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efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493276005207 OMB No 1545-0047 **Return of Organization Exempt From Income Tax** Form **990**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private

2016

Department of the Treasury

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

▶ Information about Form 990 and its instructions is at www IRS gov/form990

Open to Public

Interna	al Rever	nue Service							Inspection		
A F	or the	2016 c	alendar year, or tax year beg	inning 01-01-2016 , and endin	g 12-31-2	2016					
	eck if ap Idress c	oplicable change	C Name of organization THE LUZERNE FOUNDATION				D Employe 23-2765		ication number		
□ In	ame cha Itial reti	_	Doing business as				23 2703	. 150			
_	nai rn/term nended		Number and street (or P O box if 140 MAIN STREET	Number and street (or P O box if mail is not delivered to street address) Room/suite 140 MAIN STREET							
□ Ap	plicatio	on pending	City or town, state or province, co LUZERNE, PA 18709	ountry, and ZIP or foreign postal code			(570) 7:	14-13/0			
			<u> </u>				G Gross red	eipts \$ 22	2,652,832		
			F Name and address of princi CHARLES M BARBER	pal officer	1	H(a) Is this a		urn for			
			140 MAIN STREET LUZERNE, PA 18709			subordin H(b) Are all s	ubordinate	es	□Yes ☑No □Yes □No		
I Ta	ıx-exem	npt status		◀ (Insert no)	527	included		st (see	instructions)		
J W	ebsit	e: www	w luzfdn org	(maere no) — 4247(a)(1) or —		H(c) Group e			•		
K For	m of or	ganization	✓ Corporation ☐ Trust ☐ As	sociation Other	L	Year of formatio	n 1994	M State	of legal domicile PA		
	irt I			Sociation — Other P							
Pe	1 B		scribe the organization's mission								
ıce	<u>R</u>	RAISES CO	ONTRIBUTIONS FROM THE COM	MUNITY TO SUPPORT CHARITABLE :	AND EDUC	CATIONAL ACT	IVITIES				
nar	-										
Activities & Governance	2	Check thi	s box 🕨 🗌 If the organization	discontinued its operations or dispos	sed of mor	e than 25% of	f its net as	ssets			
J.	3	Number o	of voting members of the govern	ning body (Part VI, line 1a)				3	19		
~ √0			•	of the governing body (Part VI, line	•			4	19		
Ě			• ,	calendar year 2016 (Part V, line 2a)				5	4		
Acti			·	ecessary)			•	6 7a	25		
•	1			om Form 990-T, line 34				7a 7b	0		
	+ -	ivec amen	ated business taxable income in	0111 101111 230 1, IIIIC 34 1 1 1	• •	Prior	Year	7.5	Current Year		
۵.	8	Contribut	ions and grants (Part VIII, line	1h)			17,919,5	92	15,366,533		
Ravenue	9	Program :	service revenue (Part VIII, line			0	C				
λċλ	10	Investme	nt income (Part VIII, column (A		1,611,6	14	766,615				
_	11	Other rev	enue (Part VIII, column (A), lın		-12,8		-71,886				
	12	Total reve	enue—add lines 8 through 11 (r	nust equal Part VIII, column (A), lin	e 12)		19,518,3	96	16,061,262		
	1			, column (A), lines 1–3)			16,242,3	50	15,661,514		
	1	•	paid to or for members (Part IX,				206 5	0	304 196		
Expenses	1		otner compensation, employee inal fundraising fees (Part IX, co	benefits (Part IX, column (A), lines	5-10)		286,5	0			
3	l .		raising expenses (Part IX, column (D)	, ,,	•			4			
핓			penses (Part IX, column (A), line	· - · -			785,9	78	396,328		
		·	, , , , , , , , , , , , , , , , , , , ,	qual Part IX, column (A), line 25)			17,314,8	_	16,362,041		
		•	less expenses Subtract line 18	, , , , , , , , , , , , , , , , , , , ,			2,203,5	14	-300,779		
& α						Beginning of	Current Ye	ear	End of Year		
Net Assets or Fund Balances	20	Total asse	ets (Part X, line 16)				33,639,9	38	35,531,922		
A As			ilities (Part X, line 26)				6,611,5	_	7,742,519		
Ş.Ş.			s or fund balances Subtract line				27,028,4	_	27,789,403		
Pa	rt II	Signa	ature Block								
				mined this return, including accomp te Declaration of preparer (other th							
any k	nowle	dge									
		* * * * * * *	* ure of officer			2017-0 Date)9-29				
Sign		Jagilace	are or officer			Date					
Here	е		ES M BARBER PRESIDENT & CEO r print name and title								
			rint/Type preparer's name	Preparer's signature	Date	Chack		TIN			
Pai	d	⊢	ulius Green CPA	Julius Green CPA		self-en	nployed	00350393			
	pare	· -	irm's name Baker Tilly Virchow	Krause LLP			EIN ► 39-0				
Use	• Onl	ly [⊩]	ırm's address ► 46 Public Square	7012601		Phone	no (570) 8	20-0100			
			WilkesBarre, PA 18								
			this return with the preparer sh duction Act Notice, see the s	<u> </u>		 Cat No 112		✓ Y	'es □ No Form 990 (2016		
. UI P	aperl	***** KC(uucuon met Noute, see tile si	cparate mod utilions.		Latino 112	.OZ I		roim 990 (2016		

Cat No 11282Y

Form **990** (2016)

Form	990 (2016)					Page 2
Par	Statement	of Program Service	e Accomplis	hments		
	Check if Sche	dule O contains a resp	onse or note to a	any line in this Part III		🗸
1		organization's mission				
CORF EXIS SUPP EDUC PRES PHIL	PORATION THAT HAS INTEREST OF MAKE OUR REGORTS SEVEN KEY ARE ARTION AND SCHOLAR ERVATION AND THE ENATHROPY OF VERY S	BEËN RECOGNIZED BY ION A BETTER PLACE 1 EAS THAT TOGETHER SSHIP, ARTS AND CULT ENVIROMENT, AND HEA PECIAL PEOPLE WHO U	THE IRS AS A T. TO LIVE, WORK, A ONSTITUTE A H URE, NEIGHBOR LITH AND WELLI UNDERSTAND TH	AX-EXEMPT PUBLIC CHA Nd PLAY THROUGH THI EALTHY AND SUSTAINAI HOODS AND COMMUNI NESS THE LUZERNE FOI AT QUALITY OF LIFE RE	NIZED AS A PENNSYLVANIA NON-P RITY, BY REASON OF BEING AN O E GENEROSITY OF OUR DONORS, T BLE COMMUNITY INCLUDING SOCI TY DEVELOPMENT, YOUTH ISSUES JNDATION IS PRIVILEGED TO FACT QUIRES "GIVING BACK" SO OTHER OY SAFE NEIGHBORHOODS	RGANIZATION THAT FHE FOUNDATION AL SERVICES, , HISTORIC ILITATE THE
2	the prior Form 990 o			vices during the year wh	ich were not listed on	☐ Yes ☑ No
3	•			changes in how it condu	cts, any program	
		ese changes on Schedu				🗆 Yes 🗹 No
4	Section $501(c)(3)$ an		ons are required	to report the amount of	argest program services, as measured; grants and allocations to others, t	
4a	(Code See Additional Data) (Expenses \$	15,661,514	including grants of \$	15,661,514) (Revenue \$)
4b	(Code) (Expenses \$		including grants of \$) (Revenue \$)
4c	(Code) (Expenses \$		including grants of \$) (Revenue \$)
4d	Other program servi (Expenses \$	ces (Describe in Sched	ule O) luding grants of	\$) (Revenue \$)
4e	Total program serv		15.661.5			

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

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Νo

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Form 990 (2016)

Checklist of Required Schedules

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete

2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 为 . . . Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates

Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

assessments, or similar amounts as defined in Revenue Procedure 98-19?

Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 🛸 . . .

Did the organization maintain collections of works of art, historical treasures, or other similar assets?

Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🛸 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX,

or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 🕏

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🕏 12a Did the organization obtain separate, independent audited financial statements for the tax year?

b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional ঙ 뉰

business, investment, and program service activities outside the United States, or aggregate foreign investments

14a Did the organization maintain an office, employees, or agents outside of the United States? **b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸

29

No

Page 4

Part IV Checklist of Required Schedules (continued)

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,

Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's

current and former officers, directors, trustees, key employees, and highest compensated employees If "Yes,"

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 🔧

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . . 🥞

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N. Part I .

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🛸

column (A), line 2? If "Yes," complete Schedule I, Parts I and III

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . .

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

20a 20b 21

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24a

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Yes

Yes

Yes

Form 990 (2016)

Yes

Yes

Yes

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Nο

Nο

No

Nο

Nο

Nο

No

Nο

Nο

Nο

Νo

Nο

orm	990 (2016)			Page 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			\Box
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 7			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by			
L	this return	2b	Yes	
U	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		103	
3a	Did the organization have unrelated business gross income of $$1,000$ or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country \(\bullet_\) See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	- 55		
·	21 You, to line ou or ob, and the organization me form occor in the first in the fi	5 c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during			
	the year?	8		No
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		No
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		No
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for			
b	additional information the organization must report on Schedule 0 Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13a		
_	The organization is necessary to inside qualified reality plans.			
	Enter the amount of reserves on hand	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a 14b		140
D	it res, has it filed a Form 720 to report these payments/IF INO, provide an explanation in Schedule O		orm 00	<u></u>

Form	990 (2016)			Page 6
Par	Governance, Management, and DisclosureFor each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	·	nse to li	
Se	Check If Schedule O contains a response or note to any line in this Part VI	• •		✓
1 a	Enter the number of voting members of the governing body at the end of the tax year 19		Yes	No
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O	1		
b	Enter the number of voting members included in line 1a, above, who are independent 1b 19			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8 b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	∍.)	
		\square	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt			
	status with respect to such arrangements?	16b		
	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed ► PA			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
	☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records ▶CHARLES M BARBER 140 MAIN STREET 2ND FLOOR LUZERNE, PA 18709 (570) 714-1570			

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amount of other

compensation

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

Part VII and Independent Contractors Check if Schedule O contains a response or note to any line in this Part VII .

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax

year List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount

of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid

• List all of the organization's current key employees, if any See instructions for definition of "key employee" • List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee)

who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

• List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000

of reportable compensation from the organization and any related organizations

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the

organization, more than \$10,000 of reportable compensation from the organization and any related organizations List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest

hours per

compensated employees, and former such persons L Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee (A) (B) (C) (D) (F) (E) Name and Title Position (do not check more Reportable Reportable Estimated Average

than one box, unless person

compensation

	week (list any hours	is both an officer and a director/trustee)				from the organization (W-2/1099-MISC)	from related organizations (W- 2/1099-	compensation from the organization and			
	for related organizations below dotted line)	Individual trustee or director	Institutional Trust⊬ë	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	related organizations	
See Additional Data Table											

Form 990 (2016)										Page 8
Part VIII Section A. Officers, Direct	tors, Trustees	s, Key l	Emp	loye	es,	and I	Higl	nest Compensate	d Employees (co	ntınued)
(A) Name and Title	(B) Average hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	la stitutional Trust⊭ë	10	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
See Additional Data Table										

See Additional Data Table					

	1b Sub-Total										
d	d Total (add lines 1b and 1c)										
2	Total number of individuals (including of reportable compensation from the o			e liste	ed al	bove	e) who	rece	eived more than \$1	00,000	

Yes No

Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on 3 Νo

For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the

3

4

	organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such			ĺ			
	ındıvıdual	4	Yes				
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No			
Se	ection B. Independent Contractors						
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.						

5	5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person							
S	ection B. Independent Contractors							
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.							
	(A) Name and business address	(B) Description of services	Com	(C) pensation				

	Section B. Independent Contractors							
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year							
	(A) Name and business address	(B) Description of services	(C) Compensation					
-								

Warne and Dusiness address	Description of services	Compensation
<u> </u>		
<u> </u>		

2	Total number of independent contractors (including but not limited to those listed above) who r	eceived more than \$100,000 of	
	compensation from the organization ▶ 0		
			Form 990 (2016)

Part	VΙ	II Statement of	Revenue						rage J
		Check ıf Schedul	le O contains	a respo	onse or note to any	y line in this Part VII	ı		<u> </u>
						(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	1:	a Federated campaig	ns	1a			revenue		512-514
ons, Gifts, Grants Similar Amounts		b Membership dues		1b					
ira! 10u		c Fundraising events		1c	23,840				
s, (An		d Related organizatio		1d					
Siff lar		e Government grants (c		10 1e					
.s. (E		f All other contributions		l ie	<u> </u>				
ië s		and similar amounts n		1f	15,342,693				
but		g Noncash contribution	one included						
Contributic and Other		in lines 1a-1f \$		229,	,115				
Contributions, Gifts, Grants and Other Similar Amounts	١,	h Total.Add lines 1a-1	lf		•	15,366,533			
					Busines				
Program Service Revenue	2a								
å.	b)		_					
ī,e	-			_					
Ž	d	d		_					
Ē	e	· ———							
ogra	f	All other program se	rvice revenue	<u> </u>					
Ĕ	g	Total.Add lines 2a-2i	f		>				
		Investment income (i			nterest, and other		4		E02 E74
		similar amounts) . Income from investm			1	503,57	4		503,574
			ent or tax-exe	-		▶ ▶	+		+
	_	Royaldies	(ı) Rea		(II) Personal	1			
	6a	Gross rents			. ,				
				2,500					
	t	b Less rental expenses		53,345					
	(c Rental income or		-50,845					
		(loss)	(1)				5		-50,845
	•	d Net rental income o	(ı) Securi		(II) Other	-30,04	3		-50,643
	7 <i>a</i>	Gross amount from sales of assets other than inventory		66,050	. ,				
	ł	b Less cost or other basis and sales expenses	6,5	503,009					
	•	C Gain or (loss)	2	263,041					
		d Net gain or (loss) .			•	263,04	1		263,041
Other Revenue	82	a Gross income from f (not including \$ contributions reporte See Part IV, line 18	23,840 ed on line 1c)	of	14,17	5			
æ		b Less direct expense		b	35,21				
her		c Net income or (loss)			ents 🕨	-21,04	1		-21,041
ŏ	96	Gross income from g See Part IV, line 19		ies a					
	ŀ	b Less direct expense	s	b		1			
	•	c Net income or (loss)	from gaming	activit	ies				
	10	aGross sales of invent returns and allowand	tory, less ces	a					
	ł	b Less cost of goods s	sold	b					
	(Net income or (loss)		invent					
	11	Miscellaneous	Revenue		Business Code	_			
		La							
	ł	b							
	(с							
		d All other revenue .							
	•	e Total. Add lines 11a	-11d		•		<u></u>		
	12	2 Total revenue. See	Instructions			16,061,26	2	0	0 694,729
						10,001,20	ı		0 694,729 Form 990 (2016)

Part IX	Statement of Functional Expenses
---------	----------------------------------

Form 990 (2016)				Page 10
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all col	umns All other orga	ınızatıons must comp	elete column (A)	
Check if Schedule O contains a response or note to any	line in this Part IX	<u></u>		🗆
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	15,661,514	15,661,514		
2 Grants and other assistance to domestic individuals See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	157,548		126,039	31,509
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	114,454		103,009	11,445
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9 Other employee benefits	13,083		11,775	1,308
10 Payroll taxes	19,114		16,177	2,937
11 Fees for services (non-employees)				
a Management				
b Legal	15,000		15,000	
c Accounting	20,050		20,050	
d Lobbying	,		,	
e Professional fundraising services See Part IV, line 17				
f Investment management fees	39,322		39,322	
- L				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	3,996		3,996	
12 Advertising and promotion	4,692		4,692	
13 Office expenses	15,133		15,133	
14 Information technology	9,746		9,746	
15 Royalties				
16 Occupancy	13,188		13,188	
17 Travel	8,783		8,783	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	6,397		6,397	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	5,144		5,144	
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)	·		,	
a SPECIAL ACTIVITIES EXP	235,684			235,684
b AUTO EXPENSES	9,177		9,177	
c DUES & SUBSCRIPTIONS	4,070		4,070	
d Temporary Services	1,959		1,959	
e All other expenses	3,987		3,987	
25 Total functional expenses. Add lines 1 through 24e	16,362,041	15,661,514	417,644	282,883
Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation			·	· ·
Check here ► ☐ If following SOP 98-2 (ASC 958-720)				

		(A) Beginning of year		End of year
1	Cash-non-interest-bearing	100	1	100
2	Savings and temporary cash investments	3,028,295	2	2,702,293
3	Pledges and grants receivable, net	1,561,979	3	1,660,147
4	Accounts receivable, net		4	
5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and contributing employers and sponsoring organizations of section $501(c)(9)$		6	

voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L Notes and loans receivable, net . Inventories for sale or use . 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other 1,112,612 basis Complete Part VI of Schedule D 10a accumulated depreciation 106 42 612

	b	Less accumulated depreciation	106	42,612	1,070,000	10c	1,070,000
	11	Investments—publicly traded securities .			27,979,564	11	30,099,382
	12	Investments—other securities See Part IV, line		12			
	13	Investments—program-related See Part IV, line		13			
	14	Intangible assets		14			
	15	Other assets See Part IV, line 11		15			
	16	Total assets.Add lines 1 through 15 (must equa	33,639,938	16	35,531,922		
	17	Accounts payable and accrued expenses			1,533	17	
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities		20			
Š	21 22	Escrow or custodial account liability Complete P		21			
Ë.	22	Loans and other payables to current and former					

22 23

24

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7.742.519

7,742,519

25.943.992

1.845.411

27,789,403

35.531.922 Form **990** (2016)

6.609.997

6,611,530

25.265.262

1,763,146

27,028,408

33,639,938

	11	Investments—publicly traded securities .	27,979,564	11	30,099,382
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets.Add lines 1 through 15 (must equal line 34)	33,639,938	16	35,531,922
	17	Accounts payable and accrued expenses	1,533	17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
6S	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
<u>.</u>	22	land and other parables to groupe and former officers, directors, twisters			

key employees, highest compensated employees, and disqualified

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties .

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here ightharpoonup and

persons Complete Part II of Schedule L . .

and other liabilities not included on lines 17-24)

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here > and complete lines 30 through 34.

Capital stock or trust principal, or current funds . . .

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25 .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

Liabilit 23 24 26 Assets or Fund Balances 27 28 29

30

31

32

33

34

Net

9	Otner	nanges in net assets or fund balances (explain in Schedule O)	9		82,265
10	Net as	ets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	27	,789,403
Par	t XII	Financial Statements and Reporting			
		Check if Schedule O contains a response or note to any line in this Part XII		 	✓
				 Yes	No
1		ting method used to prepare the Form 990			

2c

3a

3b

Yes

Nο

Form 990 (2016)

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Audit Act and OMB Circular A-133?

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

Additional Data

Software ID:

Software Version:

EIN: 23-2765498

Name: THE LUZERNE FOUNDATION

Form 990 (2016)

Form 990, Part III, Line 4a:

DURING THE CURRENT YEAR

The Luzerne Foundation, your community foundation, exists to make our region a better place to live, work and play Through the generosity of our donors, The Foundation supports seven key areas that together support a healthy and sustainable community including Social Services, Education and Scholarships, Arts and Culture, Neighborhoods and Community Development, Youth Issues, Historic Preservation and the Environment, and Health and Wellness The Luzerne Foundation is privileged to facilitate the philanthropy of very special people who understand that quality of life requires "giving back" so others might realize the beauty of our area, have access to the arts, education, healthcare, and enjoy safe neighborhoods For 22 years, The Luzerne Foundation has assisted individuals and families, businesses, civic groups, and other nonprofit organizations with realizing their goals for CHARITABLE GIVING so, collectively, they can improve the quality of life for those living and working in Luzerne County

AND THROUGHOUT THE REGION in addition, the Luzerne Foundation supports worthy charities at a national level SEE SCHEDULES F AND I FOR GRANTS AWARDED.

Compensated Employees, and Independent, Contractors (D) (E) Name and Title Average Position (do not check more Reportable Reportable than one box, unless compensation amount of other hours per compensation person is both an officer from related week (list from the compensation any hours and a director/trustee) organization organizations for related (W-2/1099-(W- 2/1099organization and individ or dire Forme Institu MISC) organizations MISC) below dotted organizations

(F)

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

	iine)	lual trustee otor	itional Trustee		it compensated vee	ď			
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oseph E Kluger Esquire	0 10								

CHAIRMAN	•••••	×	X		0	0	
Joseph E Kluger Esquire	0 10	Х	x		0	0	
VICE CHAIRMAN							
thomas L KENNEDY ESQ	0 10	×	×		0	0	

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Jackie Brozena

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Scott W Williams

Senator John Yudichak

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Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless hours per compensation compensation amount of other person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and MISC) organizations MISC) related organizations

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

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	line)	vidual trustee Inector	titutional Trustee	DEI	employee	hest compensated doviee	1021
John Dowd	0 10	X					
Director		ζ.					
Scott Henry	0 10						ĺ
		X					ı

DIRECTOR

John Lovack

DIRECTOR

DIRECTOR

Tara Wilson

LAUREN ALLEN

ROB NEHER

ROBERT BEE

DIRECTOR

kevin FOLEY

DEBBIE EASTWOOD

Director (TERM BEGAN 7-1-2016)

Director (TERM BEGAN 7-1-2016)

Director (TERM BEGAN 7-1-2016)

treasurer (term end 6-30-16)

Director

Mike Jones Sr

Compensated Employees, and Independent Contractors (D) (E) Name and Title Average Position (do not check more Reportable Reportable than one box, unless amount of other hours per compensation compensation person is both an officer from the from related week (list and a director/trustee) organization organizations organization and

(F)

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related organizations

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

	any nours	anu	a uii	ecto	ır/tı	ustee	,	organization	organizations	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	
gerTRUDE C MCGOWAN ESQ	0 10	×						0		0
secretary (term end 6-30-16)								,		Ī

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TerrENCE W CASEY

Peter J Danchak

DIRECTOR (resigned)

august f genetti jr

r clements gover

Alexander Sloot

Donna Palermo

Director (resigned)

Charles M Barber

President and CEO

ROBERT KORJESKI

CHIEF FINANCIAL OFFICER

DIRECTOR (resigned)

kathı flack

DIRECTOR (term end 6-30-16)

DIRECTOR (term end 6-30-16)

DIRECTOR (term END 6-30-16)

DIRECTOR (term end 6-30-16)

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	m 990	ULE A		Charity Statue organization is a sect	ion 501(c)(3) d	organization o	ort	2016
D epartr	nent of	the Treasury	► Information al	► Attach to Form 9 pout Schedule A (Form	990 or Form 99	0-EZ.	uctions is at	Open to Public Inspection
lame	of th	ue Service ne organiza		<u>www.irs.g</u>	<u>00/10/11/990</u> .		Employer identific	
HE LU	ZERNE	FOUNDATION					23-2765498	
Par			for Public Charity St				See instructions.	
1e oi 1	rganız.		a private foundation beca	•	•	•	(A)(:)	
<u>.</u> 2		•	onvention of churches, or				(A)(I).	
3			scribed in section 170(b		,			
_			or a cooperative hospital s	_			. •	
4	Ш	name, city,	esearch organization ope and state	<u> </u>				
5			ation operated for the ber (iv). (Complete Part II)	nefit of a college or unive	rsity owned or op	perated by a gov	vernmental unit descri	bed in section 170
6		A federal, s	tate, or local government	or governmental unit de	scribed in sectio	on 170(b)(1)(A	A)(v).	
7	✓	section 17	ation that normally receiv (0(b)(1)(A)(vi). (Compl	ete Part II)			unit or from the gener	al public described in
8		A communi	ty trust described in sect	ion 170(b)(1)(A)(vi)	(Complete Part I	I)		
9		_	ural research organization ant college of agriculture			•	-	ege or university or a
0		from activit	ation that normally receivites related to its exempt income and unrelated busies section 509(a)(2).	functions—subject to cer siness taxable income (le	taın exceptions, a	and (2) no more	than 331/3% of its su	pport from gross
1		•	ation organized and opera	, ,	r public safety S	ee section 509	(a)(4).	
2		more public	ation organized and opera ly supported organization through 12d that describ	ns described in section 5	09(a)(1) or sec	ction 509(a)(2). See section 509(a	
a		organizatioi	supporting organization of n(s) the power to regular Part IV, Sections A and	ly appoint or elect a majo				
b		Type II. A manageme	supporting organization s nt of the supporting organ plete Part IV, Sections	supervised or controlled i nization vested in the sar				
С			unctionally integrated. organization(s) (see instru					ted with, its
d		functionally	on-functionally integra integrated The organiza) You must complete I	tion generally must satis	fy a distribution i	requirement and		
e		Check this l	box if the organization re	ceived a written determir	nation from the II		pe I, Type II, Type II	I functionally
f	Enter		or Type III non-functional of supported organization		organization			
g			ing information about the		s)			
i) Na)Name of supported organization		organization (ii)EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv Is the organiz your governir	ation listed in	Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
otal								
		vork Reduc	tion Act Notice, see the	Instructions for	Cat No 11285	<u>. </u>	⊥ Schedule A (Form 9	

	III. If the organization f	ails to qualify und	der the tests list	ed below, please	e complete Part	III.)		
	Section A. Public Support							
	Calendar year	(a)2012	(b) 2013	(c)2014	(d)2015	(e)2	2016	(f) Total
	(or fiscal year beginning in) ▶	(-,	(-)	(-,	(-/	(-,-	-	(-7
1	Gifts, grants, contributions, and membership fees received (Do not	11,808,207	17,202,950	17,873,865	17,919,592	1	5,366,533	80,171,147
	include any "unusual grant ")	11,000,207	17,202,530	17,073,003	17,515,552	-	3,300,333	00,171,147
2	Tax revenues levied for the							
_	organization's benefit and either							
	paid to or expended on its behalf	,						
3	The value of services or facilities							
	furnished by a governmental unit to							
_	the organization without charge	44 000 207	17 202 050	47.072.065	17.010.500	-	F 266 F22	00 171 11
	Total. Add lines 1 through 3	11,808,207	17,202,950	17,873,865	17,919,592	1	5,366,533	80,171,147
5	The portion of total contributions by each person (other than a							
	governmental unit or publicly							
	supported organization) included on							59,916,752
	line 1 that exceeds 2% of the							
	amount shown on line 11, column (f)							
6	Public support. Subtract line 5 from line 4							20,254,395
_	Section B. Total Support							
_	Calendar year				T			
	(or fiscal year beginning in) ▶	(a)2012	(b) 2013	(c)2014	(d)2015	(e)2	2016	(f)Total
7	Amounts from line 4	11,808,207	17,202,950	17,873,865	17,919,592	1	5,366,533	80,171,147
8	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties	560,805	651,791	803,008	796,875		506,074	3,318,553
	and income from similar sources							
_	Net income from unrelated business	-						
9	activities, whether or not the							
	business is regularly carried on							
10								
	or loss from the sale of capital							
	assets (Explain in Part VI)							
11	Total support. Add lines 7 through 10							83,489,700
12	Gross receipts from related activities,	etc (see instruction	ns)	•	•	12	'	97,76
13	First five years. If the Form 990 is for	or the organization'	s first, second, thir	d, fourth, or fifth	tax year as a sect	on 501	(c)(3) or <u>g</u> ar	nization,
	check this box and stop here	<u> </u>					▶ ⊔	
S	Section C. Computation of Publi	c Support Perce	entage					
14	Public support percentage for 2016 (li	ne 6, column (f) div	vided by line 11, co	olumn (f))		14		24 260 %
15	Public support percentage for 2015 Sc	hedule A, Part II, li	ine 14			15		25 210 %
	33 1/3% support test—2016. If the			n line 13, and line	14 is 33 1/3% or	more. c	heck this b	
-00	and stop here. The organization qual	-						·· ▶ □
	33 1/3% support test—2015. If the		• •		nd line 15 is 33 1/	3% or m	ore check	
Ľ	• • •	-			na iirie 13 is 33 1/.	5 /0 01 11	iore, crieck	
	box and stop here. The organization				.13 16 16-	وعدالم مما	. 1 /	▶□
17 a	10%-facts-and-circumstances tes is 10% or more, and if the organization							
	in Part VI how the organization meets							
	organization					.,		▶ ☑

10%-facts-and-circumstances test—2015. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly ightharpoonssupported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions Schedule A (Form 990 or 990-EZ) 2016

Section A. Public Support								
the organization fails to qualify under the tests listed below, please complete Part II.)								
(Complete only if you checked the box on line 10 of Part 1 or if the organization failed to qualify under Part 11. I	ίT							

Se	ection A. Public Support						
	Calendar year	(a)2012	(b) 2013	(c)2014	(d)2015	(e) 2016	(f)Total
1	(or fiscal year beginning in) ► Gifts, grants, contributions, and						
_	membership fees received (Do not	I					
	ınclude any "unusual grants`")	<u> </u>					
2	Gross receipts from admissions,	I					
	merchandise sold or services performed, or facilities furnished in	I					
	any activity that is related to the	I					
	organization's tax-exempt purpose	I					
_	Cross receipts from activities that are						
3	Gross receipts from activities that are not an unrelated trade or business	I					
	under section 513	I					
4	Tax revenues levied for the						
	organization's benefit and either paid	I					
5	to or expended on its behalf The value of services or facilities						
,	furnished by a governmental unit to	I					
	the organization without charge	ļ					
6	Total. Add lines 1 through 5	<u></u>					
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	I					
	5 received from disqualified persons	<u> </u>					
b	Amounts included on lines 2 and 3						
	received from other than disqualified	I					
	persons that exceed the greater of \$5,000 or 1% of the amount on line	I					
	13 for the year	I					
C	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6)						
31	ection B. Total Support	Г	1	T	Т		
	Calendar year (or fiscal year beginning in) ▶	(a)2012	(b) 2013	(c)2014	(d) 2015	(e) 2016	(f)Total
9	Amounts from line 6						
.0a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and						
ь	income from similar sources Unrelated business taxable income						
U	(less section 511 taxes) from						
	businesses acquired after June 30,						
	1975						
	Add lines 10a and 10b Net income from unrelated business						
11	activities not included in line 10b,						
	whether or not the business is						
	regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets						
	(Explain in Part VI)						
13	Total support. (Add lines 9, 10c,						
	11, and 12) First five years. If the Form 990 is fo	r the organization	te first second the	hird fourth or fift	 	ction 501/c)(2) a:	raanization
14	check this box and stop here	Tale organización	r a mac, second, ti	ma, iourtii, or iiit	ii tax yeai as a se	CCOT 301(C)(3) 01	yanızatıon, ► □
<u> </u>	ection C. Computation of Public	Support Perce	ntage				
15	Public support percentage for 2016 (lin			column (f))		15	
16	Public support percentage from 2015 S		· ·	(.,,		16	
	ection D. Computation of Invest	<u> </u>				10	
17	Investment income percentage for 20:			line 13, column (f))	17	
18	Investment income percentage from 2			,(••	18	
	331/3% support tests—2016. If the			on line 14, and lir	ie 15 is more than		e 17 is not
	more than 33 1/3%, check this box and						▶ □
	33 1/3% support tests—2015. If the						. —

not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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Schedule A (Form 990 or 990-EZ) 2016

6

7

8

10a

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V) Section A. All Supporting Organizations Yes No

Page 4

5c

6

7

8

9a

9b

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2016

_	If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose,		
	describe the designation If historic and continuing relationship, explain	1	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described		
	in section 509(a)(1) or (2)	2	
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)		
	below	3a	
b	Did the organization confirm that each supported organization qualified under section $501(c)(4)$, (5) , or (6) and satisfied the public support tests under section $509(a)(2)$? If "Yes." describe in Part VI when and how the organization made the		

эa	Did the organization have a supported organization described in section 301(c)(4), (5), or (6), it res, answer (b) and (c)			
	below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the			
	determination			
c	Old the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?			
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			

	the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the			
	determination	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?			
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b ın Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
	Supervised by or in connection with its supported organizations			

	determination				
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?				
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3с			
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below				
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported				
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or	4b			
С	supervised by or in connection with its supported organizations Did the organization support any foreign supported organization that does not have an IRS determination under sections				
	501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support				
	to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes	4c			
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and				

4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you		
	checked 12a or 12b ın Part I, answer (b) and (c) below	4a	
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported		
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b	
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support		
	to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes	4c	
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the		
	organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by	5a	

U	bld the organization have ditinate control and discretion in deciding whether to make grants to the foreign supported		
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b	
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support		
	to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes	4c	
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the		
	organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a	
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the		
	organization's organizing document?	5b	

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

Substitutions only. Was the substitution the result of an event beyond the organization's control?

organization's supported organizations? If "Yes," provide detail in Part VI.

complete Part I of Schedule L (Form 990 or 990-EZ)

the organization had excess business holdings)

organization had an interest? If "Yes," provide detail in Part VI.

provide detail in Part VI.

answer line 10b below

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

Par	** Supporting Organizations (continued)					
			Yes	No		
11	Has the organization accepted a gift or contribution from any of the following persons?					
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the					
	governing body of a supported organization?	11a				
b	A family member of a person described in (a) above?	11b				
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c				
C-	ection B. Type I Supporting Organizations					
se	ection B. Type I Supporting Organizations		Yes	No		
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint of	ır 🗀	1.03	""		
	elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Pa					
	VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or					
	trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such					
	powers during the tax year	1				
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that					
	operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting					
	organization	2				
			•	•		
Se	ection C. Type II Supporting Organizations		Yes	N.		
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees	of [res	No		
1	were a majority of the organization's directors of trustees during the tax year also a majority of the directors of trustees each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the	or				
	supporting organization was vested in the same persons that controlled or managed the supported organization(s)					
		1				
				•		
Se	ection D. All Type III Supporting Organizations		Τ.,			
	Did the appropriate any would be each of the grown which are not the best first first of the COL seconds of the	,	Yes	No		
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of					
	Form 990 that was most recently filed as of the date of notification, and (III) copies of the organization's governing					
	documents in effect on the date of notification, to the extent not previously provided?	<u> </u>	-	<u> </u>		
2	Were any of the organization's officers directors or trustoes either (1) appointed or elected by the supported arrangement	n 1				
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization	"				
	maintained a close and continuous working relationship with the supported organization(s)	<u> </u>				
_	Divinion of the valeting described in (2) did the surround of	2				
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in torganization's investment policies and in directing the use of the organization's income or assets at all times during the t					
	year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3				
	ection E. Type III Functionally-Integrated Supporting Organizations					
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instr	actions)				
a						
b						
С	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instru	ictions))		
2	Activities Test Answer (a) and (b) below.	_	Yes	No		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the					
	supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supporte organizations and explain how these activities directly furthered their exempt purposes, how the organization was	3				
	responsive to those supported organizations, and how the organization determined that these activities constituted	<u> </u>				
	substantially all of its activities	2a				
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the					
	organization's position that its supported organization(s) would have engaged in these activities but for the organization	s				
_	involvement	2b				
3	Parent of Supported Organizations Answer (a) and (b) below.	_				
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each the supported organizations? Provide details in Part VI.	of 3a				
h	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its	<u> </u>	1			
,	supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard	3b				
		,	1			

-	Add lifles 1 till odgif 5			
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		

d	Total (add lines 1a, 1b, and 1c)	1d	
е	Discount claimed for blockage or other factors (explain in detail in Part VI)		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
	Section C - Distributable Amount		Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	

Schedule A (Form 990 or 990-EZ) (2016)

c Excess from 2014.

d Excess from 2015.

e Excess from 2016. . . .

Part VI Supplemental Information.

Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test ESTABLISHED IN 1994 AS A CLASSIC "COMMUNITY FOUNDATION", THE LUZERNE FOUNDATION ("TLF") IS A FORCE FOR PHILANTHROPY IN NORTHEAST PENNSYLVANIA AND BEYOND. TLF'S PRIMARY MISSION IS TO ENHANCE THE LIVES OF PEOPLE LIVING IN LUZERNE COUNTY, PENNSYLVANIA, AND SURROUNDING COUNTIES. IT SEEKS TO ACCOMPLISH ITS MISSION BY SUPPORTING THE FOLLOWING SEVEN KEY AREAS OF NEED THAT TOGETHER SUPPORT A HEALTHY AND SUSTAINABLE COMMUNITY SOCIAL SERVICES, EDUCATION AND SCHOLARSHIPS, ARTS AND CULTURE, NEIGHBORHOODS AND COMMUNITY DEVELOPMENT, YOUTH ISSUES, HISTORIC PRESERVATION AND THE ENVIRONMENT, AND, HEALTH AND WELLNESS SINCE ITS INCEPTION THROUGH 2016, TLF MADE FINANCIAL GRANTS TOTALING IN EXCESS OF \$111 MILLION TO SUPPORT ITS MISSION THROUGH THE ACCOMPLISHMENT OF A WIDE VARIETY OF DIFFERENT PROJECTS AND MISSIONS, OF MOSTLY SMALL NONPROFIT, TAX EXEMPT COMMUNITY-BASED ORGANIZATIONS, LOCATED IN AND SERVING THE RESIDENTS OF LUZERNE COUNTY AND SURROUNDING COUNTIES LOCATED IN NORTHEAST PENNSYLVANIA TLF MAINTAINS OVER 303 DONOR ESTABLISHED MISSION-DIRECTED FUNDS THAT IN THE AGGREGATE HAVE A CURRENT FAIR MARKET VALUE IN EXCESS OF \$35 MILLION SUPPORT FOR TLF AND ITS MISSION IS OBTAINED PRIMARILY THROUGH DIRECT SOLICITATION OF INDIVIDUALS, BUSINESSES AND THE COMMUNITY AT LARGE THE FOLLOWING FACTS AND CIRCUMSTANCES OVERWHELMINGLY SUPPORT THE CONCLUSION THAT TLF SATISFIES THE "10% FACTS & CIRCUMSTANCES TEST" SET FORTH IN TREASURY REGULATION SECTION 1 170A-9(E)(3) PERCENTAGE OF "PUBLIC SUPPORT" FOR THE 2015 CALENDAR YEAR TLF'S PUBLIC SUPPORT PERCENTAGE WAS 25 21% 2014 WAS THE FIRST YEAR SINCE TLF WAS ESTABLISHED THAT ITS PUBLIC SUPPORT PERCENTAGE DID NOT EXCEED 33-1/3RD % "
BROAD BASE OF TLF'S SUPPORT" IN 2016, TLF RECEIVED MORE THAN 2,659 CONTRIBUTIONS FROM 2,131 DIFFERENT INDIVIDUALS AND BUSINESSES SUBSTANTIALLY, ALL OF THE CONTRIBUTIONS THAT TLF RECEIVED IN 2016 WERE FROM INDIVIDUALS RESIDING IN AND BUSINESSES LOCATED IN LUZERNE COUNTY, PENNSYLVANIA AND COUNTIES IMMEDIATELY SURROUNDING IT LUZERNE COUNTY HAS A TOTAL OF APPROXIMATELY 325,000 RESIDENTS, MANY OF WHOM ARE CHILDREN. THUS, TLF PROUDLY BOASTS THAT IT IS BROADLY SUPPORTED BY A SIGNIFICANT PERCENTAGE OF THE ADULT MEMBERS OF ITS IMMEDIATE COMMUNITY TLF'S GOVERNING BODY HAS BROAD COMMUNITY PERSPECTIVE AND REPRESENTATION " TLF IS A NONPROFIT, NON-STOCK PENNSYLVANIA NONPROFIT CORPORATION IT IS GOVERNED BY A SELF-PERPETUATING BOARD OF DIRECTORS, EACH OF WHOM HAS ONE VOTE TLF'S BYLAWS PROVIDE THAT ITS DIRECTORS BE ADULTS " RESIDING IN OR NEAR, OR OTHERWISE BE CLOSELY IDENTIFIED WITH, LUZERNE COUNTY, PENNSYLVANIA" TLF'S BYLAWS FURTHER PROVIDE THAT DIRECTORS "SHOULD BE KNOWLEDGEABLE REGARDING THE CHARITABLE NEEDS AND INTERESTS OF THE COMMUNITIES SERVED AND HAVE STANDING IN THOSE COMMUNITIES AND ACCESS TO BUSINESSES, GROUPS AND INDIVIDUALS INTERESTED IN PROMOTING, ENCOURAGING AND SUPPORTING THE CHARITABLE PURPOSES AND FUNCTIONS OF THE CORPORATION, AND BE ACTIVE IN OR OTHERWISE INVOLVED WITH THE CHARITABLE NEEDS OF THOSE COMMUNITIES " IN 2016, TLF'S BOARD WAS COMPRISED OF 19 VOTING MEMBERS, EACH OF WHOM SATISFIES THE PROFILE OF AND QUALIFICATIONS FOR BEING A DIRECTOR AS SET FORTH IN TLF'S BYLAWS " REGULAR AND CONTINUOUS EFFORTS TO SOLICIT PUBLIC SUPPORT "TLF MAINTAINS ACTIVE AND CONTINUOUS EFFORTS AND PROGRAMS TO SOLICIT AND OBTAIN CONTRIBUTIONS AND BEQUESTS FROM THE PUBLIC TLF'S EFFORTS IN THIS REGARD BEGIN WITH ITS EFFORTS TO ESTABLISH ITS COMMUNITY IDENTITY AND TO MAKE THE PUBLIC POSITIVELY AWARE OF AND FAMILIAR WITH ITS NAME, LOGO, MISSION AND VALUES MUCH OF TLF'S PROFESSIONALLY DESIGNED WEBSITE IS DEDICATED TO EDUCATING AND FAMILIARIZING THE PUBLIC AT LARGE, AS WELL AS PROSPECTIVE DONORS IN PARTICULAR, ABOUT TLF, ITS MISSION AS A ROBUST COMMUNITY FOUNDATION AND THE NUMEROUS, ATTRACTIVE AND FLEXIBLE WAYS TO CONTRIBUTE BOTH FINANCIAL AND OTHER RESOURCES TO SUPPORT TLF AND ITS MISSION AS ONE OF ITS REQUIRED AND IMPORTANT FUNCTIONS AND RESPONSIBILITIES, THE STAFF OF TLF REGULARLY ORGANIZES AND ENGAGES IN ACTIVITIES AND PROGRAMS (E G , SEMINARS AND OTHER EDUCATIONAL PROGRAMS AND LECTURES BY PROMINENT PROFESSIONALS IN SUCH FIELDS AS ESTATE AND TAX PLANNING THAT ARE OPEN TO THE PUBLIC) DESIGNED TO INCREASE PUBLIC AWARENESS OF THE BENEFITS OF SUPPORTING TLF AND OTHERWISE TO ATTRACT AND ENCOURAGE CONTRIBUTIONS AND BEQUESTS FROM THE PUBLIC TLF REGULARLY USES ELECTRONIC AND REGULAR MAIL TO SOLICIT SUPPORT FROM THE PUBLIC TLF ALSO REGULARLY UTILIZES LOCAL MEDIA ADVERTISEMENTS TO ATTRACT AND SOLICIT SUPPORT FROM THE PUBLIC AND SEEKS TO OBTAIN PUBLIC SUPPORT THROUGH PERSUADING LOCAL MEDIA TO PROVIDE UNPAID COVERAGE ABOUT TLF, ITS MISSION, ACCOMPLISHMENTS AND ACHIEVEMENTS IN ADDITION, EACH MEMBER OF TLF'S BOARD ACCEPTS THE ROLE OF GOODWILL AMBASSADOR AND AS A SOLICITOR OF PUBLIC SUPPORT AS A DIRECTOR'S SIGNIFICANT DUTY AND RESPONSIBILITY "NO MEMBER OF TLF'S GOVERNING BODY IS A "SUBSTANTIAL CONTRIBUTOR" NOT ONLY DOES TLF ENGAGE IN AND MAINTAIN NUMEROUS PROGRAMS AND WAYS TO ACTIVELY AND CONTINUOUSLY SOLICIT SUPPORT FROM THE GENERAL PUBLIC, MOST OF THE SUPPORT THAT IT DOES OBTAIN IS CONTRIBUTED BY MEMBERS OF THE GENERAL PUBLIC AS EVIDENCED BY THE FACT THAT NO MEMBER OF TLF'S BOARD OF DIRECTORS IS A "SUBSTANTIAL CONTRIBUTOR" TO TLF WITHIN THE MEANING OF IRC SECTION 507(D)(2) MOREOVER, AND WITH THE EXCEPTION OF CHARLES D. FLACK, BOARD MEMBER (NOW DECEASED) AND HIS BROTHER, HAROLD FLACK, EACH OF WHOM STARTED A CHARITABLE FUND FROM THE PROCEEDS OF A BUSINESS SALE, NO MEMBER OF TLF'S BOARD OF DIRECTORS, NOR ANY TLF OFFICER OR EMPLOYEE, NOR ANY OF THEIR RELATIVES [WITHIN THE MEANING OF IRC SECTION 507(D)(2)(C)(II)] HAS CONTRIBUTED OR BEQUEATHED, IN THE AGGREGATE, MORE THAN 2% OF THE TOTAL CONTRIBUTIONS AND BEQUESTS RECEIVED BY TLF FROM ITS INCEPTION THROUGH AND INCLUDING DECEMBER 31, 2016 "PUBLIC ACCESS TO TLF AND ITS RESOURCES" BY DESIGN, THE PUBLIC HAS ACCESS TO THE ACTIVITIES AND RESOURCES OF TLF. THE WEBSITE OF TLF MAINTAINS A LINK TO ITS MOST RECENT AUDITED FINANCIAL STATEMENTS AS WELL AS A LINK TO ITS CURRENT AND SEVERAL PRIOR YEARS IRS FORMS 990 IN ADDITION, TLF'S WEBSITE PROVIDES AN EASILY COMPLETED APPLICATION FOR NONPROFITS WHO WISH TO APPLY FOR A GRANT TLF MAINTAINS A DATA BASE FOR EACH NONPROFIT THAT APPLIES FOR A GRANT AND STRIVES TO KEEP THE DATA IT COLLECTS CURRENT ANNUALLY, TLF HOSTS FORUMS AND SEMINARS FOR NONPROFITS THAT HELP THE COMMUNITIES THAT IT SERVES TO MAKE OTHER NONPROFITS AWARE OF THEIR RESOURCES AS WELL AS BETTER AWARE OF HOW TLF CAN BETTER SUPPORT ITS MISSION AND PURPOSES ON A CONTINUOUS BASIS, TLF COLLABORATES WITH OTHER LARGE REGIONAL NONPROFIT PROVIDERS OF GOODS AND SERVICES TO MORE EFFICIENTLY AND EXPEDITIOUSLY ADDRESS REGIONAL CONCERNS, NEEDS AND DISASTERS TLF MAINTAINS A CONTINUOUS AND OPEN DIALOGUE WITH THOSE WHO HAVE ESTABLISHED WITH TLF DONOR ADVISED OR RESTRICTED FUNDS AS WELL AS WITH OTHER CONTRIBUTORS TO BETTER INSURE THAT TLF'S FUNDS ARE BEING DISBURSED APPROPRIATELY AND AS REQUESTED TLF REGULARLY POSTS ON ITS WEBSITE AND FURNISHES, TO ANYONE WHO SUBSCRIBES, NEWS AND OTHER INFORMATION ABOUT ITS OPERATIONS AND THE STATUS OF PARTICULAR PROJECTS AND NEEDS OF THE COMMUNITIES THAT IT SERVES "TLF'S EDUCATIONAL PROGRAMS AND MATERIALS "TLF REGULARLY CONDUCTS/SPONSORS EDUCATIONAL PROGRAMS AND PRODUCES INFORMATIONAL MATERIALS/REPORTS FOR DONORS GRANTEE NONPROFITS AND FOR PROFESSIONAL ADVISORS. IN EACH CASE, SUCH PROGRAMS, MATERIALS AND REPORTS ARE DESIGNED TO ASSIST AND EDUCATE OTHERS IN THE COMMUNITIES THAT TLF SERVES ABOUT THE COMMUNITIES' NEEDS AND BEST METHODS AND WAYS TO ADDRESS SUCH NEEDS THROUGH ITS WEBSITE, MEDIA ADVERTISEMENTS AND THROUGH MORE DIRECT ELECTRONIC AND REGULAR MAIL CONTACT, TLF ADVERTISES AND OTHERWISE INFORMS OTHERS ABOUT THE OPEN AND FREE AVAILABILITY OF ITS EDUCATIONAL PROGRAMS AND MATERIALS "ACTIVE AND CONTINUOUS COLLABORATION WITH AND PARTICIPATION BY COMMUNITY LEADERS AND PUBLIC OFFICIALS" THE STAFF AND BOARD OF TLF MAINTAIN RELATIONSHIPS AND A CONTINUOUS DIALOGUE WITH BOTH COMMUNITY LEADERS AND PUBLIC OFFICIALS OF THE COMMUNITIES THAT TLF SERVES DUE TO THE NATURE AND SIZE OF THE COMMUNITIES THAT TLF SERVES, MANY CURRENT AND FORMER COMMUNITY LEADERS AND SOME FORMER PUBLIC OFFICIALS SERVE FROM TIME TO TIME AS A TLF DIRECTOR OR ARE MEMBERS OF ITS FOUNDERS' BOARD (THAT SERVES TLF IN AN ADVISORY CAPACITY) CURRENTLY, TLF DIRECTOR JOHN T YUDICHAK ALSO SERVES AS A PENNSYLVANIA STATE SENATOR AND TLF'S REMAINING DIRECTORS SERVE THE PUBLIC IN VARIOUS CAPACITIES SUCH AS CPAS, ATTORNEYS, BUSINESS ENTREPRENEURS, FINANCIAL SERVICES AND/OR COMMUNITY ADVOCATES IN ADDITION, THE OFFICERS OF TLF'S BOARD AND ITS PRESIDENT/CEO ARE IN REGULAR CONTACT WITH THE PUBLIC OFFICIALS OF LUZERNE COUNTY, SEVERAL NEIGHBORING COUNTIES AND MANY OF THE PUBLIC OFFICIALS OF CITIES AND MUNICIPALITIES LOCATED IN THOSE COUNTIES

SCHEDULE D (Form 990)

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

➤ Attach to Form 990.

DLN: 93493276005207 OMB No 1545-0047

Internal Revenue Service

Department of the Treasury

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

	me of the organization LUZERNE FOUNDATION		Employe	identification i	number			
1111	THE LOZENNE FOUNDATION			23-2765498				
Pa	Organizations Maintaining Donor Complete if the organization answere	Advised Funds or Other Similar Fund d "Yes" on Form 990, Part IV, line 6.	ds or Account	s.				
		(a) Donor advised funds	(b)Funds	and other accou	nts			
1	Total number at end of year	91			212			
2	Aggregate value of contributions to (during year)	15,048,817			1,204,791			
3	Aggregate value of grants from (during year)	14,934,093			891,496			
4	Aggregate value at end of year	14,984,812			18,819,698			
5	Did the organization inform all donors and donor funds are the organization's property, subject to t		or advised	 ✓ Y	es 🗌 No			
6	Did the organization inform all grantees, donors, a used only for charitable purposes and not for the conferring impermissible private benefit?			· • ·	es 🗌 No			
Pa	rt III Conservation Easements. Complet	e if the organization answered "Yes" on	Form 990, Part	IV, line 7.				
1	Purpose(s) of conservation easements held by the	e organization (check all that apply)						
	\square Preservation of land for public use (e g , rec	reation or education) \qed Preservation $lpha$	of an historically	ımportant land ar	rea			
	Protection of natural habitat	Preservation of	of a certified histo	oric structure				
	Preservation of open space							
2	Complete lines 2a through 2d if the organization h	neld a qualified conservation contribution in th	e form of a cons	ervation				
	easement on the last day of the tax year			ld at the End of	the Year			
a	Total number of conservation easements		2a					
b	Total acreage restricted by conservation easement		2b					
С.	Number of conservation easements on a certified	` '	2c					
d	Number of conservation easements included in (c) structure listed in the National Register	acquired after 8/17/06, and not on a historic	2d					
3	Number of conservation easements modified, trantax year ▶	isferred, released, extinguished, or terminated	d by the organiza	tion during the				
4	Number of states where property subject to conse	ervation easement is located >						
5	Does the organization have a written policy regard and enforcement of the conservation easements if		— ling of violations	, □ Yes	□ No			
6	Staff and volunteer hours devoted to monitoring,	ınspecting, handling of violations, and enforcii	ng conservation	easements during	the year			
7	Amount of expenses incurred in monitoring, insper	cting, handling of violations, and enforcing co	nservation easer	nents during the	year			
8	Does each conservation easement reported on line	e 2(d) above satisfy the requirements of secti	on 170(h)(4)(B)([1]				
	and section $170(h)(4)(B)(II)$?			☐ Yes	□ No			
9	In Part XIII, describe how the organization reports balance sheet, and include, if applicable, the text the organization's accounting for conservation eas	of the footnote to the organization's financial						
Par	Organizations Maintaining Collect Complete if the organization answere	tions of Art, Historical Treasures, or d "Yes" on Form 990, Part IV, line 8.	Other Similar	Assets.				
1a	If the organization elected, as permitted under SF art, historical treasures, or other similar assets he provide, in Part XIII, the text of the footnote to its	ld for public exhibition, education, or research	ın furtherance o		orks of			
b	If the organization elected, as permitted under SF historical treasures, or other similar assets held fo following amounts relating to these items	AS 116 (ASC 958), to report in its revenue stor public exhibition, education, or research in f	atement and bala furtherance of pu	ance sheet works blic service, prov	of art, ride the			
(i) Revenue included on Form 990, Part VIII, line 1		▶ \$	i				
(i	i)Assets included in Form 990, Part X		▶ \$					
2	If the organization received or held works of art, I following amounts required to be reported under :		financial gain, p	rovide the				
а	Revenue included on Form 990, Part VIII, line 1		▶ \$	\$				
b	Assets included in Form 990, Part X		>	\$				
or I	Paperwork Reduction Act Notice, see the Instr	uctions for Form 990. Cat	No 52283D 5	Schedule D (For	m 990) 2016			

Page 2

3	Using the organization's acquisition, accession items (check all that apply)	, and other records	s, check a	any of t	he following	that are a s	ignificant us	e of its coll	ection	_
а	Public exhibition		d		Loan or exch	ange progra	ams			
b	Scholarly research		e		Other					
c	Preservation for future generations									
4	Provide a description of the organization's coll Part XIII	ections and explain	how the	y furth	er the organı	zation's exe	mpt purpose	e in		
5	During the year, did the organization solicit or						ar			
	assets to be sold to raise funds rather than to	<u>'</u>	part of th	e orgar	ization's coll	ection?		☐ Yes	□ N	о
Pa	Complete if the organization answ X, line 21.		orm 990	, Part :	IV, line 9, c	r reported	an amoun	t on Form	1 990,	Part
1a	Is the organization an agent, trustee, custodia included on Form 990, Part X?	in or other interme	dıary for	contrib	utions or oth	er assets no		☐ Yes	□ N	o
ь	If "Yes," explain the arrangement in Part XIII	and complete the f	ollowing	table			Am	ount		_
c	Beginning balance	·	_			1c				_
d	Additions during the year					1d				_
е	Distributions during the year					1e				_
f	Ending balance					1f				_
2 a	Did the organization include an amount on Fo	m 990, Part X, line	21, for	escrow	or custodial	account liab	ılıty?	☐ Yes	\square N	o
b	If "Yes," explain the arrangement in Part XIII	Check here if the	explanatı	on has	been provide	ed in Part XI	II			
Pa	rt V Endowment Funds. Complete if									
		(a)Current year		rıor year			d) Three years		our yea	
	Beginning of year balance	27,977,014	-	26,318,		23,900,129	•	15,858		852,284
	Contributions	1,571,866		3,086,		1,791,479		15,260		680,125
	Net investment earnings, gains, and losses	2,261,017		125,		2,211,892		16,970		169,489
	Grants or scholarships	1,310,427		1,184,	535	1,242,494	1,10	05,652		977,262
е	Other expenditures for facilities and programs									120,000
f	Administrative expenses	400,088		368,	369	342,847	30	2,307		258,778
	End of year balance	30,099,382		27,977,	014	26,318,158	23,90	0,129	20,	345,858
2	Provide the estimated percentage of the curre	nt year end balanc	e (line 1d	a, colun	nn (a)) held a			I		
а		.00 000 %	` .		(//					
b	Permanent endowment ▶									
С	Temporarily restricted endowment ▶									
	The percentages on lines 2a, 2b, and 2c shoul	d equal 100%								
3a	Are there endowment funds not in the possess	sion of the organiza	ation that	are he	ld and admir	nstered for t	the		W	N 1-
	organization by (i) unrelated organizations							3a(i)	Yes	No No
	(ii) related organizations							3a(ii)		No
b	If "Yes" on 3a(II), are the related organization		on Sche	dule R?				3b		
4	Describe in Part XIII the intended uses of the	organization's endo	owment f	unds						
Pa	t VI Land, Buildings, and Equipmen			Davit T	/ lima 44a	Caa Fawaa	000 0	V lone 40		
	Complete if the organization answ Description of property (a) Cost or oth		t or other		· .	See Form umulated dep		•	ok valu	
	(investme				,					
1a	Land									
b	Buildings	1,070,000				·			1	1,070,000
c	Leasehold improvements			(,349		9,349			0
d	Equipment			3:	3,263		33,263			0
	Other									
Tota	II. Add lines 1a through 1e (Column (d) must ed	jual Form 990, Part	X, colur	nn (B),	line 10(c))	<u> ▶</u>			1	1,070,000

(4) (b) (c) (c) (d) (d) (d) (e) (e) (f) (f) (f) (e) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f	Part VII	Investments—Other Securities. Complete if the org See Form 990, Part X, line 12.	janization	answered 'Yes' o	n Form 990, Par	t IV, line 11b.
(3) Color Policy of Color Colo						
(6) (7) (8) (9) (9) (1) (1) (1) (1) (1) (2) (3) (4) (5) (6) (7) (7) (8) (9) (9) (1) (1) (1) (2) (1) (2) (2) (3) (4) (5) (6) (7) (7) (8) (9) (9) (1) (1) (1) (1) (2) (2) (3) (4) (5) (6) (7) (7) (8) (9) (9) (1) (1) (1) (1) (2) (2) (3) (4) (5) (6) (7) (7) (8) (9) (8) (9) (9) (9) (1) (1) (1) (1) (2) (2) (3) (4) (5) (6) (7) (7) (8) (9) (8) (9) (9) (9) (1) (1) (1) (1) (2) (2) (3) (4) (5) (6) (7) (7) (8) (9) (8) (9) (9) (9) (9) (1) (1) (1) (1) (2) (2) (3) (4) (5) (6) (7) (7) (8) (9) (8) (9) (9) (9) (9) (1) (1) (1) (1) (2) (2) (3) (4) (5) (6) (7) (7) (8) (9) (8) (9) (9) (9) (9) (1) (1) (1) (1) (2) (2) (3) (4) (5) (6) (7) (7) (8) (9) (9) (9) (9) (1) (1) (1) (1) (2) (2) (3) (4) (5) (6) (7) (7) (8) (9) (9) (9) (9) (9) (1) (1) (1) (1) (2) (2) (3) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (9) (9) (9) (9) (9) (9) (9			·			
(C) (P) (E) (F) (G) (G) (F) (G) (G) (G) (G) (G) (G) (G) (G) (G) (G	(A)					
(C) See Form 990, Part X, and (S) line (1)	(B)					
(6) (7) Trotal. (Column (2) round recest from 990, Part X, cot (8) line 23 ; Part XII (a) Description of investments (b) Book value (Column (2) remains a remainded of valuation (Column (2) round recest from 990, Part X, line 11.0 (b) Book value (Column (2) round recest from 990, Part X, cot (8) line 23 ; (c) Description of investments (b) Book value (Column (2) remainded valuation (Column (2) remainded valuation (Column (2) remainded valuation (Column (2) remainded valuation (2) remainded value (2) remainded value (2) remainded value (2) remainded value (3) remainded value (4) Remainded value (4	(C)					
(F)	(D)					
(6) (9-5) Total. (Column (6) must equal Form 980, Part X, Line 13. (a) Description of investment (b) Book value (c) Method of valuation (c) See Form 990, Part X, Line 13. (a) Description of investment (b) Book value (c) Method of valuation (c) See Form 990, Part X, Line 13. (a) Description of investment (b) Book value (c) Method of valuation (c) See Form 990, Part X, Line 13. (d) Get (e) Get	(E)					
(H) Total Colore (stream and Secret 900, Pert. X., (a) (a) ins. 12.) Part VIII See Form 990, Pert X., Ins. 13. (b) Secret 990, Pert X., Ins. 13. (c) Secret 990, Pert X., Ins. 13. (d) Secret 990, Pert X., Ins. 13. (e) Secret 990, Pert X., Ins. 15. (e) Secret 15. (e) Secret 990, Pert X., Ins. 15. (e) Secret 15. (e)	(F)					
Total. (Column (b) most equal form 990, Part X, or (B) Not 22) Part XII Trestments—Program Related. Complete if the organization answered "Ves" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13c. (a) Description of investment (b) Sook value (c) Prethod of valuation. (d) Program Related. Complete if the organization answered "Ves" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13c. (e) Description of investment (f) Cost or are ext year market valua (f) Cost or are ext year market valua (g) Cost or are ext year market valua (h) Sook value (g) Cost or are ext year market valua (h) Sook value (h) Description (h) Book value (h)	(G)					
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See Form 990, Part X, Inte 13.						
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(1) (2) (3) (4) (5) (6) (7) (8) (9) (9) (1) (1) (1) (2) (3) (4) (4) (5) (5) (6) (7) (8) (9) (9) (1) (1) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (9) (1) (1) (1) (1) (2) (3) (4) (5) (5) (6) (7) (7) (8) (9) (9) (1) (1) (1) (1) (2) (3) (4) (5) (5) (6) (7) (7) (8) (9) (9) (1) (1) (1) (1) (2) (3) (4) (5) (5) (6) (7) (7) (8) (9) (9) (1) (1) (1) (2) (1) (2) (3) (4) (5) (5) (6) (7) (7) (8) (9) (9) (1) (1) (1) (2) (1) (2) (2) (3) (4) (5) (6) (7) (7) (8) (9) (9) (1) (1) (1) (2) (1) (2) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (1) (1) (1) (1) (2) (2) (3) (4) (4) (5) (5) (6) (7) (8) (9) (9) (9) (1) (1) (1) (1) (2) (1) (2) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (1) (1) (1) (2) (1) (2) (2) (3) (4) (4) (5) (6) (7) (7) (8) (9) (9) (9) (1) (1) (1) (1) (2) (1) (2) (2) (3) (4) (4) (5) (6) (7) (7) (8) (9) (9) (9) (1) (1) (1) (1) (1) (2) (1) (2) (2) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (9) (9) (9) (9) (9) (9) (9) (9) (9) (9			(b) Book v	alue C	(c) Method of values	aluation market value
(4) (5) (6) (7) (8) (9) Total. (Calumn (b) must equal form 990, Part X, cal (b) line 32) Part XX Other Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d See Form 990, Part X, line 15 (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Calumn (b) must equal Form 990, Part X, cal (d) line 15) Part XX Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of riability (b) Book value (1) Federal income taxes unitrust 706,653 SECURITY OBPOSIT 20,000 FUNDS HELD AS AGENCY ENDOWMENT 7,015,866 (4) (5) (6) (7) (8) (9) Total. (Calumn (b) must equal form 990, Part X, cal (d) line 25) 7,742,519 2. Labolity for uncertain tax positions 1 in Part XIII, provide the text of the forunded to the organizations francial statements that reports the	(1)				<u> </u>	
(4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 999, Part X, sol (b) inve 13) (a) Description (b) Book value (c) Description (d) Description (e) Description (f) Book value (h) Book value (h) Book value (ii) Book value (iv)	(2)					
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2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	Total. (Column	n (b) must equal Form 990, Part X, col (B) line 25)	<u> </u>	7,742,51	9	

Add lines 2a through 2d .

Add lines 4a and 4b . .

Subtract line 2e from line 1 .

Part XI

2

b

c

d

е

3

4

5

1

2

а b

d

e 3

а

b

c

Part XIII

5

4

b

Part XII

Schedule D (Form 990) 2016

Page 4

1,086,774

-88,562

16,061,262

16,475,603

113,562

16.362.041

16,362,041

Schedule D (Form 990) 2015

16,149,824

Donated services and use of fac	ыl	itie	!S		
Recoveries of prior year grants					
Other (Describe in Part XIII)					

Other (Describe in Part XIII)

Donated services and use of facilities .

Other (Describe in Part XIII)

Supplemental Information

Prior year adjustments . . .

Other (Describe in Part XIII) .

Add lines 2a through 2d .

Add lines 4a and 4b .

Return Reference

See Additional Data Table

Subtract line 2e from line 1 .

Other losses .

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Amounts included on Form 990, Part VIII, line 12, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b.

Total expenses and losses per audited financial statements .

Amounts included on line 1 but not on Form 990, Part IX, line 25

Amounts included on Form 990, Part IX, line 25, but not on line 1:

Investment expenses not included on Form 990, Part VIII, line 7b .

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,

Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Net unrealized gains (losses) on investments

2c 2d

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

4a 4b

2a

2b

2a

2b 2c

2d

4b

Explanation

-88.562 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)

979.509

25,000

82,265

25,000

88.562

2e

3

4c

5

3 4c Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

2e

Page 5	Schedule D (Form 990) 2015		
	tal Information <i>(continued)</i>	Part XIII Supplemental Info	
xplanation		Return Reference	

Schedule D (Form 990) 2016

Additional Data

Software ID:

Software Version:

EIN: 23-2765498

Name: THE LUZERNE FOUNDATION

Supplemental Information

Return Reference	Explanation
Part V, Line 4	Endowment Funds held at The Luzerne Foundation may be established to benefit a particular institution or agency, to provide ongoing support to a favorite charity, award scholarship in the name of a loved one, or otherwise support seven key areas. Social Services, Education and Scholarships, Arts and Culture, Neighborhoods and Community Development, Youth Is sues, Historic Preservation and the Environment, and Health and Wellness, in the name of a person or other entity. Endowment Funds can be established by gift or by a bequest and are additionally supported by the earnings on those contributions as well as periodic contributions. Most Endowment Funds are permanent with the requirement that the principal is never depleted. The balance in the Endowment Fund is invested in a pool with long-term assets and oversight is provided by an informal yet qualified Investment Committee. Donors can establish a Fund in their name, in a family's name, or in the name of any person or organization they wish to honor. Grants distributed from a donor's fund are awarded in the name of any person or organization they wish to honor. Grants distributed from a donor's fund are awarded in the name of their fund. This person or organization will always be remembered and linked to good works in our community.

applemental Information		
Return Reference	Explanation	
art X, Line 2	The Foundation accounts for uncertainty in income taxes by prescribing a recognition thres hold of more-likely-than-not to be sustained upon examination by the appropriate taxing au thority. Measurement of the tax uncertainty occurs if the recognition threshold has been met. Management determined that there were no tax uncertainties that met the recognition the reshold in 2016 and 2015.	

Su

upplemental Information			
Return Reference	Explanation		
Part XI, Line 2d - Other Adjustments	CHANGE IN VALUE OF REMAINDER TRUST 82,265		

upplemental Information				
Return Reference	Explanation			
Part XI, Line 4b - Other Adjustments	RENTAL EXPENSES -53,345 SPECIAL EVENTS EXPENSES -35,217			

Sı

upplemental Information	
Return Reference	Explanation
Part XII, Line 2d - Other Adjustments	SPECIAL EVENTS EXPENSES 35,217 RENTAL EXPENSES 53,345

Sι

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493276005207 OMB No 1545-0047 SCHEDULE F Statement of Activities Outside the United States (Form 990) 2016 ► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. Open to Public ► Attach to Form 990. ► See separate instructions. Department of the Treasury Inspection ▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization **Employer identification number** THE LUZERNE FOUNDATION 23-2765498 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and 1 other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed) 3 (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is a (f) Total expenditures offices in the employees, agents, region (by type) (e q, program service, describe for and investments and independent fundraising, program specific type of in region region contractors in services, investments, grants service(s) in region to recipients located in the region region) (1) (2) (3) (4) (5) 3a Sub-total b Total from continuation sheets to Part I c Totals (add lines 3a and 3b)

(15) (16)

IV, line 1	.5, for any rec	cipient who received	more than \$5,000	. Part II can be dupl	icated if additional	space is needed.		
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1) See Add'l Data	а			'			1	
(2)		1		'			1	
(3)		1		'			1	
(4)				<u> </u>				
2 ⁵⁾ Enter total numb	per of recipient	t organizations listed a	above that are recor	nized as charities by	the foreign country,	, recognized as tax-		
(6) exempt by the II	S, or for whic	ch the grantee or cour		lection 501(c)(3) equi	ivalency letter	· · · · · · •		
(7)	<u>Jeroroulei oit</u>	Janizations or enduces	 	 • • • • • • • • • • • • • • • • • • •	 • • • • •	1	<u></u>	
· ·	 	 				 	Schedule	F (Form 990) 2016
(8)		1		'		Ţ	1	
(9)		1	,	'		1	1	
(10)		1		'		1	1	
(11)		1	'	'		1	ĺ	
(12)		1		'				
(13)		1	,	'		,	ĺ	
(14)		'		<u>'</u>		†		

(4) (5) (6)

(7) (8) (9)

(10) (11) (12) (13) (14) (15) (16)

(17) (18) Page **3**

Schedule F (Form 990) 2016

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III Part III can be duplicated if additional space is needed. (c) Number of (d) Amount of (e) Manner of cash (f) Amount of (h) Method of (a) Type of grant or assistance (b) Region (a) Description

(a) Type of grant of assistance	(D) Region	recipients	cash grant	disbursement	non-cash assistance	of non-cash assistance	valuation (book, FMV, appraisal, other)
(1)							
(2)	•						

			assistance	assistance	(book, FMV, appraisal, other)
(1)					
(2)					

(1)				
(2)				
(3)				

Sche	dule F (Form 990) 2016		Page 4
Par	t IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)		
	2.1.3.1. decidens for 1 5.1.1.5 GS2G and GS2G Try	☐ Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)		
	Corporations (see Instructions for Form 5471)	\square Yes	✓ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)		
	(see Instructions for Form 6003)	☐ Yes	✓ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form		
	5713)	∐ Yes	✓ No

Schedule F (F	orm 990) 2016 Page 5
	Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).
Return Reference	Explanation
Part I, Line 2	The Luzerne Foundation exercises a rigorous due diligence in its grantmaking from all of its diverse funds. The Foundation adheres to all state and federal regulations in its grantmaking and uses policies and best practices in compliance with the "National Standards" for community foundations as part of The Council on Foundations. Because of the generosity of its donors, The Luzerne Foundation, from time to time, makes grants to 501 (c)(3) public charities whose scope of programs and services extend beyond the borders of the United States and into foreign countries across the globe. As part of its due-diligence process, and to insure

compliance with the HR-4 and the Patriot Act, The Luzerne Foundation issues a grant agreement to each domestic entity to assure that the monies designated for specific countries are used solely for the purposes intended. Regular reporting on the use of the funding is provided by the grantee and monitored by The Luzerne Foundation so that we can assure compliance in our grant making efforts locally, regionally, nationally, and globally

Return Reference	Explanation
PART II,	ALL GRANTS LISTED ON SCHEDULE F, PART II, WERE PROVIDED BY THE LUZERNE FOUNDATION TO DOMESTIC ENTITIES EXEMPT UNDER 501(C)(3) STATUS THESE DOMESTIC ENTITIES THEN DIRECTLY PROVIDED THE GRANTS TO ENTITIES LOCATED OUTSIDE OF THE UNTIED STATES

Additional Data

Software ID: Software Version:

EIN: 23-2765498

Name: THE LUZERNE FOUNDATION

Form 990 Schedule F Part II - Grants or Entities Outside The United States

FULLI SEU SCII	orm 990 Schedule F Part 11 - Grants of Entitles Outside The Onited States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)	
		Africa	GENERAL SUPPORT FOR PROGRAMS AND LAND ACQUISITION	370,000	CHECK				
		the Pacific	GENERAL SUPPORT INCLUDING PROGRAMS AND "TEEN CHALLENGE"	143,400	CHECK				

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (a) Name of (d) Purpose of (e) Amount of section (c) Region (book, FMV, non-cash cash and EIN(If organization cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Central AmericalGeneral support 3,113,550 CHECK land the lıncludına Carıbbean orphanages, programs, lfarmına South Asia GENERAL 25,000 CHECK

PROGRAM ISUPPORT

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (a) Name of (d) Purpose of (e) Amount of section (c) Region (book, FMV. cash non-cash and EIN(If organization grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East **GENERAL** 97,000 CHECK land North ISUPPORT FOR Africa PROGRAMS AND SCHOOLS

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493276005207 OMB No 1545-0047 SCHEDULE G **Supplemental Information Regarding** (Form 990 or 990-EZ) **Fundraising or Gaming Activities** Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a Open to Public Department of the Treasury Attach to Form 990 or Form 990-EZ. Inspection Internal Revenue Service ▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www irs gov/form990. Name of the organization **Employer identification number** THE LUZERNE FOUNDATION 23-2765498 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations e Solicitation of non-government grants ☐ Internet and email solicitations Solicitation of government grants Phone solicitations ☐ Special fundraising events ☐ In-person solicitations

2a	Did the organization have or key employees listed in						∕es □ No
b	If "Yes," list the ten highes to be compensated at leas			fundraise	rs) pursuant to agreemen		
((i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrai custo cont contrib	Did ser have ody or rol of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			
1							
2							
3							
3							
4							
5							
,							
6							
7							
8							
9							
0							
ota	al			•			

licensing

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or

	than \$15,000 of fundraising egross receipts greater than \$5		gross income on Form	1 990-EZ, lines 1 and 6	5b. List events with
	<u></u>	(a)Event #1 Annual Mtg &	(b) Event #2 ANNUAL GOLF	(c)Other events	(d) Total events (add col (a) through
Revenue		Reception (event type)	TOURNAMENT (event type)	(total number)	col (c))
	1 Gross receipts	2,175	35,840		38,015
	2 Less Contributions	2,175	21,665		23,840
	3 Gross income (line 1 minus line 2)		14,175		14,175
	4 Cash prizes	195	8,470		8,665
Ş	5 Noncash prizes				
Expenses	6 Rent/facility costs	3,318	5,356		8,674
Щ Ф	7 Food and beverages	6,210	6,426		12,636
Direct	8 Entertainment				
ā	9 Other direct expenses	5,069	172		5,241
	10 Direct expense summary Add lines 4 to	, ,			35,216
Pai	11 Net income summary Subtract line 10 rt III Gaming. Complete if the orga	, , ,	es" on Form 990, Part I	V, line 19, or reported	-21,041 more than \$15,000
	on Form 990-EZ, line 6a.			•	
Reversie		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
	1 Gross revenue				
Expenses	2 Cash prizes				
	3 Noncash prizes				
Direct	4 Rent/facility costs				
<u> </u>	5 Other direct expenses				
		☐ Yes%	☐ Y es%	☐ Yes %	
	6 Volunteer labor	□ No	☐ No	□ No	
	7 Direct expense summary Add lines 2 to	hrough 5 ın column (d)		•	
	8 Net gaming income summary Subtract	line 7 from line 1, colum	n (d)	<u> ▶</u>	
9	Enter the state(s) in which the organization	on conducts gaming activ	ities		
a b	Is the organization licensed to conduct ga If "No," explain				Yes No
10a b	Were any of the organization's gaming lic	enses revoked, suspende	d or terminated during the	e tax year?	☐ Yes ☐ No
					l

Sche	dule G (Form 990 or 990-EZ) 2016					F	age				
11	Does the organization conduct gaming	j activities with nonmember	s?		☐Yes	□No					
12	Is the organization a grantor, benefici- formed to administer charitable gamin		a member of a partnership or other entity		□Yes	□No					
13	Indicate the percentage of gaming act	ivity conducted in									
а	The organization's facility			13a							
b	An outside facility			13b			(
14	Enter the name and address of the pe	rson who prepares the orga	nization's gaming/special events books and re	ecords							
	Name •										
	Address >										
15a	Does the organization have a contract revenue?	with a third party from who	om the organization receives gaming		□Yes	□No					
b			ganization ▶ \$ and th	ne							
	amount of gaming revenue retained b	y the third party $ hildsymbol{ ho}$ \$									
С	If "Yes," enter name and address of the third party										
	Name ▶										
	Address ►										
16	Gaming manager information										
	Name ►										
	Gaming manager compensation ► \$										
	Description of services provided										
	☐ Director/officer	☐ Employee	☐ Independent contractor								
17	Mandatory distributions										
а	,	te law to make charitable di	stributions from the gaming proceeds to		_						
_	retain the state gaming license?				☐ Yes	□ No					
b	·		uted to other exempt organizations or spent								
D.	in the organization's own exempt activ			- (···) -	and (). a	ad Dawt					
Pal		l5c, 16, and 17b, as app	tions required by Part I, line 2b, column licable. Also complete this part to provid								
	Return Reference		Explanation								
			<u>'</u>	ule G (F	orm 990 or	990-EZ)	201				

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493276005207 OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations,** (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization Employer identification number THE LUZERNE FOUNDATION 23-2765498 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and ✓ Yes □ No Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
See Additional Data Table									
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
2 Enter total number of sect3 Enter total number of other							173		
	Enter total number of other organizations listed in the line 1 table								

Additional Data

All Saints Church

17 North Cleveland Street McAdoo, PA 18237 Allied Services Foundation

100 Abington Executive Park Clarks Summit, PA 18411

Software ID: Software Version: **EIN:** 23-2765498

26-3064945

23-2523682

Name: THE LUZERNE FOUNDATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation	ı
organization		ıf applıcable	grant	cash	(book, FMV, appraisal,	ı
or government				assistance	other)	ı

501(C)(3)

501(C)(3)

or government		assistance	other)	

5,000

141,500

(g) Description of

non-cash assistance

(h) Purpose of grant

or assistance

Program Support

Program Support

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

Matching Gift Program

Support

Allone Charities 70 North Main Street	47-3715226	501(C)(3)	17,000		Collaborative Matching Gifts Program
WilkesBarre, PA 18711					

72,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Alpha Omega Relief Network

6547 N Academy Blvd No 632

Colorado Springs, CO 80918

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Film Series to Spanish

Alpha USA 13-3962840 501(C)(3) 25,000 2275 Half Day Road Bannockburn, IL 60015

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

57 North Franklin Street WilkesBarre, PA 18701

for Alpha International Alzheimer's Association 25-1510692 501(C)(3) 8,675 Program Support

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 54-1720006 501(C)(3) 75.000 Matching Gift Challenge America World Adoption

6723 Whittier Avenue McLean, VA 22101 American Bible Society 13-1623885 501(C)(3) 11.000 Bibles for Troops

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

101 N Independence Mall E Floor 8 Philadelphia, PA 191062155

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 24-0803079 501(C)(3) 5.100 American Red Cross-Wyoming Program Support Valley Chapter 256 North Sherman Street WilkesBarre, PA 187025316

25.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Art House North

781 Armstong Avenue Saint Paul, MN 55102

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance

Program Support-WNA

Asheville Christian Academy 56-1891323 501(C)(3) 12.000 74 Riverwood Road

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Awakening Foundation

1025 Front Street Ste 1 Conway, AK 72032

46-2611720

Program Support Swannanoa, NC 28778 250,000

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Bear Creek Camp 23-1726320 501(C)(3) 110.000 Cabin Renovations 3601 Bear Creek Boulevard Project/Matching Gift

WilkesBarre Twp, PA 18702 Bear Creek Township Volunteer 23-6295911 501(C)(4) 180,000 Program Hose Co

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Bear Creek, PA 18602

|Support/Equipment PO Box 156

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government other) assistance Bethany Christian Services 38-1405282 501(C)(3) 40.000 Hub Church Program Greater Delaware Valley Branch Office 7827 Old York Road Elkins Park, PA 190272508

20,000

Form 990. Schedule I. Part II. Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Biblical History Center

130 Gordon Commerical Drive LaGrange, GA 30240

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance

Bloomsburg Christian Church 107 Deussan Drive Bloomsburg, PA 17815	23-2155852	501(C)(3)	70,000		Rwanda Land Acquisition
Bloomsburg University of	23-2738930	501(C)(3)	7,750		Scholarships

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Pennsylvania

400 East Second Street Bloomsburg, PA 178151301

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Brandon's Forever Home 47-1066145 501(C)(3) 5.000 Program Support PO Box 1247 Conyngham, PA 18219

25,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Bridges of Peace International

6611 Hannah Rose Road Colorado Springs, CO 80923

Inc

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government other) assistance Calvary Chapel Fellowship of 59-3163220 501(C)(3) 50.000 Calvary Chapel Haiti Poverty ALLEVIATION Melbourne Inc 2955 Minton Road INITIATIVE

5,000

Form 990. Schedule I. Part II. Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

West Melbourne, FL 329046624 Camp AsthmaCadabra

WilkesBarre, PA 18703

PO Box 1536

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

Capacity/Building

Camp Orchard Hill Inc 640 Orange Road Dallas, PA 18612	23-2265574	501(C)(3)	36,500		Program Support
Canopy Life Academy	47-2207010	501(C)(3)	25,000		Teacher Training and

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PO Box 500942 Atlanta, GA 31150

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Care Net 54-1382723 501(C)(3) 100.000 Program Support 44180 Riverside Parkway Suite 200

CASAblanca Gala

Sponsorship

33.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Lansdowne, VA 20176
CASA of Luzerne County

667 North River Street

Plains, PA 18705

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 23-7227221 501(C)(3) 18.000 Catholic Youth Center of Program Support Wilkes-Barre

20.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

36 South Washington Street WilkesBarre, PA 187013026 Charity Water

40 Worth Street Suite 330 New York, NY 10013

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Children's Service Center of 24-0795404 501(C)(3) 7.235 Program Support Wyoming Valley Inc

Conference/Passion

Conference Match

335 South Franklin Street WilkesBarre, PA 187023897 74-2439414 501(C)(3) 450,000 Passion

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Choice Ministries Inc. P O Box 5

Roswell, GA 30077

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance at

Casa Materna Project

Christ Community Church 1215 Hillsboro Road Franklin, TN 37069	62-1296156	501(C)(3)	40,000		Counseling Center a Christ Community Church
					í

120,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Christ Weslevan Church

363 Stamm Road Milton, PA 17847

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance gram support

Nica Water Project

10,000

Christian Faith Ministries P O Box 50538 Denton, TX 76206	23-7424817	501(C)(3)	140,000		Progr
Benedity 177 7 0200					

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Christian Fellowship Church

21673 Beaumeade Circle Ashburn, VA 20147

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government other) assistance Christian Veterinary Mission 91-6012289 501(C)(3) 50.000 Program Support-Haiti CRISTA Ministries 19303 Fremont Avenue North

Seattle, WA 98133 City Life Church 46-4181393 501(C)(3) 8.000

Form 990. Schedule I. Part II. Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Philadelphia, PA 19147

Program Support for 770 South 13th Street 1st "Servolution" Floor

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 23-1653093 501(C)(3) 35.500 Commission on Economic Program Support Opportunity of Luzerne County 163 Amber Lane

195.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

WilkesBarre, PA 18702
Community Pregnancy Clinic

940 Fifth Avenue Naples, FL 34012

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 54-2035617 501(C)(3) 76.000 Congressional Coalition on Haiti 20/20 A ------ I -------- (CCAI) Trip/Program Support

Program Support-Haiti

Farming

90.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Adoption Institute (CCAI)
311 Massachusetts Avenue NE
Washington, DC 20002
Convov of Hope

Springfield, MO 65802

330 South Patterson Avenue

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Council on Foundations Inc. 13-6068327 501(C)(3) 11.300 Annual Membership PO Box 75661 Dues for Baltimore, MD 212755661

50,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

CURE International

701 Bosler Avenue Lemoyne, PA 17043

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 23-1915333 501(C)(3) 5.000 Danville Child Development Program Support

Center 398 Wall Street Danville, PA 17821

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1062 Laskin Road Number 21A Virginia Beach, VA 23451

Dayspring International Inc 51-0237239 501(C)(3) 25.000 Church Planting in India

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Diamond City Partnership Inc. 23-3094874 501(C)(3) 6.775 Program Support

Designated St Theresa

5340 WilkesBarre, PA 187105340	Two Public Square P O Box	. , ,	'		
WilkesBarre, PA 187105340	5340				
	WilkesBarre, PA 187105340				

6.865

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Diocese of Scranton

300 Wyoming Avenue Scranton, PA 18503

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 26-1270154 501(C)(3) 65.000 Disaster Accountability Project Matching Gift/Program C/O CULI 4402 Bestor Drive Support

25,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

ROCKVILLE, MD 20853

Downtown Hazleton Alliance for Progress
20 West Broad Street

Hazleton, PA 18201

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance ECHOcuba - Evangelical 65-0510432 501(C)(3) 215.000 Program Support Christian Humanitarian

Support

PO Box 546135 Miami, FL 33154					
Ethel Walker School	06-0689699	501(C)(3)	66,640		Constance

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

ce L Bell 230 Bushy Hill Road Library Simsbury, CT 06070 Renovations/Prog

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government assistance other) F M Kirby Center for the 22-2697004 501(C)(3) 16.450 Program Support Performing Arts 71 Public Square WilkesBarre, PA 187012577 Family Promise of Carbon 27-0763520 501(C)(3) 7.000 Program Support

County

167 South Third Street Lehighton, PA 18235

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 24-0795415 501(C)(3) 15.846 Family Service Association of Program Support Wyoming Valley

31 West Market Street WilkesBarre, PA 187011304 501(C)(3) 300,000 Program Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Far Reaching Ministries Inc 33-0776828 38615 Calistoga Drive Ste 100

Murrieta, CA 92563

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 23-6295765 501(C)(3) 5.100 Fine Arts Fiesta Inc. Program Support

P O Box 2053 WilkesBarre, PA 187032053

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Jacksonville, FL 32223

First Coast Women's Services 59-3200240 501(C)(3) 5,000 Program Support 11215 San Jose Blvd

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

Symphonic

Mastersingers

Food For the Poor Inc	59-2174510	501(C)(3)	120,000		Program support
6401 Lyons Road		, , , ,	· ·		
Coconut Creek, FL 33073					
Fort Myers Symphonic Chorus	65-1131571	501(C)(3)	5,000		Support-Fort Myers

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

6900 Daniels Parkway

Fort Myers, FL 33912

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Forward Edge International 91-1646598 501(C)(3) 120 000 Program Support

15121-A Ne 72 Ave Vancouver, WA 98686	71 10 (00)0	332(3)(3)	223,000		Trogram Support
Fractured Atlas Productions Inc 248 West 35th Street Suite	11-3451703	501(C)(3)	10,000		Drawn to Help

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1202

New York, NY 10001

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Friends of Haiti Providence 47-2184718 501(C)(3) 20,000 Solar Panel Project

Farations	05 2721505	E01(C)(3)	20,000		
University PO Box 64719 Rochester, NY 14624					

Phoenix, AZ 85082

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Year End Match Frontiers 95-3731505 501(C)(3) 30,000 PO Box 60670

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 26-0812968 501(C)(3) 72.800 2016-Program Support Geisinger Commonwealth Cabaal as Madiaina

525 Pine Street Scranton, PA 18509					
Geisinger Health System Foundation 100 North Academy Avenue	23-1995911	501(C)(3)	105,500		Support for Janet Weiss

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

MC 30-50 Danville, PA 17822

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Support-Red

Matching Gift/Program

Support

Dallas, TX 75374	Global Advance PO Box 742077 Dallas, TX 75374	75-2332727	501(C)(3)	50,000				Program S Zone
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145,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

God's World Publications Inc. 56-0538016

P O Box 20002

Asheville, NC 28802

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 95-4896863 501(C)(3) 1.200.000 Grace Community Church To Support Montreat 5182 US 70 West College

33,100

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Marion, NC 28752

Grace Episcopal Church

30 Butler Street Kingston, PA 18704

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government other) assistance Great Commission Resources 52-2438113 501(C)(3) 73,000 Buzbee/Open Heart Ministries

Community Program

Support

International 3441 Archer Ct Virginia Beach, VA 23452 Greater Hazleton Chamber of 24-0607160 501(C)(3) 33.910 Boy Scout Troop 790

Form 990. Schedule I. Part II. Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Commerce Citiscape

20 West Broad Street

Hazleton, PA 18201

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government assistance other) Greater Hazleton Philharmonic 23-7282088 501(C)(6) 9.720 Program Support Society 959 Lattimer Road Hazle Township, PA 18202 Greater Pike Community 45-4672905 501(C)(3) 5.963 Program support

Form 990. Schedule I. Part II. Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Foundation PO Box 992 Milford, PA 18337

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Haiti Teen Challenge 37-1578706 501(C)(3) 150.000 Haiti Operations

120,000

Haiti Teen Challenge 37-1578706 501(C)(3) 150,000 Hait 1619 Portland Avenue South Minneapolis, MN 55404

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Hands and Feet Project

PO Box 682105 Franklin, TN 37068

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Heaven's Family 16-1739329 501(C)(3) 30.000 Designated for Syrian P O Box 12854 Refugees

5,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Pittsburgh, PA 152412542
Helping Hands Society

301 Rocky Road Hazleton, PA 18201

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 47-2111865 501(C)(3) 5.600 Scholarship Fund Holy Family Academy 601 North Laurel Street

Matching Gift Challenge

- Support of Haiti

200,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Hazleton, PA 18201

Hope International
227 Granite Hill Drive Suite

Lancaster, PA 17601

250

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Hope Outreach International 20-8403144 501(C)(3) 200.000 Scholarships/Land Acquisition

15.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PO Box 29 Oneco, FL 34264		
Hopeland 575 Madison Avenue 24th Floor	47-1203150	501(C)(3)

New York, NY 10022

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

Saint Gabriel House -

Restoration and

Renovation

30,000

House of His Creation	23-1910987	501(C)(3)	200,000		In Support of Property
541 West 28th Division Hwy					Acquisition
Lititz, PA 17543					

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Housing Development Corp

WilkesBarre, PA 187026545

163 Amber Lane

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

Hunts for Healing Inc	27-2034894	501(C)(3)	50,000		Program Support
3 Coburn Hill Road					
Laceyville, PA 18623					
					(

Impact Foundation 20-0520386 501(C)(3) 153,000 Program Support for PO Box 25277 Fund o 5050

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Overland Park, KS 662255277

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Keystone Rescue Mission 34-2042921 E01/C1/31 70 000 Matching Gift/Program

Ginea

Alliance 8 W Olive St Scranton, PA 18508	34 2042321	301(0)(3)	70,000		Support
Kids for the Kingdom Inc	68-0421846	501(C)(3)	25,000		Designated for Nueva

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PO Box 85

Graton, CA 95444

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

To Support Workshops

for Children With Down

Syndrome

Kıng's College	24-0804602	501(C)(3)	40,000		2016 Annual Support
133 North River Street					
WilkesBarre, PA 18711					

5,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

KISS Theatre Company

WilkesBarre, PA 18702

400 East End Centre

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 26-3196544 501(C)(3) 504.000 KORE Foundation Inc. Program support 695 Nashville Pike 101

 Gallatin, TN 37066
 Library for All 164 West 25th Street 10th Floor
 90-0888570
 501(C)(3)
 145,000
 Haiti Digital Library

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

New York, NY 10001

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

Program

|Support/Hurricane Relief

Lifechurch PO Box 1996 Allentown, PA 181051996	22-3110904	501(C)(3)	300,000		Designated for Playgrounds

595,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

59-2672303

Love a Child Inc

Fort Myers, FL 33913

12411 Commerce Lakes Drive

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Love Link Inc 75-2556797 501(C)(3) 30,000 Orphan Care in El r-Support Need

7654 Cypress Court North Richland Hills, TX 761322053					Greatest Need
Luzerne County Community College Association of Higher	23-2268047	501(C)(3)	6,750		Sponsorships

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Education 1333 South Prospect Street

Nanticoke, PA 186343899

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government assistance other) Luzerne County Historical 24-0811758 501(C)(3) 28.198 Program support Society 27-2810691 501(C)(3) 30,000 Program Support

49 South Franklin Street WilkesBarre, PA 18701 Mack Avenue Communtiv Church

PO Box 15692 Detroit, MI 48215

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

Scholarships

Marian Catholic 166 Marian Ave	23-3046452	501(C)(3)	15,500		Program Support
Tamaqua, PA 18252					

7.280

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Marvwood University

2300 Adams Avenue Scranton, PA 185091598

Form 990. Schedule I. Part II. Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government other) assistance Maternal & Family Health 23-1856766 501(C)(3) 6.100 Program Support Services Inc 15 Public Square Suite 600 WilkesBarre, PA 187011700 Vehicle Purchase

Mercy Smiles International 77-0588337 501(C)(3) 5.000 Outreach

21019 Gliddens Road Waverly, MO 64096

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 26-3493804 501(C)(3) 8.650 Program - Service Dog

 Merlin's Kids Inc
 26-3493804
 501(C)(3)
 8,650
 Program - Service Do Training for Autistic Children

 Miles for Michael
 23-2765498
 501(C)(3)
 29,900
 Miles for Michael

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

140 Main Street 2nd Floor

Luzerne, PA 18709

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance ram

Misericordia University	24-0795406	501(C)(3)	139,550		Progra
301 Lake Street					Suppo
Dallas, PA 186121090					

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

154 Centre Street Freeland, PA 182240089

ort/Scholarships MMI Preparatory School 24-0795967 501(C)(3) 29,935 PROgram Support

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Models for Christ 13-3320422 501(C)(3) 5.000 Michael Smith Project PO Box 3080

New York, NY 10163

Monadnock Bible Conference 02-0268537 501(C)(3) 81,000
Center 257 Dublin Road PO Box 70

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Jaffrey, NH 03452

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government other) assistance Mt Gilead Camp and 23-1673125 501(C)(3) 63.000 Camp Scholarships and Conference Center Maintenance

Conservancy

Conference Center
440 Rinker Road
Stroudsburg, PA 18360

National Christian Foundation 58-1493949 501(C)(3) 175,000

Finding God
Project/American

Form 990. Schedule I. Part II. Grants and Other Assistance to Domestic Organizations and Domestic Governments.

500

Alpharetta, GA 30009

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government assistance other) National Vaccine Information 54-1951769 501(C)(3) 70,000 Program Support Center 21525 Ridgetop Circle Suite 100

31,800

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Sterling, VA 20166
NEPA Philharmonic

PO Box 4525 Scranton, PA 18505

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance n Support

Designated for Camp

Victory

NEPA Rainbow Alliance PO Box 1032 Pittston, PA 18640	27-3965572	501(C)(3)	6,000		Program

5,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Nicholas Wolff Foundation Inc.

PO Box 810

Millville, PA 17846

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance North Branch Land Trust 23-7755642 501(C)(3) 71.035 Annual Appeal/Program 251 Huntsville-Idetown Road Support

7,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Dallas, PA 18612

Northeast Regional Cancer
Institute

334 Jefferson Avenue Scranton, PA 18510

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government other) assistance Northmoreland Township 23-2204025 501(C)(3) 11.000 Building Fund/Program Volunteer Fire Company Support 1618 Demunds Road Dallas, PA 18612 OC International (dba One 94-1501634 501(C)(3) 25.000 Program Code Acade

Form 990. Schedule I. Part II. Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Challenge) PO Box 36900

Colorado Springs, CO 80918

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 87-0643214 501(C)(3) 100.000 Pure Creative Arts Operation Kids Foundation

Designated for the

Haiti

Midwifery Program in

50.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

193 East Fort Union Bivd St
100
Midvale, UT 84047
Partners in Development

55 Market Street Suite 201

Ipswich, MA 01938

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 24-6000376 501(C)(3) 7.200 Penn State Wilkes-Barre l Annual Campaign/Scholarships

Old Route 115 PO Box PSU Lehman, PA 18627 Permanent Endowment for 04-2774790 501(C)(3) 10,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

II/M/O RUSTY FLACK -Martha's Vinevard TO BENEFIT ST PO Box 1182 ANDREW'S CHURCH Oak Bluffs, MA 02557

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance ram Support

Providing Hope Ministries PO Box 2103 Kingston, PA 18704	23-2070710	501(C)(3)	30,000		Program Support
	27 5424044	F04/C\/2\	F7.000		D 6 1
Psalms 823 Ministries	27-5121814	501(C)(3)	57,000		Program Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

148 Edinburgh Road San Angelo, TX 76901

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 27-4281672 501(C)(3) 100.000 REACH Pregnancy Center of Program Support Northern NY PO Box 126 Potsdam, NY 13676

Program Support

100,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

27-2403572

Rebuild Globally

106 East Church Street Orlando, FL 32801

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Rescue Freedom International 16-1773392 501(C)(3) 750,000 Program Support PO Box 77

Haiti Relief/Program

Support

821,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Kırkland, WA 98083

11160 Kenwood Road

Cincinnati, OH 45242

Restavek Freedom Foundation

20-8334578

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Rock Solid Academy 27-2392471 501(C)(3) 100.000 Program Support 106 South Lehigh Street

PROGRAM SUPPORT

| South Lenigh Street | Shavertown, PA | 18708 | Shavertown, PA | 18708 | S

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Danville, PA 17821

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 59-1060466 501(C)(3) 50.000 Sanibel Community Center Renovations to the 2173 Periwinkle Way Community House Sanibel, FL 33951

Program Support

70,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Sanibel-Captiva Conservation

3333 Sanibel-Captiva Road Sanibel, FL 33957

Foundation

59-1205087

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Santa Parade Inc 46-1541146 501(C)(3) 6.500 Annual Parade PO Box 4376 Sponsorship Scranton, PA 18505

Dominican Republic Sewer Project

180,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Santiago Christian School

1016 Scenic View Drive Schwenksville, PA 19473

Foundation

36-4385849

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance SAT 7 23-2964829 501(C)(3) 25.000 Educational PO Box 2770 Programming in the

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Colorado Springs, CO 80918

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 32-0011220 501(C)(3) 200.000 Shaohannah's Hope Inc Adoption Assistance 230 Franklin Road 11JJ PO Box

230 Franklin Road 11JJ PO Box 647
Franklin, TN 37065

Skidmore College 14-1338562 501(C)(3) 10,000 Program Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

815 N Broadway

Saratoga Springs, NY 12866

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 23-1666202 501(C)(3) 5.100 St John the Baptist Roman Program Support Catholic Church 126 Nesbitt Street

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Larksville, PA 18651

St Joseph's Center Foundation 23-2286365 501(C)(3) 6.610 Program Support 2010 Adams Avenue Scranton, PA 185091599

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government other) assistance St Paul's Lutheran Church 41-1568278 501(C)(3) 5.000 Program Support in

Form 990. Schedule I. Part II. Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Hall 3rd Floor

Selinsgrove, PA 178701164

474 Yalick Road
Dallas, PA 18612

Susquehanna University
514 University Avenue
Selinsgove

Dallas, PA 18612

Susquehanna University Avenue
Selinsgove

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government other) assistance TAPS (Tragedy Assistance 92-0152268 501(C)(3) 15.000 Program Support

Program for Survivors) 3033 Wilson Blvd Suite 630 Arlington, VA 22201 Teach for Haiti co United 20-4286082 501(C)(3) 20,000 Anseve Pou Aviti Charitable Programs

Form 990. Schedule I. Part II. Grants and Other Assistance to Domestic Organizations and Domestic Governments.

8201 Greensboro Drive Tysons Corner, VA 221023818

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (f) Method of valuation (a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government assistance other) Teen Challenge - United to 20-3459311 501(C)(3) 50.000 Program Support Rescue 11095 Molly Lane Neosho, MO 64850 The 410 Bridge co Canopy Life 20-5534140 501(C)(3) 37.578 Matching Gift

Academy

PO Box 500942 Atlanta, GA 31150

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance The Gathering 75-2726170 501(C)(3) 25.000 Program Support

6125 Paluxy Drive Tyler, TX 75703		(-)(-)			
The General Council of the Assemblies of God	44-0577787	501(C)(3)	50,000		Gaza Lighthouse School

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1445 North Boonville Avenue Springfield, MO 658021894

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance The Jewish Community Alliance 24-0795437 501(C)(3) 5,655 Program Support

Program Support

60 South River Street WilkesBarre, PA 187022405				
The Orphan Institute 6723 Whittier Avenue Suite 401	26-4339070	501(C)(3)	30,500	

McLean, VA 22101

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance The Osterhout Free Library 24-0795971 501(C)(3) 65.139 Program Support 71 South Franklin Street WilkesBarre, PA 187011287 24-6000376 501(C)(3) 20.513 Scholarships

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

The Pennsylvania State University Office of the Bursar 103 Shields Building

University Park, PA 16802

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance The Porch Light 59-0657326 501(C)(3) 20,000 To Support One Girl at The Porch Light Safe

Home for a Year

Program Support

The Porch Light 59-065/326 501(C)(3) 20,000 PO Box 8190 Lakeland, FL 33802

The Rabbit Room Inc 47-5081441 501(C)(3) 20,000

940 Davidson Drive Nashville, TN 372051011

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Form 990. Schedule I. Part II. Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government other) assistance The Veritas Forum Inc. 20-5616941 501(C)(3) 65.000 Resource Distribution One Broadway 14th Floor Project Cambridge, MA 021421187 27-4345913 501(C)(3) 2.039.000 Program support 2220 County Road 210 West

Tim Tebow Foundation Suite 108 PMB 317

Jacksonville, FL 32259

Form 990. Schedule I. Part II. Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government assistance other) Touch Ministries Inc. 30-0600735 501(C)(3) 7.000 PURCHASE NEW PO Box 386 IGENERATOR 23-2664557 501(C)(3) 7,000 Program Support

New Martinsville, WV 26155 Unitarian Universalist Congregation of Wyoming Valley PO Box 2608

WilkesBarre, PA 187032608

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government other) assistance United Way of Wyoming Valley 24-0831490 501(C)(3) 89.935 Program Support 100 North Pennsylvania Avenue 2nd Floor

Scholarships

17,500

Form 990. Schedule I. Part II. Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

25-0965591

WilkesBarre, PA 18701

University of Pittsburgh

4200 Fifth Avenue Pittsburgh, PA 15260

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Valley With a Heart 23-2765498 501(C)(3) 16.660 | Vallev With a Heart 140 Main Street 2nd Floor Benefits

Program Support

30,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Luuzerne, PA 18709

PO Box 106 Latham, NY 12110

Vascular Birthmark Foundation

16-1515227

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Visiting Orphans 20-3179796 501(C)(3) 6.394 Program Support PO Box 100284

Library Building Project/Program

Support

PO Box 100284
Nashville, TN 37224

Weatherly Area Community
Library
PO Box 141

Weatherly, PA 18255

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 26-3899171 501(C)(3) 10.000 Wedawood Circle Institute Program Support 5272 Lyngate Court

Burke, VA 22015

Westmoreland Club Charitable 47-3233704 501(C)(3) 13,000
Foundation
59 S Franklin Street

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

WilkesBarre, PA 18701

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance e and Greenhouse

Support

Widows Garden 15960 DOCKEN DRIVE MILACA, MN 56363	33-0498900	501(C)(3)	102,000		Dome and Greenhouse Project
Wilkes University	24-0795506	501(C)(3)	53,875		Scholarships/Program

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

84 West South Street

WilkesBarre, PA 187660999

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance for

Campaign/Program

Support

World Concern 19303 Fremont Avenue N Seattle, WA 981333800	91-6012289	501(C)(3)	25,000		1	Program Support fo World Concern
Wyoming Seminary	24-0795509	501(C)(3)	266,694			Annual

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

201 North Sprague Avenue

Kingston, PA 18704

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government assistance other) Wyoming Valley Children's 24-0795510 501(C)(3) 12.600 Program support Association 1133 Wyomina Avenue Forty Fort, PA 18704 Wyoming West Wyoming Little 23-2669768 501(C)(3) 7.000 Program Support

League

117 Washington Avenue West Wyoming, PA 18644

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 24-0795638 501(C)(3) 69.425 YMCA of Wilkes-Barre Inc. Program 40 West Northampton Street Support/Annual WilkesBarre, PA 187011774 Campaign

Program Support

158,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

84-0385934

Young Life

420 North Cascade Avenue Colorado Springs, CO 80903

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ► Attach to Form 990.

OMB No 1545-0047

DLN: 93493276005207

Employer identification number

2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule J (Form 990)

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

THE LUZERNE FOUNDATION 23-2765498 **Questions Regarding Compensation** Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization a Receive a severance payment or change-of-control payment? **4**a Νo 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan? Νo Participate in, or receive payment from, an equity-based compensation arrangement? 4c Νo If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? **5**a Νo 5b Any related organization? Νo If "Yes," on line 5a or 5b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? 6a Νo 6b Any related organization? Νo If "Yes," on line 6a or 6b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 67 If "Yes," describe in Part III 7 Yes Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8 Νo If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

Page 2

Schedule J (Form 990) 2015

(A) Name and Title	(B) Breakdown o	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
	Base (ı) compensation	(II) Bonus & Incentive compensation	(III) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred on prior Form 990

3.975

21.073

157.548

7.500

Schedule J (Form 990) 2015

125.000

1 Charles M Barber

President and CEO

Part III Supplemental Information				
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information				
Return Reference	Explanation			
Part I, Line 7	The Luzerne Foundation's Executive Committee, led by the TLF Chairman of the Board, conducts an annual review of the President & CEO The process is			

Page 3

Schedule J (Form 990) 2015

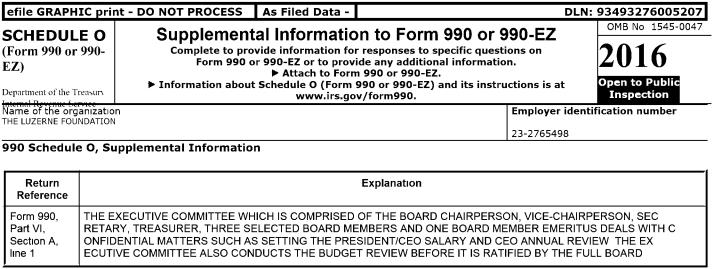
Schedule J (Form 990) 2015

Part I, Line 7

The Luzerne Foundation's Executive Committee, led by the TLF Chairman of the Board, conducts an annual review of the President & CEO The process is initiated by the President and CEO who provides a month-by-month overview of his/her accomplishments throughout the year which are then evaluated against the objectives in our strategic plan. The Executive Committee uses the following performance metrics. Goals, Programming, Leadership, Vision, Staff Retention, Overall Management and Development. Additional resources include the Grantmaker and Salary and Benefits report provided by the Council on Foundation in Washington DC. The results of the Committee's evaluation are compiled and group discussion ensues to determine the bonus amount.

efil	e GRAPHIC pr	int - DO NOT PR	OCESS	As Filed Data -		DLN	9349327	6005	207
	IEDULE M			loncash Contri	hutions		OMB No 1	.545-0	047
(For	m 990)		17	ioncasii Contii	Dutions		20	1 (-
	▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.							16)
		► Attach to Form							
	tment of the Treasurv al Revenue Service	▶Information abo	out Schedu	le M (Form 990) and its i	nstructions is at <u>www.irs</u>		Inspe	ection	
	e of the organizat .UZERNE FOUNDATIO					Employer iden	tification n	umber	•
						23-2765498			
Pa	rt I Types	of Property				_			
			(a) Check ıf applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line		(d) d of determin ontribution a		s
1	Art—Works of art	.			1g				
2	Art—Historical tr								
3	Art—Fractional in	nterests							
4	Books and public	ations							
5	Clothing and hou								
e	-	objetos							
6 7	Cars and other v Boats and planes								
8	Intellectual prope								
9	Securities—Public	,	X	5	229.115	QUOTED MARK	ET PRICE		
	Securities—Close	•				1			
11	Securities—Partr	nership, LLC,							
	or trust interest								
	Securities—Misce								
13	Qualified conserv contribution—Hi structures	storic							
14	Qualified conserv								
	contribution—Of								
	Real estate—Res					+			
17	Real estate—Cor								
18	Collectibles .								
19	Food inventory								
20	Drugs and medic								
21	Taxidermy .								
22	Historical artifact	ts							
23	Scientific specim								
24	Archeological art								
25	Other ► (,							
26 27	Other ► (
28	Other • (
	,	•	he organiza	tion during the tax year for	contributions				
-				B, Part IV, Donee Acknowled		29			
								Yes	No
30a	During the year	, dıd the organızatıo	n receive by	contribution any property i	reported in Part I, lines 1 th	rough 28, that			
	ıt must hold for	at least three years	from the da	ate of the initial contribution	, and which is not required	to be used			
	for exempt purp	oses for the entire h	nolding perio	od?			. зоа	•	No
b	If "Yes," describ	e the arrangement i	n Part II						
31	•	_		olicy that requires the review	v of any non-standard conti	nhutions?	31	Yes	
	_	_		•	•		31	163	
	contributions?		rd parties o	or related organizations to s	olicit, process, or sell nonca	sn • • •	32a	Yes	
	If "Yes," describ		ame	column (s) for a time of	norty for which actions ()	na abaaliad			
33	describe in Part		amount in	column (c) for a type of pro	perty for which column (a)	іѕ спескеа,			
P		II on Act Notice see the	Inchrection	or for Form 000	Cat. No. 512271	Cal. a	dule M (Form	0001	2016

Schedule M (Form 990) (2016)	Page 2				
Part II Supplemental Info	ormation.				
Provide the informat	non required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part				
I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.					
Return Reference	Explanation				
Part I, Column (b)	The amounts reported in column b, LINE 9, represent the number of contributors				
	The organization uses investment managers to sell the publicly traded securities that are donated to the foundation				
	Schedule M (Form 990) (2016)				



Return Explanation
Reference

Form 990,
Part VI,
Section A,
line 2

MICHAEL WEAVER, WHO IS A CURRENT BOARD MEMBER, IS THE STEP-SON OF BOARD EMERITUS, FRANK BE
VEVINO AS EMERITUS, FRANK DOES NOT HAVE VOTING PRIVILEGES

Return Explanation Reference

Charles Barber, PResident & CEO. Bob Korieski, CFO, AND the EXECUTIVE COMMITTEE review the f l Form 990. Part VI. ull Form 990 in its entirety prior to filing A PUBLIC INSPECTION COPY IS PROVIDED TO THE Section B. FULL BOARD OF DIRECTORS FOR REVIEW PRIOR TO THE FILING

line 11b

Return Reference	Explanation
Form 990, Part VI, Section B, Iine 12c	Annually, The Luzerne Foundation distributes conflict of interest forms to the Board of Di rectors so that the information held on file is current. Each director, principal officer and member of a committee with board-delegated powers is required to sign a statement which affirms that they have received a copy of the conflict of interest policy, have read and understands the policy, have agreed to comply with the policy, understands the duty of each officer or director to maintain and preserve the confidentiality of board and committee discussions and protect privacy at all times, and understands that the corporation is a charitable organization and that to maintain its tax-exempt status it must engage primarly in activities that accomplish one or more of its tax-exempt purposes. These forms are reviewed by the Audit and Governance Committees. Any conflict of interest that is identified its reviewed at the board of directors meeting on a case by case basis and is documented in the Board Meeting Minutes.

Return Reference	Explanation
Form 990, Part VI, Section B, line 15	Annual compensation reviews are conducted by the President & CEO, Director of Operations a nd Administrative Support Staff. IN ADDITION, The President & CEO, and the Director of Operations ARE ALSO reviewed ANNUALLY. As a matter of practice, the Foundation's Executive Committee sets the President's salary and benefits. The President and CEO then set the support staff's salary and benefits. In advance of the President and CEO review, the executive committee receives a comprehensive CEO review form that surveys seven key areas of performance. Board Relations, Staff planning and oversight, public relations and foundation development, grants management, fiscal management, personal characteristics and institutional vision. Each executive committee member rates the candidate on a scale of consistently excellent to below expectations, and is encouraged to provide additional feedback in the comments section of the review form. In addition, general observation questions are posed to sollicit feedback and proposed new ideas for the future. The information obtained on the forms is compiled and discussed among the Executive Committee members, and is documented in the minutes. Once a collective decision is reached by the Executive Committee, the chairman of the executive committee reports and discusses the outcome with the president and CEO. To assist in the determination of the CEO compensation package, additional materials and han douts are provided through the Council on Foundations, (a resource for community foundations and philanthropic entities.) These handouts include comparable salaries for other community foundations.

Return Explanation

Form 990,
Part VI,
Section C,
Iline 19

Governing documents, conflict of interest policy, and audited financial statements are ava
Ilable to the public upon request, in addition, a statement of financial position is made
available in the annual "Community Guide" of the Foundation The 990 is available to the public on the FOUNDATION'S website or upon request

Return Reference	Explanation
DISCLOSURE REGARDING FEES PAID TO THE CHIEF FINANCIAL OFFICER	ROBERT KORJESKI, CPA IS THE CHIEF FINANCIAL OFFICER OF THE ORGANIZATION HE DOES NOT HAVE BOARD VOTING PRIVILEGES FOR FORM 990 REPORTING PURPOSES, HE HAS BEEN IDENTIFIED AS AN OFF ICER ON PART VII OF THIS FORM 990 FEES FOR SERVICES PROVIDED BY MR KORJESKI FROM THE LUZ ERNE FOUNDATION ARE PAID TO A CORPORATION OF WHICH MR KORJESKI IS THE 100% STOCKHOLDER FEES PAID FOR THESE SERVICES WERE \$6,000 FOR THE 2016 YEAR

990 Schedule O, Supplemental Information Return Explanation Reference

Form 990,
Part XI, line

CHANGE IN VALUE OF REMAINDER TRUST 82,265

Return Explanation
Reference

Form 990
Part XII Line
There were No changes from prior year for the oversight process or selection process from the prior year

efile GRAPHIC print - De	O NOT PROCESS As Filed Data -										DLN: 93493	276005	207		
SCHEDULE R	Related ()raani	zatione a	nd Hn	rolato	d Dartn	archin	<u> </u>			OMB No	1545-004	17		
(Form 990)		_					-		27		2016				
` ,	 Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990. ► Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. 														
Department of the Treasury Internal Revenue Service	Attach to Form 990.	rmation ai	out Scheau	e K (FOFM	990) and	its instruct	ions is at	www.ir	s.gov/torm9	<u>90</u> .	Open to Public Inspection				
Name of the organization THE LUZERNE FOUNDATION								Emp	loyer identifi	cation	number				
THE EUZEKNE FOUNDATION								23-2	765498						
Part I Identification	n of Disregarded Entities Complete If	the organ	ızatıon answ	ered "Yes	" on Form	990, Part	IV, line 3	3.							
(a) Name, address, and EIN (if applicable) of disregarded entity		(a) (s, and EIN (if applicable) of disregarded entity Primar				ome	(e) me End-of-year assets		(f) Direct controll entity						
	of Related Tax-Exempt Organization mpt organizations during the tax year.	ns Comple	te if the org	anızatıon	answered	"Yes" on F	orm 990,	Part IV	, line 34 bed	ause i	it had one or	more			
Name, address, ar	(a) Name, address, and EIN of related organization		(b) ary activity	Legal dom	c) nicile (state n country)	(d) Exempt Cod		Public cl	(e) narity status n 501(c)(3))	Dire	(f) ect controlling entity	Section (13) coi enti	512(b) trolled		
						-						Yes	No		
						1									
For Panerwork Reduction A	ct Notice, see the Instructions for Form 9	990		Ca	t No 5013	1 35Y				Sche	dule R (Form	990) 20	16		

one or more related organizations treated as a partnership dutation (a) Name, address, and EIN of related organization			(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	Predomin income(reli unrelate excluded f tax und sections 5	ated, total incor d, rom er	Share of end-of-year assets	(H Disprop alloca	rtionate	(i) Code V- amount ir 20 of Schedule (Form 10	n box f e K-1	(j) Genera managi partne	ing ow	(k) centa nersh
					3117			Yes	No			Yes I	No	
												+		
		-												
IV Identification of Related Org							swered "Yes	" on Fo	orm 99	90, Part	: IV, I	ıne 3	4	
IV Identification of Related Org because it had one or more rela (a) Name, address, and EIN of related organization		do (state	(c) Legal omicile or foreign	st during th			swered "Yes (f) Share of total income	Share	(g) of end- year assets	-of- F	(h) Percent	age	Section (13)	contr
because it had one or more rela (a) Name, address, and EIN of related organization	ated organizations treated as	do (state	on or trus (c) Legal omicile	st during th	(d) t controlling	(e) Type of entity (C corp, S corp,	(f) Share of total	Share	(g) of end- year	-of- F	(h) Percent	age	Section (13)	on 51 contr ntity
because it had one or more rela (a) Name, address, and EIN of related organization	ated organizations treated as (b) Primary activity	do (state	on or trus (c) Legal omicile e or foreign ountry)	st during th	(d) t controlling	(e) Type of entity (C corp, S corp,	(f) Share of total	Share	(g) of end- year	-of- F	(h) Percent	age	Section (13) of er	on 5: contr ntity
because it had one or more rela (a) Name, address, and EIN of related organization	ated organizations treated as (b) Primary activity	do (state	on or trus (c) Legal omicile e or foreign ountry)	st during th	(d) t controlling	(e) Type of entity (C corp, S corp,	(f) Share of total	Share	(g) of end- year	-of- F	(h) Percent	age	Section (13) of er	on 51 contr ntity
because it had one or more rela (a) Name, address, and EIN of related organization	ated organizations treated as (b) Primary activity	do (state	on or trus (c) Legal omicile e or foreign ountry)	st during th	(d) t controlling	(e) Type of entity (C corp, S corp,	(f) Share of total	Share	(g) of end- year	-of- F	(h) Percent	age	Section (13) of er	on 51 contr ntity
because it had one or more rela (a) Name, address, and EIN of related organization	ated organizations treated as (b) Primary activity	do (state	on or trus (c) Legal omicile e or foreign ountry)	st during th	(d) t controlling	(e) Type of entity (C corp, S corp,	(f) Share of total	Share	(g) of end- year	-of- F	(h) Percent	age	Section (13) of er	on 51 contr ntity
because it had one or more rela (a) Name, address, and EIN of	ated organizations treated as (b) Primary activity	do (state	on or trus (c) Legal omicile e or foreign ountry)	st during th	(d) t controlling	(e) Type of entity (C corp, S corp,	(f) Share of total	Share	(g) of end- year	-of- F	(h) Percent	age	Section (13) of er	on 51 contr ntity?
because it had one or more rela (a) Name, address, and EIN of related organization	ated organizations treated as (b) Primary activity	do (state	on or trus (c) Legal omicile e or foreign ountry)	st during th	(d) t controlling	(e) Type of entity (C corp, S corp,	(f) Share of total	Share	(g) of end- year	-of- F	(h) Percent	age	Section (13) of er	on 51 contr ntity?
because it had one or more rela (a) Name, address, and EIN of related organization	ated organizations treated as (b) Primary activity	do (state	on or trus (c) Legal omicile e or foreign ountry)	st during th	(d) t controlling	(e) Type of entity (C corp, S corp,	(f) Share of total	Share	(g) of end- year	-of- F	(h) Percent	age	Section (13) of er	on 51 contro ntity?
because it had one or more rela (a) Name, address, and EIN of related organization	ated organizations treated as (b) Primary activity	do (state	on or trus (c) Legal omicile e or foreign ountry)	st during th	(d) t controlling	(e) Type of entity (C corp, S corp,	(f) Share of total	Share	(g) of end- year	-of- F	(h) Percent	age	Section (13) of er	on 51 contr ntity?

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to related organization(s)	1b		No
c Gift, grant, or capital contribution from related organization(s)	1c		No
d Loans or loan guarantees to or for related organization(s)	1d		No
e Loans or loan guarantees by related organization(s)	1e		No
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	1 g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1 i		No

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1n

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1q

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(d)

Method of determining amount involved

No

No

No

No

No No

е	Loans or loan guarantees by related organization(s)	1e	No
f	Dividends from related organization(s)	1f	No
g	Sale of assets to related organization(s)	1 g	No
h	Purchase of assets from related organization(s)	1h	No
i	Exchange of assets with related organization(s)	1i	No
j	Lease of facilities, equipment, or other assets to related organization(s)	1j	No

f Dividends from related organization(s)	1f	No
g Sale of assets to related organization(s)	ig	No
h Purchase of assets from related organization(s)	۱h	No
i Exchange of assets with related organization(s)	1i	No
j Lease of facilities, equipment, or other assets to related organization(s)	1j	No
k Lease of facilities, equipment, or other assets from related organization(s)	í k	No
l Performance of services or membership or fundraising solicitations for related organization(s)	11	No
m Performance of services or membership or fundraising solicitations by related organization(s)	<u>Im</u>	No

(b)

Transaction

type (a-s)

(c)

Amount involved

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . .

(a)

Name of related organization

Reimbursement paid to related organization(s) for expenses . . .

Reimbursement paid by related organization(s) for expenses . . .

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

-																
(a) Name, address, and EIN of entity	(b) Primary activity		(d) Predominant Income		domicile income (state or (related, foreign unrelated,		(e) re all partners section 501(c)(3) rganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership	
l			514)	Yes	No	ļ i	ļ į	Yes	No		Yes	No				
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										Schedul	e R (Form	1 990	0) 2016			

