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DLN: 93493316050233

Form **990** 

Department of the Treasury

### **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2012

OMB No 1545-0047

Open to Public

A Fo	r the	2012 cal	endar year, or tax year beginning	g 01-01-2012 , 2012, and ending 12	2-31-2012			Inspection	
		applicable :hange	C Name of organization THE MS HERSHEY FOUNDATION					fication number	
	me cha		Doing Business As			23-62	42/34		
	ial retu minate		Number and street (or P O box if m 63 WEST CHOCOLATE AVENUE Suite	all is not delivered to street address) Room	/suite	E Telepho			
– <sub>Am</sub>	ended	return	City or town, state or country, and 2	ZIP + 4		(717)	298-220	00	
— <sub>App</sub>	olicatio	n pending	Hershey, PA 17033			<b>G</b> Gross re	ceipts \$ 4	7,271,508	
			F Name and address of prir	ncipal officer		s this a group	return fo		
			63 W CHOCOLATE AVENU	E	а	ffiliates?		ΓYes <b>Γ</b> No	
			HERSHEY,PA 17033					d? ☐ Yes ☐ No	
<b>I</b> Ta	x-exer	mpt status	▼ 501(c)(3)	insert no ) 4947(a)(1) or 527				ee instructions)	
y W	ebsit	e: ► ww	w mshersheyfoundation org		H(c) (	Group exempti	on numb	er ►	
<b>K</b> For	n of or	rganızatıon	Corporation Trust Associatio	n	L Year	of formation 193	35 <b>M</b> Sta	ate of legal domicile Pi	
	rt I	_	mary					-	
ince		TO PRE		on or most significant activities N HERSHEY'S LEGACY AND COMM E RESIDENTS OF THE HERSHEY AI		ION AND TO	PROVID	E EDUCATIONAL	
Governance	,	Check th	ous how Mar if the organization du	scontinued its operations or dispose	d of more th	an 25% of its	net asse	ts	
		CHECK (I	ins box Fig. in the organization di	scontinued its operations of dispose	a or more th	all 25% Of its			
Activities &				ing body (Part VI, line 1a)			3		
Ĕ				of the governing body (Part VI, line 1 calendar year 2012 (Part V, line 2a)			5	12	
₽ F				ecessary)			6	75	
•				art VIII, column (C), line 12			7a		
	ь	Net unre	lated business taxable income f	rom Form 990-T, line 34			7b	ļ	
						Prior Year		Current Year	
a)	8			ne 1 h)		1,858,4	_	1,420,186	
Ravenue	9			ne 2g)		5,193,1	_	6,913,082	
죮	10 11			(A), lines 3, 4, and 7d) lines 5, 6d, 8c, 9c, 10c, and 11e)		5,720,1 50,5	_	8,737,532 53,326	
	12	Total	revenue—add lines 8 through 11	(must equal Part VIII, column (A),	line	12,822,2		17,124,126	
	13	Grants	s and sımılar amounts paıd (Part	IX, column (A), lines 1-3)			0	C	
	14			X, column (A), line 4)			0	C	
\$	15	5-10)		ee benefits (Part IX, column (A), line	s 	3,150,032		3,268,223	
Expenses	16a			column (A), line 11e)	•		0	C	
짚	b		indraising expenses (Part IX, column (D	· · · · · · · · · · · · · · · · · · ·	-	6.001.0	0.4	8,047,875	
	17 18			lines 11a-11d, 11f-24e) st equal Part IX, column (A), line 25					
	19			18 from line 12		2,690,3	_	11,316,098	
Net Assets or Fund Balances			,			nning of Curren Year		End of Year	
See Base	20	Total	assets (Part X, line 16)			58,563,8	36	58,708,153	
2 m	21					22,487,8		22,680,523	
	22		ssets or fund balances Subtract ature Block	line 21 from line 20		36,076,0	34	36,027,630	
Jnde ny ki	nowle	alties of dge and	perjury, I declare that I have ex	amined this return, including accomp aplete Declaration of preparer (othe					
Sign		Signa	ature of officer			Date			
Here	е		ALD PAPSON EXECUTIVE DIRECTOR						
			e or print name and title Print/Type preparer's name	Preparer's signature	Date		PTIN		
Paid	4				Date	Check If self-employed	1- 1 TIA		
	a pare		Firm's name FricewaterhouseCoope	rs LLP		Firm's EIN 🟲			
Use	•		Firm's address 🕨 2001 MARKET ST SUIT	E 1700		Phone no (267)	330-3000	 	

PHILADELPHIA, PA 19103

May the IRS discuss this return with the preparer shown above? (see instructions)

┌Yes ┌No

Form	990	(2012)	

age	2
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Par		of Program Servedule O contains a res				٦	<del>-</del>
1	Briefly describe the	organization's missior	1				_
CULT HERS GENI	URAL ENRICHMENT SHEY GARDENS, HEI	T TO THE RESIDENTS RSHEY THEATRE AND	OF THE HERS HERSHEY CO	SHEY AREA, THE FOL MMUNITY ARCHIVE	VISION AND TO PROVIDE E INDATION OPERATES THE S THROUGH COUNTLESS V CONTINUES TO ENHANCE T	HERSHEY STORY, OLUNTEERS AND	
							_
							_
2	the prior Form 990 o	or 990-EZ?		ervices during the year	which were not listed on		
3	·	ese new services on S					
3	services?	cease conducting, or	· · · ·				
	If "Yes," describe th	ese changes on Sched	ule O				
4	expenses Section 5		) organizations	s are required to report	ree largest program services, t the amount of grants and allo		
4a	(Code SEE SCHEDULE O	) (Expenses \$	6,303,025	including grants of \$	) (Revenue \$	5,496,237 )	
4b	(Code SEE SCHEDULE O	) (Expenses \$	3,698,697	ıncludıng grants of \$	) (Revenue \$	1,281,935 )	
4c	(Code SEE SCHEDULE O	) (Expenses \$	462,959	including grants of \$	) (Revenue \$	116,982 )	
	(Code	) (Expenses \$	252,796	ıncludıng grants of \$	) (Revenue \$	17,928 )	_
	Hershey Community Ar	chives & Other					
	0.11	vices (Describe in Sch	edule O )				_
40	Other program serv						
40	(Expenses \$		luding grants o	of\$	) (Revenue \$	17,928 )	

Part IV	Checkli	st 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? <i>If</i> "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		
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 1	6		No
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 2	8	Yes	
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 $IV^{\square}$	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			
а	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	Yes	
С	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		Νo
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		

Par	t 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 $1^2$ If "Yes," complete Schedule I, Parts I and II	21		No
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? If "Yes," complete Schedule I, Parts I and III	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? If "Yes," complete Schedule J	23	Yes	
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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	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</i> "Yes," complete Schedule L, Part 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? If "Yes," complete Schedule L, Part 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? If "Yes," complete Schedule L, Part II	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? If "Yes," complete Schedule L, Part III	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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			1
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	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</i> "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule $M$	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νo
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Νo
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? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
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 $512(b)(13)$ ? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	36		No
37	organization? If "Yes," complete Schedule R, Part V, line 2			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

ĠΙ	Statements Regarding Other 1RS Fillings and Tax Compliance			_
	Check if Schedule O contains a response to any question in this Part V	•	Yes	No
la	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   52		163	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
-	gaming (gambling) winnings to prize winners?	1c	Yes	
a	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			
)	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
1	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
)	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			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N c
)	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
:	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
2	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	5С 6а		No
ui .	organization solicit any contributions that were not tax deductible as charitable contributions?			14 (
)	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).  Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a	Yes	
	services provided to the payor?	/a	res	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		N
ı	If "Yes," indicate the number of Forms 8282 filed during the year			
:	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	/g		
	Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. 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		
	Sponsoring organizations maintaining donor advised funds.  Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make any taxable distributions under section 4966 /	9a 9b		
	Section 501(c)(7) organizations. Enter	30		
	Initiation fees and capital contributions included on Part VIII, line 12   10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
1	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O	13a		
)	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			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

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. 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			
	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			
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	Yes	
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	Yes	
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		Νo
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			
а	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
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			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	Yes	
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?			
а	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)			
	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
  - Own website Another's website Upon request Other (explain in Schedule O)
- 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
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►DONALD PAPSON EXEC DIRECTO 63 WEST CHOCOLATE AVE HERSHEY, PA (717) 298-2200

# <u>Part VIII</u> Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

#### 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

( <b>A)</b> Name and Title	(B) A verage hours per week (list any hours for related	more pers and	than on is	one bot ect	not box h ar or/tr	offic	ess er e)	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the	
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations	
(1) JAMES M SHEEHAN ESQ	1 0	х		Х				0	59,583	8,53!	
BD OF MGRS-PRES/CHRMN to 7/12	7 0	_ ^						O O	39,363	6,33.	
(2) JAMES M MEAD	5	V						0	200,000	122,026	
BOARD OF MANAGERS	7 5	X						Ů	200,000	122,020	
(3) VELMA A REDMOND ESQ	1 0	,,							120.000	2.026	
BOARD OF MANAGERS	8 0	X						0	120,000	2,029	
(4) RICHARD ZILMER	1 0	T						_			
BD OF MANAGERS PRES/CHRMN 7/12	9 5	X		×				0	125,000	2,029	
(5) HERSHEY TRUST COMPANY											
INSTITUTIONAL TRUSTEE			×					1,000	0	(	
(6) GAYLA M BUSH	2 0										
ASST TREASURER/ASST SECRETARY	53 0			X				0	234,609	44,585	
(7) DONALD PAPSON	40 0										
EXECUTIVE DIRECTOR	0 0			Х				133,734	68,166	23,495	
(8) WILLIAM DAVIES	1 0										
TREASURER to 7/12	45 0			Х				0	309,392	29,642	
(9) MARC WOOLLEY	2 0	_									
SECReTARY 1/12				Х				0	366,624	4,206	
(10) KENNETH GALL	48 0	$\vdash$									
							Х	0	130,828	45,281	
FORMER OFFICER to 7/09 (11) MARY LOUISE PORTER ESQ	55 0										
							Х	0	365,273	9,088	
SECRETARY TO 9/11	0 0		-								
				_							
		-		<u> </u>							

\$100,000 of compensation from the organization  $\blacktriangleright 0$ 

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

	(A) Name and Title	(B) A verage hours per week (list any hours for related	more t	tion ( han d on is	ne l both	box, an d	heck unless officer stee)		Repor compen from organizat	table sation the tion (W-	(E)  Reportable  compensation  from related  organizations (W	-   '	(F) Estima mount o compens from t	ited fother sation :he
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-	·MISC)	2/1099-MISC)		rganizati relati organiza	ed
1b	Sub-Total			<u> </u>				<u> </u>						
	Total from continuation shee		ection /	٠.				Þ				+		
d	Total (add lines 1b and 1c) .							•		134,734	1,979,47	'5		290,916
2	Total number of individuals (ii \$100,000 of reportable comp						d abov	e) w	ho receive	d more th	an			
3	Did the organization list any <b>f</b>						emplo	yee	, or highest	compen	sated employee		Yes	No
4	on line 1a? If "Yes," complete:  For any individual listed on lin  organization and related organ  individual	ie 1a, is the sum	of repo	rtabl	e co	mpe						3	Yes	
5	Did any person listed on line is services rendered to the orga									anızatıon	or individual for	5	Yes	No
	Complete this table for your fi compensation from the organi	ve highest comp											tax year	
		( <b>A</b> ) Name and business	address							Des	(B) cription of services		(C Comper	
												+		
2	Total number of independent co	ontractors (inclu	dına but	not	lımıt	ed to	o thos	e list	ted above)	who rece	ıved more than	$\dashv$		

Part V		Statement o	<b>T KEVENUE</b> ule O contains a respon	ise to any question i	n this Part VIII .			
					<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
s &	1a	Federated cam	paigns 1a					
ant	ь	Membership du	es <b>1b</b>	135,349				
Ω E.	С	Fundraising eve	ents <b>1c</b>					
ffs, FA	d	Related organiz	rations 1d	347,002				
Contributions, Giffs, Grants and Other Similar Amounts	e	Government grants		618,676				
Sin	ء ا	_						
tributio Other	f	similar amounts no	ons, gifts, grants, and <b>1f</b> ot included above	319,159				
<u>ē</u> ₹	g	Noncash contribute	ons included in lines		j	į		į į
Cont	h	Total. Add lines	s 1a-1f		1,420,186			
<u>0</u>								
e E	2a	ADMISSIONS		Business Code 713990	F 746 330	F 746 220		
Program Service Revenue	b b	-	NITY RENTAL INCOME	531120	5,746,220 233,559	5,746,220 233,559		-
	c	THEATRE SERVICE		900099				+
,¥C€	d	PROGRAM REVENU		900099	261,525 122,020	261,525 122,020		+
Š	"	AGREEMENTS	- TROM HEAR	900099	122,020	122,020		
Program S	e	OTHER INCOME		900099	549,758	549,758		<u> </u>
Ş	f	All other progra	im service revenue					
Δ	g	Total. Add lines	s 2a – 2f	🛌	6,913,082			
	3		ome (including dividend		928,715			928,715
	4		ar amounts) stment of tax-exempt bond p	F-	0			<u>, , , , , , , , , , , , , , , , , , , </u>
	5				0			
			(ı) Real	(II) Personal				
	6a	Gross rents	10,000					
	ь	Less rental expenses						
	c	Rental income or (loss)	10,000	0				
	d	· · ·	me or (loss)		10,000			10,000
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other than inventory	37,924,633					
	ь	Less cost or other basis and	30,115,816					
		sales expenses						
	C	Gain or (loss)	7,808,817		7,808,817			7,808,817
	d 8a	Gross income f	rom fundraising	· · · · •	7,000,017			7,000,017
Other Revenue	Ou.	events (not inc \$ of contributions	luding  reported on line 1c)					
č		See Part IV, lin	e 18 a	74,892				
her	ь	Less direct ex	penses b	31,566				
ŏ	c		(loss) from fundraising (		43,326			43,326
	9a	Gross income f See Part IV, lin	rom gaming activities le 19					
	ь	Less direct ex	penses b					
	С		(loss) from gaming activ	/ities	o			
	10a	Gross sales of returns and allo						
	ь	less costofa	oods sold <b>b</b>					
	С		(loss) from sales of inve	entory 🛌	0			
		Miscellaneous		Business Code				<del>                                     </del>
	11a							
	b							
	С	-						
	d	All other reven	ue					
	e	Total. Add lines	s 11a-11d	🕨	0			
	12	Total revenue.	See Instructions	▶		6.040.555		0 702
	l			- 1	17,124,126	6,913,082		8,790,858

	Statement of Functional Expenses				
section	on 501(c)(3) and 501(c)(4) organizations must complete all columns. All				
Do	Check if Schedule O contains a response to any question in this Pa		(B)	(c)	<del>]</del>
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	0			
2	Grants and other assistance to individuals in the United States See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	158,229		158,229	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	2,188,213	2,092,303	95,910	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	359,200	319,377	39,823	
9	Other employee benefits	286,392	218,221	68,171	
10	Payroll taxes	276,189	258,122	18,067	
11	Fees for services (non-employees)				
а	Management	196,050	169,392	26,658	
b	Legal	20,660		20,660	
С	Accounting	44,608		44,608	
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	0			
12	Advertising and promotion	627,815	626,357	1,458	
13	Office expenses	40,029	38,943	1,086	
14	Information technology	44,719	32,705	12,014	
15	Royalties	0			
16	Occupancy	459,163	458,770	393	
17	Travel	845	845		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	4,889	4,316	573	
20	Interest	393,862	393,862		
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	2,071,061	2,066,662	4,399	
23	Insurance	117,914	106,403	11,511	
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)				
а	COST OF ATTRACTIONS	3,313,972	3,313,972		
b	PROGRAM SUPPLIES	188,646	162,670	25,976	
С	COLLECTIONS MANAGEMENT	69,761	69,761		
d	CREDIT CARD FEES	86,579	86,579		
e	All other expenses	367,302	298,217	69,085	
25	Total functional expenses. Add lines 1 through 24e	11,316,098	10,717,477	598,621	0
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 ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Par	T X	Check if Schedule O contains a response to any question in thi	s Part	x			
					<b>(A)</b> Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			43,462	1	60,457
	2	Savings and temporary cash investments			4,519,619	2	1,153,608
	3	Pledges and grants receivable, net			215,833	3	56,564
	4	Accounts receivable, net			2,862,474	4	3,652,163
	5	Loans and other receivables from current and former officers, of employees, and highest compensated employees. Complete P. Schedule L	art II (	of	0	5	0
ŝ	6	Loans and other receivables from other disqualified persons (a $4958(f)(1)$ ), persons described in section $4958(c)(3)(B)$ , and and sponsoring organizations of section $501(c)(9)$ voluntary e organizations (see instructions) Complete Part II of Schedule	outing employers			0	
Assets	7	Notes and loans receivable, net			0	7	
Ą	8	Inventories for sale or use			0	8	
	9	Prepaid expenses and deferred charges			88,249	<u> </u>	199,420
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D		32,697,933	,	-	133,420
	ь	Less accumulated depreciation	10b	12,622,367	21,891,175	10c	20,075,566
	11	Investments—publicly traded securities		<u> </u>	28,152,621	11	26,771,297
	12	Investments—other securities See Part IV, line 11			790,403	12	6,739,078
	13	Investments—program-related See Part IV, line 11		0	$\vdash$	0	
	14	Intangible assets		0		0	
	15	Other assets See Part IV, line 11		0	15	0	
	16	Total assets. Add lines 1 through 15 (must equal line 34).		58,563,836		58,708,153	
	17	Accounts payable and accrued expenses			1,108,764		860,976
	18	Grants payable	0	18	0		
	19	Deferred revenue			1,689,587	19	2,065,717
	20	Tax-exempt bond liabilities			0	20	0
	21	Escrow or custodial account liability Complete Part IV of Sch			0	21	0
lities	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disquali	ors, tr			21	
Liabiliti		persons Complete Part II of Schedule L			О	22	0
Ï	23	Secured mortgages and notes payable to unrelated third partie			0	23	0
	24	Unsecured notes and loans payable to unrelated third parties			0	24	0
	25	Other liabilities (including federal income tax, payables to rela and other liabilities not included on lines 17-24) Complete Pa					
		D			19,689,451	25	19,753,830
	26	<b>Total liabilities.</b> Add lines 17 through 25			22,487,802	26	22,680,523
ce s		Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.	<b>⊽</b> and	l complete			
อม	27	Unrestricted net assets			10,882,208	27	9,144,893
е С	28	Temporarily restricted net assets			25,193,826	28	26,882,737
됟	29	Permanently restricted net assets			0	29	0
r Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check he complete lines 30 through 34.	ere 🟲	┌ and			
S 0.	30	Capital stock or trust principal, or current funds				30	
Ř	31	Paid-in or capital surplus, or land, building or equipment fund				31	
Assets	32	Retained earnings, endowment, accumulated income, or other				32	
Net /	33	Total net assets or fund balances			36,076,034	33	36,027,630
Z	34	Total liabilities and net assets/fund balances			58,563,836	34	58,708,153
	1		- •	<u> </u>	1 25,555,550		

Par	t XI Reconcilliation of Net Assets				-9
	Check if Schedule O contains a response to any question in this Part XI	<u> </u>			ᅜ
1	Total revenue (must equal Part VIII, column (A), line 12)	1		17,1	124,126
2	Total expenses (must equal Part IX, column (A), line 25)	2		11,3	316,098
3	Revenue less expenses Subtract line 2 from line 1	3		5,8	308,028
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		36,0	76,034
5	Net unrealized gains (losses) on investments	5		-5,4	176,894
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		-3	379,538
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		36,0	27,630
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. $ abla$
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	▼ Separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain i Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the raudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b		

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DLN: 93493316050233

OMB No 1545-0047

# **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.

Inspection

			ne organ							Employer	ident if icat ic	n number			
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 I1, check only one box )  1	THE	4S HERS	SHEY FOUI	NDATION						22 62425	724				
The organization is not a private foundation because it is. (For lines 1 through 11, check only one box)  1	Pa	rt T	Reas	on for Pu	blic Charity Sta	tus (All or	nanizations	s must com	nlete this n						
A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).  A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)  A school described in section 170(b)(1)(A)(iii).  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  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)  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).  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)  A community trust described in section 170(b)(1)(A)(vii) (Complete Part II)  An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).  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											isti actions	•			
A school described in section 170(b)(1)(A)(ii). (Attach Schedule E ) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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 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)  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).  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 )  A community trust described in section 170(b)(1)(A)(vi) (Complete Part II )  An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III )  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).  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)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h  a Type II b Type II c Type III recommended in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box (1) person who directly or indirectly controls, either alone or together with persons described in (1) box?  (ii) A person who directly or indirectly controls, either alone or together		Ī						-							
A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).  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  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)  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).  A no 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)  A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)  A community trust described in section 170(b)(1)(A)(vii). (Complete Part II)  A norganization that normally receives (1) more than 331/3% of its support from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III)  An organization organization after June 30, 1975. See section 509(a)(2). (Complete Part III)  An organization organizad and operated exclusively to test for public safety. See section 509(a)(2).  An organization organizad 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 1 b Type 11 c Type III - Functionally integrated d Type III - Non-functionally integrated d Pype III - Non-functionally integrated described in section 509(a)(2).  f If the organization received a written determination from the IR	2	Ţ.							•	,,,,,,,					
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  A morganization 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)  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(iv).  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)  A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)  A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)  A norganization that normally receives (1) more than 331/2% 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 331/2% 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)  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).  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) resection 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 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 (ii) Pype II (iii)   Ves No (iii) A family membe		, T							n 170(b)(1)	(A)(iii).					
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)  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).  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)  A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)  A community trust described in section 170(b)(1)(A)(vii). (Complete Part II)  An organization that normally receives. (1) more than 331/2% 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 331/2% of its support from gross investment income and unrelated business staxable income (less section 511 tax) from businesses acquired by the organization after June 30,1975. See section 509(a)(2). (Complete Part III)  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 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 none or more publicly supported organizations described in (i) other than foundation managers and other than one or more publicly supported organizations described in (ii) above?  (ii) 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)		Ė									1)(A)(iii). E	nter the			
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).  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)  A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)  An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III)  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).  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 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)(2)  If the organization received a written determination from the IRS that it is a Type I, Type III, or Type III supporting organization, check this box  Gine August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  (ii) A family member of a person described in (i) above?  (iii) A family member of a person described in (i) above?  (iii) A family member of a person described in (	5	ļ	_	•		_	or universi	ty owned or o	perated by a	government	al unit desc	ribed in			
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 )  A community trust described in section 170(b)(1)(A)(vi) (Complete Part II )  An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III )  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).  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 esceribed in 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 by then foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)  If the organization received a written determination from the IRS that it is a Type I, Type III, or Type III supporting organization, check this box  Gince 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 family member of a person described in (i) above?  (ivi) Name of organization (described on coil (iv) Isthe organization organization in coil (i) organiz		_													
described in section 170(b)(1)(A)(vi). (complete Part II )  A community trust described in section 170(b)(1)(A)(vi) (Complete Part II )  A community trust described in section 170(b)(1)(A)(vi) (Complete Part II )  An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III )  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).  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	6		A fede	ral, state, or	local government o	r government	tal unit desc	rıbed ın <b>sect</b> i	ion 170(b)(1	)(A)(v).					
A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)  An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).  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	7		_		•		•	support from	a governme	ntal unit or fi	om the gen	eral public			
An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III)  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).  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		_						mploto Bart II	r \						
receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 ii/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III)  10  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).  11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or 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		•		-				-	-	utions mam	harchin faac	and groce			
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	,	1,													
acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III )  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).  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.  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  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?  (iii) A family member of a person described in (i) above?  (iiii) A family member of a person described in (i) above?  (iiii) A family member of a person described in (i) above?  (iii) A family member of a person described in (i) above?  (iii) A family member of a person described in (i) above?  (iv) I sthe organization organization organization in organization in organization in organization in col (i) organization organization organization organization organization support			•			•	-			` ,					
An organization organized and operated exclusively to test for public safety. See section 509(a)(4).  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											cax, nom be	1311103303			
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	10	Г													
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		<u>'</u>	_								o carry out	the nurnoses of			
other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)  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  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?  (ii) Name of (ii) EIN (iii) Type of organization organization (v) Did you notify the organization in colinary organization organization in colinary organization in colinary organization organization in colinary organization organi		·	one or the box	more public that descri	ly supported organiz ibes the type of supp	ations descr orting organ	ibed in sect ization and	ion 509(a)(1 complete line	) or section ! s 11e throu	509(a)(2) S gh 11h	ee <b>section 5</b>	<b>609(a)(3).</b> Check			
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  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?  (iii) A family member of a person described in (i) above?  (iiii) A 35% controlled entity of a person described in (i) or (ii) above?  h Provide the following information about the supported organization(s)  (i) Name of supported organization organization organization in col (i) of your col (i) organized organization in col (i) organized supported organized supported organization in col (i) organized support	е	Γ	other t	han foundati	-	_					•	•			
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)  (i) Name of supported organization (iii) Type of organization (iii) Type of organization (described on col (i) listed in in col (i) of your col (i) organized support	f				received a written d	etermination	from the IR	S that it is a	Туре I, Туре	≘ II, or Type	III support	ıng organızatıon,			
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?  (iii) A family member of a person described in (i) above?  (iiii) A 35% controlled entity of a person described in (i) or (ii) above?  h Provide the following information about the supported organization(s)  (i) Name of supported organization organization (described on col (i) listed in col (i) of your col (i) organized support												Г			
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii)  and (iii) below, the governing body of the supported organization?  (ii) A family member of a person described in (i) above?  (iii) A 35% controlled entity of a person described in (i) or (ii) above?  h Provide the following information about the supported organization(s)  (i) Name of supported organization organization (described on col (i) listed in col (i) of your col (i) organized supported supported supported organization in col (i) of your col (i) organized support	g					ization accep	oted any gift	or contributi	on from any	of the					
and (III) below, the governing body of the supported organization?  (ii) A family member of a person described in (I) above?  (iii) A 35% controlled entity of a person described in (I) or (II) above?  h Provide the following information about the supported organization(s)  (i) Name of supported organization organization organization (described on col (i) listed in col (i) of your col (i) organized organized support						controls, eith	er alone or	together with	persons des	cribed in (ii)		Yes No			
(ii) A family member of a person described in (i) above?  (iii) A 35% controlled entity of a person described in (i) or (ii) above?  h Provide the following information about the supported organization(s)  (i) Name of supported organization organization organization organization (described on col (i) listed in in col (i) of your col (i) organized support															
(iii) A 35% controlled entity of a person described in (i) or (ii) above?  h Provide the following information about the supported organization(s)  (i) Name of supported organization organization (described on col (i) listed in col (i) of your col (i) organized organized support			•	•			-								
h Provide the following information about the supported organization(s)  (i) Name of supported organization (described on col (i) listed in col (i) of your col (i) organized or				*	•			above?							
supported organizationorganizationorganization in col (i) listed inthe organization in col (i) of yourorganization in col (i) organizedmonetary support	h		Provide	e the followi	ng information about	the support	ed organizat	ion(s)							
supported organizationorganizationorganization in col (i) listed inthe organization in col (i) of yourorganization in col (i) organizedmonetary support															
or IRC section document?	suppor		orted ization		organization organization in the organization in col (i) listed in in col (i) of your support?		he organization organiz		organization in m						
(see			instructions))												
Yes No Yes No Yes No					motractions,)	Yes	No	Yes	No	Yes	No				
Total	Tota	.1													

Sch	edule A (Form 990 or 990-EZ) 2012							Page <b>2</b>
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation faile	ed to q	
	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	ow, please com	iplete Pa	rt III.)	
	ection A. Public Support endar year (or fiscal year beginning					1		
	in) ►	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2	312	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not include any "unusual							
	grants ")							
2	Tax revenues levied for the							
	organization's benefit and either							
	paid to or expended on its behalf							
3	The value of services or facilities							
•	furnished by a governmental unit to							
	the organization without charge							
4	<b>Total.</b> Add lines 1 through 3							
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							
6	(f) <b>Public support.</b> Subtract line 5 from							
	line 4							
S	ection B. Total Support							
Cal	endar year (or fiscal year beginning	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 20	)12	(f) Total
_	in) ► A mounts from line 4		. ,		. ,	, ,		. ,
7 8	Gross income from interest,							
0	dividends, payments received on							
	securities loans, rents, royalties							
	and income from similar							
9	sources Net income from unrelated							
9	business activities, whether or not							
	the business is regularly carried							
	on							
10	Other income Do not include gain or loss from the sale of capital							
	assets (Explain in Part IV )							
11	Total support (Add lines 7 through							
4.0	10)		<u> </u>					
12	Gross receipts from related activitie					12		
13	<b>First five years.</b> If the Form 990 is this box and <b>stop here</b>							ization, check
	ection C. Computation of Pub				<u> </u>	<u> </u>		
14	Public support percentage for 2012			11, column (f))		14		
15	Public support percentage for 2011			, , , , , , ,		15		
	33 1/3% support test—2012. If the o	· ·	•	on line 13 and l	ine 14 is 33 1/20%		chack ti	nie hov
104	and <b>stop here.</b> The organization qua				me 1 1 13 33 1/3/0	or more,	JIICCK CI	<b>►</b> □
b	<b>33</b> 1/3% support test—2011. If the				and line 15 is 33	3 1/3% or n	nore, ch	eck this
	box and <b>stop here.</b> The organization						. 4 4	▶□
1/a	10%-facts-and-circumstances test- is 10% or more, and if the organizat							•
	in Part IV how the organization mee							
	organization				4	r	,rF3	<b>▶</b> □
b	10%-facts-and-circumstances test-							
	15 is 10% or more, and if the organ Explain in Part IV how the organizat							lv
	supported organization	ion meets the T	acts-ana-cncum:	stances test III	ic organization qu	uiiiiE5 45 i	a public	·y ▶□
18	Private foundation. If the organizat	on did not check	c a box on line 13	, 16a, 16b, 17a,	or 17b, check thi	s box and	see	·
	instructions							<b>▶</b> ┌

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

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

	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2008	<b>(b)</b> 2009	<b>(c)</b> 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	6,730,327	1,603,659	3,348,260	1,940,423	1,495,078	15,117,747
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	5,634,437	2,672,057	6,599,077	5,193,188	6,913,082	27,011,841
3	Gross receipts from activities that are not an unrelated trade or business under section 513						0
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5	The value of services or facilities furnished by a governmental unit to the organization without charge						0
6	<b>Total.</b> Add lines 1 through 5	12,364,764	4,275,716	9,947,337	7,133,611	8,408,160	42,129,588
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	1,216,036	132,903	2,432,599	960,249	347,002	5,088,789
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						0
	amount on line 13 for the year	1 216 026	122.002	2 422 500	060 240	247.002	F 000 700
с 8	Add lines 7a and 7b <b>Public support</b> (Subtract line 7c	1,216,036	132,903	2,432,599	960,249	347,002	5,088,789
	from line 6 )						37,040,799
	ation D. Total Company						
	ction B. Total Support						
	ndar year (or fiscal year	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
		(a) 2008 12,364,764	<b>(b)</b> 2009 4,275,716	(c) 2010 9,947,337	( <b>d</b> ) 2011 7,133,611	(e) 2012 8,408,160	<b>(f)</b> Total 42,129,588
Cale 9	ndar year (or fiscal year beginning in)  Amounts from line 6 Gross income from interest,						
Cale 9	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
Cale 9	ndar year (or fiscal year beginning in)  A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from	12,364,764	4,275,716	9,947,337	7,133,611	8,408,160	42,129,588
Cale 9 10a	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	12,364,764	4,275,716	9,947,337	7,133,611	8,408,160	42,129,588 3,765,031
Cale 9 10a b	ndar year (or fiscal year beginning in)  A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	12,364,764 720,883	4,275,716 312,030	9,947,337 840,028	7,133,611 953,375	8,408,160 938,715	42,129,588 3,765,031 0
Cale 9 10a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the	12,364,764 720,883	4,275,716 312,030	9,947,337 840,028	7,133,611 953,375	8,408,160 938,715	42,129,588 3,765,031 0 3,765,031
9 10a b	ndar year (or fiscal year beginning in)  A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c,	12,364,764 720,883	4,275,716 312,030	9,947,337 840,028	7,133,611 953,375	8,408,160 938,715	42,129,588 3,765,031 0 3,765,031
Cale 9 10a  b  c 11 12	ndar year (or fiscal year beginning in)  A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	12,364,764 720,883 720,883	4,275,716 312,030 312,030 4,587,746	9,947,337 840,028 840,028	7,133,611 953,375 953,375 953,375	938,715 938,715	42,129,588 3,765,031 0 3,765,031 0 45,894,619
Cale 9 10a  b  c 11 12	ndar year (or fiscal year beginning in)  A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the check this box and stop here	12,364,764 720,883 720,883 13,085,647 for the organization	4,275,716  312,030  312,030  4,587,746  in's first, second,	9,947,337 840,028 840,028 10,787,365 third, fourth, or fi	7,133,611 953,375 953,375 953,375	938,715 938,715	42,129,588  3,765,031  0  3,765,031  0  45,894,619
Cale 9 110a  b  c 11  12  13 14  See	ndar year (or fiscal year beginning in) ►  A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is five this box and stop here ection C. Computation of Puble Public support percentage for 2012	12,364,764  720,883  720,883  13,085,647  for the organization	4,275,716  312,030  312,030  4,587,746  In's first, second, or centage  divided by line	9,947,337 840,028 840,028 10,787,365 third, fourth, or fi	7,133,611 953,375 953,375 953,375	938,715 938,715	42,129,588  3,765,031  0  3,765,031  0  45,894,619
Cale 9 10a  b  c 11  12  13 14  See 15	ndar year (or fiscal year beginning in)  A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the check this box and stop here	12,364,764  720,883  720,883  13,085,647  for the organization	4,275,716  312,030  312,030  4,587,746  In's first, second, or centage  divided by line	9,947,337 840,028 840,028 10,787,365 third, fourth, or fi	7,133,611 953,375 953,375 953,375	938,715 938,715 938,715 9,346,875 501(c)(3) organ	42,129,588  3,765,031  0  3,765,031  0  45,894,619  ization,
Cale 9 10a  b  c 11  12  13 14  See 15 16  See	ndar year (or fiscal year beginning in) ►  A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is for the check this box and stop here ection C. Computation of Public support percentage from 201  Public support percentage from 201  ection D. Computation of Inventice in the computation i	12,364,764  720,883  720,883  720,883  13,085,647  for the organization  lic Support Pere (line 8, column (1) 1 Schedule A, Parestment Incompared to the col	4,275,716  312,030  312,030  4,587,746  In's first, second, or centage (i) divided by line rt III, line 15  me Percentage	9,947,337 840,028 840,028 10,787,365 third, fourth, or fi	7,133,611 953,375 953,375 8,086,986 fth tax year as a	938,715  938,715  938,715  9,346,875  501(c)(3) organ	42,129,588  3,765,031  0  3,765,031  0  45,894,619  Ization,  80 708 % 75 795 %
Cale 9 10a  b  c 11  12  13 14  See 15 16  See 17	hdar year (or fiscal year beginning in) ►  A mounts from line 6  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (Add lines 9, 10c, 11, and 12)  First five years. If the Form 990 is feeck this box and stop here  ction C. Computation of Publ Public support percentage from 201  ction D. Computation of Inve	12,364,764  720,883  720,883  720,883  in the organization of the	4,275,716  312,030  312,030  4,587,746  In 's first, second, or centage  of divided by line rt III, line 15  me Percentage  lumn (f) divided by	9,947,337 840,028 840,028 10,787,365 third, fourth, or fill 13, column (f))	7,133,611 953,375 953,375 8,086,986 fth tax year as a	938,715  938,715  938,715  9,346,875  501(c)(3) organ	42,129,588  3,765,031  0  3,765,031  0  45,894,619  Ization,  80 708 %
Cale 9 10a  b  c 11  12  13 14  See 15 16  See 17 18	ndar year (or fiscal year beginning in) ►  A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is for the check this box and stop here ection C. Computation of Public support percentage from 201  Public support percentage from 201  ection D. Computation of Inventice in the computation i	12,364,764  720,883  720,883  720,883  ic Support Pe (line 8, column (in 1 Schedule A, Patestment Incomposition of the column of	4,275,716  312,030  312,030  4,587,746  In's first, second, Incentage Odivided by line Int III, line 15  The Percentage  Jumn (f) divided by line Int III, line 15  The Percentage  The Percen	9,947,337 840,028 840,028 10,787,365 third, fourth, or fill 13, column (f)) 1e by line 13, column	7,133,611 953,375 953,375 8,086,986 fth tax year as a	938,715  938,715  938,715  9,346,875  501(c)(3) organ  15 16 17 18	42,129,588  3,765,031  0  3,765,031  0  45,894,619  Ization,  80 708 %  75 795 %  8 204 %  8 370 %

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

Schedule A (Form 990 or 990-EZ) 2012

Schedule A (Form 990 or 990-EZ) 2012

DLN: 93493316050233

Inspection

OMB No 1545-0047

Open to Public

### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

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

**Supplemental Financial Statements** 

Name of the organization

Employer identification number

HE MS HERSHEY FOUNDATION				
			5242734	
art I Organizations Maintaining Donor Adv organization answered "Yes" to Form 990,		-unds	or Account	<b>s.</b> Complete if
organization answered Tes to Form 550	(a) Donor advised funds		(b) Funds and	other accounts
Total number at end of year			-	
Aggregate contributions to (during year)				
Aggregate grants from (during year)				
Aggregate value at end of year				
Did the organization inform all donors and donor adviso funds are the organization's property, subject to the organization's property.		nor advi	sed	Г Yes Г I
Did the organization inform all grantees, donors, and do used only for charitable purposes and not for the benefit conferring impermissible private benefit?				ΓYes ΓΙ
art II Conservation Easements. Complete if	the organization answered "Yes"	to Forn	n 990. Part I	V. line 7.
Purpose(s) of conservation easements held by the orga Preservation of land for public use (e g , recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a	or education)  Preservation of a	a certifie	d historic stru	cture
easement on the last day of the tax year			Held at the	e End of the Year
Total number of conservation easements		2a	ricia at tir	c the or the real
Total acreage restricted by conservation easements		2b		
Number of conservation easements on a certified histo	oric structure included in (a)	2c		
Number of conservation easements included in (c) acq historic structure listed in the National Register	uired after 8/17/06, and not on a	2d		
Number of conservation easements modified, transferre	ed, released, extinguished, or termina	ted by th	ie organizatior	n during
the tax year <b>►</b>				
Number of states where property subject to conservati	on easement is located .			
Does the organization have a written policy regarding t enforcement of the conservation easements it holds?	me periodic monitoring, inspection, na	nanng or	violations, an	□
Staff and volunteer hours devoted to monitoring, inspec	cting, and enforcing conservation ease	ements c	luring the year	-
<b>-</b>				
A mount of expenses incurred in monitoring, inspecting	, and enforcing conservation easemer	its during	g the year	
<b>▶</b> \$				
Does each conservation easement reported on line $2(d)$ and section $170(h)(4)(B)(H)^2$	d) above satisfy the requirements of se	ection 17	70(h)(4)(B)(ı)	Γ Yes Γ I
In Part XIII, describe how the organization reports con balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easeme	e footnote to the organization's financi			
rt III Organizations Maintaining Collections Complete if the organization answered "You		, or Otl	her Similar	Assets.
If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asset service, provide, in Part XIII, the text of the footnote to	16 (ASC 958), not to report in its rev ts held for public exhibition, education	, or rese	arch in further	
If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asset service, provide the following amounts relating to these	ts held for public exhibition, education			
(i) Revenues included in Form 990, Part VIII, line 1			<b>►</b> \$	
(ii) Assets included in Form 990, Part X			<b>►</b> \$	
If the organization received or held works of art, histori following amounts required to be reported under SFAS				ide the
Revenues included in Form 990, Part VIII, line 1	. <del>-</del>		<b>&gt;</b> \$	

**b** Assets included in Form 990, Part X

Par	<b>TIT</b> Organizations Maintaining Co	llections of Ar	t, His	<u>stori</u>	<u>cal T</u> i	<u>reasures, or O</u>	<u>the</u>	<u>r Similar As</u>	ssets (c	<u>ontınued)</u>
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other reco	rds, c	heck	any of	the following that a	are a	significant us	e of its	
а	Public exhibition		d	Γ	Loan	or exchange progr	ams			
b	Scholarly research		e	Г	Othe	r				
c	▼ Preservation for future generations									
4	Provide a description of the organization's co Part XIII	ollections and expl	aın ho	w the	y furth	er the organization	's ex	empt purpose	ın	
5	During the year, did the organization solicit	or receive donatior	s of a	rt, hıs	torıcal	treasures or othe	rsım	nılar		
	assets to be sold to raise funds rather than t								☐ Yes	✓ No
Par	Part IV, line 9, or reported an ar						d "Y	es" to Form	990, 	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					utions or other ass	ets i	not	┌ Yes	√ No
b	If "Yes," explain the arrangement in Part XI	II and complete th	e follo	wing t	able	Г		_		
_						-		Ai	mount	
C	Beginning balance					-	1c			
d	Additions during the year					-	1d			
e •	Distributions during the year					-	1e			
f	Ending balance	222 5		_		L	1f			
2a	Did the organization include an amount on Fo								☐ Yes	Г No
ь	If "Yes," explain the arrangement in Part XII									<u>'</u>
Pa	rt V Endowment Funds. Complete	If the organization (a)Current year		swer )Prior y		s" to Form 990, b (c)Two years back				ears back
1a	Beginning of year balance	25,193,826	(5)		003,061	21,949,743		20,214,188		28,927,435
b	Contributions	28,958			25,910	34,320		1,686,453		
c	Net investment earnings, gains, and losses	1,711,659			173,169	3,036,666		1,712,890		-3,996,038
d	Grants or scholarships									
е	Other expenditures for facilities and programs	51,706			8,314	17,668		1,663,788		4,717,209
f	Administrative expenses									
g	End of year balance	26,882,737			193,826			21,949,743		20,214,188
2	Provide the estimated percentage of the cur	rent year end balar	nce (lir	ne 1g	, colum	nn (a)) held as				
а	Board designated or quasi-endowment 🕨									
b	Permanent endowment ►									
С	Temporarily restricted endowment ► 100 The percentages in lines 2a, 2b, and 2c sho	000 % uld equal 100%								
3a	Are there endowment funds not in the posse	ssion of the organi	zatıon	that	are hel	d and administered	d for	the		l st
	organization by  (i) unrelated organizations		_				_		(i) Yes	No No
	(ii) related organizations		٠.						(ii) Yes	110
b	If "Yes" to 3a(II), are the related organization							3	<b>b</b> Yes	
4	Describe in Part XIII the intended uses of the	ne organization's e	ndown	nent f	unds				•	
Par	t VI Land, Buildings, and Equipme	ent. See Form 9	90, Pa							
	Description of property				Cost or s (Inves			(c) Accumulated depreciation	a (a) Bo	ook value
1a	Land					1	,000			1,000
b	Buildings					21,982	,130	5,526,07	78 :	16,456,052
C	Leasehold improvements					8,141	,839	5,120,8	57	3,020,982
d	Equipment					2,446		1,880,98		565,198
	Other				<b>5</b> ) (		,783	,		32,334
Tota	I. Add lines 1a through 1e (Column (d) must e	equal Form 990, Part	X, colu	umn (	B), line	10(c).)		🟲		20,075,566

art VIII Investments—Other Securities. Sec		
(a) Description of security or category	( <b>b)</b> Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
)Financial derivatives		
)Closely-held equity interests		
)O ther		
) COMMON TRUST FUNDS - FOREIGN	6,739,078	F
tal. (Column (b) must equal Form 990, Part X, col (B) line 12)	6,739,078	
rt VIII Investments—Program Related. S	-	
(a) Description of investment type	(b) Book value	(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
		•
art IX Other Assets. See Form 990, Part X,	line 15.	
	line 15.	(b) Book value
art IX Other Assets. See Form 990, Part X,	line 15.	(b) Book value
art IX Other Assets. See Form 990, Part X,	line 15.	(b) Book value
art IX Other Assets. See Form 990, Part X,	line 15.	(b) Book value
art IX Other Assets. See Form 990, Part X,	line 15.	(b) Book value
<b>Other Assets.</b> See Form 990, Part X,	line 15.	(b) Book value
<b>Other Assets.</b> See Form 990, Part X,	line 15.	(b) Book value
<b>Other Assets.</b> See Form 990, Part X,	line 15.	(b) Book value
<b>Other Assets.</b> See Form 990, Part X,	line 15.	(b) Book value
<b>Other Assets.</b> See Form 990, Part X,	line 15.	(b) Book value
<b>Other Assets.</b> See Form 990, Part X,	line 15.	(b) Book value
<b>Other Assets.</b> See Form 990, Part X,	line 15.	(b) Book value
<b>Other Assets.</b> See Form 990, Part X,	line 15.	(b) Book value
ort IX Other Assets. See Form 990, Part X,	line 15.	(b) Book value
ort IX Other Assets. See Form 990, Part X,	line 15.	(b) Book value
<b>Other Assets.</b> See Form 990, Part X,	line 15.	(b) Book value
<b>Other Assets.</b> See Form 990, Part X,	line 15.	(b) Book value
Other Assets. See Form 990, Part X,  (a) Descri	line 15.	
tal. (Column (b) must equal Form 990, Part X, col.(B) line i	Ine 15. ription	(b) Book value
tal. (Column (b) must equal Form 990, Part X, col.(B) line in the column of the column	Ine 15. ription  (5.) X, line 25.	
tal. (Column (b) must equal Form 990, Part X, col.(B) line in the column (a) Description of liability	Ine 15. ription	
tal. (Column (b) must equal Form 990, Part X, col.(B) line in a column (a) Description of liability	Ine 15. ription  (5.) X, line 25.	
tal. (Column (b) must equal Form 990, Part X, col.(B) line in the column (b) must equal Form 990, Part X, col.(B) line in the column (a) Description of liability deral income taxes	Ine 15.  ription  45.)  X, line 25.  (b) Book value	
cal. (Column (b) must equal Form 990, Part X, col.(B) line in art X  Other Liabilities. See Form 990, Part X, col.(B) line in art X  Other Liabilities. See Form 990, Part X, col.(B) line in a column (a) Description of liability deral income taxes  CRUED POST RETIREMENT BEN OB	### 15.  ###	
cal. (Column (b) must equal Form 990, Part X, col.(B) line and art X  Other Liabilities. See Form 990, Part (a) Description of liability  deral income taxes  CRUED POST RETIREMENT BEN OB  AN GUARANTEE OBLIGATION	15.) X, line 25.  (b) Book value  0 4,311,586 13,966,102	
tal. (Column (b) must equal Form 990, Part X, col.(B) line and tal. (Column (b) must equal Form 990, Part X, col.(B) line and tal. (a) Description of liability  deral income taxes  CRUED POST RETIREMENT BEN OB  AN GUARANTEE OBLIGATION	### 15.  ###	
tal. (Column (b) must equal Form 990, Part X, col.(B) line in the column of the column	15.) X, line 25.  (b) Book value  0 4,311,586 13,966,102	
tal. (Column (b) must equal Form 990, Part X, col.(B) line in the column of the column	15.) X, line 25.  (b) Book value  0 4,311,586 13,966,102	
tal. (Column (b) must equal Form 990, Part X, col.(B) line and the column (b) must equal Form 990, Part X, col.(B) line and the column (a) Description of liability  deral income taxes  CRUED POST RETIREMENT BEN OB  AN GUARANTEE OBLIGATION	15.) X, line 25.  (b) Book value  0 4,311,586 13,966,102	
tal. (Column (b) must equal Form 990, Part X, col.(B) line in the column (b) must equal Form 990, Part X, col.(B) line in the column (a) Description of liability  deral income taxes  CRUED POST RETIREMENT BEN OB  DAN GUARANTEE OBLIGATION	15.) X, line 25.  (b) Book value  0 4,311,586 13,966,102	
tal. (Column (b) must equal Form 990, Part X, col.(B) line and the column (b) must equal Form 990, Part X, col.(B) line and the column (a) Description of liability  deral income taxes  CRUED POST RETIREMENT BEN OB  AN GUARANTEE OBLIGATION	15.) X, line 25.  (b) Book value  0 4,311,586 13,966,102	
tal. (Column (b) must equal Form 990, Part X, col.(B) line in the column (b) must equal Form 990, Part X, col.(B) line in the column (a) Description of liability  deral income taxes  CRUED POST RETIREMENT BEN OB  DAN GUARANTEE OBLIGATION	15.) X, line 25.  (b) Book value  0 4,311,586 13,966,102	
Other Assets. See Form 990, Part X,  (a) Description of liability  Indeed to the company of the	15.) X, line 25.  (b) Book value  0 4,311,586 13,966,102	
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otal. (Column (b) must equal Form 990, Part X, col.(B) line in the column (b) must equal Form 990, Part X, col.(B) line in the column (a) Description of liability in the column (b) Description of liability in the column (c) Description (c) Des	15.) X, line 25.  (b) Book value  0 4,311,586 13,966,102	
otal. (Column (b) must equal Form 990, Part X, col.(B) line at al. (Column (b) must equal Form 990, Part X, col.(B) line at a column (a) Description of liability  deral income taxes  CCRUED POST RETIREMENT BEN OB  DAN GUARANTEE OBLIGATION	15.) X, line 25.  (b) Book value  0 4,311,586 13,966,102	
tal. (Column (b) must equal Form 990, Part X, col.(B) line in the column (b) must equal Form 990, Part X, col.(B) line in the column (a) Description of liability  deral income taxes  CRUED POST RETIREMENT BEN OB  DAN GUARANTEE OBLIGATION	15.) X, line 25.  (b) Book value  0 4,311,586 13,966,102	

Part XI Reconciliation of	Revenue per Audited Financia	l Statements With Revenue p	er R	eturn
1 Total revenue, gains, and ot	her support per audited financial staten	nents	1	11,678,798
	but not on Form 990, Part VIII, line 12	i i		
<u>-</u>	stments	· · ·		
	nts			
	[]	2d 31,566		
e Add lines <b>2a</b> through <b>2d</b>			2e	-5,445,328
3 Subtract line 2e from line 1			3	17,124,126
4 Amounts included on Form 9	990, Part VIII, line 12, but not on line 1	ı		
<b>a</b> Investment expenses not in	cluded on Form 990, Part VIII, line 7b	. 4a		
·		. 4b	_	
c Add lines 4a and 4b			4c	17 124 126
	nd 4c. (This must equal Form 990, Part Expenses per Audited Financi		5 s ner	17,124,126 Return
	per audited financial statements		1	11,727,202
2 Amounts included on line 1	but not on Form 990, Part IX, line 25			
<b>a</b> Donated services and use o	f facilities	2a		
<b>b</b> Prior year adjustments .		2b		
		. 2c		
·	()	<b>2d</b> 411,104	1	
-			2e 3	11,316,098
	990, Part IX, line 25, but not on line <b>1</b> :		-	11,316,098
	cluded on Form 990, Part VIII, line 7b	4a		
·	[)	4b	1	
c Add lines 4a and 4b			4c	
5 Total expenses Add lines 3	and <b>4c.</b> (This must equal Form 990, Pa	rt I, line 18 ) . . . . . .	5	11,316,098
Part XIII Supplemental I				
	descriptions required for Part II, lines 3 XI, lines 2d and 4b, and Part XII, lines			
information	<u>'</u>		•	,
Identifier	Return Reference	Explanat	ion	
Schedule D, Part III, Line 1a	Museum Collections	The Museum's collections are comused as a means to educate the pu	•	
SCHEDULE D, PART V, LINE 4	INTENDED USES OF THE ORGANIZATION'S ENDOWMENT FUNDS	preserved, and cared for The Foun collections when they are acquired Collections of Art, Historical Treas Assets The M S Hershey Foundati following (1) artifacts and historical related to the life and legacy of Milit personal life to his various busines artifacts and historical oral and wricommunity of Hershey (3) artifacts German culture (4) ethnographic mpeople of the United States (5) plaid Garden The above collections furtifoundation's exempt purpose of edenichment for the residents of the displayed in an accessible public mgardens  MILTON S HERSHEY MADE HIS FOUNDATION ON DECEMBER 5, OF CREATING AND ENDOWING 1 FOUNDATION FOR EDUCATION WAS FUNDED FOR SEVERAL USE PURPOSES AS FOLLOWS (1) FOLL AND MAINTENANCE IN WHOLE (1) MORE EDUCATIONAL INSTITUT TO WNSHIP, PENNSYLVANIA, AN PUBLIC SCHOOLS OF DERRY TO IMPROVEMENT AND ELEVATION EDUCATION, AND/OR (3) THE VOR PROFESSIONAL EDUCATION DERRY TOWNSHIP IN ADDITION of Managers, the endowment funds land and erect a building or building	Sche ures, and oral ton S ses to that control that contro	dule D, Part III, Line 4 and Other Similar ollection includes the and written documents Hershey from his his philanthropies (2) ocuments related to the document Pennsylvania Is related to indigenous at the Hershey S Hershey In and cultural ley area by being m, public archive and TO THE M S HERSHEY WITH THE PURPOSE RPETUITY THIS RPOSES THE TRUST TENTS AND ESTABLISHMENT PART OF ONE OR IN DERRY (2) THE SUPPORT OF IP AND THE THE STANDARD OF IONAL, CULTURAL NY RESIDENT OF In approval by the Board e utilized to purchase
Schedule D, Part XI, Line 2D	LOAN GUARANTEE OBLIGATION	The M S HERSHEY Foundation (FC building, which is the site of The He order to provide funding for the prointo agreements dated March 1, 20 Derry Industrial and Commercial D (Authority) Under these agreemen responsible for the construction of COMPLETION, The Foundation so Authority at the cost to construct a \$20,000 per year for a period of 29 building ownership will revert back addition, the Foundation guarantee loan between the Authority and PN (PNC Bank) to fund the construction December 2007, the Foundation guarate swap in the notional amount of Authority and PNC Bank to manage service cost from rising interest ra Foundation guaranteed an additional loan between the Authority and PN construction of the project SCHED 48 (ASC 740) FOOTNOTE TAX PORECOGNIZED OR DERECOGNIZED LIKELY THAN NOT" THRESHOLD OR EXPECTED TO BE TAKEN IN FOUNDATION'S ACCOUNTING PUNCERTAIN TAX POSITIONS IS INCOME TAX POSITIONS ARE MLARGEST AMOUNT THAT IS GRED OF BEING RECOGNIZED THE FOUNDATION RECORD THE	ershey lect, the	Story Museum In the Foundation entered with the Township of prenent Authority of Foundation was wilding UPON building to the ased it back for as, at which time the Foundation In 1,000,000 nonrecourse with the foundation of the project During
Schedule D, Part XII, Line 2d		Other Expenses not on return SPE (reclass) \$ 31,566 INCREASE IN		
		COST 417,785 DECREASE IN IN LIABILITY (38,247) \$ 41	TERES	ST RATE SWAP

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DLN: 93493316050233

OMB No 1545-0047

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Name of the organization

THE MS HERSHEY FOUNDATION

**SCHEDULE G** 

**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.

Open to Public Inspection

**Employer identification number** 

23-6242734

_						1 110 4 11 1		
Pa	rt I Fundraising Act	ivities. Complete	if the oi	rganızatı	on a	inswered "Yes" t	to Form 990, Part IV	, line 17.
1	Indicate whether the organi	zation raised funds	through ar	ny of the f	follov	ving activities Che	eck all that apply	
а	Mail solicitations			e	Γ	Solicitation of non	-government grants	
b	☐ Internet and email solid	citations		f	Γ	Solicitation of gov	ernment grants	
c	Phone solicitations			g	Γ	Special fundraisin	g events	
d	In-person solicitations							
2a	Did the organization have a or key employees listed in	Form 990, Part VII)	or entity	ın connec	tion	with professional f	undraising services?	┌ Yes ┌ No
b	If "Yes," list the ten highest to be compensated at least			undraiser	s) pu	irsuant to agreeme	ents under which the ful	ndraiser is
•	(i) Name and address of Individual or entity (fundraiser)	(ii) Activity	fundrais custo cont	Did ser have ody or crol of outions?	(iv	) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
			103					
Tot a	List all states in which the o	organization is regis	· · · ·	<b>▶</b> censed to	solı	cıt funds or has be	en notified it is exempt	from registration or
	licensing							

Pa	rt II	Fundraising Events. Commore than \$15,000 of fundraevents with gross receipts g	aising event contributi			
			(a) Event #1  BYND FOOTLIGHTS  (event type)	(b) Event #2  CULTURAL EXPRS (event type)	(c) O ther events  1 (total number)	(d) Total events (add col (a) through col (c))
₽	1	Gross receipts	22,474	23,875	28,543	74,892
Revenue	2	Less Contributions				
- <u>~</u>	3	Gross income (line 1 minus line 2)	22,474	23,875	28,543	74,892
	4	Cash prizes				
m	5	Noncash prizes				
ul Sei	6	Rent/facility costs				
Expenses	7	Food and beverages .				
Direct -	8	Entertainment				
Δ	9	Other direct expenses .	3,993	10,357	17,216	31,566
	10	Direct expense summary Add lin	es 4 through 9 in column	(d)		(31,566)
	11	Net income summary Combine li			•	43,326
Par	t II	Gaming. Complete if the or \$15,000 on Form 990-EZ, lii		'Yes" to Form 990, Pa	rt IV, line 19, or repo	
Revenue	1	Gross revenue	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
		Cash prizes				
Expenses		Non-cash prizes				
		·				
Direct		Rent/facility costs				
	5	Other direct expenses	_	_	_	
	6	Volunteer labor	「 Yes 「 No	│ Yes	│ Yes │ No	
	7	Direct expense summary Add lines	s 2 through 5 ın column (d	d)	•	
	8	Net gaming income summary Com	bine lines 1 and 7 in colu	mn (d)	<u> ▶ </u>	
9		er the state(s) in which the organiza				
a b		the organization licensed to operate No," explain				
10a b		re any of the organization's gaming   Yes," explain	licenses revoked, suspen	ded or terminated during	the tax year?	

70ES	s the organization operate gaining activities with nonlinembers?							
.2		neficiary or trustee of a trust or a men						
	formed to administer charitable of	gaming?		· · · · Fyes F No				
.3	Indicate the percentage of gamir	ng activity operated in						
а	The organization's facility							
b	An outside facility			13b				
.4	Enter the name and address of th	ne person who prepares the organizati	on's gaming/special events books	and records				
	Name ►							
	Address 🟲							
	revenue?	ntract with a third party from whom the						
	amount of gaming revenue retain	ed by the third party 🟲 \$						
C	If "Yes," enter name and address	s of the third party						
	Name 🟲							
	Address 🟲							
<b>.6</b>	Gaming manager information							
	Name 🕨							
	Gaming manager compensation 🟲 \$							
	Description of services provided	<b>&gt;</b>						
	☐ Director/officer	Employee	Independent contractor					
.7	Mandatory distributions							
а	Is the organization required unde	er state law to make charitable distrib	utions from the gaming proceeds to					
	retain the state gaming license?			Г <sub>Yes</sub> Г <sub>No</sub>				
b	Enter the amount of distributions	required under state law distributed t	to other exempt organizations or sp	ent				
		activities during the tax year 🟲 💲						
Par	columns (III) and (v), a	<b>mation.</b> Complete this part to pr and Part III, lines 9, 9b, 10b, 15b ditional information (see instructi	, 15c, 16, and 17b, as applical					
	Identifier	Return Reference	Explana	tion				

DLN: 93493316050233

OMB No 1545-0047

#### **Schedule J** (Form 990)

Department of the Treasury

Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990,

**Compensation Information** 

Part IV, question 23. ► Attach to Form 990. ► See separate instructions. Open to Public Inspection

Name of the organization THE MS HERSHEY FOUNDATION **Employer identification number** 

23-6242734

Pa	Questions Regarding Compensation					
					Yes	No
1a	Check the appropriate box(es) if the organization prov					
	990, Part VII, Section A, line 1a Complete Part III t  First-class or charter travel	.o prov	Housing allowance or residence for personal use			
	Travel for companions	<u>'</u>	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Ë	Health or social club dues or initiation fees			
	Discretionary spending account	Ė	Personal services (e g , maid, chauffeur, chef)			
	, , , ,	,				
ь	If any of the boxes in line 1a are checked, did the org	anızatı	on follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses des	cribed	above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to re					
	directors, trustees, and the CEO/Executive Director,	regard	ling the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organi					
	organization's CEO/Executive Director Check all that used by a related organization to establish compensa					
	Compensation committee Independent compensation consultant	<u>'</u>	Written employment contract Compensation survey or study			
	Form 990 of other organizations	, V	Approval by the board or compensation committee			
	, Tomisso of other organizations	'	Approval by the board of compensation committee			
4	During the year, did any person listed in Form 990, Pa	art VII	, Section A, line 1a with respect to the filing organization			
	or a related organization					
а	Receive a severance payment or change-of-control p	aymen	t?	4a	Yes	
b	Participate in, or receive payment from, a supplement	al non	qualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-bas	sed co	mpensation arrangement?	4c	Yes	
	If "Yes" to any of lines 4a-c, list the persons and pro-	vide th	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only mus	t comp	olete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, I					
	compensation contingent on the revenues of					
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section A, I compensation contingent on the net earnings of	ıne 1a	, did the organization pay or accrue any			
				١.		
a	The organization?			6a		No
b	Any related organization?			6b		No
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, I payments not described in lines 5 and 6? If "Yes," de			7		No
8	Were any amounts reported in Form 990, Part VII, pa					
	subject to the initial contract exception described in	subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe				
	ın Part III			8		Νo
9	If "Yes" to line 8, did the organization also follow the	rebutta	able presumption procedure described in Regulations			
	section 53 4958-6(c)?			9		

#### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and	(D) Nontaxable	(E) Total of columns	
		(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990
(1)GAYLA M BUSH ASST TREASURER/ASST SECRETARY	(i) (ii)	0 168,980	0 63,258	0 2,371	0 34,950	0 9,635	0 5 279,194	0
(2)KENNETH GALL FORMER OFFICER to 7/09	(i) (ii)	0 110,284	0 20,023	0 521	0 20,190	0 25,091	0 176,109	0
(3)MARY LOUISE PORTER ESQ SECRETARY TO 9/11	(i) (ii)	0 44,092	0	0 321,181	0 5,859	0 3,229	0 0 374,361	0
(4)JAMES M MEAD BOARD OF MANAGERS	(i) (ii)	200,000	0	0	0 120,000	0 2,026	0 0 322,026	0
(5)DONALD PAPSON EXECUTIVE DIRECTOR	(i) (ii)	133,734 68,166		0	9,397 0	14,098	157,229 68,166	
(6)WILLIAM DAVIES TREASURER to 7/12	(i) (ii)	0 240,063	0 68,503	0 826	0 13,823	0 15,819	0 339,034	0
(7)MARC WOOLLEY SECRETARY 1/12	(i) (ii)	0 364,644	0	0 1,980	0	0 4,206	0 5 370,830	0

Schedule J (Form 990) 2012

#### Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Identifier	Return Reference	Explanation
SCHEDULE J, PART I, QUESTION 4a	KETURN KETERNCE	During the 2012 year, a severance payment was made by related organizations. None of the payments were made by the Foundation SCHEDULE 1, PART I, QUESTION 46 SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN DOVALD PROVIDED TO THE PAYON RETIREMENT PLAN DOVALD PROVIDED TO THE CONTROL OF THE SEMPLOYMENT WITH THE MS NOT PLAN DOVALD PROVIDED TO THE CONTROL OF THE SEMPLOYMENT WITH THE MS HEY COUNTROL OF THE PAYON RETIREMENT PLAN DOVALD PROVIDED TO THE SEMPLOYMENT WITH THE MS HEY COUNTROL OF THE PAYON RETIREMENT PLAN DOVALD PROVIDED TO THE SEMPLOYMENT WITH THE MS HEY COUNTROL OF THE PAYON RETIREMENT PLAN DOWALD PROVIDED THE PAYON RETIREMENT PLAN DOWALD PROVIDED THE PAYON RETIREMENT PLAN DOWALD PROVIDED THE PAYON RETIREMENT PLAN DOWALD PAYON RETI
		The M S Hershey Foundation matters would be an accumulation of the officer and staff time Each officer's individual time is detailed on Form 990, Part VII
FORM 990, PART VII	HOURS SPENT ON RELATED ORGANIZATIONS	The following table details M S Hershey Foundation board of managers members and officers who are also board of managers members and officers of related organizations and the hours spent per week on duties for these related organizations MILTON HERSHEY HERSHEY entertAINNMNT HERSHEY SCHOOL Company & RESORTS CO & SCHOOL TRUST JAMES SHEEHAN 7 0 JAMES MEAD 4 5 3 0 - VELMA REDMOND 8 0 RICHARD ZILMER 9 5 GAYLA BUSH 53 WILLIAM DAVIES 45 KENNETH GALL 55 marc woolley 48 NOTE Time spent on Hershey Trust Company matters is included in the Milton Hershey School & School Trust average hours worked per week
FORM 990, PART VII/SCHEDULE J	RELATED ORGANIZATION COMPENSATION	THE RELATED ORGANIZATIONS PROVIDE THE FOUNDATION WITH ALL PERTINENT PAYROLL INFORMATION REQUIRED TO COMPLETE PART VII AND SCHEDULE J OF THE FORM 990

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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93493316050233

OMB No 1545-0047

2012

Open to Public Inspection

# 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.

FAttach to Form 990 or 990-EZ.

Name of the organization
THE MS HERSHEY FOUNDATION

Employer identification number

23-6242734

ldentifier	Return Reference	Explanation
FORM 990, PART I, LINE 6	SUMMARY SECTION	Volunteers are a vital part of the MS Hershey Foundation Many of our volunteers have introduced a child to history, nature or live theatre. Others have helped beautify Hershey Gardens, ushered a show at the Hershey Theatre or proudly answered questions about our community's rich history at the museum. The Hershey Story

ldentifier	Return Reference	Explanation
FORM 990, PART III, LINE 4A-D	STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS	Program Service Accomplishment #1 (Line 4a) Completed during Milton Hersheys Great Building Campaign program in the 1930s, the new Community Center Building housed Hershey Theatre, which first opened as a vaudeville and movie house. Today, the Theatre is the area's premier performing arts center. Presenting touring Broadway shows, classical music, dance attractions and world-renow ned entertainers, the Theatres rich history and performing arts presentations provide cultural and educational enrichment to patrons of all ages. Developed in 2008, The Hershey Theatre Apollo Awards is a scholarship program which recognizes excellence in local high school theater productions. All Derry Township School District students may participate in field trips to the Hershey Theatre at no charge. Number Benefitted. 117,400 Expenses \$6,303,025 Revenue. \$5,496,237 Program Service Accomplishment. #2 (Line 4b). The Hershey Story, The Museum on Chocolate Avenue opened in 2009. The Museum Experience is an educational, interactive permanent exhibit space that shares the stories of Milton S. Hershey, his businesses, philanthropies and community. The Apprentice Programs an activity designed to further engage children as they explore the exhibits. In the Chocolate Lab, guests learn about the origins of chocolate and participate in hands-on activities using chocolate. In the coming year, planned special exhibits highlight the Native American and Pennsylvania German collections, originally purchased by Milton Hershey. School field trips, homeschool and summer camp programs all meet PA state academic standards. All Derry Township School District students may participate in field trips to the Museum Experience at no charge. Number Benefitted 117,000 Expenses. \$3,698,697 Revenue. \$1,281,935 Program Service.  Accomplishment #3 (Line 4c). Hershey Gardens was originally developed in 1937 at Milton Hersheys request. It has since expanded and now features 23 acres of seasonal displays and rare trees within 11 theme gardens. The Childrens Garden and

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2		Several of the board of managers members and officers of the filing organization also serve as directors and officers of business entities that are related to this filing organization

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 3	GOVERNING BODY & MANAGEMENT	The MS Hershey Foundation has several operations in Hershey, Pennsylvania, including the Hershey Gardens, the Hershey Community Archives, the Hershey Theatre, the Hershey Story, and Chocolatetown Square, collectively referred to as "Foundation Operations" These operations exist to preserve and enhance Milton Hershey's legacy and community vision and to provide educational and cultural enrichment to residents and visitors of Hershey, PA. Hershey Entertainment & Resorts Company (HE&R), a related for profit operation, has established a reputation for providing high quality services, and has extensive experience providing live performance entertainment, retail, catering, food and beverage and associates services. HE&R owns and operates numerous entertainment and hospitality venues in Hershey, Pennsylvania. Founded in 1927, by Milton Hershey, HE&R's mission and goals include demonstrating sensitivity about the quality of life for the community and using its reservoir of talent and experience to make a positive difference with the MS. Hershey Foundation in order to enhance Foundation operations and further its tax-exempt mission, the MS. Hershey Foundation entered into a contract with HE&R to provide various services including the following. 1. Wedding, party and event caterings 2. Retail operations support 3. Theatre Operations management 4. IT, communications and security services. Prior to the commencement of services, the MS. Hershey Foundation, assisted by independent outside counsel, evaluated the proposed services to ensure compliance with intermediate sanctions rules pursuant to IRC Section 4958 and Private Inurement Rules pursuant to Treasury Regulations 53.4958-4. These services are reviewed and approved by the Board of Managers on an annual basis. The MS Hershey Foundation has established an independent committee to periodically review the services being performed and the contractual relationship with HE&R to ensure it is in the best interest of the MS. Hershey Foundation to continue using the services of

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	FORM 990 REVIEW PROCESS	The Form 990 is prepared under the direction of the Director of Finance of the MS. Hershey Foundation. The Form 990 is reviewed by the Executive Director of the MS. Hershey Foundation, outside counsel and its independent tax advisors who sign the return as "paid preparers." The board of managers of the MS. Hershey Foundation reviews and discusses the Form 990 at one of its scheduled meetings prior to filing the return with the Internal Revenue Service, noting key disclosures.

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	CONFLICT OF INTEREST	The Board of Managers, Officers and key employees of the M.S. HERSHEY FOUNDATION have a fiduciary relationship with the M.S. HERSHEY FOUNDATION which requires that they act in good faith with regard to the M.S. HERSHEY FOUNDATION's best interests. It is essential in fulfilling their duties that they apply the highest moral, legal, and ethical standards in their conduct and business relationships. Both, the M.S. Hershey Foundation and the Hershey Trust Company, trustee for the M.S. HERSHEY FOUNDATION, have written conflict of interest polices which are intended to permit the M.S. HERSHEY FOUNDATION and its Managers, Officers and other key employees to identify, evaluate and address any conflict of interest that might call into question this fiduciary duty to the M.S. HERSHEY FOUNDATION. The conflict of interest policy covering the Managers, Officers and key employees is documented in the "Conflict of Interest" section of the Governance Guidelines for the M.S. Hershey Foundation. Additionally, the conflict of interest policy covering Managers, Officers and key employees is documented in "Ethical Standards" and "Conflict of Interest" and "Code of Conduct" sections of the Policy Manual for the Hershey Trust. Company Each Manager, Officer and key employee is required to avoid all activity that could create a conflict of interest or even give an appearance of a conflict of interest Any conflicts of interest are to be reported as soon as practical after they become aware of such a conflict Annually each Manager, Officer and key employee is required to complete an Annual Statement of Disclosure. The forms identify vendors, investments, other board memberships, and family members that could give rise to conflicts of interest. The statements are reviewed by the FOUNDATION'S EXECUTIVE DIRECTOR AND THE DIRECTOR OF FINANCE in order for THEM to be aware of activities that could give rise to conflicts of interest related to managers, officers and key employees are brought to the attention of the Chairperson OF THE BOARD OF MA

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINES 15A AND 15B	COMPENSATION PROCESS	The MS Hershey Foundation's board of managers (the governing body of the MS Hershey Foundation) controls the process in determining whether the total compensation of the Executive Director is fair and reasonable. This process occurs at the initial hire of the executive director and at regular intervals thereafter. The review of the total compensation of the executive director, includes but is not limited to, a review of comparable executive director total compensation as disclosed in the forms 990 of similar-sized exempt organizations. As part of this process, the compensation information is reviewed and approved by the Board of Managers FOR THE executive director. Those board of managers with a conflict in regard to the executive director's compensation review process abstain from the deliberations. The Board of Managers do not receive any compensation from M.S. HERSHEY FOUNDATION. The Board of Managers receive compensation from Hershey Trust Company as directors of the Trust Company in accordance with Article 14, Section 16 of its bylaws. The compensation is periodically reviewed by third party compensation consultants. Any member of the Board of Managers who also serves as a director or officer of The Hershey Company or of Hershey Entertainment. Resorts Co receives compensation from such related for-profit company, pursuant to such company's procedures. The compensation of the M.S. Hershey Foundation's officers, who are directors or employees of the Hershey Trust Company (Trustee of M.S. HERSHEY FOUNDATION), is determined by periodic review (generally performed at least every 3 years) by third party compensation consultants to determine that it is fair and reasonable as part of the Hershey Trust Company's compensation review process. The compensation of Hershey Trust Company, the statutory officers, the Chief Executive Officer and chief Compliance Officer is fixed by the Board of Directors of Hershey Trust Company in accordance with Section 5 of its bylaws. The CEO of Hershey Trust Company approves compensat

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	PUBLIC AVAILABILITY OF DOCUMENTS	The Foundation makes the Deed of Trust available to the public on its website. The Foundation's Conflict of Interest Policy and its audited financial statements are available to the public upon request.

ldentifier	Return Reference	Explanation
FORM 990, PART XI, LINE 9	RECONCILIATION OF NET ASSETS	Increase in unrecognized benefit cost \$(417,785) Decrease in interest rate swap liability 38,247 TOTAL \$(379,538)

DLN: 93493316050233

OMB No 1545-0047

Open to Public **Inspection** 

Schedule R (Form 990) 2012

**Employer identification number** 

#### SCHEDULE R **Related Organizations and Unrelated Partnerships**

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► Attach to Form 990. ► See separate instructions.

Internal Revenue Service

Name of the organization THE MS HERSHEY FOUNDATION

(Form 990)

Department of the Treasury

23-6242734 Identification of Disregarded Entities (Complete of the organization answered "Yes" to Form 990, Part IV, line 33.) (c) (f) Name, address, and EIN (if applicable) of disregarded entity Primary activity Legal domicile (state Total income End-of-year assets Direct controlling or foreign country) entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) (g) Section 512(b) (d) Name, address, and EIN of related organization Primary activity Legal domicile (state Exempt Code section Public charity status Direct controlling or foreign country) (if section 501(c)(3)) (13) controlled entity entity? Yes No (1) THE MILTON HERSHEY SCHOOL & SCHOOL TRUST SCHOOL PΑ 501 (c)(3) NΑ No PO BOX 445 HERSHEY, PA 17033 23-1353340 (2) THE WILLIAM E DEARDEN ALUMNI CAMPUS INC SVCS TO ALUM PΑ 501 (c)(3) NA No PO BOX 830 HERSHEY, PA 17033 20-2579678 (3) HERSHEY CEMETERY COMPANY CEMETERY PA 501(c)(13) NΑ No PO BOX 445 HERSHEY, PA 17033 23-1973529

Cat No 50135Y

		1						1					
<b>(a)</b> Name, address, and EIN of related organization		<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	redomina income (related unrelated excluded fre tax unde sections 51 514)	total income om	(g) Share of end-of-year assets	allocat	ortionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	ral or linging ner?	( <b>k)</b> Percentage ownership
								Yes	No		Yes	No	
					-								
Part IV Identification of Related Orgaline 34 because it had one or more  (a)  Name, address, and EIN of related organization			s a cor ) al	ooration o	(d) ect controlling	ng the tax ye  (e)  Type of entity	(f) Share of tota	I Sha	(g) re of er	(h)	) tage	Se	(i) ection 512
related organization		(state or coun	foreign		entity	(C corp, S corp, or trust)	income		of-year assets	owner	SHIP	co	(b)(13) ontrolled entity? es No
(1) HERSHEY TRUST COMPANY PO BOX 445 HERSHEY, PA 17033	STATE TRUST C	Р	Ą	na		C CORP							
23-0692150													
(2) HERSHEY ENTERTAINMENT RESORTS CO	ENTERTAINMENT			na		C CORP							
(2) HERSHEY ENTERTAINMENT RESORTS	ENTERTAINMENT	P	A	na		C CORP							
(2) HERSHEY ENTERTAINMENT RESORTS CO  27 WEST CHOCOLATE AVENUE HERSHEY, PA 17033	CONFECTIONERY	P		na na		C CORP							
(2) HERSHEY ENTERTAINMENT RESORTS CO  27 WEST CHOCOLATE AVENUE HERSHEY, PA 17033 23-0691815 (3) THE HERSHEY COMPANY  100 CRYSTAL A DRIVE HERSHEY, PA 17033													
(2) HERSHEY ENTERTAINMENT RESORTS CO  27 WEST CHOCOLATE AVENUE HERSHEY, PA 17033 23-0691815 (3) THE HERSHEY COMPANY  100 CRYSTAL A DRIVE HERSHEY, PA 17033													

<b>Note.</b> Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule							No
<b>1</b> D	During the tax year, did the orgranization engage in any of the following transactions with one or more related organiz	zations li	sted in Parts II-IV?				
a	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a 1b		No
<b>b</b> Gift, grant, or capital contribution to related organization(s)							No
c Gift, grant, or capital contribution from related organization(s)							
d	Loans or loan guarantees to or for related organization(s)				1d		No
е	Loans or loan guarantees by related organization(s)				1e		No
f	Dividends from related organization(s)				1f		No
g					1g		No
_	Purchase of assets from related organization(s)				1h		No
	Exchange of assets with related organization(s)				1i		No
	Lease of facilities, equipment, or other assets to related organization(s)				1j		No
,	Lease of lacinities, equipment, of other assets to related organization(s)				F		
l,	Lease of facilities, equipment, or other assets from related organization(s)				1k	Yes	
	Performance of services or membership or fundraising solicitations for related organization(s)				11		No
m Performance of services or membership or fundraising solicitations for related organization(s)  1 Performance of services or membership or fundraising solicitations by related organization(s)							
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Yes	
	Sharing of paid employees with related organization(s)				10	Yes	
٠	Sharing of paid employees with related organization(s)						
n	Reimbursement paid to related organization(s) for expenses				1p		No
-	Reimbursement paid by related organization(s) for expenses				1q	Yes	
ч	, Kellibursellient paid by related organization(s) for expenses						
r	Other transfer of cash or property to related organization(s)				1r		No
s	Other transfer of cash or property from related organization(s)				1s	Yes	
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, inc	cluding co	vered relationships	and transaction thresholds			
	(a) (b)  Name of other organization Transact type (a)	tion	<b>(c)</b> Amount involved	<b>(d)</b> Method of determining amo	ount II	nvolved	
			l				

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross)

revenue) that was not a related organization See instructions re	garding exclu	sion for ce		nent	partnerships				`	,		-	
<b>(a)</b> Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512- 514)	org	(e) all partners section 501(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
												1	

### Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier	Return Reference	Explanation
, ,	SUPPLEMENTAL INFORMATION	No disclosures are required for Schedule R, Part V, Line 2 because the M S Hershey Foundation does not control any other related organization

Additional Data Return to Form

Software ID: Software Version:

**EIN:** 23-6242734

Name: THE MS HERSHEY FOUNDATION

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