Form 990-PF

Return of Private Foundation

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

2017

OMB No 1545-0052

Open to Public Inspection

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990PF for instructions and the latest information.

For calendar year 2017 or tax year beginning , 2017, and ending Name of foundation A Employer identification number Simkiss Family Foundation 25-6837939 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) Sharon Merhige, Trustee, 656 Golf Club Road 215-569-5721 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here ▶ Newtown Square, PA 19073 G Check all that apply: ☐ Initial return ☐ Initial return of a former public charity D 1. Foreign organizations, check here □\ Final return ☐ Amended return 2. Foreign organizations meeting the 85% test. Address change ☐ Name change check here and attach computation E If private foundation status was terminated under H Check type of organization: √ ✓ Section 501(c)(3) exempt private foundation section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Fair market value of all assets at J Accounting method: ✓ Cash ☐ Accrual F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here Other (specify) end of year (from Part II, col. (c), line 16) ► \$ (Part I, column (d) must be on cash basis) 619,309 Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for charitable amounts in columns (b), (c), and (d) may not necessarily equal expenses per books income purposes the amounts in column (a) (see instructions)) (cash basis only) Contributions, gifts, grants, etc , received (attach schedule) 100,000 2 Check ► ☐ if the foundation is not required to attach Sch B 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities . . b Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) 7 Net short-term capital gain . Income modifications Gross sales less returns and allowances 10a Less: Cost of goods sold . . . Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) . 12 Total. Add lines 1 through 11 . 13 Compensation of officers, directors, trustees, etc. Expenses 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) 2,255 2,255 Accounting fees (attach schedule) h Operating and Administrative Other professional fees (attach schedule) С 17 18 Taxes (attach schedule) (see instructions) . 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings . 22 Printing and publications 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. Add lines 13 through 23 2,292 2,255 Contributions, gifts, grants paid 25 24,200 24,200 Total expenses and disbursements. Add lines 24 and 25 26 26,492 26,455 Subtract line 26 from line 12. Excess of revenue over expenses and disbursements 73,508 Net investment income (if negative, enter -0-) . Adjusted net income (if negative, enter -0-)

622

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X Form 990-PF (2017)

Pa	art II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End o	f year
			(a) Book Value	(b) Book Value	(c) Fair Market Value
	1 '	Cash-non-interest-bearing	16,675	24,331	24,331
	2	Savings and temporary cash investments			
	3	Accounts receivable ►			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ►			
		Less allowance for doubtful accounts ▶		The American Committee of the Committee	ل ــــــــــــــــــــــــــــــــــــ
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less allowance for doubtful accounts ▶			
S	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Asi	10a	Investments—U.S. and state government obligations (attach schedule)			
•	b	Investments – corporate stock (attach schedule)		· · · · · · · ·	
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶			· · · · · · · · · · · · · · · · · · ·
	' '	Less accumulated depreciation (attach schedule)		······································	
	12	Investments—mortgage loans			·
	13	Investments—mortgage loans			 .
	14			<u></u>	
	14	Land, buildings, and equipment: basis ►			
	45	Less accumulated depreciation (attach schedule) ▶	I I		
	15 16	Other assets (describe Life insurance policies)	830,601	896,453	594,978
	10	Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)			
	47		847,276	920,784	619,309
	17	Accounts payable and accrued expenses			,
S	18	Grants payable			
≝	19	Deferred revenue			1.4
و	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable (attach schedule)			.
	22	Other liabilities (describe ►) Total liabilities (add lines 17 through 22)			,
	23		0	0	2
Ś		Foundations that follow SFAS 117, check here			
Balances		and complete lines 24 through 26, and lines 30 and 31.			1
au	24	Unrestricted	847,276	920,784	
3a	25	Temporarily restricted			
ਰ	26	Permanently restricted			
Net Assets or Fun		Foundations that do not follow SFAS 117, check here ▶ □			
F		and complete lines 27 through 31.			
0	27	Capital stock, trust principal, or current funds			
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
SS	29	Retained earnings, accumulated income, endowment, or other funds			
t A	30	Total net assets or fund balances (see instructions)	847,276	920,784	
۷e	31	Total liabilities and net assets/fund balances (see			
		ınstructions)	847,276	920,784	
	rt III	Analysis of Changes in Net Assets or Fund Balances		 	
1		I net assets or fund balances at beginning of year-Part II, colu			
	end-	of-year figure reported on prior year's return)		1	847,276
2		r amount from Part I, line 27a		2	73,508
3	Othe	er increases not included in line 2 (itemize) > 920,		3	
	Add	lines 1, 2, and 3		4	920,784
5	Decr	eases not included in line 2 (itemize) ► I net assets or fund balances at end of year (line 4 minus line 5)—I	***************************************	5	
6	Tota	net assets or fund balances at end of year (line 4 minus line 5)-1	Part II, column (b), line	30 6	920,784
					222

Part IV Capital Gains and Losses for Tax on Investment Income

		 of property sold (for example, real estate, or common stock, 200 shs MLC Co) 		P—Purchase D—Donation		e acquired day, yr)	(d) Date sold (mo , day, yr)
1a	N/A			-			
b							
С							
d							
е							
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale			n or (loss) f) minus (g))
а							
<u></u>			·- <u>-</u>				<u> </u>
C							
d			·		_		
е							
	Complete only for assets showing	ng gain in column (h) and owned by th	e foundation	on 12/31/69		(I) Gains (Col	(h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any	С	ol (k), but not	tless than -0-) or rom col (h))
a							
<u>_</u>							
C							
d							
e				 ,.			
2	Capital gain net income or (n	net capital loss) { If gain, also		• • • • •			
3	Net short-term capital gain o	or (loss) as defined in sections 122		· ·	2		0
	If gain, also enter in Part I, I Part I, line 8	line 8, column (c). See instruction	ns. If (loss) · · ·	, enter -0- ın }	3		0
Part		Section 4940(e) for Reduced	Tax on N	let Investment	Incon	ne	
Was tl	s," the foundation doesn't qua	his part blank. ction 4942 tax on the distributable alify under section 4940(e). Do not it in each column for each year, s	complete t	his part.			☐ Yes 🗸 No
!	(a)	T			aking a	riy chanes	(d)
Cale	Base period years ndar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value o	(c) f noncharitable-use a	ssets		tribution ratio divided by col (c))
	2016	22,54	6	53	4,186		0 0422
	2015				7,017		0.0445
	2014	20,24			0,293		0.0506
	2013	17,77			8,999		0 0445
	2012	16,34	0	35	5,146		0.0460
2 3	Total of line 1, column (d) Average distribution ratio for	r the 5-year base period—divide				2	0 2278
•		ndation has been in existence if le			- 1	3	0.0456
4	Enter the net value of nonch	arıtable-use assets for 2017 from	Part X, line	5	.	4	615,011
5	Multiply line 4 by line 3 .					5	28,045
6	Enter 1% of net investment i	income (1% of Part I, line 27b)				6	
7	Add lines 5 and 6				.	7	28,045
8		s from Part XII, line 4 ir than line 7, check the box in Pa				8 rt using a 1	26,455 % tax rate. See the

Part '	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4940(c)	48—see i	nstru	ctior	is)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.		-		
	Date of ruling or determination letter. (attach copy of letter if necessary—see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1		0	
	here ▶ ☐ and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).				j
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	2		o	
3	Add lines 1 and 2	3		0	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4		0	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	5		0	
6	Credits/Payments.			i	
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 0			1	
b	Exempt foreign organizations—tax withheld at source 6b 0			.	1
С	Tax paid with application for extension of time to file (Form 8868) 6c 0				1
d	Backup withholding erroneously withheld 6d 0				j
7	Total credits and payments. Add lines 6a through 6d	7		0	
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached	8		0	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		0	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid .	10		0	
11	Enter the amount of line 10 to be: Credited to 2018 estimated tax ▶ Refunded ▶	11		0	
	VII-A Statements Regarding Activities	or did it	· · · · · ·	Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation participate or intervene in any political campaign?	or did it	1a	163	110
_	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes?	See the	la		
b	instructions for the definition		1b		✓
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any published or distributed by the foundation in connection with the activities.	materials			
C	Did the foundation file Form 1120-POL for this year?		1c		<u>✓</u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$				-
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax if on foundation managers. > \$	mposed	-		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		2		✓
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	articles of	3		_ ,
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		√
	If "Yes," has it filed a tax return on Form 990-T for this year?		4b	V /	Ά
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by <i>General Instruction T</i> .		5	/-	<u> </u>
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
٠	By language in the governing instrument, or				
	 By state legislation that effectively amends the governing instrument so that no mandatory directively. 	tions that			
	conflict with the state law remain in the governing instrument?		6	1	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), ar	nd Part XV	7	1	
8а	Enter the states to which the foundation reports or with which it is registered. See instructions.				
	Democratical				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorne	y General			
==	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	✓	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 49				
•	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV	. If "Yes,"			
	complete Part XIV		9		✓
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule list	sting their			
_	names and addresses	• • •	10		

Part	VII-A Statements Regarding Activities (continued)		V T	- NI -
	At the state was did the foundation directly or indirectly own a controlled entity within the		Yes	No_
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		1
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
12	person had advisory privileges? If "Yes," attach statement. See instructions	12		1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	1	
10	Website address ►			
14		0-293-	7454	
	Located at ► 656 Golf Club Road, Newtown Square, PA ZIP+4 ► 15	073-1	408	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here.			
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16	<u> </u>	✓
	the foreign country ►			
Dord	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<u> </u>		_
Part	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):			i
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes No			L'Amazina L'Ale
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			, ;
	disqualified person?			1
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes V No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes • No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			7
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	Ì		İ
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations			
D	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	N/	4
	Organizations relying on a current notice regarding disaster assistance, check here			7, 804
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2017?	1c	ļ	/
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			1-
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2017?			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions.)	2b	N	Λ
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	- <u></u> -	† **/	7
·	▶ 20 , 20 , 20 , 20			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	1		
	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the		1	
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2017.)	3b	- <u> </u>	/ A
4-	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	 '\	17
4a b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		1	† - -
J	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		1
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D	
Page	π

Part	VII-B . Statements Regarding Activities	s for W	hich Form	4720	May Be R	equire	d (contii	nued)			
5a	During the year, did the foundation pay or incur	any am	ount to:					· · · · · · · · · · · · · · · · · · ·		Yes	No
	(1) Carry on propaganda, or otherwise attempt t						☐ Yes	✓ No			
	(2) Influence the outcome of any specific public	c election	on (see secti	on 495	5); or to ca	ırry on,			1		
	directly or indirectly, any voter registration di	ive?					☐ Yes	✓ No			
	(3) Provide a grant to an individual for travel, stu	dy, or d	other similar <mark>j</mark>	ourpose	es?		☐ Yes	✓ No			
	(4) Provide a grant to an organization other than			-							
	section 4945(d)(4)(A)? See instructions						Yes	✓ No			
	(5) Provide for any purpose other than religious				ary, or educ	ational	_		j		,]
	purposes, or for the prevention of cruelty to				•		Yes	✓ No			
b	If any answer is "Yes" to 5a(1)-(5), did any of the							ribed in	~~~~	ļ	لمرر
	Regulations section 53.4945 or in a current notice	-	-					. –	5b		<u> </u>
	Organizations relying on a current notice regarding	-]	
С	If the answer is "Yes" to question 5a(4), does to							гт			.
	because it maintained expenditure responsibility		=				☐ Yes	✓ No			
٥-	If "Yes," attach the statement required by Regul										. 1
6a	Did the foundation, during the year, receive any on a personal benefit contract?					HIIUIIIS	_	⊘ No			
L	Did the foundation, during the year, pay premiur					bonofil	∐ Yes		6b		/ <u></u>
b	If "Yes" to 6b, file Form 8870.	iis, uiie	City of manet	July, Oil	a personai	Dellell	Commaci	• •	64	124	11
72	At any time during the tax year, was the foundation	a narty i	to a prohibited	tay sh	elter transac	tion?	□Yes	✓ No	\$,		
b	If "Yes," did the foundation receive any proceed								7b	NI	Δ -
Par	VIII Information About Officers, Direct									ees,	
	and Contractors	,	•			•	•			•	
1	List all officers, directors, trustees, and found	lation r	nanagers ar	d their	compens	ation. S	See instru	uctions			
	(a) Name and address		e, and average rs per week		mpensation ot paid,		Contribution yee benefit		(e) Expe		
	(a) Name and address		ed to position		ter -0-)		erred compe		other	allowan	ces
John A	A Simkiss	Trustee	•					i			
320 Bo	oot Road, Malvern, PA 19355	1 hr/we			0			0			0
Sharo	n Merhige	Trustee	•			l					
656 G	olf Club Road, Newtown Square, PA 19073	1 hr/we	ek		0			0			0
				}							
		 		ļ							
				ł							
	Compensation of five highest-paid employe	os (oth	or than the	se incl	uded on li	no 1 —	eaa inetr	uction	e) If n	one	enter
2	"NONE."	es (oui	er triair trio	se ilici	uueu on n	116 1-	300 111311	action.	37. 11 11	one,	Citto
			T				(d) Contrib	utions to			
	(a) Name and address of each employee paid more than \$50,0	00	(b) Title, and a		(c) Compe	nsation	employee	benefit	(e) Expe	ense ac allowar	
			devoted to p	osition			compen		0	anoma	1000
	NONE		Í								
							1				
			ļ		ļ		ļ				
]				
			<u> </u>		<u></u>		L				
Total	number of other employees paid over \$50,000	<u></u>		• • •	· · ·	· · · ·		<u>.</u> ►		<u> </u>	
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Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid I and Contractors (continued)	mployees,
3 Fiv	e highest-paid independent contractors for professional services. See instructions. If none, enter "NC	NE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		
		
		
Total num	ber of others receiving over \$50,000 for professional services	•]
Part IX-	A Summary of Direct Charitable Activities	
		 -
	oundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of the state of the foundation is the number of the state of the	Expenses
1 The F	oundation is a private, non-operating Foundation and as such, its sole activity is to make grants or	
contr	ibutions to other 501(c)(3) organizations, principally to public charities.	
 -		
2		
		· - \
3		
		-
4		
-+		(
Part IX-	B Summary of Program-Related Investments (see instructions) the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
	N/A	7,5,100,11
'	IVA	}
2		
		}
	program-related investments. See instructions	
3	N/A	(
Total. Add	d lines 1 through 3	>
		Form 990-PF (201

Part	X Minimum Investment Return (All domestic foundations must complete this part. Foreign	gn fou	ndations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:	<u> </u>	
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	63,326
С	Fair market value of all other assets (see instructions)	1c	561,051
d	Total (add lines 1a, b, and c)	1d	624,377
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	624,377
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		<u>-</u>
	instructions)	4	9,366
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	615,011
6	Minimum investment return. Enter 5% of line 5	6	30,751
Part		oundat	ions
1	Minimum investment return from Part X, line 6	1	30,751
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017. (This does not include the tax from Part VI.)		
С	Add lines 2a and 2b	2c	0
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	30,751
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	30,751
6	Deduction from distributable amount (see instructions)	6	0
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	30,751
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	26,455
b	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	0
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	0
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	26,455
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b See instructions	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	26,455
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g wheth	
			000 00

Part :	XIII Undistributed Income (see instruction	ns)			
1	Distributable amount for 2017 from Part XI,	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
	line 7				30,751
2	Undistributed income, if any, as of the end of 2017:	1			
а	Enter amount for 2016 only			24,195	
b	Total for prior years: 20,20,20				
3	Excess distributions carryover, if any, to 2017:				
а	From 2012				
b	From 2013				
C	From 2014				
d	From 2015				
е	From 2016				ĺ
f	Total of lines 3a through e	0	<u> </u>		
4	Qualifying distributions for 2017 from Part XII,				
	line 4: ▶ \$ 26,455				
а	Applied to 2016, but not more than line 2a.			24,195	
b	Applied to undistributed income of prior years			į.	•]
	(Election required—see instructions)		0		<i>p</i>
С	Treated as distributions out of corpus (Election		γ	- [* 1
_	required—see instructions)	0			<u> </u>
d	Applied to 2017 distributable amount				2,260
_e	Remaining amount distributed out of corpus	0	,		
5	Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same	0		7	0
	amount must be shown in column (a), the same		è	,*	
6	Enter the net total of each column as		,	4	477
0	indicated below:) - <u>-</u> -		ا الله الله الله الله الله الله الله ال
а	Corpus. Add lines 3f, 4c, and 4e Subtract line 5	0	·		
b	Prior years' undistributed income. Subtract				,
	line 4b from line 2b	_	0		
С	Enter the amount of prior years' undistributed			,	, ,
	income for which a notice of deficiency has				¥-1
	been issued, or on which the section 4942(a)			No.	
	tax has been previously assessed	·	0		· · · · · · · · · · · · · · · · · · ·
d	Subtract line 6c from line 6b. Taxable				in the second se
	amount—see instructions		0		
е	Undistributed income for 2016. Subtract line				
	4a from line 2a. Taxable amount-see				
	instructions			0	
f	Undistributed income for 2017. Subtract lines				
	4d and 5 from line 1 This amount must be				
	distributed in 2018				28,491
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)	<u> </u>	 		
8	Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions).	_			
0	Excess distributions carryover to 2018.	0		 	
9	Subtract lines 7 and 8 from line 6a				
40	Analysis of line 9:		<u>'</u>		
10					
a	Excess from 2013	{			
b		1			
9	Excess non zoro :	1	1		
d e	Excess from 2016				
e		7	1		

Form 99	00-PF (2017)					Page 10
Part	XIV Private Operating Founda	tions (see instru	ictions and Part	VII-A, guestion 9))	
	If the foundation has received a ruling foundation, and the ruling is effective for	or determination	letter that it is a	private operating	<u> </u>	
h	Check box to indicate whether the four				ection	3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year	1	Prior 3 years	/ 10 12()/	
	income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
	investment return from Part X for	13,221	(, 2010	(4) 2010	14,20	
_	each year listed					
b	Qualifying distributions from Part XII,		 			
·	line 4 for each year listed					
d	Amounts included in line 2c not used directly	\		/	 	
u	for active conduct of exempt activities					
_						
е	Qualifying distributions made directly]	
	for active conduct of exempt activities. Subtract line 2d from line 2c			i	}	
•			N/A		 	
3	Complete 3a, b, or c for the			ļ	,	
	alternative test relied upon.)	
а	"Assets" alternative test—enter:	,				
	(1) Value of all assets			\		
	(2) Value of assets qualifying under	Q.	}			
b	section 4942(j)(3)(B)(i)		 		 	
U	of minimum investment return shown in		\		1	
	Part X, line 6 for each year listed				 	
С	"Support" alternative test – enter:		1			
	(1) Total support other than gross					
	investment income (interest, dividends, rents, payments on					
	securities loaps (section					
	512(a)(5)), or royalties) .		<u> </u>			
	(2) Support from general public and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii) .	 	ļ			
	(3) Largest amount of support from		}]		
	an exempt organization		<u></u>			\
	(4) Gross investment income	(0)		 	-d 65 000	
Part				ne toundation r	iau \$5,000 or inc	orean assets at
	any time during the year-		ns.j			
1	Information Regarding Foundation List any managers of the foundation	managers:	utad mara than 20	6 of the total cont	ributions received	by the foundation
а	before the close of any tax year (but of	who have contino	ontributed more th	an \$5 000) (See s	ection 507(d)(2)	by the loundation
	before the close of any tax your tout o	my in they have o	Official Control of the	40,000/. (000 1		
NONE b	List any managers of the foundation	who own 10% o	r more of the stor	ck of a corporation	n (or an equally lai	rge partion of the
v	ownership of a partnership or other el					igo portion or the
NONE		,				
NONE 2	Information Regarding Contribution	Grant Gift Los	n Scholarshin e	tc. Programs:		
_	Check here ► ✓ If the foundation				organizations and	does not accept
	unsolicited requests for funds. If the f					
	complete items 2a, b, c, and d. See in		g, 3 ,,		3	
a	The name, address, and telephone nu		dress of the perso	n to whom applica	ations should be ac	dressed:
-						
1	N/A					
b	The form in which applications should	be submitted an	d information and	materials they sho	ould include.	
С	Any submission deadlines					
d	Any restrictions or limitations on av	vards, such as t	y geographical ai	reas, charitable fi	elds, kinds of inst	titutions, or other
	factors:					

Form 9	90-PF (2017)			_	Page 11
	Supplementary Information (con	tinued)			
_ 3	Grants and Contributions Paid During			ture Payment	
	Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
		or substantial contributor			-
a	Palu during the year				
Se	ee schedule attached				
]		
			1	1	
					1
		<u></u>	<u> </u>		<u>. </u>
_	Total	 		<u> ▶ 3</u>	24,200
D	Approved for future payment	/			
					1
				1	1
	N/A				
					, .

	gross amounts unless otherwise indicated.		siness income	Excluded by secti	on 512, 513, or 514	(e)
	· · · · · · · · · · · · · · · · · · ·	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
1	Program service revenue:		 			
	a			 		
	b			 		
	<u> </u>			 		<u> </u>
	d			 		
	e			 		
						
_	g Fees and contracts from government agencies					ļ <u> </u>
_	Membership dues and assessments					
3	Interest on savings and temporary cash investments					
4	Dividends and interest from securities					<u> </u>
5	Net rental income or (loss) from real estate:			<u> </u>		
	a Debt-financed property					
	b Not debt-financed property			ļ		
6	Net rental income or (loss) from personal property					
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory					
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue: a					
	b					
	С					
	d					
			-			
12	Subtotal Add columns (b) (d) and (e)	1		1		
	Subtotal Add columns (b), (d), and (e)	1		<u> </u>	13	
13	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)			<u> </u>		
13 See	Subtotal Add columns (b), (d), and (e)	s.)		<i>!</i>		
13 See Par	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations to XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 See Par Line	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 See Par Line	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations to XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 See Par Line	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations to XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 See Par Line	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations to XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 See Par Line	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations to XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 See Par Line	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations txvI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 See Par Line	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations to XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 See Par Line	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations txvI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 See Par Line	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations txvI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 See Par Line	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations txvI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 See Par Line	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations txvI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 See Par Line	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations txvI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 See Par Line	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations txvI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 See Par Line	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations txvI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 See Par Line	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations txvI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 See Par Line	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations txvI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 See Par Line	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations txvI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 See Par Line	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations txvI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 See Par Line	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations txvI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 See Par Line	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations txvI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 See Par Line	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations txvI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 See Par Line	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations txvI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 See Par Line	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations txvI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 See Par Line	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations txvI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 See Par Line	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations txvI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt purpose.	s.) ccomplishm	ent of Exemp	ot Purposes	13	(

Form 99	30-PF	(2017)							Page 13
Part	XV	Information Organization		nsfers to and Trans	sactions	and Relationsh	ps With Noncha		
1	ın			engage in any of the f 501(c)(3) organization				Ye	s No
а	Tra	nsfers from the rep	orting foundation to	o a noncharitable exe	mpt organi	zation of			
		Cash						1a(1)	1
	(2)	Other assets						1a(2)	1
b		er transactions:							
				empt organization .				1b(1)	1
				able exempt organiza				1b(2)	
				er assets				1b(3)	1
								1b(4) 1b(5)	+
				hip or fundraising solid				1b(6)	1
c				sts, other assets, or p				1c	1
d				s," complete the follo				w the fair	market
				ices given by the repo					
				jement, show in colun	 _				
(a) Lin	e no	(b) Amount involved	(c) Name of nonc	haritable exempt organization	on (1	d) Description of transf	ers, transactions, and sha	arıng arrange	ments
				 					
			<u> </u>						
									
			N//	Δ					
				`		 _			
									
									
									
			 						
			<u> </u>						
2a b	des	scribed in section 5		filiated with, or relate ection 501(c)(3)) or in s			npt organizations] Yes [] No
		(a) Name of organ	<u></u>	(b) Type of org	anızatıon		(c) Description of relation	nship	
	N	I/A							
				ļ					
	10.	nder penalties of perium.	declare that I have examin	ed this return, including accord	npanying scher	dules and statements and	d to the best of my knowle	dge and helie	t. it is true
Sign Here) co			nan taxpayer) is based on all in 5-10-18 Date		hich preparer has any kn	May the with the p	RS discuss the preparer show actions	nis return n below?
		Pri/Typ preparer	's name	Preparer's signature		Date		PTIN	===
Paid		/ Come	USHIB	Il Handoves	S & PHA		Check ✓ If self-employed	P00029	1004
Prep			Blank Rome LLP	VI PIJURGOCE	J. 4//		Firm's EIN >	23-131187	
Use	Uni	y ———		rd Fl., Philadelphia, PA	19103			15-569-550	
								QQQ_E	

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.
➤ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Employer identification number

Simkiss I	Simkiss Family Foundation 25-6837939							
Organization type (check one):								
Filers of	:	Section:						
Form 99	0 or 990-EZ	☐ 501(c)() (e	001(c)() (enter number) organization					
		4947(a)(1) nonexe	mpt charitable trust not treated as a private fo	undation				
		☐ 527 political orga	☐ 527 political organization					
Form 99	0-PF	√ 501(c)(3) exempt	orivate foundation					
		☐ 4947(a)(1) nonexe	mpt charitable trust treated as a private found	ation				
		☐ 501(c)(3) taxable	orivate foundation					
	nly a section 501(c)(7		al Rule or a Special Rule. on can check boxes for both the General Rule	and a Special Rule. See				
General	Rule							
Ø		r property) from any or	Z, or 990-PF that received, during the year, cor ne contributor. Complete Parts I and II. See ins					
Special	Rules							
	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II							
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.							
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contribution totaling \$5,000 or more during the year				ses, but no such butions that were received of the parts unless the				

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,

990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization Employer identification number
Simkiss Family Foundation 25-6837939

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed.				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1	John A Sımkiss, Jr. 320 Boot Road Malvern, PA 19355	\$\$50,000	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
2	Kathleen M. Sımkıss 320 Boot Road Malvern, PA 19355	\$ 50,000	Person Payroli Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$ \$	Person		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person		

Employer identification number

Part II	Noncash Property (see instructions). Use duplicate copies	of Part II if additional spa	ace is needed.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

Employer identification number

,	(10) that total more than \$1,000 for the the following line entry. For organizations contributions of \$1,000 or less for the ye	completing Part III, ent	er the total c	of exclusively religious, charitable, etc.				
	Use duplicate copies of Part III if addition		on 01100. 0 00	motidotions./ P				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held				
<u> </u>								
}								
		(e) Transfer of gif	t					
}	Transferee's name, address, and Z	IP + 4	Relations	nip of transferor to transferee				
(a) No.		(-) 11a a f aith		(d) December of how with its hold				
from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held				
		(a) Tunnafour of 115						
		(e) Transfer of gif	τ					
-	Transferee's name, address, and Z	IP + 4	Relationsl	nip of transferor to transferee				
}								
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held				
}	(e) Transfer of gift							
	Transferee's name, address, and Z	IP + 4	Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held				
	(e) Transfer of gift							
}	Transferee's name, address, and Z	IP + 4	Relationship of transferor to transferee					
-								
<u> </u>								

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or

Simkiss Family Foundation Employer Identification Number: 25-6837939 2016 Form 990-PF, Return of Private Foundation

Part XV - Supplementary Information
3.a. Grants and Contributions Paid During the Year

3.a. Grants and Contributions Paid During the Year						
Name and Address	Fdn Status	Purpose	Amount			
The Haverford School 450 Lancaster Avenue Haverford, PA 19041	PC	General	\$5,000 00			
Natural Lands Trust 1031 Palmers Mill Rd Media, PA 19132	PC	General	\$250 00			
Paoli Hospital Foundation 255 W Lancaster Ave Paoli, PA 19301	PC	General	\$5,000 00			
Melmark 2600 Wayland Road Berwyn, PA 19312	PC	General	\$1,000 00			
Washington Memorial Chapel P O Box 98 Valley Forge, PA 19481	PC	General	\$300 00			
Thorncroft 190 Line Road Malvern, PA 19355	PC	General	\$600 00			
St Joseph's University 5600 City Avenue Philadelphia, PA 19131-1395	PC	General	\$2,000 00			
Amigos de Jesus 118 Woodland Avenue Malvern, PA 19355	PC	General	\$1,500 00			
Willistown Conservation Trust 925 Providence Rd Newtown Square, PA 19073	PC	General	\$1,500 00			
St Martin de Porres School 2300 West Lehigh Avenue Philadelphia, PA 19132	PC	General	\$250 00			
St Raymond School 7940 Williams Avenue Philadelphia, PA 19150	PC	General	\$200 00			
Claremont Institute 937 W Foothill Blvd , Suite E Claremont, CA 91711	PC	General	\$250 00			
Cato Institute 1000 Massachusetts Avenue, NW Washington, DC 20001-5403	PC	General	\$300 00			
Historic Sugartown 690 Sugartown Rd , P O Box 1423 Malvern, PA 19355	POF	General	\$500 00			

ED Choice One American Square, Suite 2420 Indianapolis, IN 46282	PC	General	\$250 00
Heritage Foundation 214 Massachusetts Avenue, NE Washington, DC 20002	PC	General	\$250 00
Mises Institute 518 W Magnolia Avenue Auburn, AL 36832-4501	PC	General	\$200 00
Wounded Warriors Project, Inc P O Box 758517 Topeka, KS 66675	PC	General	\$1,000 00
Salvation Army National Headquarters P O Box 269 Alexandria, VA 22314	PC	General	\$400 00
Ronald McDonald House 26345 Newark Place Chicago, IL 60673-1263	PC	General	\$300 00
St Patrick's Church 104 Channing Avenue Malvern, PA 19355	PC	General	\$700 00
Malvern Volunteer Fire Company 424 E King Street Mavern, PA 19355	PC	General	\$100 00
Chester County Historical 225 N High Street West Chester, PA 19380	PC	General	\$250 00
Academy of Vocal Arts 1920 Spruce Street Philadelphia, PA 19103	PC	General	\$500 00
Bonner & Prendergast Catholic School 403 N Lansdowne Ave Drexel Hill, PA 19026	PC	General	\$300 00
Cabrini University 610 King of Prussia Road Radnor, PA 19087	PC	General	\$1,000 00
Institute of Humane Studies at George Mason University 3434 Washington Blvd Arlington, VA 22201	PC	General	\$300 00
Total			\$24,200 00

Simkiss Family Foundation Employer Identification Number: 25-6837939

2017 Form 990-PF, Return of Private Foundation

Part I, Line 16a Legal Fees

Blank Rome, LLP

\$ 2,255.01

Part I, Line 23 Other Expenses

Commonwealth of Pennsylvania \$

15 00

Filing Fee

Wells Fargo - checkbook order \$

22 00

Total

\$ 37 00

Simkiss Family Foundation Employer Identification Number: 25-6837939 2017 Form 990-PF, Return of Private Foundation

Part II. Balance Sheets Line 15. Other Assets

Life Insurance Policies

	Book Value			Fair	r Market Value	2
2016 Ending Balance	\$	830,601 42				
Hartford	\$	33,286 80	Premiums paid	\$	293,376 54	Interpolated Terminal Reserve
Mass Mutual	\$	22,565 22	Premiums paid	\$	103,489 60	Interpolated Terminal Reserve
Prudential	\$	10,000 00	Premiums paid	\$	198,112 20	Interpolated Terminal Reserve
2016 Ending Balance	-\$	896,453.44	-	\$	594,978.34	