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# Form **99.0-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 separate instructions is at www.irs.gov/form990pf.

	For	calle	ndar year 2016 or tax year beginning		, and ending							
	Nai	пе о	f foundation						A Employe	ridentification	number	
	_s	US	QUEHANNA FOUNDATI	ON					23-2	2732477	! 	
		Number and street (or P O box number if mail is not delivered to street address)  Room/suite							B Telephon			
			CITY AVENUE				22	20	610-	-617-26	35	
			own, state or province, country, and ZI		ostal code			C If exemptio	n application is p	ending, check here		
			A CYNWYD, PA 190			1			- -			
	Gil	nec	k all that apply: Initial retur					D 1 Foreign organizations, check here				
	Final return Address change					Amended return				organizations me	eeting the 85% test	
	<u> </u>	hool			Name change rempt private foundation			1		·	<b>&gt;</b>	
	Ϊ-	_	ection 4947(a)(1) nonexempt charitable			Other taxable private foundation					itus was terminate )(A), check here	€d
	ـــــــــ I Fa		arket value of all assets at end of year	J Account			Accrual		1			
			Part II, col (c), line 16)	1 —	ther (spe		7,007,007		II.		60-month termina (B), check here	ation
		\$	133,787,792.	(Part I, colu	ımn (d)	must be on cash	basis )		4	, 007 (1)( 1)	(2), 01100111110	
	Pa	ırt l	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), an	d (d) may not	(a) Revenue and expenses per books (b) Net investment income			usted net	(d) Disbursements for charitable purposes			
		1	necessarily equal the amounts in column (a Contributions, gifts, grants, etc., recei		<u> </u>	,005,200.					(cash basis	only)
0 8 2011		2	Check If the foundation is not required t		134	,005,200.	<del></del>		<del> </del>		<del> </del>	
	-	3	Interest on savings and temporary cash investments	o dilacii ocii b		5,031.	5	031.		5 031.	STATEME	<u>ง</u> ทา 1
මෙ		4	Dividends and interest from securities	<b>;</b>		248,055.	139.	308.		18.055	STATEME	NT 2
		5a	Gross rents						<u> </u>	<u> </u>		·
AUG		b	Net rental income or (loss)									
<b>4</b>	a)	6a	Net gain or (loss) from sale of assets not on l	ine 10								
	nua	b	Gross sales price for all assets on line 6a									<b></b> _
Z	Revenue	7	Capital gain net income (from Part IV, line 2)			····		0.		REC	EINED	ل
8	_	8	Net short-term capital gain						ļ	8 110	0 2 00/2	8
SCANNED		40-	Income modifications Gross sales less returns		<del> </del> -				ļ	a AUG	U	<u>- M</u>
00		IUB	and allowances  Less Cost of goods sold		<u> </u>				·		DEN. UT	E .
			Gross profit or (loss)							UGI	DEIN, OI	
		11 Other income			_	-943,146.		0.	-94	3,146.	STATEMEN	NT 3
		12	Total Add lines 1 through 11		131	,315,140.	144,	339.	-69	0,060.		
		13	Compensation of officers, directors, trustees	, etc	<u></u>	0.		0.		0.		0.
		14	Other employee salaries and wages		ļ	4,043.	<del></del>	0.	ļ	0.		0.
	es		Pension plans, employee benefits	. e 4	ļ	836.		0.	ļ	0.	ļ	0.
	nse			MT 4		2.	<del></del>	0.	ļ	0.	ļ	0.
	xpe		Accounting fees Other professional fees		}		<del></del>				<del></del>	
	e E	17	Interest									<del></del>
	aţį			MT 5		593.		0.		0.		0.
	istr		Depreciation and depletion									
	Ē	20	Occupancy			689.		0.		0.		0.
	¥.	21	Travel, conferences, and meetings			22.		0.		0.		0.
	and	22	Printing and publications			95.		0.		0.		0.
	Operating and Administrative Expense	23	-	мт б		83.	·	0.		0.		0.
	rat	24	Total operating and administrative					_			-	•
	ď		expenses Add lines 13 through 23		1	6,363. 176,500.		0.	ļ	0.	1 176	0.
			Contributions, gifts, grants paid  Total expenses and disbursements		<b></b>	,176,500.		~			1,176	,500.
		20	Add lines 24 and 25		1	182,863.		0.		0.	1,176	.500.
•	-	27	Subtract line 26 from line 12:					•			-,-,0	
			Excess of revenue over expenses and disbur	sements	130	132,277.					L	
		b	Net investment income (if negative, enter	er -0-)			144,	339.				
		C	Adjusted net income (if negative, enter -	0-)	]	}			1	0.		

1

623501 11-23-18 LHA For Paperwork Reduction Act Notice, see instructions

Form 990-PF (2016) SUSQUEHANNA FOUNDATION 23-27								
ГР	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		End of year			
<u> </u>	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value			
	Ť	Cash - non-interest-bearing	14,462.	50,002,122.	50,002,122.			
	2	Savings and temporary cash investments						
	3	Accounts receivable ►						
	ĺ	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						
	ľ	disqualified persons						
	,	Other notes and loans receivable 2,305,000.						
	′	Less; allowance for doubtful accounts   0.	3,305,000.	2,305,000.	1,068,722.			
			3,303,000.	2,303,000.	1,000,722.			
ets	1 -	Inventories for sale or use	<del></del>		··			
Assets		Prepaid expenses and deferred charges						
•	!	Investments - U.S. and state government obligations						
	1	Investments - corporate stock		22 251 221				
	C	Investments - corporate bonds STMT 7	1,231,270.	82,054,224.	82,054,224.			
	11	Investments land buildings, and equipment basis						
	1	Less accumulated depreciation			······			
	12	Investments - mortgage loans						
	13	Investments - other STMT 8	4,675.	6,190.	6,190.			
	14	Land, buildings, and equipment: basis ▶						
	İ	Less accumulated depreciation						
	15	Other assets (describe ► STATEMENT 9 )	329,964.	656,534.	656,534.			
	16	Total assets (to be completed by all filers - see the						
	ļ	instructions. Also, see page 1, item 1)	4,885,371.	135,024,070.	133,787,792.			
	17	Accounts payable and accrued expenses						
	1	Grants payable						
S	1	Deferred revenue						
Liabilities		Loans from officers, directors, trustees, and other disqualified persons						
ā	I	Mortgages and other notes payable						
۳		Other liabilities (describe ► I/CO PAYABLE - DOR)	4,661.	11,083.				
	22	office madritices (decorride > 17 CO 11111111111 DOIL)	4,001.	11,000.				
	22	Total liabilities (add lines 17 through 22)	4,661.	11,083.				
	23	Foundations that follow SFAS 117, check here	4,001.	11,000.				
	1	ι						
S	0.4	and complete lines 24 through 26 and lines 30 and 31. Unrestricted	ļ					
Fund Balances	24	· · · · · · · · · · · · · · · · · · ·						
ala		Temporarily restricted						
d B	26	Permanently restricted  Foundations that do not follow SFAS 117, check here	<del></del>	<u></u>				
ڃ	1	·	,					
7	ļ	and complete lines 27 through 31.						
ţ	1	Capital stock, trust principal, or current funds	0.	0.				
Assets or	I	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.				
_ <del>``</del>	I	Retained earnings, accumulated income, endowment, or other funds	4,880,710.	135,012,987.				
Net	30	Total net assets or fund balances	4,880,710.	135,012,987.				
	ļ							
	31	Total liabilities and net assets/fund balances	4,885,371.	135,024,070.	<del></del>			
P	art	Analysis of Changes in Net Assets or Fund Bala	ances					
_		<del></del>		<del></del>	<del></del>			
1		net assets or fund balances at beginning of year - Part II, column (a), line 30			4 000 540			
		t agree with end-of-year figure reported on prior year's return)		1	4,880,710.			
		amount from Part I, line 27a		2	130,132,277.			
		increases not included in line 2 (itemize)	<del>_</del>	3	0.			
		ines 1, 2, and 3		4	135,012,987.			
		eases not included in line 2 (itemize)		5	0.			
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, colur	nn (b), line 30	6 (	135,012,987.			
					Form <b>990-PF</b> (2016)			

Part IV   Capital Gains a	nd Losses for Tax on In	vestment	Income				
	oe the kınd(s) of property sold (e.g. ehouse; or common stock, 200 shs			(b) How acquired P - Purchase D - Donation		acquired lay, yr.)	(d) Date sold (mo., day, yr.)
1a				D Donation			
b NON	E						
С							
d							
<u>e</u>				<u> </u>			
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale			ain or (loss) s (f) minus (	
<u>a</u>					·		
b							
C							
<u>d</u>		<del></del>					
Complete only for possite showing	gara in column (b) and award by	ha faundation	10/04/00				
Complete only for assets showing	gain in column (h) and owned by t			(!)	Gains (C	ol. (h) gain i	minus
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (ı) col. (ı), ıf any	Coi.	col. (k), but not less than -0-) or Losses (from col. (h))		
<u>a</u>							
<u>b</u>		· <del></del> -	<del></del>				
C							
d							
<u>e</u>							
2 Capital gain net income or (net capi	If gain, also enter $\left\{\begin{array}{l} \text{If gain, also enter} \\ \text{If (loss), enter -0-} \end{array}\right.$	in Part I, line I in Part I, line	7 7	} 2			
3 Net short-term capital gain or (loss)	) as defined in séctions 1222(5) an	d (6):					
If gain, also enter in Part I, line 8, co		, ,		<b>)</b>			
If (loss), enter -0- in Part I, line 8	4040/			] 3	<del></del>		
<u> </u>	der Section 4940(e) for				ome		
(For optional use by domestic private f	oundations subject to the section 4	940(a) tax on	net investment ir	ncome.)			
If section 4940(d)(2) applies, leave this	s part blank.						
Was the foundation liable for the section			•	riod?			Yes X No
If "Yes," the foundation does not qualify				entrico	<del></del>		<del></del>
1 Enter the appropriate amount in ea	<del></del>	Structions ber	ore making any e	<del></del>			741
Base periód years	(b) Adjusted qualifying dist	ributions	Net value of no	(c) oncharitable-use assets		Distrib	(d) ution ratio
Calendar year (or tax year beginning	<del>' '''/</del>		THE VALUE OF THE		<del></del>	(coi. (b) aivi	ded by col. (c))
2015		$\frac{1,500}{500}$		1,315,683		<del></del> .	.191155
2014		2,500. 7,000.	<del></del>	175,727 165,739			1.038543
<u>2013</u> 2012		2,686.					2.274661
2012		7,801.		188,209 281,904			3.042819 $4.000656$
2011	1,12	1,001.	<del></del>	201,304	<del>*}</del>		4.000050
2 Total of line 1, column (d)					2		10.547834
3 Average distribution ratio for the 5-	vear hase period - divide the total o	n line 2 hv 5	or by the number	of years			10.34/034
the foundation has been in existence	-	ii mio E by O,	or by the number	oi years	3		2.109567
the loandation has been in existence	o i 1005 than o yours				-		2.103307
4 Enter the net value of noncharitable	-use assets for 2016 from Part X, I	ine 5			4		7,002,924.
5 Multiply line 4 by line 3	•				5	1	4,773,137.
6 Enter 1% of net investment income	(1% of Part I, line 27b)				6		1,443.
7 Add lines 5 and 6					7	1.	4,774,580.
	Dart YII lina 1						
8 Enter qualifying distributions from fiffine 8 is equal to or greater than li		1b. and compl	lete that nart usin	in a 1% tay rate	8	L	1,176,500.
See the Part VI instructions.		,	that part asm	19 a 170 tan 14to.			

	m 990-PF (2016) SUSQUEHANNA FOUNDATION 23-27 art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - s	732477 ee instru		Page 4 ns)
1a	a Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1%		2,8	<u>87.</u>
	of Part I, line 27b			
C	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-)			0.
3	Add lines 1 and 2		<u>2,8</u>	<u>87.</u>
4	——————————————————————————————————————			0.
	, i i i i i i i i i i i i i i i i i i i		<u>2,8</u>	87.
	Credits/Payments:			
	a 2016 estimated tax payments and 2015 overpayment credited to 2016			
	b Exempt foreign organizations - tax withheld at source			
	c Tax paid with application for extension of time to file (Form 8868)  6c 10,000.			
	d Backup withholding erroneously withheld		^ ^	0.0
	Total credits and payments Add lines 6a through 6d	<u>+</u>	<u>u, u</u>	00.
				7.
9			7 1	06
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid STATEMENT 11 > 10    Enter the amount of line 10 to be: Credited to 2017 estimated tax > 5, 266. Refunded > 11		/,1	06. 0.
	art VII-A Statements Regarding Activities			
	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
	any political campaign?	1a		X
b	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	16		X
	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			
C	Did the foundation file Form 1120-POL for this year?	1c		Х
ď	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 .	-		
е	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?	2		X
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or	1		
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		_X_
	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		<u>X</u>
	b If "Yes," has it filed a tax return on Form 990-T for this year?			
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			
6		1		
	By language in the governing instrument, or      By state language in the governing instrument as the second state of the			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law  seems in the governor instrument?		v	
7	remain in the governing instrument?  Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X	
	The foundation have at least \$5,000 in assets at any time during the year in test, Complete Part II, Cor (c), and Part XV			
8a	a Enter the states to which the foundation reports or with which it is registered (see instructions)			
Vu	PA	-		
b	o 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	8b	Х	
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			<del></del>
	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV	9	,	X
10	·	0 10	X	
		Form <b>990</b>		(2016)

Form 990-PF (2016)

Х

3b

4a

N/A

Form 4720, to determine if the foundation had excess business holdings in 2016)

had not been removed from jeopardy before the first day of the tax year beginning in 2016?

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

of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C.

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

orm 990-PF (2016) SUSQUEHANNA FOUNDATION			<u>23-27324</u>	77 Page <b>6</b>
Part VII-B   Statements Regarding Activities for Which	Form 4720 May Be	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y	es X No	
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indir	ectly,	Ì	ì
any voter registration drive?		Y <sub>1</sub>	es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y	es X No	į į
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section			
4945(d)(4)(A)? (see instructions)		Y	es X No	1 )
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or	for	[	{ }
the prevention of cruelty to children or animals?		Y	es X No	1 1
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described	in Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?	· ·	N/A	5b
Organizations relying on a current notice regarding disaster assistance check h	ere			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		uned		
expenditure responsibility for the grant?		. —	es 🔲 No	
If "Yes," attach the statement required by Regulations section 53 494				1
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	` *		ł	
a personal benefit contract?		Y	es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		Į.	6b X
If "Yes" to 6b, file Form 8870				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	☐ Ye	es X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu	itable to the transaction?	,	<u> </u>	7b
Part VIII Information About Officers, Directors, Trust		nagers, Highl		
Paid Employees, and Contractors				
List all officers, directors, trustees, foundation managers and their				
f Mana and addings	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	allowances
SEE STATEMENT 12		0.	0.	0.
			{	
	-			
		1		
			<u>[]</u>	
Compensation of five highest-paid employees (other than those inc	<del> </del>	enter "NONE."	(4)	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense account, other
	devoted to position	(c) compensation	and deferred compensation	allowances
NONE				
	· · · · · · · · · · · · · · · · · · ·	<u> </u>		
				<del></del>
		<u> </u>		<del></del>
otal number of other employees paid over \$50,000			<b></b>	0
			Form	<b>990-PF</b> (2016)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	, see instructions )
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		· · · · · · · · · · · · · · · · · · ·
а	Average monthly fair market value of securities	1a	5,017,902.
b	Average of monthly cash balances	1b	2,091,666.
C	Fair market value of all other assets	1c	
	Total (add lines 1a, b, and c)	1d	7,109,568.
	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	7,109,568.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	106,644.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	7,002,924.
6_	Minimum investment return Enter 5% of line 5	6	350,146.
P	<b>art XI</b> Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here  and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	350,146.
2a	Tax on investment income for 2016 from Part VI, line 5	,	
b	Income tax for 2016. (This does not include the tax from Part VI.)	]	
C	Add lines 2a and 2b	2c	2,887.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	347,259.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	347,259.
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	347,259.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	1,176,500.
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:	1	
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	1,176,500.
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	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	1,176,500.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years	qualifies f	or the section

Part XIII Undistributed Income (see instructions)

,	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI,		<del></del>		
line 7				347,259.
2 Undistributed income, if any, as of the end of 2016		<del></del>		<u> </u>
a Enter amount for 2015 only			0.	
b Total for prior years:		<del></del>		
		0.		
3 Excess distributions carryover, if any, to 2016:		<del>_</del>	<del> </del>	
a From 2011 1,113,721.				-
b From 2012 563, 292.				
c From 2013 368,728.				
d From 2014 173,728.				
e From 2015 185,960.				
f Total of lines 3a through e	2,405,429.			
4 Qualifying distributions for 2016 from	2/200/225			
Part XII, line 4: ►\$ 1,176,500.		1		
a Applied to 2015, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior		<del></del>	•	<u> </u>
years (Election required - see instructions)		o .l		
c Treated as distributions out of corpus		<u></u>		<del></del>
(Election required - see instructions)	0.			
d Applied to 2016 distributable amount			<del></del>	347,259.
e Remaining amount distributed out of corpus	829,241.			01/72050
5 Excess distributions carryover applied to 2016	0.		<del></del>	0.
(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 indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	3,234,670.			
b Prior years' undistributed income. Subtract	3,23,70,0.		· · · · · · · · · · · · · · · · · · ·	
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 2015. Subtract line			<del></del>	
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2016. Subtract	<del></del>			<del></del>
lines 4d and 5 from line 1. This amount must				
be distributed in 2017				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	}			
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2011				<del></del>
not applied on line 5 or line 7	1,113,721.			
9 Excess distributions carryover to 2017.				
Subtract lines 7 and 8 from line 6a	2,120,949.			
10 Analysis of line 9:				
a Excess from 2012 563, 292.				
b Excess from 2013 368,728.				
c Excess from 2014 173,728.				
d Excess from 2015 185, 960.				
e Excess from 2016 829, 241.				
للنظ المشارع المستنب المساور	<del></del>	<del></del>	<del></del>	

623581 11-23-16

	ANNA FOUNDA			23-2	732477 Page 10
Part XIV   Private Operating F	oundations (see in	structions and Part V	II A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter that	t it is a private operating			
foundation, and the ruling is effective fo	r 2016, enter the date of	the ruling	<b>▶</b>		
b Check box to indicate whether the found	lation is a private operatii	ng foundation described	in section	4942(j)(3) or	4942(1)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2016	<b>(b)</b> 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for					
each year listed					
<b>b</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	<u></u>				
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,				1	
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 XV Supplementary Info	rmation (Comple	te this part only	if the foundation	n had \$5,000 or n	nore in assets
at any time during t	he year-see inst	ructions.)			
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh		than 2% of the total con	tributions received by th	ne foundation before the c	lose of any tax
year (but only if they have contributed n			•		
SEE STATEMENT 13					
b List any managers of the foundation wh	o own 10% or more of th	e stock of a corporation	(or an equally large por	tion of the ownership of a	partnership or
other entity) of which the foundation has					
NONE					
2 Information Regarding Contributi	on, Grant, Gift, Loan,	Scholarship, etc., P	rograms:		
Check here X if the foundation o				not accept unsolicited re	quests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	ber or e-mail address of t	he person to whom app	lications should be addi	essed:	
<u>a</u> 1110 hams, addition, and toop notice		<b>,</b>			
<b>b</b> The form in which applications should b	e submitted and informa	tion and materials they s	should include.		
Any cubmiccion deadlines:					
c Any submission deadlines:					
d Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable fields	s, kinds of institutions, o	r other factors:	

2 County and County better a Brid British W	<u> </u>			<del></del>
3 Grants and Contributions Paid During the Y		Payment	T	
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		<del> </del>
a Paid during the year				
ASHOKA	NONE	PUBLIC CHARITY	GENERAL FUND	
1700 NORTH MOORE STREET, SUITE 2000				
ARLINGTON, VA 22209-1929		ļ		12,000.
ACCOCTAMION OF ALIBOUT OF CRAMPAL UTOU	NONE	DUDI TO GUADITA		
ASSOCIATION OF ALUMNI OF CENTRAL HIGH SCHOOL	NONE	PUBLIC CHARITY	GENERAL FUND	
1700 WEST OLNEY AVENUE				
PHILADELPHIA, PA 19141				40,000.
				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
DOMINIC V. DICICCO	NONE	PUBLIC CHARITY	GENERAL FUND	
703 NORTH JEROME AVENUE				
MARGATE CITY, NJ 8402				10,000.
NATIONAL BRAIN TUMOR SOCIETY	NONE	PUBLIC CHARITY	GENERAL FUND	
55 CHAPEL STREET, SUITE 200			ļ	
NEWTON, MA 2458				10,000,
PHILADELPHIA MUSEAUM OF ART	NONE	PUBLIC CHARITY	GENERAL FUND	
2600 BENJAMIN FRANKLIN PKWY PHILADELPHIA PA 19130				30,000.
	TINUATION SHEE	T(S)	<b>▶</b> 3a	1,176,500.
b Approved for future payment				
NONE				
				,
Total			<b>▶</b> 3b	0.
	<del></del>			Form <b>990-PF</b> (2016)

Part XVI-A	Analysis of Income-Proc	fucing Activities						
Part XVI-A Analysis of Income-Producing Activities								
		Unrelated business income	Fueluded by section 540, 540, or 544					

Enter gross amounts unless otherwise indicated.	Unrelated	business income		by section 512, 513, or 514	(e)		
1 Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income		
	Code		code				
<u> </u>					<u> </u>		
b							
C							
d							
e							
f							
g Fees and contracts from government agencies			ļļ				
2 Membership dues and assessments					<u> </u>		
3 Interest on savings and temporary cash							
investments		<del></del>	14	5,031. 248,055.			
4 Dividends and interest from securities			14	248,055.			
5 Net rental income or (loss) from real estate:							
a Debt-financed property							
b Not debt-financed property							
6 Net rental income or (loss) from personal							
property							
7 Other investment income	<del></del>		01	-943,146.			
8 Gain or (loss) from sales of assets other			<u> </u>	743,140.			
than inventory							
9 Net income or (loss) from special events							
10 Gross profit or (loss) from sales of inventory	<del> </del>		+		_,		
	<del></del>						
11 Other revenue;							
a	1 1	······································					
b			+				
C							
d							
e	<b></b>	. <b></b>					
12 Subtotal. Add columns (b), (d), and (e)	<u> </u>	0	•	-690,060.			
13 Total. Add line 12, columns (b), (d), and (e)				13	-690,060.		
(See worksheet in line 13 instructions to verify calculations)			<del></del>				
				urposes			
Part XVI-B Relationship of Activities	to the Accor	nplishment of E	xempt P				
Part XVI-B Relationship of Activities			<del>-</del>				
Line No.   Explain below how each activity for which inco	ome is reported in	column (e) of Part XVI-	<del>-</del>		olishment of		
· · · · · · · · · · · · · · · · · · ·	ome is reported in	column (e) of Part XVI-	<del>-</del>		dishment of		
Line No. Explain below how each activity for which inco	ome is reported in	column (e) of Part XVI-	<del>-</del>		olishment of		
Line No. Explain below how each activity for which inco	ome is reported in	column (e) of Part XVI-	<del>-</del>		olishment of		
Line No. Explain below how each activity for which inco	ome is reported in	column (e) of Part XVI-	<del>-</del>		olishment of		
Line No. Explain below how each activity for which inco	ome is reported in	column (e) of Part XVI-	<del>-</del>		plishment of		
Line No. Explain below how each activity for which inco	ome is reported in	column (e) of Part XVI-	<del>-</del>		olishment of		
Line No. Explain below how each activity for which inco	ome is reported in	column (e) of Part XVI-	<del>-</del>		plishment of		
Line No. Explain below how each activity for which inco	ome is reported in	column (e) of Part XVI-	<del>-</del>		plishment of		
Line No. Explain below how each activity for which inco	ome is reported in	column (e) of Part XVI-	<del>-</del>		Dishment of		
Line No. Explain below how each activity for which inco	ome is reported in	column (e) of Part XVI-	<del>-</del>		plishment of		
Line No. Explain below how each activity for which inco	ome is reported in	column (e) of Part XVI-	<del>-</del>		plishment of		
Line No. Explain below how each activity for which inco	ome is reported in	column (e) of Part XVI-	<del>-</del>		plishment of		
Line No. Explain below how each activity for which inco	ome is reported in	column (e) of Part XVI-	<del>-</del>		plishment of		
Line No. Explain below how each activity for which inco	ome is reported in	column (e) of Part XVI-	<del>-</del>		plishment of		
Line No. Explain below how each activity for which inco	ome is reported in	column (e) of Part XVI-	<del>-</del>		plishment of		
Line No. Explain below how each activity for which inco	ome is reported in	column (e) of Part XVI-	<del>-</del>		plishment of		
Line No. Explain below how each activity for which inco	ome is reported in	column (e) of Part XVI-	<del>-</del>		plishment of		
Line No. Explain below how each activity for which inco	ome is reported in	column (e) of Part XVI-	<del>-</del>		plishment of		
Line No. Explain below how each activity for which inco	ome is reported in	column (e) of Part XVI-	<del>-</del>		plishment of		
Line No. Explain below how each activity for which inco	ome is reported in	column (e) of Part XVI-	<del>-</del>		plishment of		

Part	XVII	Information Re Exempt Organ		sfers To a	and Transactions a	and Relations	hips With Nonchar	ritabl	е	
1 Dic	the org	anization directly or indir	rectly engage in any	of the following	ng with any other organization	on described in secti	on 501(c) of	T	Yes	No
					27, relating to political organ			1		
		from the reporting founda						1	}	
(1)	Cash							1a(1)		Х
(2)	Other	assets						1a(2)		X
<b>b</b> Oti	ner trans	sactions:								
(1)	Sales	of assets to a noncharital	ble exempt organizat	tion				1b(1)		Х
(2)	Purch	ases of assets from a nor	ncharitable exempt o	organization				1b(2)		X
(3)	Renta	l of facilities, equipment, (	or other assets					1b(3)		X
(4)	Reimt	oursement arrangements						1b(4)		X
(5)	Loans	or loan guarantees						1b(5)		X
(6)	Perfo	mance of services or me	mbership or fundrais	sing solicitatio	ons			1b(6)		X
	-	facilities, equipment, mai	-					1c		X
					edule. Column ( <b>b)</b> should al				sets,	
					ed less than fair market valu	ue in any transaction	or sharing arrangement, s	how in		
	<u>-</u> -	the value of the goods, o	<del>,</del>							
a) Line r	10	(b) Amount involved	(c) Name of		e exempt organization	(d) Description	of transfers, transactions, and s	haring a	rangeme	nts
			ļ	<u> N/A</u>		<del></del>	<del></del>			
						<del></del>				
			ļ.—			<del></del>	<del></del>			
							·			
	-}		<del> </del>							
	+		<del> </del>							
	+		<del> </del>		<del></del>	<del> </del>				
					<del></del>					
	1					<del></del>				
	+-	<del></del>				<del></del>				
					<del></del>	<del> </del>				
2a  s	he foun	dation directly or indirect	lly affiliated with, or r	elated to, one	or more tax-exempt organi	zations described				
		501(c) of the Code (other			· · · · · · · · · · · · · · · · · · ·	24(17)(0 4000),004		] Yes	X	No
		mplete the following sche		, (-//			_			
		(a) Name of orga			(b) Type of organization		c) Description of relationsh	пр		
		N/A					<del></del>			
						<u> </u>				
					ng accompanying schedules and n taxpayer) is based on all inform		May	the IRS	discuss	this
Sign			/ 1	oparo (othor tha			sho	rn with th wn below	ie prepar (se <u>e ins</u>	er <u>tr</u> )?
Here			ozli'		1/28/17	ASSIST	ANT TREAS	Yes	:	No
	Sign	ature of officer or trustee	<del></del>	T	Date *	Title				
	ĺ	Print/Type preparer's na	ıme	Preparer's s	ignature	Date	Check if PTIN			
Paid							self- employed			
Prep	arer			<u> </u>		1			·	
Use (		Firm's name					Firm's EIN			
-J-J-G '	~ <b>y</b>	Firm's address >								
	1						i .			

Phone no.

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to Recipient Foundation Purpose of grant or any foundation manager or substantial contributor Amount status of contribution Name and address (home or business) recipient PROJECT BASED LEARNING INC NONE PUBLIC CHARITY GENERAL FUND 221 SOUTH HANSON STREET PHILADELPHIA, PA 19139 25,000. THE 52ND STREET PROJECT NONE PUBLIC CHARITY GENERAL FUND 789 10TH AVENUE 15,000. NEW YORK, NY 10019 EAGLES CHARITABLE FOUNDATION NONE PUBLIC CHARITY GENERAL FUND 1 NOVACARE WAY 9 500. PHILADELPHIA, PA 19145 FREIRE CHARTER SCHOOL FOUNDATION NONE PUBLIC CHARITY GENERAL FUND 2027 CHESTNUT ST PHILADELPHIA PA 19103 25,000. BOYS' LATIN OF PHILADELPHIA CHARTER NONE PUBLIC CHARITY LOAN FORGIVENESS SCHOOL 5501 CEDAR AVE 1,000,000. PHILADELPHIA, PA 19143 Total from continuation sheets 1 074 500.

## Schedule B

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

Department of the Treasury Internal Revenue Service

#### Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No 1545-0047

2016

Name of the organization Employer identification number SUSQUEHANNA FOUNDATION 23-2732477 Organization type (check one) Filers of: Section: 7 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private 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 General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributors **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 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 For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, 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 For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule 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-EZ or on its Form 990-PF, Part I, line 2, to

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization

Employer identification number

### SUSQUEHANNA FOUNDATION

23-2732477

SUSQU	EHANNA FOUNDATION		3-2732477
Part I	Contributors (See instructions) Use duplicate copies of Part I if	additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ARTHUR DANTCHIK  401 CITY AVE., SUITE 220  BALA CYNWYD, PA 19004	\$154,500.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	JEFF YASS  401 CITY AVE., SUITE 220  BALA CYNWYD, PA 19004	\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	JANINE YASS  401 CITY AVE., SUITE 220  BALA CYNWYD, PA 19004	\$\$.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	JANINE YASS  401 CITY AVE., SUITE 220  BALA CYNWYD, PA 19004	\$ 46,909,449.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	JANINE YASS  401 CITY AVE., SUITE 220  BALA CYNWYD, PA 19004	\$ 33,074,292.	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
623452 10-1	JEFF YASS  401 CITY AVE., SUITE 220  BALA CYNWYD, PA 19004	\$ 1,856,959.  Schedule B (Form	Person Payroll Noncash X (Complete Part II for noncash contributions) 990, 990-EZ, or 990-PF) (2016)

Employer identification number

#### SUSOUEHANNA FOUNDATION

23-2732477

art II	EHANNA FOUNDATION  Noncash Property (See instructions). Use duplicate copies of Part III		-2732477
<del></del>	Noncash Property (See instructions) Use duplicate copies of Part II	ir additional space is needed	
(a) No. rom Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
4	392,482 SHS POWERSHARES QQQ ETF	-	
		\$ 46,909,449.	12/19/16
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
5	276,726 SHS POWERSHARES QQQ ETF	-	
		\$ 33,074,292.	12/19/16
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
6	74,219 SHS THE CHEMOURS COMPANY (CC)	-	
		\$ 1,856,959.	12/20/16
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. rom	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. rom	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		-   \$	

Name of orga	nization		Employer identification number
SUSÒUE Part III	HANNA FOUNDATION  Exclusively religious, charitable, etc., confunction the year from any one contributor. Complete completing Part III, enter the total of exclusively religion. Use duplicate copies of Part III if addition	columns (a) through (e) and the follous, charitable, etc., contributions of \$1,000 c	$\frac{23-2732477}{\text{d in section 501(c)(7), (8), or (10) that total more than $1,000 for owing line entry. For organizations or less for the year (Enter this info once)} > $$
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gi	ft
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gif	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of git	it .
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	Transferee's name, address, a	(e) Transfer of gif	Relationship of transferor to transferee
-			Schedule B (Form 990, 990-EZ, or 990-PF) (20

FORM 990-PF INTERE	ST ON SAVING	GS AND	TEMPOR	ARY (	CASH IN	VESTMENTS	S	PATEMENT .	1
SOURCE			(A) EVENUE R BOOK		NET IN	(B) VESTMENT COME	1	(C) ADJUSTED NET INCOME	Ξ
INTEREST ON CLEARIN	G BALANCE	<del></del>	5,0	31.		5,031.	1	5,03	31.
TOTAL TO PART I, LI	NE 3		5,0	31.		5,031.		5,03	31.
FORM 990-PF	DIVIDENDS	AND IN	TEREST	FRON	1 SECUR	ITIES	S	PATEMENT	2
BOURCE	GROSS AMOUNT	CAPI GAI DIVID	NS	REV	(A) VENUE BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTE NET INCO	
DIVIDENDS PHILA. AUTHORITY	139,308.		0.	13	39,308.	139,30	8.	139,30	08.
CAX-EXEMPT MUNI	108,747.		0.	10	8,747.		0.	108,74	17.
CO PART I, LINE 4	248,055.		0.	24	18,055.	139,30	8.	248,05	55.
ORM 990-PF		ОТНЕ	R INCO	ME	·		នា	TATEMENT	3
DESCRIPTION			RE	(A) VENUE BOOK		(B) ET INVEST- ENT INCOME		(C) ADJUSTEI NET INCOM	
JNREALIZED MERRILL PROFIT/(LOSS)	ACCT			-943,	146.	0		-943,14	16.
COTAL TO FORM 990-P	F, PART I, I	LINE 11		-943,	146.	0		-943,14	16.

*ORM 990-PF	LEGAL	FEES	STATEMENT 4		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
JICENSES	2.	0.	0.	0.	
ro fm 990-pf, pg 1, Ln 16A	2.	0.	0.	0.	
ORM 990-PF	TAX	ES	ST	'ATEMENT 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
[NCOME TAX PENNSYLVANIA FILING FEE BALES & USE TAX EMPLOYER TAXES FEDERAL PENALTY	223. 15. 41. 304. 10.	0. 0. 0. 0.	0. 0. 0. 0.	0. 0. 0. 0.	
TO FORM 990-PF, PG 1, LN 18	593.	0.	0.	0.	
FORM 990-PF	OTHER E	XPENSES	ST	'ATEMENT 6	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FIFTS  OFFICE EXPENSE  OSTAGE & SHIPPING  UPPLIES  MEALS & ENTERTAINMENT	2. 66. 8. 5. 2.	0. 0. 0. 0.	0. 0. 0. 0.	0. 0. 0. 0.	
	83.	<del></del>	0.		

*ORM 9,90-PF	CORPORATE BONDS		STATEMENT
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
BONDS LONG EQUITY SECURITIES LONG		1,126,962.	1,126,962 80,927,262
COTAL TO FORM 990-PF, PART II, L	INE 10C	82,054,224.	82,054,224
ORM 990-PF O	THER INVESTMENTS		STATEMENT
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
ACCRUED TRADING RECEIVABLES	COST	6,190.	6,190
TOTAL TO FORM 990-PF, PART II, L	INE 13	6,190.	6,190
FORM 990-PF	OTHER ASSETS		STATEMENT
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
CLEARING ACCOUNT DEBIT BALANCE	329,964.	656,534.	656,534
O FORM 990-PF, PART II, LINE 15	329,964.	656,534.	656,534

	UBSTANTIAL CONTRIBUT VII-A, LINE 10	ITORS	STATI	EMENT	10
NAME OF CONTRIBUTOR	ADDRESS				
JANINE YASS	401 CITY AVE., BALA CYNWYD, F				
FORM 990-PF INTER	EST AND PENALTIES		STATI	EMENT	11
OVERPAYMENT FROM FORM 990-PF, SECTION 6652 LATE FILING PEN				7,1 -1,8	
NET OVERPAYMENT				5,2	66.
	IST OF OFFICERS, DI ND FOUNDATION MANAG		STATI	EMENT	12
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB		
ARTHUR DANTCHIK 401 CITY AVE., SUITE 220 BALA CYNWYD, PA 19004	PRESIDENT 0.00	0.	0.		
					0.
401 CITY AVE., SUITE 220	VICE-PRESIDENT 0.00	0.	0.		0.
401 CITY AVE., SUITE 220 BALA CYNWYD, PA 19004  JEFFREY YASS 401 CITY AVE., SUITE 220		0.	0.		
ANDREW FROST 401 CITY AVE., SUITE 220 BALA CYNWYD, PA 19004  JEFFREY YASS 401 CITY AVE., SUITE 220 BALA CYNWYD, CA 19004  ROBERT SACK 401 CITY AVE., SUITE 220 BALA CYNWYD, PA 19004	0.00 VICE-PRESIDENT				0.

SUSQUEHANNA FOUNDATION			23-2732	477
PHILIP POCHE 101 CITY AVE., SUITE 220 3ALA CYNWYD, PA 19004	ASSISTANT TREASURER 0.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF,	PAGE 6, PART VIII	0.	0.	0.
FORM 990-PF	PART XV - LINE 1A ST OF FOUNDATION MANAGERS		STATEMENT	13

NAME OF MANAGER

ARTHUR DANTCHIK ANDREW FROST JEFFREY YASS JOEL GREENBERG