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**Return of Private Foundation** or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public.
 ▶ Information about Form 990-PF and its separate Instructions is at www.irs.gov/form990pf.

Open to Public Inspection

For	calend	dar year 2013 or tax year beginning	and ending				
Na	me of fo	undation			A Emplo	yer identification number	
N	ORT	HWEST CHARITABLE FOUNDATION			27.	-1403629	
		1 street (or P O box number if mail is not delivered to street address)	<del></del>	Room/suite		One number (see instructions)	
1	00	LIBERTY STREET				4-728-7260	
		, state or province, country, and ZIP or foreign postal code				nption application is pending, o	hook hom
<u>W</u> .	<u>ARR</u>	EN PA 16365	<del></del>			ipaon application is penting, c	TIBOX LIBID
G C	heck	all that apply: Initial return Initial return	rn of a former public c	hanty	D 1. Fo	reign organizations, check hen	• ▶ [_
		Final return Amended	return		1	reign organizations meeting the	_
		Address change Name cha			85	% test, check here and attach	computation >
<u>н</u> с	heck t	type of organization: $X$ Section 501(c)(3) exempt private	foundation		E if priva	te foundation status was termi	nated under
	Section	1 4947(a)(1) nonexempt charitable trust Other taxable	e private foundation		section	1 507(b)(1)(A), check here	▶ _
		ket value of all assets at J Accounting method:	X Cash Ac	crual		oundation is in a 60-month terr	
	-	ear (from Part II, col. (c), Other (specify)		•	under	section 507(b)(1)(B), check he	re 🕨 📙
	e 16)		be on cash basis.)	<u> </u>	<u> </u>	· <del>- · -</del> ·	
Pa	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	(b) Net inv	restment	(c) Adjusted net	(d) Disbursements for chantable
		the amounts in column (a) (see instructions) )	books	inco	me	ıncome	purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	500	)	,,,,,,,,,,		(22211 22012 OTH)
	2	Check ► X if the foundation is <b>not</b> required to attach Sch. B					
	3	Interest on savings and temporary cash investments	6:		61		
	4	Dividends and interest from secunties	655,52	L 6	55,521		
	5a	Gross rents					
<u>•</u>	b	Net rental income or (loss)					
Ĕ	6a	Net gain or (loss) from sale of assets not on line 10		`			7.11
Revenue	ь	Gross sales price for all assets on line 6a					
æ	7	Capital gain net income (from Part IV, line 2)			0		
	8	Net short-term capital gain		<u> </u>		0	······································
	9	Income modifications	····	ļ			
	10a	Gross sales less returns and allowances	-11-111-1	<u> </u>			
	b	Less: Cost of goods sold	RECEIVE				
	С 11	Gross profit or (loss) (attach schedule)	NLOLIVE				
	12	Other income (attach schedule)  Total. Add lines 1 through 11	6569082		55,582	0	
	13	Compensation of officers, directors, trustees, etc.	OI WIAT 2 2 -		22,302		
es	14	Other employee salanes and wages		<u></u>			<del></del>
benses	15	Pension plans, employee benefits	OGDEN.	UT			
	16a	Legal fees (attach schedule)		1			
Ω .	ь	Accounting fees (attach schedule)					
<u>×</u>	С	Other professional fees (attach schedule)	-	1			
rat	17	Interest					
ist	18	Taxes (attach schedule) (see instructions) STMT 1	8,107				124
듣	19	Depreciation (attach schedule) and depletion					
틸	20	Occupancy	<del></del>				
d Admi	21	Travel, conferences, and meetings					
an	22	Printing and publications	<del></del>	<u> </u>			
g	23	Other expenses (att. sch ) STMT 2	18,617	'	18,617		
ati	24	Total operating and administrative expenses.	06.70	1		_	
Operating and Administrative Ex	25	Add lines 13 through 23	26,724		18,617	0	124
σ	25 26	Contributions, grifts, grants paid  Total expenses and dishure monts. Add lines 24 and 25	818,346		10 617		818,346
	27	Total expenses and disbursements. Add lines 24 and 25 Subtract line 26 from line 12:	845,070	<u> </u>	18,617	0	818,470
	a a	Excess of revenue over expenses and disbursements	-188,988		I	1	,
	a b	Net investment income (if negative, enter -0-)	-100,988		36,965		······
	c	Adjusted net income (if negative, enter -0-)		1 0	20, 303	0	
		vork Reduction Act Notice, see instructions.	<del></del>	.t		<b>⊘</b>	Form 990-PF (2013)

1	Part	Balance Sheets Attached schedules and amounts in the description column	Beginning of year		End of	f year
_		should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	$\rightarrow$	(c) Fair Market Value
1	1	Cash – non-interest-bearing	119,639	118,	747	118,747
	2	Savings and temporary cash investments				
ł	3	Accounts receivable		•	.	
i		Less: allowance for doubtful accounts ▶				
	4	Pledges receivable ▶			1	
		Less. allowance for doubtful accounts ▶				
	5	Grants receivable				
- [	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see				
		instructions)				
1	7	Other notes and loans receivable (att. schedule)				
1		Less: allowance for doubtful accounts ▶ 0				
2	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
۲	10a	Investments – U.S. and state government obligations (attach schedule)				
	b	Investments – corporate stock (attach schedule) SEE STMT 3	12,775,650	12,775,	650	18,882,411
ı	C	Investments – corporate bonds (attach schedule)				
	11	Investments – land, buildings, and equipment, basis				
1		Less accumulated depreciation (attach sch.)				
	12	Investments – mortgage loans				
	13	Investments – other (attach schedule) SEE STATEMENT 4	1,794,347	1,606,	251	1,608,563
-	14	Land, buildings, and equipment: basis ▶				
ı		Less: accumulated depreciation (attach sch.) ▶				
1	15	Other assets (describe ▶ )				
	16	Total assets (to be completed by all filers – see the				
┙		instructions Also, see page 1, item I)	14,689,636	14,500,	648	20,609,721
1	17	Accounts payable and accrued expenses				7-11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	18	Grants payable				
<u>e</u>	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
Ē	21	Mortgages and other notes payable (attach schedule)				
1	22	Other liabilities (describe ▶ )		_		
$\perp$	23	Total liabilities (add lines 17 through 22)	0		0	
١		Foundations that follow SFAS 117, check here				
ces		and complete lines 24 through 26 and lines 30 and 31.				
힏	24	Unrestricted	14,689,636	14,500,	648	
a	25	Temporarily restricted				
[מ	26	Permanently restricted				
		Foundations that do not follow SFAS 117, check here				
		and complete lines 27 through 31.				
0	27	Capital stock, trust principal, or current funds				
Š	28	Paid-in or capital surplus, or land, bldg., and equipment fund				
H S	29	Retained earnings, accumulated income, endowment, or other funds		_		
Net Assets or Fund Balan	30	Total net assets or fund balances (see instructions)	14,689,636	14,500,	648	
Z	31	Total liabilities and net assets/fund balances (see				
$\perp$		instructions)	14,689,636	14,500,	648	
F	art l	Analysis of Changes in Net Assets or Fund Balances				
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line 30 (must a	gree with			
	end-c	of-year figure reported on prior year's return)		l	_1	14,689,636
2	Enter	amount from Part I, line 27a			2	-188,988
3	Other	increases not included in line 2 (itemize)			3	
4	Add I	nes 1, 2, and 3			4	14,500,648
5	Decre	eases not included in line 2 (itemize)		_ [	5	
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), li	ine 30		6	14,500,648
						5 990-PE (2010)

Part IV Capital Gains a	nd Losses for Tax on Investme	ent Income	· · · · · · · · · · · · · · · · · · ·		<del></del>
	cnbe the kind(s) of property sold (e.g., real estate, rarehouse, or common stock, 200 shs MLC Co.)		(b) How acquired P – Purchase D – Donation	(c) Date acquir (mo , day, yr	
1a N/A		<del></del>	D = Doriation		
b					
С					
d					
е	<del></del>	I	1		
(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis inse of sale		h) Gain or (loss) plus (f) minus (g)
<u>a</u>					
<u>b</u>			-	<del></del>	<del></del>
d					<del></del>
е					<del></del>
Complete only for assets showing	gain in column (h) and owned by the four	ndation on 12/31/69		(I) Gair	ns (Col. (h) gain minus
(I) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		is of col. (i) (j), if any	col (k), l	but not less than -0-) or sees (from col (h))
a					
b					
С					
d					
е	If goin, also enter in	Port Lline 7		<u> </u>	
2 Capital gain net income or (net ca	If gain, also enter in If (loss), enter -0- in			2	
3 Net short-term capital gain or (los	s) as defined in sections 1222(5) and (6):	. a.c.,e /		<del>-</del>	
, -	column (c) (see instructions). If (loss), en	ter -0- in			
Part I, line 8		<u></u>		3	
	nder Section 4940(e) for Reduc			)	
(For optional use by domestic private	foundations subject to the section 4940(a	) tax on net investme	nt income.)		
If section 4940(d)(2) applies, leave the	s part blank.				
Was the foundation liable for the secti	ion 4942 tax on the distributable amount o	f any year in the base	e period?		Yes X No
	fy under section 4940(e). Do not complete	• •	•		
1 Enter the appropriate amount in e	ach column for each year, see the instruc	tions before making a	any entries.		
(a) Base penod years	(b)		(c)		(d) Distribution ratio
Calendar year (or tax year beginning in)			of nonchantable-use assets		ol (b) divided by col (c))
2012	613		17,066,14		0.035973
2011		,088	17,043,1		0.011740
2010 2009		,615	15,698,30 15,167,18		0.005008
2009			13,101,10	50	
2000					
2 Total of line 1, column (d)				2	0.052721
		2 by 5, or by the			
number of years the foundation ha	as been in existence if less than 5 years			3	0.017574
4 Enter the net value of nonchantab	le-use assets for 2013 from Part X, line 5			4	<u>18,551,564</u>
					206 005
5 Multiply line 4 by line 3	•			5	326,025
6 Enter 1% of net investment incom	e (1% of Part I line 27h)			6	6,370
Enter 170 of flet investment incom	e (170 017 att 1, mie 270)	•	•		0,310
7 Add lines 5 and 6				7	332,395
•		• •	• •		
8 Enter qualifying distributions from	• ••			8	818,470
	line 7, check the box in Part VI, line 1b, a	nd complete that part	tusing a 1% tax rate Se	e the	
Part VI instructions.					
					Form 990-PF (2013)

3

Total. Add lines 1 through 3

qualifies for the section 4940(e) reduction of tax in those years.

	Minimum Investment Return (All domestic foundations must complete this part. Foreign	found	lations.
•	see instructions.)		,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	17,999,927
b	Average of monthly cash balances	1b	834,148
С	Fair market value of all other assets (see instructions)	1c	
đ	Total (add lines 1a, b, and c)	1d	18,834,075
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	18,834,075
4	Cash deemed held for charitable activities. Enter 1½% of line 3 (for greater amount, see		
	instructions)	4	282,511
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	18,551,564
6	Minimum investment return. Enter 5% of line 5	6	927,578
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating		
•	foundations and certain foreign organizations check here		
1	Minimum investment return from Part X, line 6	1	927,578
2a	Tax on investment income for 2013 from Part VI, line 5		
ь	Income tax for 2013. (This does not include the tax from Part VI.)		
С	Add lines 2a and 2b	2c	6,370
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	921,208
4	Recoveries of amounts treated as qualifying distributions	4	· <b></b> · · · · · · · · · · · · · · · · · ·
5	Add lines 3 and 4	5	921,208
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		·-
	line 1	7	921,208
_			•
1-1	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	1a	818,470
b	Program-related investments – total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	818,470
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see instructions)	5	6,370
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	812,100
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation		<del></del>

	iff Ali Undistributed income (see instructions)	(a)	(b)	(c) 2012	(d)
1	Distributable amount for 2013 from Part XI,	Corpus	Years pnor to 2012	2012	2013
_	line 7				736,966
2	Undistributed income, if any, as of the end of 2013:			00 017	•
	Enter amount for 2012 only			90,917	
	Total for prior years: 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2013:				
	From 2008				,
b	From 2009				·
С	From 2010				
d	From 2011				
е	From 2012				
f	Total of lines 3a through e	···			
4	Qualifying distributions for 2013 from Part XII,				
	line 4 ▶ \$ 818,470				
а	Applied to 2012, but not more than line 2a			90,917	
b	Applied to undistributed income of prior years				
	(Election required – see instructions)				
С	Treated as distributions out of corpus (Election				
	required – see instructions)			.,	
d	Applied to 2013 distributable amount				727,553
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2013				
	(If an amount appears in column (d), the same				,
	amount must be shown in column (a).)				<i>'</i>
6	Enter the net total of each column as			1	
	indicated below:			1	
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b	Pnor years' undistributed income. Subtract				,
	line 4b from line 2b				A
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				
	amount – see instructions				
е	Undistributed income for 2012. Subtract line				
	4a from line 2a. Taxable amount – see				
	instructions				
f	Undistributed income for 2013. Subtract lines	,			-
	4d and 5 from line 1. This amount must be		,		
	distributed in 2014				9,413
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				,
	170(b)(1)(F) or 4942(g)(3) (see instructions)				
8	Excess distributions carryover from 2008 not				
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2014.	<u></u>	· · ·		-
	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9:			· ·	
а	Excess from 2009				
b	Excess from 2010				
c	Excess from 2011	,			,
d	Excess from 2012			,	
	Excess from 2013	,		·	

Part XV Supplementary Information (co	Non or Approved for For	ituro Doverno-t		<del> </del>
3 Grants and Contributions Paid During the	If recipient is an individual,	l e		
Recipient	show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	reapient	contribution	
a Paid during the year				
SEE STATEMENT 6				
				818,346
	•			
i				
			]	
			1	
			1	
			1	
			1	
		1	1	
			1	
Total			<b>▶</b> 3a	818,346
b Approved for future payment		1		,
N/A				
Total			▶ 3b	

_	er gross amo	Analysis of Income-Producing Acti unts unless otherwise indicated.		business income	Excluded	l by section 512, 513, or 514	
	_		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
1	Program ser		<del></del>		<del>                                     </del>		(000 1100 0000113 )
	a				1		
			<del></del>		1		
	<u> </u>	<del></del>	<del>  </del>		1		<del></del>
	u				<del>  </del>	· · · · · · · · · · · · · · · · · · ·	
	f		<del>                                     </del>	<del></del>	╁──╁		<del></del>
	·	d contracts from government agencies	<del>                                     </del>		<del>                                     </del>		<del></del>
2	-	dues and assessments			+ +		-··
		avings and temporary cash investments			14	61	<u> </u>
4		nd interest from securities			$\frac{14}{14}$	655,521	-
		come or (loss) from real estate.			+	033,321	······
•		anced property		·····	<del> </del>		
		-financed property			<del> </del>		
6		come or (loss) from personal property			1		
	Other investi	•			1 — 1		
8		) from sales of assets other than inventory			1		
9		or (loss) from special events	1		1		
		or (loss) from sales of inventory			1		
		ue: a			1		
							<del></del>
				- · · · · · · · · · · · · · · · · · · ·			
					1 1		
					<del>                                     </del>		
	е		1		1 1		
12	e	d columns (b), (d), and (e)		(		655,582	
	e Subtotal. Add	d columns (b), (d), and (e)		(		655,582 <b>13</b>	
13	e Subtotal. Add Total. Add lin	d columns (b), (d), and (e) ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations )				655, 582 13	655 <b>,</b> 582
13 (Se	e Subtotal. Add Total. Add lin	ne 12, columns (b), (d), and (e)				13	
13 (Se	Subtotal. Add ling worksheet in Part XVI-B	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations )  Relationship of Activities to the Ac  Explain below how each activity for which income is	complishmer reported in colum	nt of Exempt Po	<b>Irposes</b>	13 d importantly to the	
13 (Se	eSubtotal. Add linee worksheet i	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations ) Relationship of Activities to the Ac	complishmer reported in colum	nt of Exempt Po	<b>Irposes</b>	13 d importantly to the	
13 (Se	Subtotal. Add ling worksheet in Part XVI-B	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations )  Relationship of Activities to the Ac  Explain below how each activity for which income is	complishmer reported in colum	nt of Exempt Po	<b>Irposes</b>	13 d importantly to the	
13 (Se	eSubtotal. Add linee worksheet i	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations )  Relationship of Activities to the Ac  Explain below how each activity for which income is	complishmer reported in colum	nt of Exempt Po	<b>Irposes</b>	13 d importantly to the	
13 (Se	eSubtotal. Add linee worksheet i	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations )  Relationship of Activities to the Ac  Explain below how each activity for which income is	complishmer reported in colum	nt of Exempt Po	<b>Irposes</b>	13 d importantly to the	
13 (Se	eSubtotal. Add linee worksheet i	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations )  Relationship of Activities to the Ac  Explain below how each activity for which income is	complishmer reported in colum	nt of Exempt Po	<b>Irposes</b>	13 d importantly to the	
13 (Se	eSubtotal. Add linee worksheet i	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations )  Relationship of Activities to the Ac  Explain below how each activity for which income is	complishmer reported in colum	nt of Exempt Po	<b>Irposes</b>	13 d importantly to the	
13 (Se	eSubtotal. Add linee worksheet i	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations )  Relationship of Activities to the Ac  Explain below how each activity for which income is	complishmer reported in colum	nt of Exempt Po	<b>Irposes</b>	13 d importantly to the	
13 (Se	eSubtotal. Add linee worksheet i	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations )  Relationship of Activities to the Ac  Explain below how each activity for which income is	complishmer reported in colum	nt of Exempt Po	<b>Irposes</b>	13 d importantly to the	
13 (Se	eSubtotal. Add linee worksheet i	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations )  Relationship of Activities to the Ac  Explain below how each activity for which income is	complishmer reported in colum	nt of Exempt Po	<b>Irposes</b>	13 d importantly to the	
13 (Se	eSubtotal. Add linee worksheet i	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations )  Relationship of Activities to the Ac  Explain below how each activity for which income is	complishmer reported in colum	nt of Exempt Po	<b>Irposes</b>	13 d importantly to the	
13 (Se	eSubtotal. Add linee worksheet i	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations )  Relationship of Activities to the Ac  Explain below how each activity for which income is	complishmer reported in colum	nt of Exempt Po	<b>Irposes</b>	13 d importantly to the	
13 (Se	eSubtotal. Add linee worksheet i	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations )  Relationship of Activities to the Ac  Explain below how each activity for which income is	complishmer reported in colum	nt of Exempt Po	<b>Irposes</b>	13 d importantly to the	
13 (Se	eSubtotal. Add linee worksheet i	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations )  Relationship of Activities to the Ac  Explain below how each activity for which income is	complishmer reported in colum	nt of Exempt Po	<b>Irposes</b>	13 d importantly to the	
13 (Se	eSubtotal. Add linee worksheet i	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations )  Relationship of Activities to the Ac  Explain below how each activity for which income is	complishmer reported in colum	nt of Exempt Po	<b>Irposes</b>	13 d importantly to the	
13 (Se	eSubtotal. Add linee worksheet i	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations )  Relationship of Activities to the Ac  Explain below how each activity for which income is	complishmer reported in colum	nt of Exempt Po	<b>Irposes</b>	13 d importantly to the	
13 (Se	eSubtotal. Add linee worksheet i	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations )  Relationship of Activities to the Ac  Explain below how each activity for which income is	complishmer reported in colum	nt of Exempt Po	<b>Irposes</b>	13 d importantly to the	
13 (Se	eSubtotal. Add linee worksheet i	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations )  Relationship of Activities to the Ac  Explain below how each activity for which income is	complishmer reported in colum	nt of Exempt Po	<b>Irposes</b>	13 d importantly to the	
13 (Se	eSubtotal. Add linee worksheet i	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations )  Relationship of Activities to the Ac  Explain below how each activity for which income is	complishmer reported in colum	nt of Exempt Po	<b>Irposes</b>	13 d importantly to the	
13 (Se	eSubtotal. Add linee worksheet i	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations )  Relationship of Activities to the Ac  Explain below how each activity for which income is	complishmer reported in colum	nt of Exempt Po	<b>Irposes</b>	13 d importantly to the	
13 (Se	eSubtotal. Add linee worksheet i	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations )  Relationship of Activities to the Ac  Explain below how each activity for which income is	complishmer reported in colum	nt of Exempt Po	<b>Irposes</b>	13 d importantly to the	
13 (Se	eSubtotal. Add linee worksheet i	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations )  Relationship of Activities to the Ac  Explain below how each activity for which income is	complishmer reported in colum	nt of Exempt Po	<b>Irposes</b>	13 d importantly to the	
13 (Se	eSubtotal. Add linee worksheet i	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations )  Relationship of Activities to the Ac  Explain below how each activity for which income is	complishmer reported in colum	nt of Exempt Po	<b>Irposes</b>	13 d importantly to the	
13 (Se	eSubtotal. Add linee worksheet i	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations )  Relationship of Activities to the Ac  Explain below how each activity for which income is	complishmer reported in colum	nt of Exempt Po	<b>Irposes</b>	13 d importantly to the	
13 (Se	eSubtotal. Add linee worksheet i	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations )  Relationship of Activities to the Ac  Explain below how each activity for which income is	complishmer reported in colum	nt of Exempt Po	<b>Irposes</b>	13 d importantly to the	

Part	XVII	Information Reg	-	ansfers To and	Transaction	ns and Relationsh	ips With Noncharitat	le	1 43	ge TC
<b>1</b> Di	d the orga	nization directly or indi	rectly engage	e in any of the follow	ing with any oth	er organization describe	ed		Yes	No
in	section 50	1(c) of the Code (othe				on 527, relating to politi				
	ganization		ntion to a nor	acharitable averant e				ŀ		ĺ
		om the reporting founda	ation to a nor	nchantable exempt o	organization or:			ļ		
•	) Cash		•		•	•		1a(1)	<del> </del>	X
	) Other as	• •						1a(2)	1	X
	ther transa									į
	-	assets to a noncharita	· <del>-</del>	•			•	1b(1)	igsquare	X
-	-	es of assets from a no						1b(2)		Х
(3	) Rental o	f facilities, equipment,	or other asse	ets				1b(3)		X
(4	) Reimbu	rsement arrangements						1b(4)		X
(5	) Loans o	r Ioan guarantees .						1b(5)		X
(6	) Perform	ance of services or me	mbership or	fundraising solicitati	ions			1b(6)		X
c St	naring of fa	cilities, equipment, ma	iling lists, oth	ner assets, or paid e	mployees			1c		Х
d If	the answe	r to any of the above is	"Yes," comp	lete the following so	chedule. Column	(b) should always show	v the fair market			
va	lue of the	goods, other assets, or	r services giv	en by the reporting	foundation. If the	e foundation received le	ss than fair market			
va	lue in any	transaction or sharing	arrangement	t, show in column (d	i) the value of th	e goods, other assets, o	or services received.			
(a) L	ine no	(b) Amount involved	(c) Nan	ne of nonchantable exempt	t organization	(d) Description of	of transfers, transactions, and shaning	arrangemer	nts	
N/A								-		
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de	scribed ın	ntion directly or indirect section 501(c) of the C plete the following sch	ode (other th			, ,		Y6	es X	No
	(1	) Name of organization		(b) Type of or	ganization		(c) Description of relationship			
N/	Α						<del></del>			
-							· · · · · · · · · · · · · · · · · · ·			
							e best of my knowledge and belief, i	is true,		
Sign Here	<b>)</b>	d complete Declaration of pro-	P See 1	Lan taxpayer) is based on	all information of wh	15/14	May the IRS diswith the prepar (see instruction	ar shown be	low	No
	Print/Tvn	e preparer's name	-		Preparer's signature	<del></del>	Date			
		, -p			DO	, , ,	,	,	Check self-emp	if
Paid	RAYMO	ND A. HAINES,	CPA	[:	KUOB	us CPA	5/1	4/14	- con-onth	Jou
repare	Firm's na			MPANY			PTIN PC	1446	897	
Jse Only	y Firm's ac	010		D AVE., P	O. BOX	767	Firm's EIN ▶ 25		542	5
		WARRE		16365-07			Phone no 81		3-7	
									<del></del>	

27-1403629	Federal S	Federal Statements		
Stat	Statement 1 - Form 990.	- Form 990-PF, Part I, Line 18 - Taxes	8	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
EXCISE TAX FRANCHISE TAX TOTAL	\$ 7,983	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	0 % %	\$ 124
Statement 2	- Form 990-PF,	Part I, Line 23 - Other Expenses	penses	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
EXPENSES INVESTMENT FEES TOTAL	\$ 18,617 \$ 18,617	\$ 18,617 \$ 18,617	\$	\$ \$
Statement 3 - Fo	rm 990-PF, Part II, L	- Form 990-PF, Part II, Line 10b - Corporate Stock Investments	ck Investments	
Description NORTHWEST BANCSHARES INC. TOTAL	Beginning of Year \$ 12,775,650 \$ 12,775,650	End of Year Year \$ 12,775,650 \$ 12,775,650	Basis of Valuation	Fair Market Value \$ 18,882,411 \$ 18,882,411
Statement 4	- Form	990-PF, Part II, Line 13 - Other Investments	estments	
Description	ш	į	Basis of Valuation	ഥ
FEDERATED ULTRASHORT BOND #108 FUND FEDERATED PRIME CASH OBLIGATION #851 TOTAL	\$ 1,120,312 674,035 \$ 1,794,347	\$ 1,120,312 485,939 7 \$ 1,606,251		\$ 1,122,624 485,939 \$ 1,608,563

		Expenses	0	0	0	0	0	0	0	0
	ees, Etc.	Benefits Ex	0	0	0	0	0	0	0	0
	ers, Directors, Trust	Compensation	0	0	0	0	0	0	0	0
atements	- List of Offic	Average Hours	5.00	5.00	5.00	5.00	1.00	1.00	1.00	1.00
Federal Statements	PF, Part VIII, Line 1	Title	PRESIDENT	VICE PRESIDE	TREASURER	SECRETARY	DIRECTOR	DIRECTOR	DIRECTOR	DIRECTOR
	Statement 5 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees, Etc.	Name and Address	.CA .E.T	ET	ET	ET	ir Iet	ELL BT	AY ET	ET
27-1403629		Na	GREGORY C. LAROCCA 100 LIBERTY STREET WARREN PA 16365	VICKI L. STEC 100 LIBERTY STREET WARREN PA 16365	DONALD E. REED 100 LIBERTY STREET WARREN PA 16365	JESSIE L. THOMAS 100 LIBERTY STREET WARREN PA 16365	WILLIAM J. WAGNER 100 LIBERTY STREET WARREN PA 16365	RICHARD E. MCDOWELL 100 LIBERTY STREET WARREN PA 16365	PHILLIP M. TREDWAY 100 LIBERTY STREET WARREN PA 16365	SONIA M. PROBST 100 LIBERTY STREET WARREN PA 16365

	Amount	50 549		18,150	1.000		4,000	8,726	1.500		2,500	6,641	•	1,000	8,500		200	10,000	•	10,000	2,000		000	10,000	8,333	5,000	2,000
	Purpose	MATCHING EMPLOYEE CONTRIBITION FOR 2	10.7	CONTRIBUTION 2013	CONTRIBUTION 2013		HUMAN SERVICES, CRISIS & COUNSELING	ONE CHILDREN'S HOSPITAL DRIVE	CONTRIBUTION 2013		GRANT 2012, YEAR TWO OF TWO-YEAR, PR	CAPITAL IMPROVEMENTS TO BUILDING	ļ	CONSTRUCTION PROJECT AT JUNIOR/SENIO	MOBILE FOOD PANTRY, HEALTHY (INCLUD		REPLACEMENT OF WINDOW	FINANCIAL LITERACY EXHIBIT "OLD TOWN		CHILD & FAMILY FOCUSED THERAPEUTIC	DOLLY PARTON'S IMAGINATION LIBRARY.	THE STATE OF THE S	SCHOUNTIES, COLIONAL &	COOLER/FREEZER & DINING ROOM EXPANSI	BRIDGE OVER TUNA CREEK FOR BIKE TRAI	OFFER WORK OPPORTUNITIES TO THOSE WI	WASHINGTON HEALTH SYSTEM CHILDREN'S
Address	Status	IRD AVENUE	420 WEST 6TH STREET		LEY STREET	ST BEAVER AVENUE	T. PLANT FLOOR 3		I THIRD STREET	110 PAINTERS MILL ROAD	SECOND AVENUE		BEECH STREET	TAT AM TAT		BOX 144	420 EBENCH STREET	enon Sineel	EAST 6TH STREET		oin Singel,	ROSSVILLE BLVD.	. FRANCIS DRIVE			NGARM SIKEEI	
	Relationship	305 TH			54 FRALEY	141 WE	CENTRAL.		13 EAST		207	) 1	650	1507	) ) H	P.0.			101	420 545	4	7201	100 ST.			11 11 11 11	-1 -2 -1
Name	Address	UNITED FUND OF WARREN COUNTY WARREN PA 16365	OF ERIE COUNTY	PA 165	KANE AREA UNITED FUND KANE PA 16735	HELP CENTRE	STATE COLLEGE PA 16801 NONE CHILDREN'S HOSPITAL OF PITTSRIBGH F	PITTSBURGH PA 15224 NONE	UNITED WAY OF MIFFLIN-JUNIATA LEWISTOWN PA 17044 NONE	LUPUS FOUNDATION OF AMERICAN - DC/M	OWINGS MILLS MD 21117 NONE JEFFERSON DEFREES FAMILY CENTER		HOOL DISTR	THE SECOND HABVEST FOOD BANK OF NW		STORICAL SO	IRVINE PA 16329 NONE ** EXPERTENCE CHIT.DREN'S MISEIM	ERIE PA 16507 NONE	œ.	ERIE PA 16507 NONE		THE COMMUNITY COLLEGE OF BALTIMORE BALTIMORE NO 21237	Æ, INC.	BRADFORD PA 16701 NONE	IONE VALUE INSTITUTION NONE	ACALEVA PITTSBURGH PA 15203 NONE	WASHINGTON PA 15301 NONE

Name	Ad	Address	į	
Address	Relationship	Status	Purpose	Amount
CANONSBURG GENERAL HOSPITAL	100 MEDICAL BLVD.	BLVD.	FREE TRANSPORTATION TO APPTS. FREE A	10.000
COMMUNITY YMC	100 HAYNES	STREET	at. Campatgn	2.000
rion	205 MARKET	STREET	CONTRIBITON 2013	10.000
· ·	563 LINCOLN AVENUE	AVENUE		) () ) ()
PITTSBURGH PA 15202 NONE	M 0622	Y EST COLLEGE AVENUE.	YOUTH PROGRAMS ARTVISION (PERFORMING IE.	5,000
STATE COLLEGE PA 16501 NONE			CONTRIBUTION 2013	4,000
OF WARREN & FOREST COUNTES WARREN PA 16365	707	AV ENOE	2ND YEAR PAYMENT OF 5-YEAR GRANT	5,000
UNITED WAY OF THE LAUREL HIGHLANDS JOHNSTOWN PA 15901	422 MAIN	STREET, #203	CONTRIBUTION 2013	5,000
ED WAY,	P.O. BOX 344,	1, 212 PENN		1,000
ALLEY,	. 109 EAST	LOCUST STREET	HOINERS HOOK TRHONKIN	
CENTRE HALL FA 10828 NONE HOUSE OF HOPE	P.O. BOX 579	•	SHOKI-IEKE FINANCIAL ASSISIANCE (KEN	000
A 16345		E	SAFE, STRUCTURED ENVIRONMENT FOR FEM	2,000
EDUCATION CONSORTIUM OF THE UPPER A RUSSELL PA 16345	4 10/ WEKNEK SIKEET	STKET.	SUPPORT CREATION OF REGIONAL COMMUNI	10,000
INC.	511 MARKET	STREET		
WARREN PA 16365 NONE WARREN FOREST HIGHER EDUCATION COUN	: N 589 HOSPITAL DRIVE,		LIGHTING EXPENSE & EXPENSE FOR PA WA SUITE	2,500
	,		GED DIPLOMA PROGRAM IN ERIE COUNTY	25,000
OF GREATER ERIE FRIE PA 16507	31 WEST 10TH	1 STREET	DOWNTOWN TEEN CENTER & MULTI-PURPOSE	2,500
DATION	302 FRENCH	STREET	:	
ERIE PA 16507 NONE	0		PEDIATRIC CARE UNIT TO BE BUILT IN T	2,000
OF BUTLER BUTLER PA 16001 NONE	170	WEST CONNINGHAM STREE PI	(EE PROVIDE SCHOLARSHIPS FOR PRE-SCHOOL	4,000
SISTERS OF ST. JOSEPH OF NORTHWESTE ERIE PA 16506	5031 WEST	RIDGE ROAD	SUPPORT EDUCATION, HEALTH CARE, CARE	2,500
IAY	18 NORTH SECOND ST.,		P.O.	,
CLEARFIELD PA 16830 NONE			CONTRIBUTION 2013	4,600

	Amount	4,500	10,000	10,000	4,000	2,500	6,500	10,000	25,000	10,000	8,333	20,000	15,000	700	1,100	1,000	1,600	2,200	1,000
	- Purpose A	CONTRIBUTION 2013	2ND YEAR PAYMENT OF 3-YEAR GRANT, RE	2ND YEAR OF 3-YEAR GRANT, NURSING &	2ND YEAR OF 5-YEAR GRANT, PLAYGROUND	CONVERSION TO ELECTRONIC HEALTH RECO	CONTRIBUTION 2013	2ND CHECK OF 3-YEAR GRANT, YOUTH PRO	2ND & FINAL CHECK OF 2-YEAR GRANT, (	2ND CHECK OF 3-YEAR GRANT, INFORMATI	2ND CHECK OF 3-YEAR GRANT, REPAIR/MA	2ND CHECK OF 5-YEAR GRANT, CANCER CE	2ND CHECK OF 5-YEAR GRANT, RETIREMEN	CONTRIBUTION 2013	CONTRIBUTION 2013	CONTRIBUTION 2013	CONTRIBUTION 2013	CONTRIBUTION 2013	CONTRIBUTION 2013
Address	Relationship Status	1999 ALLEGHENY BLVD., P.O.CC	WEST FIRST STREET	BTH WASHINGTON STI	SPITAL DRIVE SHIT	OCC TITLE ENTER SOLI )		NOVIII DNOAD SINEEI	KOSSELL BLVD.	43 SEKVICE DKIVE	NIM CENTER SINEEL	E		SOUTH HERMITAGE ROAF	C COITET TONAHOR CE	TO GOILL CONTROL OF	BOY 134	DOA 134 AALRV STRFFF	
Name	Address	UNITED WAY OF VENANGO COUNTY RENO PA 16343 TITUSVILLE YMCA	TITUSVILLE PA 16354 NONE CLARION UNIVERSITY FOUNDATION INC.	301 Y YMCA	BUTLER PA 16001  FAMILY SERVICES OF WARREN COUNTY	WARREN PA 16365 NONE UNITED WAY OF SOUTHERN CHAUTAIIOITA C	NY 14701	RIDGWAY PA 15853 NONE MCKPAN COINTY CARE FOR CHILDREN		DICKINSON CENIEK, INC. RIDGWAY PA 15853 NONE	CLARTON COUNTY HOSPITAL.	CLARION PA 16214  CLARION PA 16214  LITHERAN SENTOR LIFE	ZELIENOPLE PA 16063 NONE THE UNITED WAY OF CORRY AREA INC	CORRY PA 16407 TED WAY OF MERCER COUNTY	HERMITAGE PA 16148 THE UNITED WAY OF ASHTARILA COUNTY	ASHTABULA OH 44004	TITUSVILLE PA 16354 NONE	A 15834	KANE PA 16735 NONE

	Amount	25,000	1,700	5,000	5,000	1,600	5,100	6,000	4,800	3,500	150,000	5,000	10,000	8,500	5,000	8,500	5,000	5,000	25,000
	Purpose Am	NT PROJECT	CONTRIBUTION 2013	CONTRIBUTION 2013	CONTRIBUTION 2013	CONTRIBUTION 2013 (COVERS CUMBERLAND	CONTRIBUTION 2013	CONTRIBUTION 2013	CONTRIBUTION 2013	CONTRIBUTION 2013	OF 3-YEAR GRANT, EVERFI FIN	NG CAMPAIGN (3RD YEAR OF 5-YEA	STRATEGY TO END POVERTY, EDUCATION O	2ND CHECK OF 3-YEAR GRANT, TO AID LO	CHECK OF 3-YEAR GRANT, FEED THE	2ND CHECK OF 3-YEAR GRANT, SUPPORT L	FINAL CHECK OF 2-YEAR GRANT, MENTORI	ECK OF 3-YEAR GRANT, WILLIAMSP	FINAL CHECK OF 3-YEAR GRANT, CANCER
Address	Relationship Status	WEST SIXTH STRE	TH ST. MARYS STREE	MAIN STREET	UX ZU/	ZZSS MILLENNIUM WAI CONTRI	CANEI AVENOE	COMBERLAND SIREEL	EAST KING STREET	WASHINGTON ROAD	WELLS	STATE	WEST BEAU STREET	KING STREET	SND	OKIH MAIN SIKEET	/ / Hidida	220 ELMIKA SIKEEI 2ND CHECK	CENI FARR WEST
Name	Address	ഥ	ST. MARYS PA 15857  ST. MARYS PA 15857  NONE	$\cap$	UNITED WAY OF CLARION COUNTY CLARION PA 16214 UNITED MAY OF THE CARACTERY DECION	UNITED WAI OF THE CAPITAL REGION ENOLA PA 17025 UNITED MAY OF LANCASTED COMMEY	PA 17601	UNITED WAI OF LEBANON COUNTI LEBANON PA 17042 NONE	<b>~</b>	⊟	* -	П	COMMUNITY ACTION SOUTHWEST (CAS) WASHINGTON PA 15301 NONE	$\supset$	NY 14701	<b>-</b>	CHAUIAOQOA SIKIDEKS IOOIH DEVELOFM JAMESTOWN NY 14701 THE WILLIAWSPORM VMCA		WARREN GENERAL HOSFITAL WARREN PA 16365 NONE

	Amount	3,000	2,200		T, 800	2,500	2,500	2,500	3.014		4,000	3,700		2,000	5,500	L	006,6	2,000	3,000	5,000		10,000	5,000	20,000
	Purpose	CONTRIBUTION 2013	CONTRIBUTION 2013		REWARD STUDENTS FOR ACHIEVEMENT	NEW SERVER & 7 NEW COMPUTERS	QUALITY DAYCARE SO PARENTS CAN GRADU	BUNDLE UP PROGRAM	IE LITERACY PROGRAMS, TECHNOLOGY, AFTER	2	ENHANCE FARMLAND, RESTORE TROUT FISH	HELP STRUGGLING FAMILIES: RENT, FOOD		PLAYGROUND STRUCTURE FOR 84 ENROLLED	FARENTS AS TEACHERS), HOME VISITS, SC		BOYS & GIRLS CLUB, EMPOWER YOUTH WIT	AMBULATORY SURGERY CENTER, IMPROVED	PROVIDE SERVICE, BOOKS, MAGAZINES, D	HEALTH & HUMAN SERVICES PROGRAMS, GI		LIBRARY PROJECT EXPANSION	PURCHASE JAMES CENTER, REACH LOW-INC	IE ZELIENOPLE PARK (SPORT COURT)
Address	Relationship Status	415 CHESTNUT STREET	223 SOUTH JARED STREET	1466 BEAVER VALLEY ROAD	FRONT STREET	325 FDANKIIN STDEFT		576 VINE STREET E	203 NORTH ALLEGHENY STREE	109 NORTH BRADY STREET,		Z6U3 EAST COLLEGE AVENUE, H	7 PETROLEUM STREET	1000 1000 1000 1000	C/O LINCOLN STREET, 301	62 ALLEN STREET	2130 MAIN STREET		12 WEST SUMMIT STREET I	75 COLLEGE AVENUE	121 MAIN STREET	Eddado Mika Helloo	SOUTH MAIN SIREEL	111 WEST NEW CASTLE STREE ZI
Name	Address Rek	UNITED WAY OF WESTERN CRAWFORD COUN MEADVILLE PA 16335	DUBOIS AREA UNITED WAY DUBOIS PA 15801	RICT EDUCAT	FLINTON PA 1664U JOSEPH & ELIZABETH SHAW PUBLIC LIBR	EARFIELD PA 16830		THE SALVATION ARMY OF JOHNSTOWN, PA JOHNSTOWN PA 15907 NONE	CENTRE COUNTY LIBRARY & HISTORICAL RELIEFONTE DA 16823 NONE	JST	DUBOIS PA 15801	THE SALVATION ARMY OF CENTRE COUNTY STATE COLLEGE PA 16801 NONE			JAMESTOWN COMMUNITY LEARNING COUNCY JAMESTOWN NY 14701 NONE	RT BOYS	JAMESTOWN NY 14701 STSTERS HOSPITAL FOUNDATION, INC.		LAKEWOOD MEMORIAL LIBRARY LAKEWOOD NY 14750 NONE	UNITED WAY OF GREATER ROCHESTER ROCHESTER NY 14607	C. FBO: (		PA 15220	COMMUNITY PARK ASSOCIATION, INC. ZELIENOPLE PA 16063 NONE

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27-1403629

	Amount		10,000		2,000		1,500		10,000		19,000		1,000		4,000	818,346
	Purpose	PKW	ENDOWMENT FUND TO SUPPORT CULTURAL E		OUTDOOR FITNESS PARK	BOX	GOVERNMENT OUTREACH PROGRAM		2ND CHECK OF 3-YEAR GRANT - ASSISTAN		CONTRIBUTION 2013		CONTRIBUTION 2013		CONTRIBUTION 2013	
Address	Status	LITTLE PATUXENT PKW		STREET				AIN STREET		TH STREET		ROAD		JRGH ROAD		
A	Relationship			308 MARKET		5 WATER STI		800 EAST M		420 WEST 6TH STREET		705 BUTLER ROAD		184 PITTSBURGH ROAD		
Name	Address Rela	COMMUNITY FOUNDATION OF HOWARD COUN 10630	COLUMBIA MD 21044 NONE	WARREN COUNTY DEVELOPMENT ASSOC. FB 308 MARKET STREET	WARREN PA 16365 NONE	POTTER EDUCATION COUNCIL (REQUEST C 5 WATER STREET, P.O.	COUDERSPORT PA 16915 NONE	BEACON LIGHT BEHAVIORAL HEALTH SYST 800 EAST MAIN STREET	BRADFORD PA 16701 NONE	UNITED WAY OF ERIE COUNTY	ERIE, PA 16507 NONE	THE UNITED WAY OF ARMSTRONG COUNTY	KITTANNING PA 16201 NONE	UNITED WAY OF BUTLER COUNTY	BUTLER PA 16001 NONE	TOTAL

Northwest Charitable Foundation EIN: 27-1403629 2013 Form 990-PF Part XIII Attachment

The Foundation is in its start-up period under Reg. 53.4942(a)-3(b)(4)(i). Its start up period is January 1, 2010 through December 31, 2013. Under Reg. 53.492(a)-3(b)(4)(iii) the Foundation is not required to make a distribution until the end of the start-up period. Below is a table showing the start-up period activity as of December 31, 2013.

		Gross Distributable Amount				Start-up Period Distributable Amount			
Year 1	2010	779,754	X	20%	=	\$	155,951		
Year 2	2011	846,614	X	40%	=		338,646		
Year 3	2012	845,594	X	60%	=		507,356		
Year 4	2013	921,208	x	80%	=		736,966		
							1,738,919		
	2010 distrib	outions					(83,776)		
	2011 distrib	outions					(205,633)		
	2012 distrib	outions					(621,627)		
		(818,470)							
Remaining	\$	9,413							