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Form 990-PF

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

OMB No 1545-0052 2015

Department of the Treasury Internal Revenue Service ► Do not enter social security numbers on this form as it may be made public. Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. 2015
Opén to Public Inspection

Fo	or cale	enda	ar ye	ear 2015, or tax	x year beginning	, 2015	, and ending				
Na	me of to	ounda	tion					A	Employer identification number	er	
Ng	albor a	nd str	eet (c	or PO box number if	S PARTNERSHIP f mail is not delivered to street a	address)	Room/suite	В	27-4735585 Telephane number (see instruct		
2	00	STEVENS DRIVE own state or province country and ZIP or foreign postal code					<u>!</u>	+	(215) 863-5809		
	HIL					PA	19113	C If exemption application is pending, check here . >			
Ğ				at apply.	Initial return	X Initial return of a form	er public charity] _{D 1}	Foreign organizations, check	here	
_					Final return	Amended return		1	3 4	لــا	
					Address change	Name change	 	_	Poreign organizations meetin here and attach computation		
Н	Che			of organization		(c)(3) exempt private fo	undation private foundation	_	If proveto foundation status w	Land on terminated	
-	احيب			on 4947(a)(1) no alue of all assets at	onexempt charitable tru		Cash X Accrual	-∤E	If private foundation status w under section 507(b)(1)(A), or		
,	froi	man n Pa	cet va rt II, d	column (c), line 16)		Other (specify)	Nasii [V] Accidai	F	If the foundation is in a 60-m	onth termination ==	
	► \$;		176,	765. (Part I	column (d) must be on	cash basis)	1.	under section 507(b)(1)(B), o		
[Part		Ext colu saril	alysis of Revolutions (b), (c), and (y) equal the amogenistructions)	venue and total of amounts in id (d) may not neces- ounts in column (a)	(a) Revenue and expenses per books	(b) Net investme	nt	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)	
-		Τ.	<u> </u>		s, etc, received (attach schedule) .	267,653.	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	-5	Carrier or Continue	。大人,这个对这个多层军员	
		1:	_	[-3	ndation is not required to attach Sch E				· Janipage - Ag Janages	是自由的	
		1.	Q 1	nterest on savinos and len	emporary cash investments		1]		CHAPTER AND THE	
@		1	-	-	om secunties		+			ATT STATE	
2		1		Gross rents · · ·						3-X-50-50-00-12	
2		1		Net rental income or (loss)		13. 产业产产的			And the property of the contract of the contra	2000 120 150 150 150 150 150 150 150 150 150 15	
2	R			Net gain or (loss) from sale Gross sales price for a	ale of assets not on line 10 · · · ·		A CONTRACTOR		"不是"。 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	· · · · · · · · · · · · · · · · · · ·	
SCANNED	٧	1		assets on line 6a 🕟 🔻	me (from Part IV, line 2)	The state of the s		Z. 1. 11	· · · · · · · · · · · · · · · · · · ·	B. A. Francisco	
\leq	E	ι	8	Net short-term capital	algain	100000000000000000000000000000000000000		,		· · · · · · · · · · · · · · · · · · ·	
MAY	Ų	١.	9	Income modifications	s <i>.</i>	C POWER AND A PER				人名英格雷拉里河	
P		1		Gross sales less returns and allowances			通知证金				
B			b	Less Cost of goods sold			- Garage	A A .	- 12 Family From the State of t		
20		}		Gross profit or (loss) (attac	ach schedule)		19 1 7 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			Carried Barbara	
2017	1	1	11	Other income (attach	h schedule)						
_		1	12	Total. Add lines 1 t	through 11	. 267,653	·			高いはいい おおまかい かいかい	
		1	13	•	ficers, directors, trustees, etc. alaries and wages		- 				
		1	14 15		iloyee benefits						
		1		•	chedule)						
•	1	M			tach sch)						
		Ĭ	C		ach sch)	•					
-	0	î l	17	Interest		-					
	E P	R	18 19	Taxes (attach schedule)(Depreciation (attach)(see instrs)	` 			 	The state of the s	
	Ť	Ť	13	schedule) and deple						一文学 基础和 2007	
<u></u>	N	<u>.</u>	20		e and magings		-				
20:17	_	- 1	21 22		s, and meetings				 		
$\langle \rangle$	Ñ D	χ̈́	23	Other expenses (att					†		
, 4		EN		See Line 23 St		337,901					
⋛		EXPENSES	24	Total operating and expenses. Add line:	nd administrative es 13 through 23	367,680	,				
MAY		s	25	•	unts paid · · · · · · ·			ATT	THE PROPERTY OF THE PARTY OF TH		
B 1.00		- }	26	Total expenses and							
C.D			~~	Add lines 24 and 25		3077000		र एड्डिंड इ.स.च्या	GECT TO THE T	1 14:55 S. 2588 S. 488	
, # G		- }	27	Subtract line 26 from a Excess of revenue		Land Control of the Control	14 The Control of the		是一种的人	學是學學	
		- {		and disbursement	its	-100,02		مودر ستود	The state of the s	· · · · · · · · · · · · · · · · · · ·	
34.63.63									X 25 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	Park St. Carlot	
- - ,	B				ome (if negative, enter -0) . uction Act Notice, see					Form 900 BE (2015)	
17 1	BAA	· LC	or Pa	aperwork Reduc	icavii act Notice, see l	113(14)(10)13.	TEEA0301	12/04/1	5	Form 990-PF (2015)	

Page 2

Dort	i e	Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	year
Pari		(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
• 1	1	Cash - non-interest-bearing	268,634.	168,738.	168,738.
- }	2	Savings and temporary cash investments			
1	3	Accounts receivable	Land of the State	والمعارضية سياري والمالية	· The boundary of the
ĺ		Less allowance for doubtful accounts	·		
}	4	Pledges receivable	المستخدمة المستخدمة	and the same was the way	as Si de la mire a Zin in a fatta de la care
- 1		Less allowance for doubtful accounts	500.	 	
1	5	Grants receivable		<u></u>	
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach sch)	ر در	Lifer Marian Care	الله المراقبة الله الله الله الله الله الله الله الل
A		Less allowance for doubtful accounts			
A S E T	8	Inventories for sale or use			
E	9	Prepaid expenses and deferred charges	8,396.	8,027.	8,027.
Ś	10 a	Investments – U.S. and state government obligations (attach schedule)			
	t	nvestments — corporate stock (attach schedule)			
		investments — corporate bonds (attach schedule)			
	11	Investments — land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			
	13	Investments - other (attach schedule)			
	14	Land, buildings, and equipment basis		The rand do not the second	
		Less' accumulated depreciation (attach schedule)			
	15 16	Other assets (describe Total assets (to be completed by all filers — see the instructions Also, see page 1, item I)	277,530.	176,765.	176,765.
L	17	Accounts payable and accrued expenses	5,188.		
A	18	Grants payable			
В	19	Deferred revenue			
Ľ	20	Loans from officers, directors, trustees, & other disqualified persons		<u> </u>	
i T	21	Mortgages and other notes payable (attach schedule)		1	
1	22	Other liabilities (describe)		
E S	23	Total liabilities (add lines 17 through 22)	5,188	4,450.	
	-	Foundations that follow SFAS 117, check here		4,430.	
NF	24		174,812	. 147,315.	
- E U	25	Temporarily restricted	97,530	. 25,000	
_ 0		· · · · · · · · · · · · · · · · · · ·			
A B S A E A		Foundations that do not follow SFAS 117, check here . F and complete lines 27 through 31.			
ĔĹ	27	7 Capital stock, trust principal, or current funds			
TA	. 1				
0 E		Retained earnings, accumulated income, endowment, or other funds			
RS		7 Total net assets or fund balances (see instructions)	272,342	. 172,315	
	3	Total liabilities and net assets/fund balances (see instructions)	277,530	-	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balan			
1	To	tal net assets or fund balances at beginning of year — Part II, columnd-of-year figure reported on prior year's return)	(a), line 30 (must agree	with	272 240
2		ter amount from Part I, line 27a			272,342.
3				<u> </u>	-100,027.
4		d lines 1, 2, and 3		4	172 215
5		program and restricted in line 2 (Homisto)			172,315.
6	То	tal net assets or fund balances at end of year (line 4 minus line 5) —	Part II, column (b) line	30 6	172,315.
			21, 22, 110		1/2,313.

Part VI instructions

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 : Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	nstru	etions	;)		
	 		غند ذً."		1 1	2: 3
	Date of ruling or determination letter (attach copy of letter if necessary – see instrs)	_			-	
b[Domestic foundations that meet the section 4940(e) requirements in Part V,	1				
C	check here . ▶ ☐ and enter 1% of Part I, line 27b	7, 250	र्जन्	F-5-35	3, 2,	3.52
	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		A ALIE	à L i		E.
f	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2				
3 /	Add lines 1 and 2 · · · · · · · · · · · · · · · · · ·	3	L			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) \dots	4				
5 `	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0	5				0.
6	Credits/Payments	٠٠٠٠	5.45	33.25	11	الزائدة الآ الأمام الآ
a :	2015 estimated tax pmts and 2014 overpayment credited to 2015	11.16	- A - 1	*********		
b	Exempt foreign organizations — tax withheld at source 6 b	15.55¢				元"。元 第二次
C	Tax paid with application for extension of time to file (Form 8868) 6 c	स्तु <u>ें</u> श्रः अस्तु }}	1	4.4	2000年	227
d	Backup withholding erroneously withheld				100	
7	Total credits and payments Add lines 6a through 6d	7	}			
8	Enter any penalty for underpayment of estimated tax. Check here 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	1			0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				0.
	Enter the amount of line 10 to be Credited to 2016 estimated tax	11				
Parl	VII-A Statements Regarding Activities					
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			1. 1. 1. E	Yes	No
	participate or intervene in any political campaign?			1 a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?		<i>.</i>	1 b		х
	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					於
	Did the foundation file Form 1120-POL for this year?			1 c		X
u	(1) On the foundation > \$ (2) On foundation managers > \$					2
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers • \$					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2	Mari 4. Butz	X
	If 'Yes.' attach a detailed description of the activities			23		下段
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	. <i>.</i>		3	X	
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4 a		X
	o If Yes,' has it filed a tax return on Form 990-T for this year?			4 b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If 'Yes,' attach the statement required by General Instruction T			\$\$%*	- 4.5	美国
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.			- 32		1
	By language in the governing instrument, or			**	1	[2]
	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	X	1
7				7	X	
8 8	a Enter the states to which the foundation reports or with which it is registered (see instructions)			7	2	- 23
				300	1	
ļ	b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation			8 b		X
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If 'Yes,' complete Part	j)(5) XIV		9	23	X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names				-	
	and addresses	<u></u>		. 10	<u> </u>	X
BAA	A.		F	orm 99	0-PF	(2015)

orm	990-PF (2015) AMERIHEALTH CARITAS PARTNERSHIP 27-4/3558	5	Pa	ge 5
Par	t 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		х
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		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address			
14	The books are in care of UAC Telephone no (215)	851-	1982	<u> </u>
45	Located at 1207 CHESTNUT ST PHILADELPHIA PA 2IP+4 19107 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here			СТ
13	and enter the amount of tax-exempt interest received or accrued during the year		•	لـا
16	· · · · · · · · · · · · · · · · · · ·	. 16	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes' enter the name of the foreign country	1.5	1	だかっ
Pa	rt 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
1 :	During the year did the foundation (either directly or indirectly)	125	-5-E	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?		4.7%	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?		275	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	10 Sec. 1	4	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	ا پر ۱۳۰۰ هم در مورد در مورد مورد	- 140 - 1	
	(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)?	1 mg		きま
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)			
	b If any answer is 'Yes to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1 b	ب الأمنا	33
	Organizations relying on a current notice regarding disaster assistance check here	1.75	2	3,00
	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 2015?	1 c	.s.7.	in in its and
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))	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	要	E E
	a At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015?		-	3-4
	If 'Yes,' list the years ► 20 , 20 , 20 , 20 .			200
	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement — see instructions)	2 b		ELE
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	- Sur	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1
	► 20 _ ,20 _ ,20 _ ,20 _			4.5
	3 a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?		1	
	b If Yes, did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015).	31		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
			 	
•	4 a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a	ļ	X
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	12.	•	
B	AA	Form 99		X (2015)
		. 4.111		,,,

Compensation of five highest-paid employ (a) Name and address of each employee	(b) Title, and average	luded on line 1 - see i	nstructions). If none, a (d)Contributions to	enter 'NONE.'
	-			
PHILADELPHIA PA 19113	10.00	<u>0.</u>	0.	0.
200 STEVENS DRIVE	- TREASURER	0	_	
STEVE BOHNER	- TDEACHDER			{
PHILADELPHIA PA 19113	10.00	0.	0.	0.
200 STEVENS DRIVE	- VICE-CHAIR	_	_	}
DR ANDREA GEIZER	-			
PHILADELPHIA PA 19113	10.00	0.	0.	0.
200 STEVENS DRIVE	_ CHAIRMAM			1
CHRISTOPHER DRUMM	~			
(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
1 List all officers, directors, trustees, foundate				,
and Contractors				· · ·
Part VIII Information About Officers,				
7 a At any time during the tax year, was the foundable 16 Yes, did the foundation receive any proceed				No Line
b Did the foundation, during the year, pay premit If 'Yes' to 6b, file Form 8870	uns, airectly or inairectly, or	a personal benefit cont	ract ^y	6b X
on a personal benefit contract?			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	No
6 a Did the foundation, during the year, receive an	y funds, directly or indirectly	, to pay premiums	т. г	
If 'Yes,' attach the statement required by Regu	lations section 53 4945-5(d	•	LJ L	
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure response	ie roundation claim exempti libility for the grant?	on from the	· · · Yes	No Salas
(see instructions)?				5 b
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53 4945 or in	a current notice regarding of	lisaster assistance		
educational purposes, or for the prevention	•		· · · · Yes X	No
(5) Provide for any purpose other than religiou	s, charitable, scientific, litera	ary, or		三 源
(4) Provide a grant to an organization other that in section 4945(d)(4)(A)? (see instructions)	an a charitable, etc, organiza	ation described	· · · · Tyes X	No
(3) Provide a grant to an individual for travel, s			· · · · [Yes [X]	No
on, directly or indirectly, any voter registrati	on drive?			17 0 1 6 64 6 93
(2) Influence the outcome of any specific public	- ,	,		
(1) Carry on propaganda, or otherwise attempt	=	tion 4945(e))?	Yes X	No
Part VII-B Statements Regarding Activi		4720 May Be Requ	irea (continuea)	
Form 990-PF (2015) AMERIHEALTH CARIT			27-473	5585 Page 6

plans and deferred compensation devoted to position MARIA PHAIL BATTLE
200 STEVENS DRIVE
PHILADELPHIA
AUTUMN BAIDOURI
200 STEVENS DRIVE
PHILADELPHIA
LATISHA WRIGHT
200 STEVENS DRIVE
PHILADELPHIA PRESIDENT 0. 20.00 131,631 38,002 MGR PROGRAMS 19113 30.00 64,868. 0. 20,234. PROGRAM SPEC 36.00 50,979. 16,590 0. Total number of other employees paid over \$50,000 None

Part	VIII Information About Officers, Directors, Trustees, Found and Contractors (continued)	dation Managers, Highly Paid E	mployees,
3 F	ive highest-paid independent contractors for professional services (see in	structions). If none, enter 'NONE.'	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
йойе			
	~		
		1	
			
Total	number of others receiving over \$50,000 for professional services	·······	None
Parl	IX-A Summary of Direct Charitable Activities		
List the	foundation's four largest direct charitable activities during the tax year. Include relevant statistical is alions and other beneficiaries served, conferences convened, research papers produced, etc.	information such as the number of	Expenses
1	HEALTHY HOOPS IS AN INNOVATIVE ASTHMA AND OBEST		
	MANAGEMENT PROGRAM THAT USES BASKETBALL AS A PLA	ATFORM_TO	
2	TEACH CHILDREN/FAMILY HOW TO MANAGE ASTHMA. HEALTH EMPOWERMENT TOUR IS A FAITH-BASED HEALTH	EDUCATION DROCDAM	191,372.
2	DESIGNED TO EDUCATE PARTICIPANTS ON IMPORTANT H		
	INCLUDING BREAT CANCER, DIABETES, OBESITY, STROKE		130,948.
3			
4			
Par	IX-B Summary of Program-Related Investments (see instru	ctions)	'
Desc	ribe the two largest program-related investments made by the foundation during	the tax year on lines 1 and 2	Amount
1			
			.]
2			
-	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
	ther program-related investments. See instructions		
3			-
Tota	I. Add lines 1 through 3	· · · · · · · · · · · · · · · · · · ·	
BAA			

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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

4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

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).

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0.

0.

4

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
Distributable amount for 2015 from Part XI, line 7				0.
2 Undistributed income, if any, as of the end of 2015	3		الانساء كنظاب سيم السياد	
a Enter amount for 2014 only		`		1 2 2 2 3
3 Excess distributions carryover, if any, to 2015				130
a From 2010	1 may 1 1			
b From 2011) î. ī.	
c From 2012	1	1 m 2 m		
d From 2013				
e From 2014				
f Total of lines 3a through e				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
4 Qualifying distributions for 2015 from Part				F 1 1 1 1 1 1 1
XII, line 4 \$			أراء أرضنا فأركت أحاداها	
a Applied to 2014, but not more than line 2a	· · · · · · · · · · · · · · · · · · ·	12. N	The state of the second	7. 2.2.
b Applied to undistributed income of prior years (Election required — see instructions)				
c Treated as distributions out of corpus (Election required — see instructions)				
d Applied to 2015 distributable amount		· · · · · · · · · · · · · · · · · ·		3
e Remaining amount distributed out of corpus	0.	Salar Contract	المراج وي المسامرة الم	三、江西是多、李子道
5 Excess distributions carryover applied to 2015	.}			-
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as		4		
indicated below:	Less market			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	•			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		10000000000000000000000000000000000000
c Enter the amount of prior years' undistributed income for which a notice of deficiency has	to the same	:		マンスト でしょうべん
been issued, or on which the section 4942(a)		~		
tax has been previously assessed		13		The same of the sa
d Subtract line 6c from line 6b Taxable amount — see instructions		1	Taria de la companya	
		0.		7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount — see instructions			. 0	
f Undistributed income for 2015 Subtract lines 4d and 5 from line 1. This amount must be	1000	引擎,"4位"的多	· "是"。"是"	2
distributed in 2016		The Article of the Control	一样等,一种	0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 3 mar 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions)				
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)	. 0	y promote a second	V 19	
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9.	٠	· ***** - *** *** ***	1 1 2 2 2	
a Excess from 2011 0		A A STATE OF THE S		
b Excess from 2012 0	(1) - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			1、1、1、1、1、1、1、1、1、1、1、1、1、1、1、1、1、1、1、
c Excess from 2013 0	 ~~~ ~ ~ ~ ~			1度深层温温温度
d Excess from 2014 0			Mark The Control of t	
e Excess from 2015 0			William States	中心。这种说
BAA				Form 990-PF (2015)

Form 990-PF (2015) AMERIHEALTH CARIT			 	27-4735585	Page 10
Part XIV. Private Operating Foundati					N/A
 1 a If the foundation has received a ruling or dete is effective for 2015, enter the date of the ruling 	rmination letter that 19 · · · · · · · ·	it is a private operat	ting foundation, and	· · <u>· ·</u> · · · · · · • • [
b Check box to indicate whether the foundation		ng foundation descri		X 4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum investment return from Part X for each year listed	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
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	
(1) Value of all assets	! !				1
(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(i)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income		1			
Part XV. Supplementary Information assets at any time during the	(Complete this	s part only if the	e foundation ha	ad \$5,000 or mor	e in
Information Regarding Foundation Managa List any managers of the foundation who had close of any tax year (but only if they have c NONE	ve contributed more	e than 2% of the tota in \$5,000) (See sec	l contributions recei tion 507(d)(2))	ved by the foundation	before the
b List any managers of the foundation who ow a partnership or other entity) of which the for NONE	n 10% or more of t undation has a 10%	ne stock of a corpora or greater interest	ation (or an equally i	arge portion of the ow	nership of
2 Information Regarding Contribution, Gra	-1 C:4 1 C-1	alasahun ata Bu			
Check here X if the foundation only m requests for funds if the foundation makes complete items 2a, b, c. and d	akes contributions	to preselected charit	able organizations a	and does not accept un tions under other cond	nsolicited ditions,
a The name, address, and telephone number	or e-mail address of	of the nerson to what	n applications show	d he addressed	
The name, address, and telephone number	or e man address t	n the berson to who	ii applications shou	d be addressed	
b The form in which applications should be su	bmitted and inform	ation and materials t	hey should include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards, su	ch as by geograph	cal areas, charitable	fields, kinds of instr	tutions, or other factor	s

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Form **990-PF** (2015)

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art XIV. Private Operating Foundati					N/A
1 a If the foundation has received a ruling or determined is effective for 2015, enter the date of the ruling	rmination letter that it	is a private operation	ng foundation, and th	ne ruling	
b Check box to indicate whether the foundation	_			X 4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	_	Prior 3 years		
income from Part I or the minimum investment return from Part X for	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
each year listed	0.	0.	0.	0.	
b 85% of line 2a					
C Qualifying distributions from Part XII, line 4 for each year listed	362,353.	683,532.	1,017,646.	607,101.	2,670,632.
d Amounts included in line 2c not used directly for active conduct of exempt activities	0.	0.	0.	0.	
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c	362,353.	683,532.	1,017,646.	607,101.	2,670,632.
Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter				1	
(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	0.	0.	. 0.	0.	0.
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			1		
assets at any time during the Information Regarding Foundation Managers of the foundation who has close of any tax year (but only if they have continuous).	gers: ve contributed more t	han 2% of the total	contributions receive on 507(d)(2).)	ed by the foundation	befare the
b List any managers of the foundation who ow a partnership or other entity) of which the for NONE	n 10% or more of the undation has a 10% c	stock of a corporat or greater interest	tion (or an equally la	ge portion of the ow	nership of
2 Information Regarding Contribution, Graden Check here X If the foundation only makes requests for funds If the foundation makes complete items 2a, b, c, and d.	akes contributions to	preselected charita	ble organizations an	d does not accept ur ons under other cond	isolicited litions,
a The name, address, and telephone number	or e-mail address of	the person to whom	applications should	be addressed.	
b The form in which applications should be su	bmitted and informati	on and materials th	ney should include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards, su	ch as by geographica	al areas, charitable	fields, kinds of institu	tions, or other factor	S

Form 990-PF (2015) AMERIHEALTH CARITAS PARTNERSHIP

27-4735585

Page 10

•	,			
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)	substantial contributor	recipient		
a Paid during the year	SUISIAI IIIAI (WINITOVIO)			
b Approved for future payment	· · · · · · · · · · · · · · · · · · ·	,		а
Total				i b

Part XVI-A	Analysis	of I	ncome-Producing	Activities

ter gross amounts unless otherwise indicated	Unrelate	d business income	Excluded	by section 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income (See instructions.)
a					
b				 	
c d					
	 				
e			}		
g Fees and contracts from government agencies	 				
2 Membership dues and assessments			 		
3 Interest on savings and temporary cash investments	ļ		 		
Dividends and interest from securities	\ 		1		
Net rental income or (loss) from real estate.	J. 1 61 -		1.5	多层的原理: 多国务会区	
a Debt-financed property			1		
b Not debt-financed property	ļ		†		
Net rental income or (loss) from personal property			 		†
7 Other investment income			 	 	
B 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		 	 	 	
Other revenue	my 1 3 3 3 3 3 5		E'ari The	建设、基金等	1、是最高级的工作的"多"
•	4.5 Fe 15. " 3.	Little . At Second to Mande	3,217	2 cm 2 12 22 2 25 4 5 3 5	1-4-14-32-15-1-1-14
	 	 	 		
^	 	 	+	 	
4	 		 	 	
е	1	 	+	 	
Subtotal Add columns (b), (d), and (e)	78 74 25 25 - 35 10	 	5 2 7 5	}	
3 Total. Add line 12, columns (b), (d), and (e)			1 7	· 	.'
Line No. Explain below how each activity for which incaccomplishment of the foundation's exempt	come is repor	ted in column (e) of Par	t X\/J-Δ c	ontributed importantly to	the
			· · · · · · · · · · · · · · · · · · ·		
					
					
				·····	
					
					
					·
	 .				
					
					
					
					
1				· -	

Form 990-PF (2015) AMERIHEALTH CARITAS PARTNERSHIP 27-4735585 | Part XVII | Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

describeration describeration describeration a Transfer (1) Construction (2) Ob Other (1) Society (1) Society (2) Property (3) Rransfer (4) Rransfer (6) Property Construction (5) Long Construction (bed in section 501(c) g to political organizations from the reporting ash	of the Code (other titions? g foundation to a not the code of the	ge in any of the following with a than section 501(c)(3) organization charitable exempt organization organization exempt organ	ations) or in section 5	527,	. 1b(2) X . 1b(3) X . 1b(4) X . 1b(5) X . 1b(6) X . 1c X
the ac	oods, other assets, or	r services given by t	the reporting foundation. If the in column (d) the value of the	oundation received I	ess than fair market value	e iu
(a) Line no	(b) Amount involved		noncharitable exempt organization		or services received	sharing arrangements
(a) Line no	(D) Amount myorved	(C) Name of	non-onember exempt organization	(a) Description	i oi nanoiero, nanoactiono, and	analing an angentents
				+		
	1		* - * - * - * - * - * *			
						
	<u> </u>					
	<u> </u>					
						
						
						
	J					
desc	e foundation directly or cribed in section 501 (ones,' complete the follo	c) of the Code (othe	d with, or related to, one or mor r than section 501(c)(3)) or in s	e tax-exempt organizection 527?	zations	· · Yes XNo
(a) Name of organization			(b) Type of organization		(c) Description of rel	ationship
Sign Here	nder penalties of perjury, I de prrect, and complete Declara	eclare that I have examine attion of preparer (other that	d this return, including accompanying sot in taxpayer) is based on all information of	nedules and statements, and which preparer has any known	d to the best of my knowledge and owledge	May the IRS discuss this return with the
- 1 .	Signature of officer or trusts		Date	· · · · ·	HUMAN	preparer shown below (see instructions)?
	Print/Type preparer		Preparer's signature	Title	· · · · · · · · · · · · · · · · · · ·	X Yes No
	{ " ' ' '		}	Date	Check X if	l l
Paid		ER REYNOLDS	CHRISTOPHER R	<u>EYNOLDS [09/0</u>		IP00968214
Prepare			ADOLPH & CO INC	A & CO INC Firm's EIN		2536204
Use On	ly Firm's address	158 SAXER				
		SPRINGFIE	_D	PA 19064	Phone no (61	0) 543-1199
BAA					_	Form 990-PF (2015)

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

Schedule of Contributors

2015

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Haine of the organization	•	Limpley of Technication Training				
AMERIHEALTH CARITAS PARTNERSH	IP	27-4735585				
Organization type (check one)						
Filers of:	Section:					
Form 990 or 990-EZ	501(c)() (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a priv	rate foundation				
	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					
Check if your organization is covered by the Gen	eral Rule or a Special Rule.					
Note. Only a section 501(c)(7), (8), or (10) organi	ızatıon can check boxes for both the General Rule and a Special	Rule See instructions				
General Rule						
X For an organization filing Form 990, 990-EZ	or 990-PF that received, during the year, contributions totaling \$ Parts I and II See instructions for determining a contributor's to	5,000 or more (in money or				
property) from any one contributor. Complete	e Pails I and It. See instructions for determining a contributor's to	tal contributions.				
Consist Outes						
Special Rules	(a)(3) films Farm 000 as 000 F7 that mark the 00 t (00)	at the second				
under sections 509(a)(1) and 170(b)(1)(A)(vi)	(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support te), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13	l. 16a. or 16b. and that				
received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II.						
7 31,11 633, 7 41, 7 11, 111 6 11, 61 (1) 7 5 111 633	EL, mo i compote i atte i and ii.					
For an organization described in section 501	(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a	ny one contributor,				
during the year, total contributions of more the purposes, or for the prevention of cruelty to c	during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III					
Parkers, 1 , 1 , 1 , 1 , 1 , 1						
For an organization described in section 501	(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a	ny one contributor				
during the year, contributions exclusively for	religious, charitable, etc., purposes, but no such contributions to	taled more than				
\$1,000 If this box is checked, enter here the	total contributions that were received during the year for an exc ny of the parts unless the General Rule applies to this organization	lusively religious,				
	e, etc., contributions totaling \$5,000 or more during the year					
	g or , and g or , and a real g					
Caution. An organization that is not covered by	the General Rule and/or the Special Rules does not file Schedul	e B (Form 990, 990-EZ, or				
990-PF), but it must answer. No' on Part IV, line	2, of its Form 990, or check the box on line H of its Form 990-E, illing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	7 or on its Form 990-PF				
- a.t., a.t. a control to the track and the						

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

	3 (Form 990, 990-EZ, or 990-PF) (2015)	Page	1 of 1 of Part I
ame of orga	nization EALTH CARITAS PARTNERSHIP	27-47	35585
	Contributors (see instructions) Use duplicate copies of Part I if additional space	is needed	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	AMERIHEALTH CARITAS SERVICES LLC 200 STEVENS DRIVE PHILADELPHIA PA 19113	\$175,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	SELECT HEALTH PO BOX 40849 CHARLESTON SC 29423	\$ 60,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	PASSPORT HEALTH PLAN 5100 COMMERCE CROSSINGS DRIVE LOUISVILLE KY 40229	\$25 <u>.</u> 00 <u>0</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$	Person Payroll Poncash Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash Complete Part II for noncash contributions)
(a) Numbe	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		- - - \$	Person Payroll Noncash
BAA	TEEA0702 10/12/15	-	(Complete Part II for noncash contributions)

• Form 990-PF, Page 1, Part I, Line 23 Line 23 Stmt

Other expenses:	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
CONSULTANTS	120,250.			
DUES/SUBSCRIPTIONS	3,738.			
MISCELLANEOUS	5,512.			
PROGRAM ACTIVITIES	196,458.			
BANK FEES/POSTAGE	1,282.			
LICENSES	4,045.			
RENTAL	6,616.			

Total 337, 901.