



See a Social Security Number? Say Something!  
Report Privacy Problems to <https://public.resource.org/privacy>  
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-PF**

Department of the Treasury  
Internal Revenue Service

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.

▶ Information about Form 990-PF and its instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).

OMB No 1545-0052

**2014**

Open to Public Inspection

For calendar year 2014, or tax year beginning 01-01-2014 , and ending 12-31-2014

Name of foundation FIRST HOSPITAL FOUNDATION		<b>A Employer identification number</b>  23-2904262	
Number and street (or P O box number if mail is not delivered to street address) 230 SOUTH BROAD STREET NO 810		<b>B Telephone number</b> (see instructions)  (215) 546-4290	
City or town, state or province, country, and ZIP or foreign postal code PHILADELPHIA, PA 19102		<b>C</b> If exemption application is pending, check here ▶ <input type="checkbox"/>	
<b>G</b> Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D 1.</b> Foreign organizations, check here ▶ <input type="checkbox"/> <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation ▶ <input type="checkbox"/>	
<b>H</b> Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here ▶ <input type="checkbox"/>	
<b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16)▶\$ 44,099,514		<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ <input type="checkbox"/>	
<b>J</b> Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)			

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )</i>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	<b>1</b> Contributions, gifts, grants, etc , received (attach schedule) . . . . .				
	<b>2</b> Check ▶ <input checked="" type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B . . . . .				
	<b>3</b> Interest on savings and temporary cash investments	698	698		
	<b>4</b> Dividends and interest from securities. . . . .	287,196	871,184		
	<b>5a</b> Gross rents . . . . .				
	<b>b</b> Net rental income or (loss) _____				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10	1,682,023			
	<b>b</b> Gross sales price for all assets on line 6a 6,969,949				
	<b>7</b> Capital gain net income (from Part IV, line 2) . . .		1,098,035		
	<b>8</b> Net short-term capital gain . . . . .				
	<b>9</b> Income modifications . . . . .				
	<b>10a</b> Gross sales less returns and allowances				
	<b>b</b> Less Cost of goods sold . . . . .				
	<b>c</b> Gross profit or (loss) (attach schedule) . . . . .				
	<b>11</b> Other income (attach schedule) . . . . .	341,127	1,618,683		
	<b>12 Total.</b> Add lines 1 through 11 . . . . .	2,311,044	3,588,600		
Operating and Administrative Expenses	<b>13</b> Compensation of officers, directors, trustees, etc	0	0		0
	<b>14</b> Other employee salaries and wages . . . . .				
	<b>15</b> Pension plans, employee benefits . . . . .				
	<b>16a</b> Legal fees (attach schedule) . . . . .	1,860	93		1,768
	<b>b</b> Accounting fees (attach schedule) . . . . .	56,185	22,104		34,081
	<b>c</b> Other professional fees (attach schedule) . . . . .	79,594	66,754		12,840
	<b>17</b> Interest . . . . .				
	<b>18</b> Taxes (attach schedule) (see instructions) . . . . .	81,854	0		0
	<b>19</b> Depreciation (attach schedule) and depletion . . .	2,981	0		
	<b>20</b> Occupancy . . . . .	31,272	1,564		18,675
	<b>21</b> Travel, conferences, and meetings . . . . .	16,424	0		16,810
	<b>22</b> Printing and publications . . . . .				
	<b>23</b> Other expenses (attach schedule) . . . . .	266,030	29,279		233,616
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23 . . . . .	536,200	119,794		317,790
	<b>25</b> Contributions, gifts, grants paid . . . . .	1,151,087			1,295,632
	<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	1,687,287	119,794		1,613,422
	<b>27</b> Subtract line 26 from line 12				
	<b>a Excess of revenue over expenses and disbursements</b>	623,757			
	<b>b Net investment income</b> (if negative, enter -0-)		3,468,806		
	<b>c Adjusted net income</b> (if negative, enter -0-)				

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions )	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing . . . . .	3,664	6,051	6,051
	2	Savings and temporary cash investments . . . . .	1,371,521	771,284	771,284
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable . . . . .			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use . . . . .			
	9	Prepaid expenses and deferred charges . . . . .	4,471	6,611	6,611
	10a	Investments—U S and state government obligations (attach schedule)	1,939,709	2,027,342	2,027,342
	b	Investments—corporate stock (attach schedule) . . . . .			
	c	Investments—corporate bonds (attach schedule). . . . .			
	11	Investments—land, buildings, and equipment basis ▶ _____ 38,621 Less accumulated depreciation (attach schedule) ▶ _____ 14,362	286	24,259	24,259
	12	Investments—mortgage loans . . . . .			
	13	Investments—other (attach schedule) . . . . .	40,683,176	41,234,867	41,234,867
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
Liabilities	15	Other assets (describe ▶ _____)	17,767	29,100	29,100
	16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	44,020,594	44,099,514	44,099,514
	17	Accounts payable and accrued expenses . . . . .	42,799	41,731	
	18	Grants payable . . . . .	322,856	178,311	
	19	Deferred revenue . . . . .			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule) . . . . .			
	22	Other liabilities (describe ▶ _____)	185,000	115,572	
Net Assets or Fund Balances	23	Total liabilities (add lines 17 through 22) . . . . .	550,655	335,614	
		Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24	Unrestricted . . . . .	43,469,939	43,763,900	
	25	Temporarily restricted . . . . .			
	26	Permanently restricted . . . . .			
		Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds . . . . .			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds			
	30	Total net assets or fund balances (see instructions) . . . . .	43,469,939	43,763,900	
	31	Total liabilities and net assets/fund balances (see instructions) . . . . .	44,020,594	44,099,514	

Part III Analysis of Changes in Net Assets or Fund Balances		
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year’s return) . . . . .	1 43,469,939
2	Enter amount from Part I, line 27a . . . . .	2 623,757
3	Other increases not included in line 2 (itemize) ▶ _____	3 83,000
4	Add lines 1, 2, and 3 . . . . .	4 44,176,696
5	Decreases not included in line 2 (itemize) ▶ _____	5 412,796
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . . .	6 43,763,900

Part IV

Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a	See Additional Data Table			
b				
c				
d				
e				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a See Additional Data Table			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a See Additional Data Table			
b			
c			
d			
e			

2	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	1,098,035
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)  If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 . . . . .	}	3	

Part V

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2013	1,733,309	41,111,984	0 042161
2012	1,784,580	38,406,888	0 046465
2011	1,715,436	38,584,616	0 044459
2010			
2009			

2	Total of line 1, column (d). . . . .	2	0 133085
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years . . . .	3	0 044362
4	Enter the net value of noncharitable-use assets for 2014 from Part X, line 5. . . . .	4	44,365,087
5	Multiply line 4 by line 3. . . . .	5	1,968,124
6	Enter 1% of net investment income (1% of Part I, line 27b). . . . .	6	34,688
7	Add lines 5 and 6. . . . .	7	2,002,812
8	Enter qualifying distributions from Part XII, line 4. . . . .	8	1,613,422

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See  
the Part VI instructions

Part VI

Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a		Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1			
b		Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b . . . . .		1	69,376
c		All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			
2		Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	0
3		Add lines 1 and 2. . . . .		3	69,376
4		Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0
5		Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- . . . . .		5	69,376
6		Credits/Payments			
a		2014 estimated tax payments and 2013 overpayment credited to 2014	6a	54,000	
b		Exempt foreign organizations—tax withheld at source . . . . .	6b		
c		Tax paid with application for extension of time to file (Form 8868) . . . . .	6c	64,000	
d		Backup withholding erroneously withheld . . . . .	6d		
7		Total credits and payments. Add lines 6a through 6d. . . . .		7	118,000
8		Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached		8	
9		Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed . . . . .		9	
10		Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid. . . . .		10	48,624
11		Enter the amount of line 10 to be Credited to 2015 estimated tax  48,624 Refunded		11	0

Part VII-A

Statements Regarding Activities

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .	1a	Yes	No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? . . . . . <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i>	1b		No
c	Did the foundation file Form 1120-POL for this year? . . . . .	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation  \$ 0 (2) On foundation managers  \$ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers  \$ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities.</i>	2		No
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i> . . . . .	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	4a	Yes	
b	If "Yes," has it filed a tax return on Form 990-T for this year? . . . . .	4b	Yes	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T.</i>	5		No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	6		No
7	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i> . . . . .	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) PA			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation.</i> . . . . .	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i> . . . . .	9		No
10	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i> . . . . .	10		No

Part VII-A

Statements Regarding Activities *(continued)*

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
Website address ▶ WWW.FIRSTHOSPITALFDN.ORG				
14	The books are in care of ▶ ANN MARIE HEALY EXECUTIVE DIRECTOR Telephone no ▶ (215) 546-4290 Located at ▶ 230 SOUTH BROAD STREET SUITE 810 PHILADELPHIA PA ZIP +4 ▶ 19102			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . . ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year . . . . . ▶	15		
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country ▶				

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?. . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?. . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days ). . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? . . . . . <b>1b</b> Organizations relying on a current notice regarding disaster assistance check here. . . . . ▶ <input type="checkbox"/>			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2014?. . . . . <b>1c</b>			No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014?. . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions ). . . . . <b>2b</b>			
c	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?. . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? ( <i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014.</i> ). . . . . <b>3b</b>			
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a	During the year did the foundation pay or incur any amount to			
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions).	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?	5b		
	Organizations relying on a current notice regarding disaster assistance check here.	<input checked="" type="checkbox"/>		
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	If "Yes," attach the statement required by Regulations section 53.4945–5(d).			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6b		No
	If "Yes" to 6b, file Form 8870.			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	7b		

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000.				0

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
HEALTH FEDERATION OF PHILADELPHIA	EMPLOYMENT SERVICES	237,985
1211 CHESTNUT STREET SUITE 801 PHILADELPHIA, PA 19107		
COLONIAL CONSULTING LLC	INVESTMENT ADVISORS	66,544
750 THIRD AVENUE 20TH FLOOR NEW YORK, NY 10017		
Total number of others receiving over \$50,000 for professional services. . . . .		0

Part IX-A

Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
2	
3	
4	

Part IX-B

Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3. . . . .	0



Part X

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities. . . . .	1a	44,723,288
b	Average of monthly cash balances. . . . .	1b	317,409
c	Fair market value of all other assets (see instructions). . . . .	1c	0
d	Total (add lines 1a, b, and c). . . . .	1d	45,040,697
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	1e	0
2	Acquisition indebtedness applicable to line 1 assets. . . . .	2	0
3	Subtract line 2 from line 1d. . . . .	3	45,040,697
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	4	675,610
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	44,365,087
6	Minimum investment return. Enter 5% of line 5. . . . .	6	2,218,254

Part XI

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

1	Minimum investment return from Part X, line 6. . . . .	1	2,218,254
2a	Tax on investment income for 2014 from Part VI, line 5. . . . .	2a	69,376
b	Income tax for 2014 (This does not include the tax from Part VI ). . . . .	2b	528
c	Add lines 2a and 2b. . . . .	2c	69,904
3	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	3	2,148,350
4	Recoveries of amounts treated as qualifying distributions. . . . .	4	0
5	Add lines 3 and 4. . . . .	5	2,148,350
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	2,148,350

Part XII

Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . .	1a	1,613,422
b	Program-related investments—total from Part IX-B. . . . .	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required). . . . .	3a	
b	Cash distribution test (attach the required schedule). . . . .	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	1,613,422
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4. . . . .	6	1,613,422

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

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				2,148,350
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only. . . . .			525,337	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2014				
a From 2009. . . . .				
b From 2010. . . . .				
c From 2011. . . . .				
d From 2012. . . . .				
e From 2013. . . . .				
f Total of lines 3a through e. . . . .	0			
4 Qualifying distributions for 2014 from Part XII, line 4 ▶ \$ 1,613,422				
a Applied to 2013, but not more than line 2a			525,337	
b Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
c Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
d Applied to 2014 distributable amount. . . . .				1,088,085
e Remaining amount distributed out of corpus	0			
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	0			
b Prior years' undistributed income Subtract line 4b from line 2b. . . . .		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .		0		
d Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
e Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
f Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015 . . . . .				1,060,265
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 not applied on line 5 or line 7 (see instructions). . . .	0			
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a . . . . .	0			
10 Analysis of line 9				
a Excess from 2010. . . .				
b Excess from 2011. . . .				
c Excess from 2012. . . .				
d Excess from 2013. . . .				
e Excess from 2014. . . .				

Part XIVPrivate Operating Foundations (see instructions and Part VII-A, question 9)

1a

If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2014, enter the date of the ruling.

b

Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

☐ 4942(j)(3) or ☐ 4942(j)(5)

2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed.	Tax year	Prior 3 years			(e) Total
		(a) 2014	(b) 2013	(c) 2012	(d) 2011	
b	85% of line 2a					
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 and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					
	(3) Largest amount of support from an exempt organization.					
	(4) Gross investment income.					

Part XVSupplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1

Information Regarding Foundation Managers:

a

List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

b

List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a

The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

SEE FOUNDATION WEBSITE FOR DETAILS  
230 S BROAD STREET SUITE 810  
PHILADELPHIA, PA 19102  
(215) 546-4290  
INFO@FIRSTHOSPITALFDN.ORG

b

The form in which applications should be submitted and information and materials they should include

SEE FOUNDATION WEBSITE FOR DETAILS

c

Any submission deadlines

SEE FOUNDATION WEBSITE FOR DETAILS

d

Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

SEE FOUNDATION WEBSITE FOR DETAILS

Part XV

Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year See Additional Data Table				
Total . . . . .			3a	1,295,621
b Approved for future payment See Additional Data Table				
Total . . . . .			3b	178,311

Enter gross amounts unless otherwise indicated

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Form **990-PF** (2014)



Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
PUBLICLY TRADED SECURITIES	P		
K1 PASSTHROUGH - ADVISORY RESEARCH SMALL/MID CAP	P		
K1 PASSTHROUGH - THE COLCHESTER GLOBAL BOND FUND	P		
K1 PASSTHROUGH - GRYPHON INTERNATIONAL EAFE GROWTH FUND	P		
K1 PASSTHROUGH - HARBOR INTERNATIONAL FUND	P		
K1 PASSTHROUGH - PIMCO COMMODITY REAL RETURN STRAT INST	P		
K1 PASSTHROUGH - RCP FUND VIII FEEDER, LTD	P		
K1 PASSTHROUGH - SANKATY SENIOR LOAN FUND, LP	P		
K1 PASSTHROUGH - TIFF PRIVATE EQUITY PARTNERS 2008, LLC	P		
K1 PASSTHROUGH - TIFF PRIVATE EQUITY PARTNERS 2009, LLC	P		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
6,969,949		6,969,949	0
			243,132
			15,024
			475,120
			467,721
			-380,793
			35,140
			1,534
			116,612
			35,164

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			0
			243,132
			15,024
			475,120
			467,721
			-380,793
			35,140
			1,534
			116,612
			35,164

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
K1 PASSTHROUGH - TIFF PRIVATE EQUITY PARTNERS 2011, LLC	P		
CAPITAL GAIN DISTRIBUTIONS	P		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
			89,381
			0

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l


Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			89,381
			0




Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
JULIA R DUTTON	CHAIR 3 00	0	0	0
230 SOUTH BROAD STREET PHILADELPHIA, PA 19102				
JANE G PEPPER THRU 0414	VICE CHAIR 0 50	0	0	0
230 SOUTH BROAD STREET PHILADELPHIA, PA 19102				
ESTELLE B RICHMAN BEGINNING 0514	VICE CHAIR 2 00	0	0	0
230 SOUTH BROAD STREET PHILADELPHIA, PA 19102				
KEITH KASPER THRU 0414	TREASURER 0 50	0	0	0
230 SOUTH BROAD STREET PHILADELPHIA, PA 19102				
PAMELA A STRISOFSKY0514 THRU 0814	TREASURER 1 00	0	0	0
230 SOUTH BROAD STREET PHILADELPHIA, PA 19102				
THERESA LARIVEE 0914 THRU 0914	TREASURER 0 50	0	0	0
230 SOUTH BROAD STREET PHILADELPHIA, PA 19102				
PETER A THOMPSON BEGINNING 1014	TREASURER 1 00	0	0	0
230 SOUTH BROAD STREET PHILADELPHIA, PA 19102				
SUZANNE SHEEHAN BECKER THRU 0414	SECRETARY 1 00	0	0	0
230 SOUTH BROAD STREET PHILADELPHIA, PA 19102				
R MICHAEL BUCKLEY BEGINNING 0514	SECRETARY 1 00	0	0	0
230 SOUTH BROAD STREET PHILADELPHIA, PA 19102				
RONNIE L BLOOM	DIRECTOR 1 00	0	0	0
230 SOUTH BROAD STREET PHILADELPHIA, PA 19102				
MORRISON C HUSTON JR	DIRECTOR 0 50	0	0	0
230 SOUTH BROAD STREET PHILADELPHIA, PA 19102				
HELEN L COONS RESIGNED APRIL 2014	DIRECTOR 0 50	0	0	0
230 SOUTH BROAD STREET PHILADELPHIA, PA 19102				
LOREE D JONES	DIRECTOR 1 00	0	0	0
230 SOUTH BROAD STREET PHILADELPHIA, PA 19102				
JOAN KENNERSON KING	DIRECTOR 1 00	0	0	0
230 SOUTH BROAD STREET PHILADELPHIA, PA 19102				
LAWRENCE T MANGAN	DIRECTOR 0 50	0	0	0
230 SOUTH BROAD STREET PHILADELPHIA, PA 19102				
A SCOTT MCNEAL	DIRECTOR 1 00	0	0	0
230 SOUTH BROAD STREET PHILADELPHIA, PA 19102				
SUSAN E PHILLIPS	DIRECTOR 2 00	0	0	0
230 SOUTH BROAD STREET PHILADELPHIA, PA 19102				
WANDA RONNER	DIRECTOR 1 00	0	0	0
230 SOUTH BROAD STREET PHILADELPHIA, PA 19102				
DAVID J WILLIAMS	DIRECTOR 2 00	0	0	0
230 SOUTH BROAD STREET PHILADELPHIA, PA 19102				
SHELLY D YANOFF	DIRECTOR 1 00	0	0	0
230 SOUTH BROAD STREET PHILADELPHIA, PA 19102				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ANTI-VIOLENCE PARTNERSHIP OF PHILADELPHIA 2000 HAMILTON STREET SUITE 304 PHILADELPHIA,PA 19130	NONE	PC	AVP COUNSELING CENTER	25,000
ATTIC YOUTH CENTER 255 SOUTH 16TH STREET PHILADELPHIA,PA 19102	NONE	PC	MENTAL HEALTH COUNSELING	30,000
BENEFITS DATA TRUST 2 LOGAN SQUARE SUITE 550 PHILADELPHIA,PA 19103	NONE	PC	PA BENEFITS CENTER	30,000
BETHESDA PROJECT 1630 SOUTH STREET PHILADELPHIA,PA 19146	NONE	PC	GENERAL OPERATING SUPPORT	10,000
BRANDYWINE HEALTH FOUNDATION 50 SOUTH 1ST AVENUE COATESVILLE,PA 19320	NONE	PC	MENTAL HEALTH FIRST AID PROGRAM	15,000
CANCER SUPPORT COMMUNITY GREATER PHILADELPHIA 4100 CHAMOUNIX DRIVE PHILADELPHIA,PA 19131	NONE	PC	PSYCHOSOCIAL CANCER SUPPORT FOR NORTH PHILADELPHIA FAMILIES	30,000
CENTER FOR ADVOCACY FOR THE RIGHTS AND INTERESTS OF THE ELDERLY (CARIE) 1500 JFK BOULEVARD SUITE 1500 PHILADELPHIA,PA 19102	NONE	PC	CARIE LINE	25,000
THE CENTER FOR AUTISM 3905 FORD ROAD SUITE 6 PHILADELPHIA,PA 191315469	NONE	PC	GENERAL OPERATING SUPPORT	25,000
CHESPENN HEALTH SERVICES 2600 WEST 9TH STREET 2 NORTH CHESTER,PA 19013	NONE	PC	INTEGRATION OF BEHAVIORAL AND PRIMARY HEALTH CARE SERVICES	40,000
CHILDREN'S CRISIS TREATMENT CENTER 1080 NORTH DELAWARE AVENUE SUITE 600 PHILADELPHIA,PA 19125	NONE	PC	CCTC'S EXPANSION SERVICES TO MONTGOMERY COUNTY	30,000
COMMUNITY VOLUNTEERS IN MEDICINE 200 B LAWRENCE DRIVE WEST CHESTER,PA 19380	NONE	PC	DIABETES PROGRAM	30,000
DAEMION COUNSELING CENTER 95 HOWELLVILLE ROAD BERWYN,PA 19312	NONE	PC	STUDENT AND FAMILY EMPOWERMENT PROGRAM	5,000
DREXEL UNIVERSITY SCHOOL OF PUBLIC HEALTH CENTER FOR HUNGER-FREE COMMUNIT 1505 RACE STREET BELLET BUILDING 11TH FLOOR MAIL STOP 1035 PHILADELPHIA,PA 19102	NONE	PC	A TRAUMA-INFORMED TANF INTEGRATING SELF PEER SUPPORT GROUPS TO IMPROVE MATERNAL AND CHILD HEALTH	46,156
EAGLES CHARITABLE FOUNDATION INC ONE NOVACARE WAY NOVACARE COMPLEX PHILADELPHIA,PA 19145	NONE	PC	GIVE KIDS SIGHT DAY	14,000
EAGLES YOUTH PARTNERSHIP ONE NOVACARE WAY NOVACARE COMPLEX PHILADELPHIA,PA 19145	NONE	PC	EAGLES EYE MOBILE PROGRAM	35,000
<b>Total</b> . . . . .  <b>3a</b>				1,295,621


Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
FAMILY SUPPORT LINE 100 WEST SIXTH STREET MEDIA,PA 19063	NONE	PC	DELAWARE COUNTY CHILDREN'S ADVOCACY CENTER	30,000
THE FOUNDATION FOR ENHANCING COMMUNITIES 200 N 3RD STREET 8TH FLOOR HARRISBURG,PA 17108	NONE	PC	PENNSYLVANIA COALITION FOR ORAL HEALTH	5,000
GARCES FOUNDATION 212 RACE STREET SUITE 1A PHILADELPHIA,PA 19106	NONE	PC	COMMUNITY ORAL HEALTH PROGRAM	20,000
GEARING UP 1221 LOCUST STREET SUITE 105 PHILADELPHIA,PA 19107	NONE	PC	COMMUNITY PROGRAMS AND IMPACT EVALUATION	10,000
GRANTMAKERS IN HEALTH 1100 CONNECTICUT AVENUE NW SUITE 1200 WASHINGTON,DC 20036	NONE	PC	FIFTY PERCENT OF ANNUAL MEMBERSHIP	1,898
HEALTH CARE ACCESS (FORMER PHOENIXVILLE HEALTHCARE ACCESS FOUNDATION) 723 WHEATLAND STREET PHOENIXVILLE,PA 19460	NONE	PC	DENTAL PROGRAM	25,000
HEALTHLINK MEDICAL CENTER 1775 STREET ROAD SOUTHAMPTON,PA 18966	NONE	PC	GENERAL OPERATING SUPPORT	20,000
KEYSTONE CARE 8765 STENTON AVENUE WYNDMOOR,PA 19038	NONE	PC	GENERAL OPERATING SUPPORT	25,000
LEGAL AID OF SOUTHEASTERN PENNSYLVANIA 625 SWEDE STREET NORRISTOWN,PA 19401	NONE	PC	STEPS TO SECURITY PROGRAM	20,000
LEGAL CLINIC FOR THE DISABLED 1513 RACE STREET PHILADELPHIA,PA 19102	NONE	PC	MEDICAL LEGAL PARTNERSHIP INITIATIVE	30,000
LUTHERAN CHILDREN AND FAMILY SERVICE OF EASTERN PENNSYLVANIA 5401 RISING SUN AVENUE PHILADELPHIA,PA 19120	NONE	PC	PHILADELPHIA REFUGEE MENTAL HEALTH COLLABORATIVE	20,000
MATERNAL AND CHILD HEALTH CONSORTIUM 30 WEST BARNARD STREET SUITE 1 WEST CHESTER,PA 19382	NONE	PC	GENERAL OPERATING SUPPORT	35,000
METROPOLITAN AREA NEIGHBORHOOD NUTRITION ALLIANCE 2323 RANSTEAD ST PHILADELPHIA,PA 19103	NONE	PC	COMPREHENSIVE NUTRITION SUPPORT FOR THE CRITICALLY ILL	25,000
MISSION KIDS - CHILD ADVOCACY CENTER OF MONTGOMERY COUNTY PO BOX 413 BLUE BELL,PA 19422	NONE	PC	CASE COORDINATOR	40,000
NATIONALITIES SERVICE CENTER 1216 ARCH STREET 4TH FLOOR PHILADELPHIA,PA 19107	NONE	PC	DOMESTIC VIOLENCE PROGRAM	30,000
<b>Total . . . . .</b>  <b>3a</b>				1,295,621

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
NORTHEAST TREATMENT CENTER 499 N 5TH STREET SUITE A PHILADELPHIA,PA 19123	NONE	PC	EMERGENCY FAMILY FUND	15,000
PENNSYLVANIA HOSPITAL 800 SPRUCE STREET PHILADELPHIA,PA 19107	NONE	PC	HISTORIC PRESERVATION EFFORTS	98,498
PENNSYLVANIA HOSPITAL ABRAMSON CANCER CENTER 800 SPRUCE STREET PHILADELPHIA,PA 19107	NONE	PC	JOAN KARNELL SUPPORTIVE CARE PROGRAM	10,000
PENNSYLVANIA HOSPITAL DEPARTMENT OF OBSTETRICS & GYNECOLOGY 800 SPRUCE STREET PHILADELPHIA,PA 19107	NONE	PC	LATINA COMMUNITY HEALTH PROGRAM	96,688
PENNSYLVANIA HOSPITAL DIABETES EDUCATION CENTER 800 SPRUCE STREET PHILADELPHIA,PA 19107	NONE	PC	CERTIFIED HEALTH EDUCATION SPECIALIST, DIABETES EDUCATION PROGRAM	34,318
PHILADELPHIA CHILDREN'S ALLIANCE 42 SOUTH 15TH STREET SUITE 300 PHILADELPHIA,PA 19102	NONE	PC	VICTIM ADVOCACY AND MENTAL HEALTH SERVICES	20,000
PHILADELPHIA LEGAL ASSISTANCE CENTER 718 ARCH STREET SUITE 300N PHILADELPHIA,PA 19106	NONE	PC	PHILADELPHIA'S MEDICAL- LEGAL-COMMUNITY PARTNERSHIP	10,000
PHILANTHROPY NETWORK GREATER PHILADELPHIA 230 SOUTH BROAD STREET SUITE 402 PHILADELPHIA,PA 19102	NONE	PC	FIFTY PERCENT OF ANNUAL MEMBERSHIP	2,063
RESOURCES FOR HUMAN DEVELOPMENT 4700 WISSAHICKON AVENUE PHILADELPHIA,PA 19144	NONE	PC	FEDERAL HEALTH INSURANCE NAVIGATION PROGRAM	20,000
RESOURCES FOR HUMAN DEVELOPMENT FOR HEALTH NEWSWORKS 4700 WISSAHICKON AVENUE PHILADELPHIA,PA 19144	NONE	PC	GENERAL OPERATING SUPPORT	20,000
SALUS UNIVERSITY THE EYE INSTITUTE 8360 OLD YORK ROAD ELKINS PARK,PA 19027	NONE	PC	VISION CARE SERVICES FOR CHILDREN IN THE PHILADELPHIA PUBLIC SCHOOLS	20,000
ST CHRISTOPHER'S FOUNDATION FOR CHILDREN 1800 JOHN F KENNEDY BOULEVARD SUITE 1550 PHILADELPHIA,PA 19103	NONE	PC	COMMUNITY ORAL HEALTH INITIATIVE	10,000
SUNDAY SUPPERS A DIVISION OF SHARE FOOD PROGRAM 7203 LINCOLN DRIVE PHILADELPHIA,PA 19119	NONE	PC	SUNDAY SUPPERS	30,000
SUPPORT CENTER FOR CHILD ADVOCATES 1900 CHERRY STREET PHILADELPHIA,PA 19103	NONE	PC	GENERAL OPERATING SUPPORT	30,000
UNIVERSITY OF PENNSYLVANIA URBAN NUTRITION INITIATIVE 3451 WALNUT STREET SUITE 221 PHILADELPHIA,PA 19104	NONE	PC	GROWING TOGETHER FOR HEALTHY COMMUNITIES	20,000
<b>Total . . . . .</b>			<b>3a</b>	1,295,621

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
VISITING NURSE ASSOCIATION - COMMUNITY SERVICES 1421 HIGHLAND AVENUE ABINGTON,PA 19001	NONE	PC	CHILDREN'S HEALTH CENTER	20,000
WEAVERS WAY COMMUNITY PROGRAMS 559 CARPENTER LANE PHILADELPHIA,PA 19119	NONE	PC	HOPE GARDEN - FAMILY/ADULT PROGRAM	40,000
WHY NOT PROSPER PO BOX 949 NORRISTOWN,PA 19404	NONE	PC	DOMESTIC VIOLENCE PROGRAM AT RIVERSIDE CORRECTIONAL FACILITY	4,000
WOMEN'S COMMUNITY REVITALIZATION PROJECT 100 WEST OXFORD STREET PHILADELPHIA,PA 19122	NONE	PC	TENANT SERVICES STABLE HOUSING FOR FAMILY WELL-BEING	15,000
WOMEN'S MEDICAL FUND 1211 CHESTNUT STREET SUITE 700 PHILADELPHIA,PA 19107	NONE	PC	HELP LINE SERVICE ENHANCEMENT	39,000
WOMEN'S THERAPY CENTER 1315 WALNUT STREET SUITE 1004 PHILADELPHIA,PA 19107	NONE	PC	PSYCHOTHERAPY FOR LOW-INCOME WOMEN	14,000
<b>Total . . . . .</b>  <b>3a</b>				1,295,621

**TY 2014 Accounting Fees Schedule****Name:** FIRST HOSPITAL FOUNDATION**EIN:** 23-2904262

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING	56,185	22,104		34,081

# **TY 2014 Investments Government Obligations Schedule**

**Name:** FIRST HOSPITAL FOUNDATION

**EIN:** 23-2904262

**US Government Securities - End of  
Year Book Value:**

2,027,342

**US Government Securities - End of  
Year Fair Market Value:**

2,027,342

**State & Local Government  
Securities - End of Year Book  
Value:**

0

**State & Local Government  
Securities - End of Year Fair  
Market Value:**

0

TY 2014 Investments - Other Schedule

Name: FIRST HOSPITAL FOUNDATION  
 EIN: 23-2904262

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
FIXED INCOME BONDS-LOOMIS CORE PLUS BOND FUND	FMV	3,821,167	3,821,167
FIXED INCOME BONDS-SANKATY SENIOR LOAN FUND	FMV	1,302,272	1,302,272
EQUITY FUNDS-ABERDEEN EMERGING MARKETS	FMV	2,221,362	2,221,362
EQUITY FUNDS-ARTISAN MID CAP FUND INST SH	FMV	3,325,144	3,325,144
EQUITY FUNDS-BMO SMALL-CAP GROWTH FUND INST	FMV	1,100,340	1,100,340
EQUITY FUNDS-HARBOR INTERNATIONAL FUND-INST	FMV	0	0
EQUITY FUNDS-PIMCO COMMODITY/REAL RETURN	FMV	0	0
HEDGE FUNDS-PIMCO STOCK PLUS LP B	FMV	4,623,070	4,623,070
HEDGE FUNDS-GRYPHON INTERNATIONAL EAFE GROWTH FUND	FMV	3,724,494	3,724,494
HEDGE FUNDS-IRIDIAN PRIVATE EQUITY	FMV	2,974,293	2,974,293
HEDGE FUNDS-ADVISORY SMALL/MID CAP VALUE II	FMV	1,103,908	1,103,908
HEDGE FUNDS-FORESTER OFFSHORE LTD CLASS B 1/10	FMV	2,746,969	2,746,969
HEDGE FUNDS-FORESTER OFFSHORE LTD CLASS A 10/09	FMV	1,700,431	1,700,431
PRIVATE EQUITY-TIFF PRIVATE EQUITY PARTNERS 2008, LLC	FMV	1,183,040	1,183,040
PRIVATE EQUITY-TIFF PRIVATE EQUITY PARTNERS 2009, LLC	FMV	668,283	668,283
PRIVATE EQUITY-TIFF PRIVATE EQUITY PARTNERS 2011, LLC	FMV	728,879	728,879
REAL ESTATE FUNDS-MADISON INTERNATIONAL REAL ESTATE LIQUIDITY FUND	FMV	842,033	842,033
REAL ESTATE FUNDS-BPG FUND IX	FMV	716,335	716,335
HEDGE FUNDS-FPA MULTI ADVISOR FUND	FMV	1,961,811	1,961,811
HEDGE FUNDS-LONE JUNIPER	FMV	1,448,018	1,448,018
PRIVATE EQUITY-RCP FUND VIII	FMV	339,637	339,637
EQUITY FUNDS-DIMENSIONAL FUND ADVISORS	FMV	3,746,020	3,746,020
COMMODITIES-VAN ECK CM COMMODITY FUND	FMV	957,361	957,361



# TY 2014 Legal Fees Schedule

**Name:** FIRST HOSPITAL FOUNDATION

**EIN:** 23-2904262

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL	1,860	93		1,768

# TY 2014 Other Assets Schedule

**Name:** FIRST HOSPITAL FOUNDATION

**EIN:** 23-2904262

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
DEPOSITS	15,767	20,000	20,000
PREPAID FEDERAL EXCISE TAX	2,000	9,100	9,100

TY 2014 Other Decreases Schedule

**Name:** FIRST HOSPITAL FOUNDATION

**EIN:** 23-2904262

Description	Amount
UNREALIZED LOSS ON INVESTMENTS	412,796

**TY 2014 Other Expenses Schedule****Name:** FIRST HOSPITAL FOUNDATION**EIN:** 23-2904262

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
DUES AND SUBSCRIPTIONS	4,132	0		4,132
ADMINISTRATIVE FEE	236,069	27,854		208,215
BANK CHARGES	141	141		0
OFFICE EXPENSE	25,688	1,284		21,269

TY 2014 Other Income Schedule

**Name:** FIRST HOSPITAL FOUNDATION

**EIN:** 23-2904262

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
ALLOCATION OF PARTNERSHIP INCOME	341,127	1,618,683	341,127

TY 2014 Other Increases Schedule

**Name:** FIRST HOSPITAL FOUNDATION

**EIN:** 23-2904262

Description	Amount
DEFERRED EXCISE TAX BENEFIT	83,000

**TY 2014 Other Liabilities Schedule****Name:** FIRST HOSPITAL FOUNDATION**EIN:** 23-2904262

Description	Beginning of Year - Book Value	End of Year - Book Value
DEFERRED FEDERAL EXCISE TAX LIABILITY	185,000	102,000
RENT PAYABLE	0	13,572

## TY 2014 Other Professional Fees Schedule

**Name:** FIRST HOSPITAL FOUNDATION

**EIN:** 23-2904262

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
GRANT ADMINISTRATOR	8,850	0		8,850
INVESTMENT ADVISORY	66,544	66,544		0
IT CONSULTING	4,200	210		3,990



# TY 2014 Taxes Schedule

**Name:** FIRST HOSPITAL FOUNDATION

**EIN:** 23-2904262

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PF EXCISE TAX	81,854	0		0