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Form **990-PF**Department of the Treasury

Return of Private Foundation

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

Do not enter social security numbers on this form as it may be made public.

OMB No 1545-0052

2014

Open to Public Inspection

▶ Information about Form 990-PF and its separate instructions is at www.lrs.gov/form990pf. Internal Revenue Service For calendar year 2014 or tax year beginning and ending Name of foundation A Employer identification number 23-2732477 SUSQUEHANNA FOUNDATION Number and street (or P O box number if mail is not delivered to street address) Room/suite **B** Telephone number 220 **401 CITY AVENUE** 610-617-2635 City or town, state or province, country, and ZiP or foreign postal code C If exemption application is pending, check here BALA CYNWYD, PA 19004 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the 85% test, check here and attach computation Address change Name change Section 501(c)(3) exempt private foundation Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J | Accounting method: X Cash Accrual If the foundation is in a 60-month termination Other (specify) (from Part II, col (c), line 16) under section 507(b)(1)(B), check here (Part I, column (d) must be on cash basis.) ▶\$ 169,695. Part | Analysis of Revenue and Expenses (d) Disbursements for charitable purposes (b) Net investment (a) Revenue and (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income income (cash basis only) 157,333. 1 Contributions, gifts, grants, etc., received Check If the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 699.STATEMENT 699 699 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 0 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances **6** b Less Cost of goods sold c Gross profit or (loss) MAY 11 Other income 158,032 699 699 Total Add lines 1 through 11 0 0. 0 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees **b** Accounting fees c Other professional fees 17 Interest 30 STMT 2 0 0 0. 18 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 92 0 0 0. 22 Printing and publications 23 Other expenses 24 Total operating and administrative 122 0 0 expenses Add lines 13 through 23 182,500 182 500. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 182,500. 182,622 0 0 Add lines 24 and 25 27 Subtract line 26 from line 12: -24,590 3 Excess of revenue over expenses and disbursements 699 b Net investment income (if negative, enter -0-) 699. Adjusted net income (if negative, enter -0-)

Fo	rm 99	O-PF (2014) SUSQUEHANNA FOUNDATION		23-2	2732477 Page 2
	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
<u></u>	'ar t	cotumn should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	51,394.	26,105.	26,105.
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts		_	
	5	Grants receivable		<u>.</u>	
	6	Receivables due from officers, directors, trustees, and other			
	l _	disqualified persons			
	7	Other notes and loans receivable			
		Less; allowance for doubtful accounts			
Assets	_	Inventories for sale or use			
Ass	L	Prepaid expenses and deferred charges Investments - U.S. and state government obligations			
_	1				
	1	Investments - corporate stock Investments - corporate bonds			
	1	Investments - Land, buildings, and equipment basis			
	''	Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment; basis			
	' '	Less accumulated depreciation			
	15	Other assets (describe ► STATEMENT 3)	142,891.	143,590.	143,590.
	1	Total assets (to be completed by all filers - see the		-	
		instructions. Also, see page 1, item I)	194,285.	169,695.	169,695.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
Š	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
lab	21	Mortgages and other notes payable			
	22	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
Ś		and complete lines 24 through 26 and lines 30 and 31.			
nce	24	Unrestricted			
ala	25	Temporarily restricted			
Net Assets or Fund Balances	26	Permanently restricted Foundations that do not follow SFAS 117, check here			
Fun		·			
<u>p</u>	27	and complete lines 27 through 31 Capital stock, trust principal, or current funds	0.	0.	
ets	27 28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
ASS	29	Retained earnings, accumulated income, endowment, or other funds	194,285.	169,695.	
et/	30	Total net assets or fund balances	194,285.	169,695.	
Z	30	Total net assets of fund balances			
	31	Total liabilities and net assets/fund balances	194,285.	169,695.	
F	art	Analysis of Changes in Net Assets or Fund Ba	alances		
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line 3	30		
-		st agree with end-of-year figure reported on prior year's return)		1	194,285.
2	•	r amount from Part I, line 27a		2	-24,590.
		r increases not included in line 2 (itemize)		3	0.
4	Add	lines 1, 2, and 3		4	169,695.
5	Decr	eases not included in line 2 (itemize)	<u></u>	5	0.
<u>6</u>	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	umn (b), line 30	6	169,695.
					Form 990-PF (2014)

		NNA FOUNDAT				23	<u>3-273</u>	<u> 2477 </u>	Page :
Part IV Capital Gains	and Los	ses for Tax on Ir	nvestment	Income	· · · · · · · · · · · · · · · · · · ·				
(a) List and desc 2-story brick wa	cribe the kind arehouse; or	d(s) of property sold (e.g common stock, 200 sh	j., real estate, s. MLC Co.)		(b) How acquired P - Purchase D - Donation	(c) Date a (mo., da		(d) Dat (mo., da	
1a									
b NO	NE								
С									
<u>d</u>									
<u>e</u>	,								
(e) Gross sales price		preciation allowed (or allowable)		t or other basis xpense of sale			ın or (loss) (f) mınus (
<u>a</u>									
<u>b</u>									
C									
<u>d</u>									
<u>e</u>	l			40.04.00					
Complete only for assets shown	r		T	•) Gains (Co . (k), but no			
(i) F.M.V. as of 12/31/69		Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any			from col. (I		
<u>a</u>									
_ b	· · · · · · · · · · · · · · · · · · ·		 -						
<u>c</u>			 						
<u>d</u>				.					
e	1		<u> </u>						
2 Capital gain net income or (net ca	apıtal loss)	If gain, also ente	r in Part I, line î I- in Part I, line	7 7	} 2			_	
3 Net short-term capital gain or (los if gain, also enter in Part I, line 8,	column (c).		nd (6):		}				
If (loss), enter -0- in Part I, line 8 Part V Qualification U	Inder Se	ction 4940(e) for	Reduced	Tax on Net	Investment Inc	ome			
(For optional use by domestic private					·				
(For optional use by domestic private	e iouiiuatioi	is subject to the section	4540(a) lax oli	Het Hivestinent in	icome.)				
If section 4940(d)(2) applies, leave t	hıs part blar	ık.							
Was the foundation liable for the sec	tion 4942 ta	x on the distributable an	nount of any ve	ar in the base per	riod?			Yes	X No
If "Yes," the foundation does not qua				•					
1 Enter the appropriate amount in					ntries.				
(a) Base period years		(b)			(c)		Dietrib	(d) ution ratio	
Calendar year (or tax year beginni	ing in)	Adjusted qualifying dis	tributions	Net value of no	ncharitable-use assets	(0	col. (b) divi	ided by col.	(c))
2013		37	7,000.		165,739	•		2.2	74661
2012		57	2,686.		188,209	•		3.0	42819
2011		1,12	7,801.		281,904			4.0	<u>00656</u>
2010			2,991.		171,530			25.6	
2009		4,53	6,166.		<u>166,573</u>	•		27.2	<u> 32301</u>
2 Total of line 1, column (d)						2		62.2	19364
3 Average distribution ratio for the	5-year base	period - divide the total	on line 2 by 5,	or by the number	of years				
the foundation has been in existe	-		,	·	·	3		12.4	43873
4 Enter the net value of noncharitat	ole-use asse	ts for 2014 from Part X,	line 5			4		175	<u>,727.</u>
5 Multiply line 4 by line 3						5		2,186	,724
6 Enter 1% of net investment incon	ne (1% of P	art I, line 27b)				6			<u> </u>
7 Add lines 5 and 6						7		2,186	<u>,731</u> .
8 Enter qualifying distributions from	n Part XII. lıı	ne 4				8		182	,500
If line 8 is equal to or greater than See the Part VI instructions.			1b, and comp	lete that part usin	g a 1% tax rate.				

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	rt VI	Excise Tax Based on Investment Income (Section 4940(a), 49		948	- see in	stru	ction	<u>1S)</u>
1a,		operating foundations described in section 4940(d)(2), check here 🕨 🔲 and enter "N/A"						
		uling or determination letter: (attach copy of letter if necessary-so						
b		c foundations that meet the section 4940(e) requirements in Part V, check here 🕒 🔲 ai	nd enter 1%	1				<u>14.</u>
	of Part I,							
		domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I,						•
		er section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others ente	r -0-)	2		_		0.
3	Add lines			3_	<u> </u>			<u>14.</u>
4		A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter	er -0-)	4				0.
		ed on investment income Subtract line 4 from line 3. If zero or less, enter -0-		5				<u> 14.</u>
		Payments:						
		timated tax payments and 2013 overpayment credited to 2014	·					
		foreign organizations - tax withheld at source						
		with application for extension of time to file (Form 8868)	35.					
	•	withholding erroneously withheld 6d		_				3 F
		edits and payments. Add lines 6a through 6d		7				<u>35.</u>
		y penalty for underpayment of estimated tax. Check here if Form 2220 is attached	•	8	ļ			
		If the total of lines 5 and 8 is more than line 7, enter amount owed		9	-			21.
		rment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	21 2	10				0.
		e amount of line 10 to be: Credited to 2015 estimated tax A Statements Regarding Activities	21. Refunded ►	11_	<u> </u>			<u> </u>
			did it participate or interiore		T		Yes	No
1a		he tax year, did the foundation attempt to influence any national, state, or local legislation or o	old it participate or intervene	111	<u> </u>	4.	103	X
		tical campaign?	notruations for the definition	١٥	 	<u>1a</u> 1b		X
D	-	end more than \$100 during the year (either directly or indirectly) for political purposes (see ii			-	וט		
		nswer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies	or any materials publish	eu or	1			
_		ted by the foundation in connection with the activities			1	1c		х
		foundation file Form 1120-POL for this year?			 	16		
a		e amount (if any) of tax on political expenditures (section 4955) imposed during the year: the foundation. > \$ (2) On foundation managers. > \$	0.					
		e reimbursement (if any) paid by the foundation during the year for political expenditure tax in						
е	manager	<u> </u>	inposed on loundation					
2	_	foundation engaged in any activities that have not previously been reported to the IRS?				2		Х
2		" attach a detailed description of the activities			 			
3	-	foundation made any changes, not previously reported to the IRS, in its governing instrumen	nt articles of incorporation (ır				
J		or other similar instruments? If "Yes," attach a conformed copy of the changes	n, ar noise of moorporation, c	•		3	'	Х
A a	-	foundation have unrelated business gross income of \$1,000 or more during the year?				4a		X
		has it filed a tax return on Form 990-T for this year?		N	/A [4b		
		re a liquidation, termination, dissolution, or substantial contraction during the year?			·	5		X
Ŭ		" attach the statement required by General Instruction T.						
6		requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:						
Ť		guage in the governing instrument, or					į	
	, ,	te legislation that effectively amends the governing instrument so that no mandatory direction	ns that conflict with the state	law				
	-	n the governing instrument?			L	6_	X	
7		foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Pr	art II, col (c), and Part XV	,		7	Х	
8a	Enter the	e states to which the foundation reports or with which it is registered (see instructions) 🕨 _						
	PA							
b	If the ans	swer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney G	eneral (or designate)					
		state as required by General Instruction G? If "No," attach explanation			L	8b	Х	
9		undation claiming status as a private operating foundation within the meaning of section 494	2(j)(3) or 4942(j)(5) for cale	ndar				
	year 201	14 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete	Part XIV			9		_X_
10	Did any p	persons become substantial contributors during the tax year? if "Yes," attach a schedule listing th	eir names and addresses			10	<u> </u>	<u>X</u>

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May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 4720, to determine if the foundation had excess business holdings in 2014)

had not been removed from jeopardy before the first day of the tax year beginning in 2014?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

N/A

3ь

4a

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X

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Total, Add lines 1 through 3

L	Minimum Investment Return (All domestic foundations must complete this part. For	eign found	dations, se	e 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	143,234.
b	Average of monthly cash balances	Γ	1b	35,169.
C	Fair market value of all other assets		1c	
d	Total (add lines 1a, b, and c)		1d	178,403.
е	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation)	0.		
2	Acquisition indebtedness applicable to line 1 assets		2	<u> </u>
3	Subtract line 2 from line 1d		3	178,403.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)		4	<u>2,676.</u>
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4		5	175,727.
6	Minimum investment return. Enter 5% of line 5		6	8,786.
LF	Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating found foreign organizations check here and do not complete this part.)	dations and	l certain	
1	Minimum investment return from Part X, line 6		1	8,786.
2a		14.		
b				
C	· · · · · · · · · · · · · · · · · · ·		2c	14.
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	8,772.
4	Recoveries of amounts treated as qualifying distributions		4	_ 0.
5	Add lines 3 and 4		5	8,772.
6	Deduction from distributable amount (see instructions)		6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1		7	<u>8,772.</u>
<u> </u>	Qualifying Distributions (see instructions)		-1	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:			100 500
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	ļ_	1a	182,500.
b		-	<u>1</u> b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	-	2	
3	Amounts set aside for specific charitable projects that satisfy the.			
a	3 (b		3a	<u> </u>
b	,, (and, (and,	-	3b	100 500
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4		4	182,500.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	ļ	_ 1	•
_	income. Enter 1% of Part I, line 27b	}-	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		6	182,500.

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI,	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
line 7				8,772.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2014:				
a From 2009 4,527,881.				
b From 2010 4,394,436.				
c From 2011 1,113,721.				
d From 2012 563, 292.				
e From 2013 368, 728.				
f Total of lines 3a through e	10,968,058.			
4 Qualifying distributions for 2014 from	10,,000,000.			
Part XII, line 4: ► \$ 182,500.				
a Applied to 2013, but not more than line 2a			0.	
· · ·				
b Applied to undistributed income of prior		o.		
years (Election required - see instructions)		<u> </u>		
c Treated as distributions out of corpus	0			
(Election required - see instructions)	0.			0 770
d Applied to 2014 distributable amount	152 500			8,772.
e Remaining amount distributed out of corpus	173,728.			
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	11,141,786.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2013. Subtract line				 .
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2014. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2015				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2009				
-	4,527,881.			
not applied on line 5 or line 7	4,541,001.		.	
9 Excess distributions carryover to 2015.	6 612 005			
Subtract lines 7 and 8 from line 6a	6,613,905.			
10 Analysis of line 9:				
a Excess from 2010 4,394,436.				
b Excess from 2011 1,113,721.				
c Excess from 2012 563, 292.				
d Excess from 2013 368,728.				
e Excess from 2014 173,728.				6 000 DE :
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	ANNA FOUND				732477 Page 10
Part XIV Private Operating F	oundations (see	instructions and Part	/II-A, question 9)	N/A	
1 a, If the foundation has received a ruling o	r determination letter th	at it is a private operating]		
foundation, and the ruling is effective fo	r 2014, enter the date o	f the ruling	▶ ∟		
b Check box to indicate whether the found	r	ting foundation describe		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	T	
income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a	<u> </u>				
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities		· · · · · · · · · · · · · · · · · · ·		-	
e Qualifying distributions made directly			-		
for active conduct of exempt activities.					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the					
alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets				 	
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest, dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public		1	1		
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					<u> </u>
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info at any time during t			it the foundation	n nad \$5,000 or m	ore in assets
 _		tructions.j	_		
1 Information Regarding Foundation	-	- 4b 00/ -64b- total as	nivibutions resoured by th	a favordation hafara the al-	and of any toy
a List any managers of the foundation wh year (but only if they have contributed n			ntributions received by the	e toungation before the cit	ise of any tax
SEE STATEMENT 4	1010 111411 40,000). (000	00011011 007 (0)(2)17			
b List any managers of the foundation wh	n own 10% or more of	the stock of a cornoration	o (or an equally large port	ion of the ownership of a	partnership or
other entity) of which the foundation has			r (or an equally large port	ion of the owner simp of a p	our thorothip or
NONE					
2 Information Regarding Contributi	on, Grant, Gift, Loa	n, Scholarship, etc.,	Programs:		
Check here ► X if the foundation o				not accept unsolicited req	uests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	ber or e-mail address o	f the person to whom ap	olications should be addre	ssed:	
b The form in which applications should b	e submitted and inform	ation and materials they	should include:		
c Any submission deadlines:					
d Aru restrictions or limitations as accordi	ough as by assess-b	and areas, sharitable fold	e kinde of inetitutions or	other factors:	
d Any restrictions or limitations on awards	s, such as by geographi	cai areas, charnable field	s, kinds of institutions, of	טנווט ומטנטוס.	
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Grants and Contributions Paid During the Ye	ear or Approved for Future	Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipient		<u>-</u>
ADAM R. SPECTOR FOUNDATION P.O. BOX 5	NONE	PUBLIC CHARITY	GENERAL FUND	
GLADWYNE PA 19035				1,00
ASHOKA 1700 NORTH MOORE STREET, SUITE 2000 ARLINGTON, VA 22209-1929	NONE	PUBLIC CHARITY	GENERAL FUND	11,00
CHOP FOUNDATION 34TH STREET AND CIVIC CENTER BOULEVARD PHILADELPHIA, PA 19104	NONE	PUBLIC CHARITY	GENERAL FUND	10,00
CONGENITAL HYPERINSULINISM INTERNATIONAL P.O. BOX 135 GLEN RIDGE, NJ 07028	NONE	PUBLIC CHARITY	GENERAL FUND	10,00
DOMINIC V. DICICCO 703 NORTH JEROME AVENUE MARGATE CITY NJ 8402	NONE	PUBLIC CHARITY	GENERAL FUND	10,00
Total SEE CON	TINUATION SHEE	ET(S)	<u>▶ 3a</u>	182,50
NONE				
Total			<u>▶ 3b</u>	orm 990-PF (20

SUSQUEHANNA FOUNDATION

Part XV Supplementary Information **Grants and Contributions Paid During the Year (Continuation)** If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient GLADWYNE FIRE COMPANY NONE PUBLIC CHARITY GENERAL FUND 1044 BLACK ROCK ROAD, P.O. BOX 11 500. GLADWYNE PA 19035 HOSTS FOR HOSPITALS NONE PUBLIC CHARITY GENERAL FUND 326 CONSHOHOCKEN STATE ROAD #2 GLADWYNE PA 19035 500. PUBLIC CHARITY GENERAL FUND JEWISH RELIEF AGENCY NONE 116 BALA AVE 36,000. BALA CYNWYD, PA 19004 NONE PUBLIC CHARITY GENERAL FUND KATIE SAMSON FOUNDATION 522 BROOKSIDE AVENUE 5,000. ST. DAVIDS PA 19087 MARCH OF DIMES NONE PUBLIC CHARITY GENERAL FUND 1019 WEST NINTH AVENUE 10,000. KING OF PRUSSIA, PA 19406 NONE PUBLIC CHARITY GENERAL FUND MELANOMA INTERNATIONAL FOUNDATION 3601 SPRUCE STREET, ROOM 472 16,000. PHILADELPHIA, PA 19104 NATIONAL BRAIN TUMOR SOCIETY NONE PUBLIC CHARITY GENERAL FUND 55 CHAPEL STREET, SUITE 200 10,000. NEWTON, MA 2458 NONE PUBLIC CHARITY GENERAL FUND OASIS 2300 N STREET, NW, SUITE 1200 10,000. WASHINGTON DC 20037 PUBLIC CHARITY GENERAL FUND PHILABUNDANCE NONE 3616 SOUTH GALLOWAY STREET 5,000. PHILADELPHIA PA 19148 NONE PUBLIC CHARITY GENERAL FUND PHILADELPHIA MUSEAUM OF ART 2600 BENJAMIN FRANKLIN PKWY 30,000. PHILADELPHIA, PA 19130 140 500. Total from continuation sheets

Part XV Supplementary Information 3 Grants and Contributions Paid During the		·		
Recipient	If recipient is an individual.			
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
	Or Substantial Contributor	roopon		
SKY COMMUNITY PARTNERS, INC	NONE	PUBLIC CHARITY	GENERAL FUND	
P.O. BOX 8574				
PHILADELPHIA, PA 19101				2,500
THE WISTAR INSTITUTE	NONE	PUBLIC CHARITY	CENERAL FUND	
3601 SPRUCE STREET	HONE	FORDIC CHARTIT	SENERAL FOND	
PHILADELPHIA, PA 19104				10,000
20.00010				
NOMEN'S WAY 123 SOUTH BROAD STREET, SUITE 1399	NONE	PUBLIC CHARITY	GENERAL FUND	
PHILADELPHIA, PA 19109				5,000
	•			
	<u> </u>			
Total from continuation sheets				

Part XVI-A	Analysis of Income-Producing Activities
Part XVI-A	Analysis of income-Producing Activities
	,

ates are a mountain unless atherway and sound	Unrelated	business income	Excluded	by section 512, 513, or 514	(0)
nter gross amounts unless otherwise indicated.	(a) Business	(b)	(C) Exclu- sion	(d)	(e) Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a	_				
b	_				
C	_				
d					
e	_ -				
f	-				
g Fees and contracts from government agencies			-	-	
2 Membership dues and assessments					
3 Interest on savings and temporary cash	522100	699.			
investments Dividends and interest from securities	522100	099.			
5 Net rental income or (loss) from real estate:					
a Debt-financed property					<u> </u>
b Not debt-financed property					
6 Net rental income or (loss) from personal				-	
property					
7 Other investment income					
Gain or (loss) from sales of assets other					
than inventory					
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a					
b	_				
C	_				
d					
e	_	500			
2 Subtotal. Add columns (b), (d), and (e)		699.		0.	0 699
3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations				13	033
Part XVI-B Relationship of Activitie		mplishment of Ex	empt l	Purposes	
Line No Explain below how each activity for which the foundation's exempt purposes (other t			contribut	ed importantly to the accon	plishment of
				<u>-</u>	
				· · · · · · · · · · · · · · · · · · ·	
					
		 			
					
					<u> </u>
			-		
			_		
					
					
3621					Form 990-PF (201

Form 990-PF (2014) SUSQUEHANNA FOUNDATION 23-2732477

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

					g with any other organization		ion 501(c) of		Yes	No
	•	from the reporting founda			7, relating to political organ	iizations*				
	Cash	nom the reporting loaned	mon to a nononantas	no oxompt or	gumzuton on			1a(1)		Х
	Other	assets						1a(2)		X
		sactions:								
(1)	Sales	of assets to a noncharitat	ble exempt organizati	on				1b(1)		_X_
(2)	Purch	ases of assets from a nor	ncharitable exempt of	ganization				1b(2)		<u> X</u>
(3)	Renta	l of facilities, equipment, o	or other assets					1b(3)		<u>X</u>
(4)	Reimt	oursement arrangements						1b(4)		_X_
(5)	Loans	or loan guarantees						1b(5)		X
(6)	Perfo	rmance of services or mei	mbership or fundrais	ıng solicitatio	ns			1b(6)		<u>X</u>
	_	facilities, equipment, mai						1c	<u> </u>	<u>X</u>
					dule. Column (b) should al				ets,	
		•			ed less than fair market valu	ue in any transaction	n or sharing arrangement, s	how in		
) the value of the goods, o			a suggest or annual trans	(4) -				
(a) Line r	10	(b) Amount involved	(c) Name of		exempt organization	(u) Description	n of transfers, transactions, and	snaring ar	rangeme	nts
				N/A	,,					
										
	+	·								
	+							-		
										
										
	_				·					
		· · · · · · · · · · · · · · · · · · ·			-					
							·			
	_									
					a.					
2a Is	the four	idation directly or indirect	tly affiliated with, or ri	elated to, one	or more tax-exempt organ	zations described		_		_
ın	section	501(c) of the Code (other	r than section 501(c)	(3)) or in sect	ion 527?			Yes	X] No
b If"	Yes," co	emplete the following sche	edule.							
		(a) Name of org	anization		(b) Type of organization		(c) Description of relations	hib		
		N/A								
	Lucia		Ab - A (b			Latetomenta, and to the	hast of my knowledge			
Sign	and be	elief, it is true, correct, and con	noise Declaration of pre	parer (other that	ig accompanying schedules and n taxpayer) is based on all inform	nation of which prepare	r has any knowledge reti	y the IRS arn with th	e prepar	er
Here					14/14/1	Treasur	sho	wn below		
	Sign	ature of officer or trustee			Date	Title	<u></u>	Yes		J No
	Joigii	Print/Type preparer's na	· · · · · · · · · · · · · · · · · · ·	Preparer's si		Date	Check If PTIN			
		Transtype proparer sila		. 1000101 0 01	griature	-===	self- employed			
Paid	;		ļ]				
							Fırm's EIN ▶			
Use		THIN S HAING								
	-	Firm's address		<u> </u>				-	-	-
							Phone no.			
· · · · ·		<u>, ,,, ·</u>						orm 99 0	0-PF	(2014)

423622 11-24-14

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
 ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.lrs.gov/form990.

OMB No 1545-0047

2014

Name of the organization

Employer identification number

	SUSQUEHANNA FOUNDATION	23-2732477
Organization type (check	k one)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	on
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
· -	on is covered by the General Rule or a Special Rule. (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Sp	pecial Rule See instructions
	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions any one contributor. Complete Parts I and II. See instructions for determining a con	
Special Rules		
sections 509(a)(any one contribu	tion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line utor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of th EZ, line 1 Complete Parts I and II	13, 16a, or 16b, and that received from
year, total contri	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receive about one of more than \$1,000 exclusively for religious, charitable, scientific, literary, of cruelty to children or animals. Complete Parts I, II, and III	
year, contributio is checked, ente purpose Do not	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received one exclusively for religious, charitable, etc., purposes, but no such contributions to ear here the total contributions that were received during the year for an exclusively at complete any of the parts unless the General Rule applies to this organization becable, etc., contributions totaling \$5,000 or more during the year	otaled more than \$1,000 If this box religious, charitable, etc ,
but it must answer "No" o	n that is not covered by the General Rule and/or the Special Rules does not file Sci on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or eet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

lame of organization

Employer identification number

SUSQUEHANNA FOUNDATION

23-2732477

<u> USQU</u>	EHANNA FOUNDATION	23	3-2732477
Part I	Contributors (see instructions) Use duplicate copies of Part I	ıf addıtıonal space ıs needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ARTHUR DANTCHIK 401 CITY AVE., SUITE 220 BALA CYNWYD, PA 19004	\$ <u>43,333.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	JEFF YASS 401 CITY AVE., SUITE 220 BALA CYNWYD, PA 19004	\$14,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	JOEL GREENBERG 401 CITY AVE., SUITE 220 BALA CYNWYD, PA 19004	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

SUSQUEHANNA FOUNDATION

23-2732477

art II	Noncash Property (see instructions) Use duplicate copies of P.	art II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Part I			
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—			
		\$	990, 990-EZ, or 990-PF) (

Name of orga	anization		Employer identification number					
SIISOIIE	HANNA FOUNDATION		23-2732477					
Part III	Exclusively religious, charitable, etc., cont the year from any one contributor. Complete completing Part III, enter the total of exclusively religious.	columns (a) through (e) and the follous, charitable, etc., contributions of \$1,000 o	in section 501(c)(7), (8), or (10) that total more than \$1,000 for					
(a) No. from	Use duplicate copies of Part III if addition (b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
Part I								
		(e) Transfer of git	t					
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
		(e) Transfer of gif	t					
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
	(e) Transfer of gift							
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
	(e) Transfer of gift							
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee					
-								

FORM 990-PF INTEREST ON SAVI	NGS A	AND TEM	PORARY	CASH	INVES	STMENTS	ST	ATEMENT	1
SOURCE	_		(A) REVENUE PER BOOKS		(B) INVES	STMENT	(C) ADJUSTED NET INCOME		
INTEREST ON CLEARING BALANCE	_	699.		699.			699.		
TOTAL TO PART I, LINE 3		699.		699.			699.		
FORM 990-PF		TAX	ES				ST	ATEMENT	2
DESCRIPTION	EXP	(A) (B) PENSES NET INVEST- R BOOKS MENT INCOME			(C) ADJUSTEI ET INCOI				
INCOME TAX PENNSYLVANIA FILING FEE			15. 0. 15. 0. 30. 0.						0.
TO FORM 990-PF, PG 1, LN 18		30.). = =			0. 0	
FORM 990-PF		OTHER	ASSETS				ST	ATEMENT	3
DESCRIPTION		BEGINNING YR BOOK VAL				FAIR MARKET VALUE			
CLEARING AGENCY BALANCE			142,891		. 143,590.		143,590.		
TO FORM 990-PF, PART II, LINE	142,89		142,89	143,590.		143,590.			
		XV - L		AGERS			ST	ATEMENT	4

NAME OF MANAGER

ARTHUR DANTCHIK JEFFREY YASS JOEL GREENBERG

Form **8868**

(Rev January 2014)

Application for Extension of Time To File an **Exempt Organization Return**

OMB No 1545-1709

Department of the Treasury rnal Revenue Service

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www irs.gov/form8868.

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box $\triangleright \lfloor X \rfloor$ If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3 month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filling of this form, visit www irs gov/efile and click on e-file for Charities & Nonprofits Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number Name of exempt organization or other filer, see instructions Employer identification number (EIN) or Type or print 23-2732477 SUSOUEHANNA FOUNDATION File by the Number, street, and room or suite no. If a P.O. box, see instructions Social security number (SSN) due date for filing your 401 CITY AVENUE, NO. 220 return See City, town or post office, state, and ZIP code. For a foreign address, see instructions instructions BALA CYNWYD, PA 19004 0 4 Enter the Return code for the return that this application is for (file a separate application for each return) Application Return Application Return Code Is For Code cor .n 990 or Form 990-EZ 01 Form 990-T (corporation) 07 02 Form 1041-A 80 Form 990-BL Form 4720 (other than individual) Form 4720 (individual) 03 09 10 Form 990-PF 04 Form 5227 05 Form 6069 11 Form 990-T (sec. 401(a) or 408(a) trust) 12 Form 8870 Form 990-T (trust other than above) BRIAN P. SULLIVAN The books are in the care of ▶ 401 CITY LINE AVE, STE 220, BALA CYNWYD, PA -Telephone No ► 610-617-2635 Fax No > If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box | If it is for part of the group, check this box | and attach a list with the names and EINs of all members the extension is for I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **AUGUST 15, 2015** , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► X calendar year 2014 or tax year beginning , and ending If the tax year entered in line 1 is for less than 12 months, check reason: __ Initial return Change in accounting period If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 35. nonrefundable credits. See instructions. If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions oution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions Form 8868 (Rev 1-2014) LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

423841 05-01-14