - see instructions		0.		
e Undistributed income for 2011 Subtract line 4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2012 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2013				256,808.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2007 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				
a Excess from 2008				
b Excess from 2009				
c Excess from 2010				
d Excess from 2011				
e Excess from 2012				

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
SEE ATTACHMENT C	N/A			1,484,067.
Total			3a	1,484,067.
b Approved for future payment				
SEE ATTACHMENT D	N/A			331,750.
Total			3b	331,750.

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

- | 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? | | Yes | No |
|--|-------|-----|----|
| a Transfers from the reporting foundation to a noncharitable exempt organization of | | | |
| (1) Cash | 1a(1) | | X |
| (2) Other assets | 1a(2) | | X |
| b Other transactions | | | |
| (1) Sales of assets to a noncharitable exempt organization | 1b(1) | | X |
| (2) Purchases of assets from a noncharitable exempt organization | 1b(2) | | X |
| (3) Rental of facilities, equipment, or other assets | 1b(3) | | X |
| (4) Reimbursement arrangements | 1b(4) | | X |
| (5) Loans or loan guarantees | 1b(5) | | X |
| (6) Performance of services or membership or fundraising solicitations | 1b(6) | | X |
| c Sharing of facilities, equipment, mailing lists, other assets, or paid employees | 1c | | X |
| d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. | | | |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

- | b If "Yes," complete the following schedule | | |
|---|--------------------------|---------------------------------|
| (a) Name of organization | (b) Type of organization | (c) Description of relationship |
| N/A | | |
| | | |
| | | |
| | | |
| | | |

**Sign
Here**

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

Signature of officer or trustee

11/5/13
Date

TREASURER

May the IRS discuss this return with the preparer shown below (see instr 1)?

☒ Yes ☐ No

**Paid
Preparer
Use Only**

Print/Type preparer's name
**CHRISTOPHER
PETERMANN**

Preparer's signature

Date

Check ☐ if
self-employed

PTIN

P00097440

Firm's name ► O'CONNOR DAVIES, LLP

Firm's EIN ▶	27-1728945
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Firm's address ► 665 FIFTH AVENUE
NEW YORK, NY 10022

Phone no 212-286-2600

Form **990-PF** (2012)

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	AMOUNT
INTEREST	232.
TOTAL TO FORM 990-PF, PART I, LINE 3, COLUMN A	232.

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
CAPITAL GAIN DISTRIBUTIONS	301,076.	301,076.	0.
DIVIDEND INCOME	326,651.	0.	326,651.
TOTAL TO FM 990-PF, PART I, LN 4	627,727.	301,076.	326,651.

FORM 990-PF OTHER INCOME STATEMENT 3

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
ALLOCATION OF PARTNERSHIP INCOME FROM K-1'S	0.	-186,836.	
ALLOCATION OF PARTNERSHIP INCOME	235,637.	232,533.	
TOTAL TO FORM 990-PF, PART I, LINE 11	235,637.	45,697.	

FORM 990-PF LEGAL FEES STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
MONTGOMERY, MCCracken WALKER & RHOADS	2,345.	117.		2,531.
TO FM 990-PF, PG 1, LN 16A	2,345.	117.		2,531.

FORM 990-PF	ACCOUNTING FEES			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
O'CONNOR DAVIES, LLP	22,000.	100.		20,400.	
YOUR PART-TIME CONTROLLER	30,474.	1,524.		29,217.	
TO FORM 990-PF, PG 1, LN 16B	52,474.	1,624.		49,617.	

FORM 990-PF	OTHER PROFESSIONAL FEES			STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
COLONIAL CONSULTING, LLC	57,866.	47,271.		0.	
ONSITE COMPUTER SERVICES	3,520.	176.		3,344.	
WEBSITE DEVELOPMENT	1,375.	69.		1,306.	
ALEXANDRA SAMUELS	1,875.	94.		1,781.	
TO FORM 990-PF, PG 1, LN 16C	64,636.	47,610.		6,431.	

FORM 990-PF	TAXES			STATEMENT	7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FEDERAL EXCISE TAXES	30,500.	0.		0.	
FOREIGN TAXES	0.	13,943.		0.	
TO FORM 990-PF, PG 1, LN 18	30,500.	13,943.		0.	

FORM 990-PF	OTHER EXPENSES		STATEMENT	8
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ADMINISTRATIVE FEES	240,038.	10,520.		235,589.
BANK SERVICE CHARGES	171.	171.		0.
OFFICE EXPENSES	13,468.	656.		13,151.
DUES AND SUBSCRIPTION	3,525.	0.		3,525.
INSURANCE	5,302.	265.		4,532.
OTHER PARTNERSHIP EXPENSES	0.	184,350.		0.
TO FORM 990-PF, PG 1, LN 23	262,504.	195,962.		256,797.

FORM 990-PF	U.S. AND STATE/CITY GOVERNMENT OBLIGATIONS		STATEMENT	9
DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKET VALUE
U.S. GOVERNMENT AND FOREIGN GOVERNMENT BONDS (SEE ATTACHMENT A)	X		2,009,231.	2,009,231.
TOTAL U.S. GOVERNMENT OBLIGATIONS			2,009,231.	2,009,231.
TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGATIONS				
TOTAL TO FORM 990-PF, PART II, LINE 10A			2,009,231.	2,009,231.

FORM 990-PF	OTHER INVESTMENTS		STATEMENT	10
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE	
FIXED INCOME BONDS (SEE ATTACHMENT A)	FMV	4,264,267.	4,264,267.	
MUTUAL FUNDS (SEE ATTACHMENT A)	FMV	10,892,237.	10,892,237.	
HEDGE FUNDS (SEE ATTACHMENT A)	FMV	14,699,548.	14,699,548.	
PRIVATE EQUITIES (SEE ATTACHMENT A)	FMV	1,510,940.	1,510,940.	
REAL ESTATE FUND (SEE ATTACHMENT A)	FMV	1,407,080.	1,407,080.	
TOTAL TO FORM 990-PF, PART II, LINE 13		32,774,072.	32,774,072.	

FORM 990-PF	OTHER ASSETS		STATEMENT 11
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
DEPOSITS	15,767.	15,767.	15,767.
DUE FROM INVESTMENT CUSTODIAN	1,656,061.	4,387,442.	4,387,442.
PREPAID FEDERAL EXCISE TAX	6,000.	22,500.	22,500.
TO FORM 990-PF, PART II, LINE 15	1,677,828.	4,425,709.	4,425,709.

FORM 990-PF	OTHER LIABILITIES		STATEMENT 12
DESCRIPTION	BOY AMOUNT	EOY AMOUNT	
DEFERRED FEDERAL EXCISE TAX LIABILITY	63,000.	97,000.	
TOTAL TO FORM 990-PF, PART II, LINE 22	63,000.	97,000.	

FORM 990-PF

PART VIII - LIST OF OFFICERS, DIRECTORS
TRUSTEES AND FOUNDATION MANAGERS

STATEMENT 13

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
LOUIS J. MAYER, EDD, CPA, MBA 230 SOUTH BROAD STREET, SUITE 402 PHILADELPHIA, PA 19102	CHAIR - TERM ENDED 4/20/2012 0.50		0.	0.
JULIA R. DUTTON, PHD 230 SOUTH BROAD STREET, SUITE 402 PHILADELPHIA, PA 19102	CHAIR 3.00		0.	0.
JANE G. PEPPER 230 SOUTH BROAD STREET, SUITE 402 PHILADELPHIA, PA 19102	VICE CHAIR 2.00		0.	0.
KEITH KASPER 230 SOUTH BROAD STREET, SUITE 402 PHILADELPHIA, PA 19102	TREASURER 2.00		0.	0.
SUZANNE SHEEHAN BECKER 230 SOUTH BROAD STREET, SUITE 402 PHILADELPHIA, PA 19102	SECRETARY 2.00		0.	0.
IJEOMA B. ACHARA-ABRAHAMS, PSY.D. 230 SOUTH BROAD STREET, SUITE 402 PHILADELPHIA, PA 19102	DIRECTOR 0.50		0.	0.
REVEREND RALPH E. BLANKS 230 SOUTH BROAD STREET, SUITE 402 PHILADELPHIA, PA 19102	DIRECTOR 0.50		0.	0.
R. MICHAEL BUCKLEY, MD, FACP 230 SOUTH BROAD STREET, SUITE 402 PHILADELPHIA, PA 19102	DIRECTOR 1.00		0.	0.
HELEN L. COONS, PHD, ABPP 230 SOUTH BROAD STREET, SUITE 402 PHILADELPHIA, PA 19102	DIRECTOR 1.00		0.	0.
MORRIS CHESTON, JR., ESQ. 230 SOUTH BROAD STREET, SUITE 402 PHILADELPHIA, PA 19102	DIRECTOR 0.50		0.	0.
JOANNE R. DENWORTH 230 SOUTH BROAD STREET, SUITE 402 PHILADELPHIA, PA 19102	DIRECTOR 1.50		0.	0.

THE FIRST HOSPITAL FOUNDATION

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GAIL W. HEARN, PHD 230 SOUTH BROAD STREET, SUITE 402 PHILADELPHIA, PA 19102	DIRECTOR 0.50	0.	0.	0.
BRUCE W. HERDMAN, PHD, MBA 230 SOUTH BROAD STREET, SUITE 402 PHILADELPHIA, PA 19102	DIRECTOR 2.00	0.	0.	0.
NATALIE LEVKOVICH 230 SOUTH BROAD STREET, SUITE 402 PHILADELPHIA, PA 19102	DIRECTOR 2.00	0.	0.	0.
SUEYUN PYO LOCKS 230 SOUTH BROAD STREET, SUITE 402 PHILADELPHIA, PA 19102	DIRECTOR 0.50	0.	0.	0.
LAWRENCE T. MANGAN 230 SOUTH BROAD STREET, SUITE 402 PHILADELPHIA, PA 19102	DIRECTOR 1.00	0.	0.	0.
A. SCOTT MCNEAL, D.O. 230 SOUTH BROAD STREET, SUITE 402 PHILADELPHIA, PA 19102	DIRECTOR 1.00	0.	0.	0.
SUSAN E. PHILLIPS 230 SOUTH BROAD STREET, SUITE 402 PHILADELPHIA, PA 19102	DIRECTOR 2.00	0.	0.	0.
PAMELA STRISOFSKY 230 SOUTH BROAD STREET, SUITE 402 PHILADELPHIA, PA 19102	DIRECTOR 1.00	0.	0.	0.
DAVID WILLIAMS 230 SOUTH BROAD STREET, SUITE 402 PHILADELPHIA, PA 19102	DIRECTOR 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		0.	0.	0.

FORM 990-PF

EXPENDITURE RESPONSIBILITY STATEMENT
PART VII-B, LINE 5C

STATEMENT 14

GRANTEE'S NAME

SEE ATTACHMENT E

GRANTEE'S ADDRESSGRANT AMOUNTDATE OF GRANTAMOUNT EXPENDEDPURPOSE OF GRANT

The First Hospital Foundation
 EIN # 23-2904262
 Schedule of Investments
 December 31, 2012

U.S. Government and Foreign Government Bonds

The Colchester Global Bond Fund	\$	2,009,231	
			\$ 2,009,231

Fixed Income - Bonds

PIMCO Total Return Institutional	\$	1,625,774	
Loomis Core Plus Bond Fund-Y		2,638,493	
			\$ 4,264,267

Equity Funds

Aberdeen Emerging Markets FD Inst CI	\$	2,461,403	
Artisan Mid Cap Fund Institutional Shares		2,584,638	
BMO Small-Cap Growth Institutional I		1,061,116	
Harbor International Fund - Institutional		3,581,736	
PIMCO Commodity/Real Return		1,203,344	
			\$ 10,892,237

Hedge Funds

PIMCO Stocks Plus LP B	\$	3,521,867	
Gryphon Internationa EAFE Growth Fund		3,562,348	
Iridian Private Equity		2,999,682	
Advisory Small/Mid Cap Value II		981,720	
Forester Offshore LTD Class B 1/10		2,239,525	
Forester Offshore LTD Class A 10/09		1,394,406	
			\$ 14,699,548

Private Equities

TIFF Private Equity Partners 2008, LLC	\$	661,919	
TIFF Private Equity Partners 2009, LLC		519,024	
TIFF Private Equity Partners 2011, LLC		329,997	
			\$ 1,510,940

Real Estate Funds

Madison International Real Estate Liquidity Fund	\$	1,086,369	
BPG Fund IX		320,711	
			\$ 1,407,080

The First Hospital Foundation
CAPITAL GAIN/(LOSS), NET (FORM 990-PF LINE 6A)
December 31, 2012
EIN # 23-2904262

DESCRIPTION	GAIN/(LOSS)
SALES OF NON-PUBLIC SECURITIES	
Advisory Research Small/Mid Cap	219,600
Gryphon International Eafe Growth Fund	19,848
Iridian Private Business Value Equity, L P	147,255
Madison International Real Estate Liquidity Fund IV, LP	35,806
Stockplus Limited Partnership c/o Stockplus Management	449,229
The Colchester Global Bond Fund	15,510
TIFF Absolute Return Pool II	833,919
TIFF Private Equity Partners 2008, LLC	35,771
TIFF Private Equity Partners 2009, LLC	343
TIFF Private Equity Partners 2011, LLC	33,777
Total Sales of Non-Public Securities	<u>1,791,058</u>
Total Realized Gain/(Loss)	<u>\$ 1,791,058</u>

THE FIRST HOSPITAL FOUNDATION
EIN #23-2904262
FORM 990-PF, PART XV, LINE 3A - GRANTS AND CONTRIBUTIONS PAID
DECEMBER 31, 2012

Organization Name	Total Grant Paid Amount	Status	Purpose
11th Street Family Health Services of Drexel University 850 North 11th Street Philadelphia, PA 19123	15,000	Public Charity	General Operating Support
AmeriHealth Mercy Foundation 200 W. Stevens Drive Philadelphia, PA 19113	2,500	Public Charity	Promoting Wellness through Collaboration: The Integration of Dental and Medical Conference Sponsorship
Attic Youth Center 255 South 16th Street Philadelphia, Pa 19102	20,000	Public Charity	Mental Health Counseling for LGBTQ Youth
Benefits Data Trust 2 Logan Square, Suite 550 Philadelphia, PA 19103	30,000	Public Charity	BenePhilly Enrollment Center
Bethesda Project 1630 South Street Philadelphia, PA 19146	20,000	Public Charity	Medical Case Manager Position
Bridging the Gaps: Philadelphia Community Health Internship Program 423 Guardian Drive 912 Blockley Hall Philadelphia, PA 19104	20,000	Public Charity	General Operating Support
Cambodian Association of Greater Philadelphia 5412 North 5th Street Philadelphia, PA 19120	25,000	Public Charity	Community Health Initiative
Center for Autism, The 3905 Ford Road, Suite 6 Philadelphia, PA 19131-5469	25,000	Public Charity	Social Competency Program
Center In The Park 5818 Germantown Avenue Philadelphia, PA 19144	20,000	Public Charity	General Operating Support
ChesPenn Health Services 2600 West 9th Street, 2 North Chester, PA 19013	20,000	Public Charity	Integration of Behavioral and Primary Health Care in Coatesville
Chester County Food Bank 1208 Horseshoe Pike Downingtown, PA 19335	30,000	Public Charity	Children's Food Backpack Program
Chester Foundation, for Crozer-Chester Medical Center One Medical Center Blvd Upland, PA 19013	39,931	Public Charity	Crozer Wellness Center-Chester Youth Council
Child Abuse Prevention Effort 8001 Roosevelt Boulevard, Suite 404 Philadelphia, PA 19152	15,000	Public Charity	Emergency Family Fund

THE FIRST HOSPITAL FOUNDATION
EIN #23-2904262
FORM 990-PF, PART XV, LINE 3A - GRANTS AND CONTRIBUTIONS PAID
DECEMBER 31, 2012

Organization Name	Total Grant Paid Amount	Status	Purpose
Children's Hospital of Philadelphia, The 34th Street and Civic Center Boulevard Philadelphia, PA 19104-4399	25,000	Public Charity	Homeless Health Initiative
Community Volunteers in Medicine 300 B Lawrence Drive West Chester, PA 19380	40,000	Public Charity	Advancing the impact of diabetes management
Delaware Valley Grantmakers 230 South Broad Street, Suite 402 Philadelphia, PA 19102	1,875	Public Charity	Fifty percent of annual membership
Drexel University, School of Public Health Center for Hunger-Free Communities 1505 Race Street, Bellet Building, 11th Floor, Mail Stop 1035 Philadelphia, PA 19102	15,870	Public Charity	Improving Child Health and Development through Changing Policy on Access to the Child and Adult Care Food Program
El Concilio, Council of Spanish Speaking Organizations, Inc. 705-09 North Franklin Street Philadelphia, PA 19123	30,000	Public Charity	Foster Care - Services to Birth Parents
Family Support Line 100 West Sixth Street Media, PA 19063	35,000	Public Charity	Child Sexual Abuse Prevention Education
Gearing Up The Tiger Building 1221 Locust Street, Suite 105 Philadelphia, PA 19107	10,000	Public Charity	Women in Transition Bicycle Program
Grantmakers In Health 1100 Connecticut Avenue NW, Suite 1200 Washington, DC 20036	1,650	Public Charity	Fifty percent of annual membership
Institute for Safe Families 3502 Scotts Lane, A-4 Philadelphia, PA 19129	40,000	Public Charity	General Operating Support
Keystone Care 8765 Stenton Avenue Wyndmoor, PA 19038	25,000	Public Charity	General Operating Support
Kids Smiles, Inc. 3751 Island Avenue, 2nd Floor Philadelphia, PA 19153	25,000	Public Charity	General Operating Support
La Comunidad Hispana 731 West Cypress Street Kennett Square, PA 19348	30,000	Public Charity	Prenatal Program

THE FIRST HOSPITAL FOUNDATION

EIN #23-2904262

FORM 990-PF, PART XV, LINE 3A - GRANTS AND CONTRIBUTIONS PAID

DECEMBER 31, 2012

Organization Name	Total Grant Paid Amount	Status	Purpose
Legal Clinic for the Disabled, Inc 1513 Race Street Philadelphia, PA 19102	60,000	Public Charity	Medical Legal Partnerships
Lutheran Settlement House 1340 Frankford Avenue Philadelphia, PA 19125	30,000	Public Charity	Children's and Mom's Project
Maternal and Child Health Consortium 30 West Barnard Street, Suite 1 West Chester, PA 19382	25,000	Public Charity	Healthy Start
Maternity Care Coalition of Greater Philadelphia 2000 Hamilton Street, Suite 205 Philadelphia, PA 19130	15,000	Public Charity	General Operating Support
Mission Kids - Child Advocacy Center of Montgomery County PO Box 413 Blue Bell, PA 19422	40,000	Public Charity	A coordinated response to child abuse/case coordinator program
Carlisle Area Health and Wellness Foundation 274 Wilson Street Carlisle, PA 17013	5,000	Public Charity	Pennsylvania Coalition for Oral Health
Pennsylvania Health Law Project The Corn Exchange Building 123 Chestnut Street, Suite 400 Philadelphia, PA 19106	10,000	Public Charity	Medical Legal Partnership Coalition in Southeastern Pennsylvania
Pennsylvania Hospital 800 Spruce Street Philadelphia, PA 19107	140,000	Public Charity	Historic Preservation
Pennsylvania Hospital Diabetes Education Center 800 Spruce Street Philadelphia, PA 19107	50,116	Public Charity	Certified Health Education Specialist
Pennsylvania Hospital Hall Mercer Community Behavioral Health Center 800 Spruce Street Philadelphia, PA 19107	40,000	Public Charity	Penn Center for Youth & Family Trauma Response & Recovery
Pennsylvania Hospital Hall Mercer Community Behavioral Health Center 800 Spruce Street Philadelphia, PA 19107	100,000	Public Charity	Child and Family Service Therapeutic Day Program

THE FIRST HOSPITAL FOUNDATION

EIN #23-2904262

FORM 990-PF, PART XV, LINE 3A - GRANTS AND CONTRIBUTIONS PAID

DECEMBER 31, 2012

Organization Name	Total Grant Paid Amount	Status	Purpose
Pennsylvania Hospital J. Edwin Wood Clinic 700 Spruce Street, Duncan Bldg., Suite 304 Philadelphia, PA 19106	50,500	Public Charity	Wood Clinic-Patient Navigator Program
Pennsylvania Hospital, Joan Karnell Cancer Center 230 West Washington Square, 2nd Floor Philadelphia, PA 19106	20,000	Public Charity	Supportive Care Fund
Philabundance 3616 South Galloway Street Philadelphia, PA 19148	20,000	Public Charity	Mobile School Pantry Program Pilot
Phoenixville Healthcare Access Foundation 723 Wheatland Street, Suite 2C P.O. Box 591 Phoenixville, PA 19460	20,000	Private Foundation	Dental Program
Planned Parenthood Southeastern Pennsylvania 1144 Locust Street Philadelphia, PA 19107	30,000	Public Charity	Promotores de Salud
Project H.O.M.E 1515 Fairmount Avenue Philadelphia, PA 19130	25,000	Public Charity	Health Education and Services for the Homeless, St. Elizabeth Wellness Center
Public Citizens for Children and Youth 1709 Benjamin Franklin Parkway Philadelphia, PA 19103	45,000	Public Charity	Health Outreach Program
Puentes de Salud 2029 South 8th Street Philadelphia, PA 19148	40,125	Public Charity	Latino Integrated Primary Care Behavioral Health Program
Resources for Human Development for Healthy NewsWorks 4700 Wissahickon Avenue Philadelphia, PA 19144	15,000	Public Charity	Healthy NewsWorks Student Media Program
St. Catherine Laboure Medical Clinic 5838 Germantown Avenue Philadelphia, PA 19144	40,000	Public Charity	Registered Nurse Position
Sunday Suppers, a division of SHARE Food Program 7203 Lincoln Drive Philadelphia, PA 19119	30,000	Public Charity	Sunday Suppers
Why Not Prosper P.O. Box 949 Norristown, PA 19404	6,500	Public Charity	Domestic Violence Program for Incarcerated Women at Riverside Correctional Facility

THE FIRST HOSPITAL FOUNDATION

EIN #23-2904262

FORM 990-PF, PART XV, LINE 3A - GRANTS AND CONTRIBUTIONS PAID

DECEMBER 31, 2012

Organization Name	Total Grant Paid Amount	Status	Purpose
Women Against Abuse, Inc. 100 South Broad Street, Suite 1341 Philadelphia, PA 19110	40,000	Public Charity	Trauma-Informed Behavioral Health Services
Youth Service, Inc 410 North 34th Street Philadelphia, PA 19104	25,000	Public Charity	Medical Clinic for Runaway and Homeless Youth
Total Grants Paid in 2012	\$ 1,484,067		

THE FIRST HOSPITAL FOUNDATION

EIN #23-2904262

FORM 990-PF, PART XV, LINE 3B - GRANTS APPROVED FOR FUTURE PAYMENT

DECEMBER 31, 2012

Organization Name	Total Grant Payable Amount	Status	Purpose
Bridging the Gaps: Philadelphia Community Health Internship Program 423 Guardian Drive 912 Blockley Hall Philadelphia, PA 19104	\$ 15,000	Public Charity	General Operating Support
Chester Foundation, for Crozer-Chester Medical Center One Medical Center Blvd Upland, PA 19013	\$ 40,006	Public Charity	Crozer Wellness Center-Chester Youth Council
Lutheran Settlement House 1340 Frankford Avenue Philadelphia, PA 19125	\$ 30,000	Public Charity	Children's and Mom's Project (CAMP)
Maternity Care Coalition of Greater Philadelphia 2000 Hamilton Street, Suite 205 Philadelphia, PA 19130	\$ 15,000	Public Charity	General Operating Support
Pennsylvania Hospital Diabetes Education Center 800 Spruce Street Philadelphia, PA 19107	\$ 51,619	Public Charity	Certified Health Education Specialist
Pennsylvania Hospital Hall Mercer Community Behavioral Health Center 800 Spruce Street Philadelphia, PA 19107	\$ 40,000	Public Charity	Penn Center for Youth & Family Trauma Response & Recovery
Pennsylvania Hospital Hall Mercer Community Behavioral Health Center 800 Spruce Street Philadelphia, PA 19107	\$ 60,000	Public Charity	Child and Family Service Therapeutic Day Program
Puentes de Salud 2029 South 8th Street Philadelphia, PA 19148	\$ 40,125	Public Charity	Latino Integrated Primary Care Behavioral Health Program
St. Catherine Laboure Medical Clinic 5838 Germantown Avenue Philadelphia, PA 19144	\$ 40,000	Public Charity	Registered Nurse Position
TOTAL GRANTS PAYABLE \$ 331,750			

The First Hospital Foundation
EIN#: 23-2904262

FORM 990-PF
DECEMBER 31, 2012 TAX YEAR

PART VII-B - SUPPLEMENTARY INFORMATION

Line 5C – Grants & Contributions

1. Grantee's name & address:
Phoenixville Healthcare Access Foundation
723 Wheatland Street, Suite 2C
P O Box 591
Phoenixville, PA 19460
2. Date and amount of the grant:
A grant totaling \$20,000 was awarded to the Phoenixville Healthcare Access Foundation on December 10, 2012 to be used for services in calendar year 2013.
3. Purpose of the grant:
The purpose of the grant is to support the Dental Program, which provides dental care to low-income children and adults whose families lack insurance coverage for dental services.
4. To the knowledge of the taxpayer, no portion of the funds contributed by Phoenixville Healthcare Access Foundation has been diverted from the purposes of the grant.
5. Phoenixville Healthcare Access Foundation provided The First Hospital Foundation with an Interim Grant Report on July 31, 2012.

The purpose of this statement is to satisfy the report-making requirements of Section 4945(h)(3) of the Internal Revenue Code of 1986, as amended, regarding taxpayer expenditure responsibility.

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒ **X**
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed)

A corporation required to file Form 990-T and requesting an automatic 6-month extension check this box and complete

Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions THE FIRST HOSPITAL FOUNDATION	Employer identification number (EIN) or 23-2904262
	Number, street, and room or suite no. If a P.O. box, see instructions. 230 SOUTH BROAD STREET, NO. 402	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. PHILADELPHIA, PA 19102	

Enter the Return code for the return that this application is for (file a separate application for each return) **0 4**

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

ANN MARIE HEALY, EXECUTIVE DIRECTOR - 230 SOUTH BROAD

- The books are in the care of ► **STREET, SUITE 402 - PHILADELPHIA, PA 19102**

Telephone No ► **215-546-4290**

FAX No. ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ☐. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **AUGUST 15, 2013**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
► ☒ calendar year **2012** or
► ☐ tax year beginning _____, and ending _____.

- 2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	55,830.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	55,830.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

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

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8868** (Rev. 1-2013)

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **X**

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print	Name of exempt organization or other filer, see instructions	Employer identification number (EIN) or
File by the due date for filing your return. See instructions.	THE FIRST HOSPITAL FOUNDATION	23-2904262
	Number, street, and room or suite no. If a P.O. box, see instructions. 230 SOUTH BROAD STREET, NO. 402	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. PHILADELPHIA, PA 19102	

Enter the Return code for the return that this application is for (file a separate application for each return)

04

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01		
Form 990-BL	02	Form 1041-A	08
Form 4720 (Individual)	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

ANN MARIE HEALY, EXECUTIVE DIRECTOR - 230 SOUTH BROAD

- The books are in the care of **STREET, SUITE 402 - PHILADELPHIA, PA 19102**

Telephone No. **215-546-4290**

FAX No.

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until **NOVEMBER 15, 2013**.

5 For calendar year **2012**, or other tax year beginning , and ending .

6 If the tax year entered in line 5 is for less than 12 months, check reason. ☐ Initial return ☐ Final return
☐ Change in accounting period

7 State in detail why you need the extension

ADDITIONAL TIME IS NEEDED TO COMPILE THE INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$	55,830.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b	\$	55,830.
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$	0.

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete, and that I am authorized to prepare this form

Signature **Ann Marie Healy** Title **CPA**

Date **8.7.13**

Form 8868 (Rev. 1-2013)