Form **990** PF

Return of Private Foundation

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

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

1811

2017

| _ | | | | rs gov/Form990PF for inst | | | | Open to Public Inspection |
|----------------|---------------------------------------|---------|--|--|--|--|--|--|
| _ | For | cale | ndar year 2017 or tax year beginning DEC | 1, 2017 | , and e | nding | NOV 30, 2018 | |
| | Nai | ne o | of foundation | • | , - | | A Employer identificatio | n number 📴 🔭 🔭 |
| | | ł | * | | | | | |
| | | | <u>T</u> STOWN MERCURY FOUNDATI | 23-6256419 | | | | |
| • | Nur | nber a | and street (or P O box number if mail is not delivered to street | address) | | Room/suite | B Telephone number | , |
| | 2 | 4 | NORTH HANOVER STREET. | | | 610-323-30 | 000 | |
| - | City | or t | town, state or province, country, and ZIP or foreign p | ostal code ' | | | C if exemption application is i | pending check here |
| | _ | | TSTOWN, PA 19464 | • | | | , ;; | 5 , |
| - | _ | | k all that apply: Initial return | Initial return of a f | ormer public c | harity | D 1. Foreign organization | s, check here |
| | | | Final return | Amended return | • | , | | |
| / | | | Address change | Name change | | | Foreign organizations m check here and attach or | eeting the 85% test, |
| ī | 1 (| heck | k type of organization: X Section 501(c)(3) ex | | | 14 | 1 | |
| X [°] | Ë | _ | · · · · · · · · · · · · · · · · · · · | Other taxable private found | | U-1 | E If private foundation sta under section 507(b)(1 | |
| ' \ | Fa | | arket value of all assets at end of year J Accounti | · | Accr | ual | 1 | |
| | | | | ther (specify) | | 441 | F If the foundation is in a under section 507(b)(1 | |
| | | \$ | 33,572. (Part I, colur | | ıs.) | | ander section sor(b)() |)(b), check here |
| ſ | | _: | Analysis of Revenue and Expenses | (a) Revenue and | (b) Net in | vectment | (c) Adjusted net | (d) Disbursements |
| L | . e čtí € | | (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) | expenses per books | (b) Net III | | income | for charitable purposes (cash basis only) |
| - | | 1 | Contributions, gifts, grants, etc., received | 45,446. | y 5000 2000 | TANK MANAGE | N/A | |
| | | 2 | Check I if the foundation is not required to attach Sch. B | | CARAMAN CO. | | | |
| | | 2 | In the domination is not required to attach soil B Interest on savings and temporary cash investments | / 23. | A A A STATE OF THE PARTY. | 23. | MONGERHOUSENCH, MACHE SANTONE | STATEMENT 1 |
| | | 4 | Dividends and interest from securities | / 23. | | | | The Secretary of Secretary |
| | | 5.0 | a Gross rents | 1 | | | | |
| | | i . | | / YEVETERVACETRIASYMPSY | | · SKARALTYCTAGES. | | |
| | | _ | Net rental income or (loss) | | THE STREET STREET | STATE OF THE STATE | | |
| | Pe | Oa L | Net gain or (loss) from sale of assets not on line 10 Gross sales price for all | Wallest Complete States | A STANDARD | AND THE PERSONAL PROPERTY. | THE RESERVE THE PROPERTY OF THE PARTY OF THE | |
| | /en | 7 | assets on line 6a* | SELECTION OF STREET | 學先發展發展 | 0 | CHARLES AND THE STATE OF THE ST | |
| <u>7)</u> | Revenue | ′ | Capital gain net income (from Part IV, line 2) | 74 / 34-20-20-20-20-20-20-20-20-20-20-20-20-20- | | U. | | A CARROL STATE OF THE STATE OF |
| £107 | | 8 | Net short-term capital gain | etholy is the rest. No state at the second | ************************************** | MO200000 | • | THE STATE OF THE S |
| 7 | | 9 | Income modifications Gross sales less returns | Transaction of the San | A STATE OF THE STA | NOTE TO SERVE | v Nodá su o oblikový da v 190 tro el selekti dekteráci | Car and Share and Property and |
| > | | | and allowances | | 3.74 | | And the second of the second | AND LOCATION OF A SECOND |
| | | | Less Cost of goods sold . | | 44.7 | | | Transport of the second |
| MAI | | | Gross profit or (loss) | | No acceptance | | | |
| | | | Other income | 45 460 | " | | | |
| 끍. | | 12 | , | 45,469. | | 23. | | FESTER ASSAULT |
| 뷀. | | 13 | Compensation of officers, directors, trustees, etc | 0. | | 0. | | 0. |
| Z | | 14 | Other employee salaries and wages | ļ | | | | |
| | Ś | 15 | | | | | | ļ |
| Ď | nse | 16a | Legal fees | 1.000 | | <u> </u> | | |
| | be | b | Accounting fees STMT 2 | 1,990. | KE | CEIVE | | 0. |
| | Ã | C | Other professional fees | | <u> </u> | | | |
| - | tive | 17 | Interest | | MAI | 0.1 0 20 | 9 | |
| | tra | 18 | Taxes | | <u> </u> | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | PA (/ / /) | as any 1 to 00 to 000 t |
| | inis | 19 | Depreciation and depletion | | 00 | | | ALC: NEW YORK |
| | 튽 | 20 | Occupancy | | | HEM! | | |
| | Ϋ́ | 21 | • | | | | | |
| | and | 22 | Printing and publications | | | | <u>.</u> | |
| | Operating and Administrative Expenses | 23 | Other expenses STMT 3 | 1,026. | | 0. | | . 0. |
| | rati | 24 | . • | ا عدم ا | | _ | | _ |
| | be | | expenses. Add lines 13 through 23 | 3,016. | | 0. | | 0. |
| ١ | ٥, | 23 | Contributions, gifts, grants paid | 50,874. | MA AND | | | 50,874. |
| 1 | | | Total expenses and disbursements. | | | | | |
| _ | | ı | Add lines 24 and 25 | 53,890. | | 0. | | 50,874. |
| _ | | 27 | Subtract line 26 from line 12: | | | | | |
| | | а | Excess of revenue over expenses and disbursements | -8,421. | | | | |
| | | b | Net investment income (if negative, enter -0-) | | | 23. | CONTRACTOR OF THE SEC | HATTER THE ST |
| _ | | С | Adjusted net income (if negative, enter -0-) | the articles. | MARCHAR | | N/A | 经验证据等 |

723501 01-03-18 LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2017)

| i D | Y regree | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only | Beginning of year | End o | of year - |
|----------------------------|----------|--|--|--|---|
| ž | ્લદ્ધા | column should be for end-of-year amounts only | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash - non-interest-bearing | 41,993. | 33,572. | 33,572. |
| | 2 | Savings and temporary cash investments | | | |
| | 1 | Accounts receivable ▶ | | | |
| | - | Less: allowance for doubtful accounts ▶ | | | |
| | 4 | Pledges receivable | | | Sen se cesta esta esta esta esta esta esta esta |
| | | Less: allowance for doubtful accounts | | | |
| | - | Grants receivable | • | | |
| | 5 | | -: | | <u> </u> |
| | 6 | Receivables due from officers, directors, trustees, and other | | | |
| | ١_ | disqualified persons | COMP. CARREST CONTROL OF THE STATE OF THE ST | Standig Transport Management of Specific Control of Specific Contr | Text of the Language Control of the |
| | 7 | Other notes and loans receivable | | | |
| | i | Less; allowance for doubtful accounts | | | |
| ţ | 8 | Inventories for sale or use | | | |
| Assets | 9 | Prepaid expenses and deferred charges | , | | |
| Ř | 10a | Investments - U.S. and state government obligations | | | |
| | ļь | Investments - corporate stock | , | | |
| | C | Investments - corporate bonds | | | |
| | l | Investments - land, buildings, and equipment basis | | 30.71 - 71 - 14 - 17 - 17 - 17 - 17 - 17 - | |
| | `` | Less accumulated depreciation | | | |
| | 12 | Investments - mortgage loans | | | |
| | 13 | Investments - other - | , | · | |
| | | Land, buildings, and equipment basis | PARTICIPATION OF THE PROPERTY OF THE PARTY O | | 4941 ADMINISTRAÇÃO - 1754. J. 1 |
| | '" | | | | |
| | 4.5 | Less accumulated depreciation | | | |
| | | Other assets (describe) | | | |
| | 16 | Total assets (to be completed by all filers - see the | 41 002 | 22 572 | 22 572 |
| | | instructions. Also, see page 1, item I) | 41,993. | 33,572. | 33,572. |
| | ı | Accounts payable and accrued expenses | | • | |
| | 18 | Grants payable/ | | | |
| ΘS | 19 | Deferred revenue | | , | |
| Liabilities | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| <u>a</u> | 21 | Mortgages and other notes payable | | + | |
| _ | 22 | Other liabilities (describe | | • | |
| | | | | | |
| | 23 | Total liabilities (add lines 17 through 22) | · 0. | 0. | |
| | | Foundations that follow SFAS 117, check here | | | |
| | ŀ | and complete lines 24 through 26, and lines 30 and 31. | | | |
| Ses | 24 | Unrestricted | 29,454. | 18,348. | |
| au | 25 | Temporarily restricted | 12,539. | 15,224. | |
| Bal | | Permanently restricted | · · · · · · · · · · · · · · · · · · · | , | |
| Net Assets or Fund Balance | | Foundations that do not follow SFAS 117, check here | | · · · · · · · · · · · · · · · · · · · | |
| Ī | | and complete lines 27 through 31. | | | |
| ģ | 27 | Capital stock, trust principal, or current funds | | | |
| ets | | Paid-in or capital surplus, or land, bldg., and equipment fund | | · . | |
| SS | | Retained earnings, accumulated income, endowment, or other funds | | | |
| at/ | | _ | 41,993. | 33,572. | |
| ž | 30 | Total net assets or fund balances | 41,333. | 33,314. | |
| | | * | 41 002 | 22 572 | |
| | 31. | Total liabilities and net assets/fund balances | 41,993. | 33,572. | |
| P | art | Analysis of Changes in Net Assets or Fund B | alances | | |
| | | | | <u>,</u> | |
| | | net assets or fund balances at beginning of year - Part II, column (a), line | 30 | | 41 000 |
| | | t agree with end-of-year figure reported on prior year's return) . | | . [1] | 41,993. |
| | | amount from Part I, line 27a | | 2 | -8,421. |
| | | increases not included in line 2 (itemize) | <u></u> | 3 | 0. |
| 4 | Add I | nes 1, 2, and 3 | • | . 4 | 33,572. |
| 5 | Decre | eases not included in line 2 (itemize) | | 5 | 0. |
| 6 | Total | net assets or fund balances at end of year (line 4 minus line 5) - Part II, co | lumn (b), line 30 | . 6 | 33,572. |
| | | • | | | Form: 990-PF (2017) |

1 7

| 18 NONE (e) Gross sales price (f) Depreciation allowed (g)Cost or other basis (h) Sain or (ficise) (c) plus (f) minus (g)) 1 | Part IV Capital Gains a | nd Losses for Tax on I | Investmen | t Income | | - - | | | |
|--|--|--|---|---------------------------------------|--------------------------------|--|------------------------|-------------------------------|----------------------------------|
| (e) Gross sales price (f) Desirection allowed (or allowable) (g) Cost or other basis (h) Gain or (loss) (e) plus (f) minus (g)) (e) Gross sales price (f) Desirection allowed (or allowable) (g) Cost or other basis (h) Gain or (loss) (e) plus (f) minus (g)) (i) Exercise of civilia (g) (g) Desire of sale (g) Desire o | | (a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) | | | (b) Ho P - I D - | (b) How acquired P - Purchase D - Donation | | | (d) Date sold (mo., day, yr.) |
| e (e) Gross sales price (f) Deprecation allowed (or allowable) (g) Cost or other basis (h) Gain or (loss) a. | 1a | | - | | | | | | |
| (e) Gross sales price (f) Depreciation allowed (re) Cost or other basis (h) Gam or (loss) (e) plus (f) minus (gr) (gr) (gr) (gr) (gr) (gr) (gr) (gr) | b NON | E | | | | | | | |
| e (e) Gross sales price (f) Deprecation allowed (or allowable) (g) Cost or other basis (h) Gain or (ioss) a | | | <u> </u> | | ļ | | | | |
| (e) Gross sales price (f) Depreciation allowed (g) Cost or other basis (h) Can or (loss) ((e) plus (f) minus (g)) a b c d d Complete only for assets showing gain in column (h) and owned by the foundation on 12/3 1/69. (i) FMW as of 12/3 1/69 (i) Adjusted basis (h) Excess of col. (h) Col. (h, flar) a c Complete only for assets showing gain in column (h) and owned by the foundation on 12/3 1/69. (i) FMW as of 12/3 1/69 (ii) Adjusted basis (h) Excess of col. (h) Col. (h, l) gain minus col. (h). (h) flar) a c Capital gain net income or (net capital loss) (ii) Adjusted basis (h) Excess of col. (h) Grown (col. (h), l) owned (h) in the collection of the capital gain and income or (net capital loss) (ii) (gain, also enter in Part I, line 7 (loss), enter-0-in Part I, line 7 (loss), enter-0-in Part I, line 8 (loss), enter-0-in Part I, line | | | | | | | | | |
| (e) plus (f) minus (g)) a Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. (i) FMV as of 12/31/69 (i) Adjusted basis as of 12/31/69 (ii) Adjusted basis (ii) FMV as of 12/31/69 (iii) Adjusted basis (iii) Adjusted ba | <u>e</u> | /// Depression allowed | | at av athav basis | | | (h) Co | | _ |
| to complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. (i) FMV as of 12/31/69 (i) Adjusted basis (i) Adjusted basis (ii) Adjusted basis (iii) Adjusted basis | (e) Gross sales price | | | | | | | | |
| c d d d d d d d d d d d d d d d d d d d | | | | <u></u> | | | | | |
| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. (i) FMV as of 12/31/69 (i) Adjusted basis as of 12/31/69 (i) Adjusted basis as of 12/31/69 (ii) Adjusted basis over cot. (ii), if any 2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 } 2 2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 } 3 3 Net short-term capital gain or (loss) as defined in sections 12/22(5) and (6): | | | + | | - | | | | |
| Complete only for assets showing gain in column (if) and owned by the foundation on 12/31/69. (i) FMV as of 12/31/69 (ii) Adjusted basis (ix) Excess of cot. (i) over cot. (ii), if any cot. (iii) that of less than 40-) or Losses (from col. (iii)) as of 12/31/69 a | | | 1 | · · · · · · · · · · · · · · · · · · · | | | | - | |
| (i) PMV as of 12/31/69 (i) Adjusted basis as of 12/31/69 (verticol. (i), if any overticol. (i), if any overticol. (ii), if any overticol. (ii), if any overticol. (iii), if any overticol. (iii), if any overticol. (iii), if any as one term of any time? 2 Capital gain net income or (net capital loss) (if gain, also enter in Part I, line 7 if gain, also enter in Part I, line 7 if gain, also enter in Part I, line 7 if gain, also enter in Part I, line 7 if gain, also enter in Part I, line 8 and so clumn (c). 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): if gain, also enter in Part I, line 8 and so clumn (c). 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): if gain, also enter in Part I, line 8 and so clumn (c). 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): if gain, also enter in Part I, line 7 if gain, also enter in Part I, line 8 and so clumn (c). 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): if gain, also enter in Part I, line 8 and so clumn (c). 4 The figure of the section 4940(4) and section 4940(4) and so on et investment income. 4 The figure of the section 4940(4) and so on et investment income. 5 Section 4940(d)(2) applies, leave this part blank. 5 Was the foundation liable for the section 4940(e) to not complete this part. 6 Lenter the foundation deash qualify under section 4940(e) to not complete this part. 6 Lenter the appropriate amount in each column for each year; see the instructions before making any entries. 6 Calendar year (or tax year beginning in) Adjusted qualifying distributions. Adjusted qualifying distributions. A Verage of the value of noncharitable-use assets of 2012 (co. (i)) divided by cci. (c). Collision of the collision and (co. (ii)) divided by cci. (co. (iii) divided by cci. (ci.) divided | e | | | | | | | | |
| (i) FMV as of 12/3 1/69 as of 12/3 1/69 over col. (ii), if any cover col. (iii) and in the content of the conte | Complete only for assets showing | gain in column (h) and owned by | y the foundation | n on 12/31/69. | | | | | |
| to c c c c c c c c c c c c c c c c c c c | (i) FMV as of 12/31/69 | | | | | col. | (k), but n Losses (| ot less than (from col. (I | 1-0-) or 1)) |
| c d d e | | | | | | - | | | |
| d e 2 Capital gam net income or (net capital loss) | | | | | | | | | |
| The complete section of the capital gam or closs) as defined in sections 1222(5) and (6): If gam, also enter in Part I, line 8, column (c). If gam, also enter in Part I, line 8, column (c). If gam, also enter in Part I, line 8, column (c). If gam, also enter in Part I, line 8, column (c). If gam, also enter in Part I, line 8, column (c). If gam, also enter in Part I, line 8, column (c). If gam, also enter in Part I, line 8, column (c). If gam, also enter in Part I, line 8, column (c). If gam, also enter in Part I, line 8, column (c). If gam, also enter in Part I, line 8, column (c). If gam, also enter in Part I, line 8, column (c). If gam, also enter in Part I, line 8, column (c). If gam, also enter in Part I, line 8, column (c). If gam, also enter in Part I, line 8, column (c). If gam, also enter in Part I, line 7, all gam (e). If gam, also enter in Part I, line 7, all gam (e). If gam, also enter in Part I, line 7, all gam (e). If gam, also enter in Part I, line 7, all gam (e). If gam, also enter in Part I, line 7, all gam (e). If gam, also enter in Part I, line 8, column (c). If gam, also enter in Part I, line 7, all gam (e). If gam, also enter in Part I, line 7, all gam (e). If gam, also enter in Part I, line 7, all gam (e). If gam, also enter in Part I, line 8, column (e). If gam, also enter in Part I, line 7, all gam (e). If gam, also enter in Part I, line 7, all gam (e). If gam, also enter in Part I, line 8, column (e). If gam, also enter in Part I, line 8, column (e). If gam, also enter in Part I, line 2, ente | | | | | | • | | | |
| 2 Capital gain net income or (net capital loss) If gain, also enter in Part I, line 7 If (loss), enter -0 - in Part I, line 7 If (loss), enter -0 - in Part I, line 7 If (loss), enter -0 - in Part I, line 8 Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) If section 4940(d)(2) applies, leave this part blank. Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If Yes, the foundation doesn't qualify under section 4940(e). Do not complete this part. I Enter the appropriate amount in each column for each year; see the instructions before making any entries. Part V (a) Base period years Calendar year (or tax year beginning in) 2016 Adjusted qualifying distributions Adjusted qualifying distributions Adjusted qualifying distributions Net value of noncharitable-use assets (c) (col. (b) divided by col. (c)) 2016 42,050. 39,278. 40,885. 9606 2014 40,325. 21,775. 1.3836 2012 67,308. 21,760. 3.0931. 2 Total of line 1, column (d) 3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years 4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5 Multiply line 4 by line 3 5 Enter 19% of net investment income (1% of Part I, line 27b) 7 Add lines 5 and 6 | - | | 1 | | | | | | · |
| 2 Capital gain net income or (net capital loss) | | (If nam, also entr | er in Part I. line | 7 | 7 | | | | |
| If gain, also enter in Part I, line 8, column (c). | 2 Capital gain net income or (net capit | | | | 上 | 2 | | | |
| If (loss), enter -0- in Part I, line 8 Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income | 3 Net short-term capital gain or (loss) | as defined in sections 1222(5) a | ınd (6): | | | | | | |
| Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income | | lumn (c). | | | | | | | |
| For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income. | | der Section 4940/e) fo | r Doducoc | Tay on Not | | - 1 | ome | | |
| Section 4940(d)(2) applies, leave this part blank. Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes X | | | | | | Stille III III C | OIIIC | | |
| Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If Yes, the foundation doesn't qualify under section 4940(e). Do not complete this part. Enter the appropriate amount in each column for each year; see the instructions before making any entries. Base period years | (roi optional use by domestic private it | runuations subject to the section | 4340(a) tax on | i net mvestment m | come.) | | | | |
| 1 Yes,* the foundation doesn't qualify under section 4940(e). Do not complete this part. 1 | If section 4940(d)(2) applies, leave this | part blank. | | | | | | | |
| Enter the appropriate amount in each column for each year; see the instructions before making any entries. Calendar year (or tax year beginning in) Adjusted qualifying distributions Net value of noncharitable-use assets Col. (b) divided by col. (c) 2016 | Was the foundation liable for the sectio | n 4942 tax on the distributable ai | mount of any ye | ear in the base per | od? | | | | Yes X No |
| Base period years Adjusted qualifying distributions Net value of noncharitable-use assets Cool. (b) divided by col. (c) | If "Yes," the foundation doesn't qualify i | ınder section 4940(e). Do not co | mplete this par | t | | | | | |
| Base period years Calendar year (or tax year beginning in) Adjusted qualifying distributions Net value of noncharitable-use assets Coll. (b) divided by coll. (c) | | ch column for each year; see the | instructions be | fore making any e | ntries. | | | | |
| 2016 | Base period years | بالمراجع والمراجع وال | atributions. | Not value of pa | | bla usa sasata | | | útión ratio |
| 2015 39 , 278 . 40 , 885 | - , , | "", " " " " | | Net value of 110 | IICHania | | _ | col. (b) dıvı | |
| 2014 40,325. 24,775. 1.6276 2013 38,011. 27,471. 1.3836 2012 67,308. 21,760. 3.0931 2 Total of line 1, column (d) 3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years 4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5 5 Multiply line 4 by line 3 6 Enter 1% of net investment income (1% of Part I, line 27b) 7 Add lines 5 and 6 7 52,273 | | | | | | | | | |
| 2013 38,011. 27,471. 1.3836 2012 67,308. 21,760. 3.0931 2 Total of line 1, column (d) 3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years 3 1.6285 4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5 4 32,09 5 Multiply line 4 by line 3 5 52,27 6 Enter 1% of net investment income (1% of Part I, line 27b) 7 Add lines 5 and 6 7 52,27 | | | | | | | | | |
| Total of line 1, column (d) 2 Total of line 1, column (d) 3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years 4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5 5 Multiply line 4 by line 3 6 Enter 1% of net investment income (1% of Part I, line 27b) 7 Add lines 5 and 6 | | | | | | | | | 1.383677 |
| 2 Total of line 1, column (d) 3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years 4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5 5 Multiply line 4 by line 3 6 Enter 1% of net investment income (1% of Part I, line 27b) 7 Add lines 5 and 6 | | | | | | | | | 3.093199 |
| Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years 4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5 5 Multiply line 4 by line 3 6 Enter 1% of net investment income (1% of Part I, line 27b) 7 Add lines 5 and 6 7 52,27 | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | 1 1 | | |
| the foundation has been in existence if less than 5 years 4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5 5 Multiply line 4 by line 3 6 Enter 1% of net investment income (1% of Part I, line 27b) 7 Add lines 5 and 6 7 52,27 | 2 Total of line 1, column (d) | | | | | | 2 | | 8.142624 |
| 4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5 5 Multiply line 4 by line 3 5 Enter 1% of net investment income (1% of Part I, line 27b) 6 Add lines 5 and 6 7 52,27 | 3 Average distribution ratio for the 5-y | ear base period - divide the total | on line 2 by 5.6 | 0, or by the numbe | er of yea | rs | | • | |
| 5 Multiply line 4 by line 3 5 52,27. 6 Enter 1% of net investment income (1% of Part I, line 27b) 6 7 Add lines 5 and 6 7 52,27. | the foundation has been in existence | e if less than 5 years | | | | | 3 | | 1.628525 |
| 5 Multiply line 4 by line 3 5 52,27. 6 Enter 1% of net investment income (1% of Part I, line 27b) 6 7 Add lines 5 and 6 7 52,27. | | | | | | | | | 22 007 |
| 5 Enter 1% of net investment income (1% of Part I, line 27b) 7 Add lines 5 and 6 7 52,27: | 4 Enter the net value of noncharitable- | use assets for 2017 from Part X, | , line 5 | | | | 1-4-1 | | 34,097. |
| 6 Enter 1% of net investment income (1% of Part I, line 27b) 7 Add lines 5 and 6 7 52,27: | 5 Multinly line 4 by line 3 | | | | | | 5 | | 52.271. |
| 7 Add lines 5 and 6 7 52,27 | Williams A by line o | | | | | | • | | 02,2.2 |
| | 6 Enter 1% of net investment income | (1% of Part I, line 27b) | | | | | 6 | | 0. |
| | | · | | | | | | | |
| 50.05 | 7 Add lines 5 and 6 | , | | | | | 7 | | 52,271. |
| 8 Enter qualifying distributions from Part XII, line 4 50, 874 | 8 Enter qualifying distributions from P | art XII, line 4 | | | | | 8 | | 50,874. |
| If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. | · · · · | · · · · · · · · · · · · · · · · · · · | a 1h and como | lata that nort using | n a 10/. + | av rata | | | / |

| Pa | Excise Tax Based on Investment Income (Section 4940 | (a), 4940(b), 4940(e), or 4 | 948 - | - see instru | ctions) |
|------------|--|--|-------|------------------|---------------|
| 18 | Exempt operating foundations described in section 4940(d)(2), check here \(\bigcup \) and ent | ter "N/A" on line 1. | | 100 m | YYSAA |
| | Date of ruling or determination letter: (attach copy of letter if nece | | | | |
| t | Domestic foundations that meet the section 4940(e) requirements in Part V, check here | | 1 | | 0. |
| | of Part I, line 27b | | | | |
| | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% | of Part I, line 12, col. (b). | | | |
| | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; other | • • • | 2 | | 0. |
| 3 | Add lines 1 and 2 | • | 3 | | 0. |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; oth | ners, 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: | | X 7/2 | | 2763 |
| a | a 2017 estimated tax payments and 2016 overpayment credited to 2017 | 6a] O. | | | |
| t | Exempt foreign organizations - tax withheld at source | 6b 0. | | | |
| 0 | : Tax paid with application for extension of time to file (Form 8868) | 6c 0. | 200 | | N Marin |
| C | Backup withholding erroneously withheld | 6d 0. | | | |
| 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 attact | hed | 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 | | |
| 11 | Enter the amount of line 10 to be: Credited to 2018 estimated tax | Refunded▶ | 11 | | |
| <u>P</u> a | rt VII-A: Statements Regarding Activities | - - | | | |
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legisla | ition or did it participate or intervene | in | | Yes No |
| | any political campaign? | | | 1a | X |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purpose | es? See the instructions for the defin | ition | 1b | X |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of | any materials published or | | | 1988 |
| | distributed by the foundation in connection with the activities. | | | | |
| | Did the foundation file Form 1120-POL for this year? | | | 1c | X |
| d | I Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the y | | | 273 | |
| | (1) On the foundation. • \$ 0. (2) On foundation managers. | | | | |
| е | Enter the reimbursement (if any) paid by the foundation during the year for political expenditu | ire tax imposed on foundation | | NO. | |
| | managers. ► \$ | | | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS | S? . | | 2 | X |
| | If "Yes," attach a detailed description of the activities. | | | | |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing ins | strument, articles of incorporation, o | r | | |
| _ | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | - | | 3 | <u> </u> |
| | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | • | | 4a | X |
| | If "Yes," has it filed a tax return on Form 990-T for this year? | | N, | /A 4b | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | • | | 5 | X |
| _ | If "Yes," attach the statement required by General Instruction T | | | | |
| б | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied eith | er. | | | |
| | By language in the governing instrument, or | d | | | |
| | By state legislation that effectively amends the governing instrument so that no mandatory of the program is the program of the program | directions that conflict with the state | iaw | 5000 | |
| _ | remain in the governing instrument? | A- D-A II I (-) I D-A M | | | X |
| ′ | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," comple | te Part II, col. (c), and Part XV | | 7 | X |
| 0. | Fatar the atotal to which the foundation records on with which the accordance Consistence of | | | | |
| ٥a | Enter the states to which the foundation reports or with which it is registered. See instructions | 5. / | | | |
| | PA | | | | |
| D | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney of each state as required by Gospon Locate at the Color of t | orney General (or designate) | | | Y SAC |
| ^ | of each state as required by General Instruction G? If "No," attach explanation | ion 4040(i)/2) or 4040(i)/E) for each | .do- | | X X |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of sections and 2017 or the tax year beginning in 20172 See the instructions for Part VIV. If "Year" complete | **** | iuar | , | $\frac{1}{x}$ |
| 10 | year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," completely part and provide the tax year? | | | 10 | $\frac{x}{x}$ |
| 10 | Did any persons become substantial contributors during the tax year? H "Yes," attach a schedule | listing their names and addresses | | | |
| | | | | Form 990- | FF (2017) |

| | 1990-FF(2017) FOITSTOWN MERCORT FOUNDATION 25 0250 | | | raye |
|----|---|---------------|---------------|-------------------------|
| P | art VII-A Statements Regarding Activities (continued) | T# 773.4 | V | L NI - |
| | | 经上级 | Yes | No |
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of | ا ا | | v |
| 40 | section 512(b)(13)? If "Yes," attach schedule. See instructions | 11 | | X |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? | ۱., | | x |
| | If "Yes," attach statement. See instructions | 12 | X | |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A | 13 | Λ | <u> </u> |
| 44 | Website address ► N/A The books are in care of ► POTTSTOWN MERCURY Telephone no. ► (610) | 323 | _ 3 በ | በበ |
| 14 | Located at \triangleright 24 NORTH HANOVER STREET, POTTSTOWN, PA | | 30 | 00 |
| 16 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here | 101 | $\overline{}$ | т. |
| 13 | and enter the amount of tax-exempt interest received or accrued during the year | N | /A | ٠ |
| 16 | At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, | | Yes | No |
| | securities, or other financial account in a foreign country? | 16 | | X |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the | 3 (13) | | 347.34 |
| | foreign country | | | |
| Pa | art VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | - 1× - |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | 遊 | Yes | No |
| 18 | During the year, did the foundation (either directly or indirectly): | 學學學 | | 200 |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? | | | i. |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | \$ 77 | | |
| | a disqualified person? Yes X No | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | | | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available | | | 1999 |
| | for the benefit or use of a disqualified person)? | | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" | 原 | | |
| | 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.) | | | 建設等 |
| t | olf any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | | | 200 |
| | section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions | 1b | 200c.621s. | Sept. 1. 200 |
| | Organizations relying on a current notice regarding disaster assistance, check here | | | \$ 0.00 0.00 0.00 |
| C | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected | | <u> </u> | ŽŽÝ |
| _ | before the first day of the tax year beginning in 2017? | 1c | 120% (SC # | X |
| 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)): | 3 | | |
| a | 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? Yes X No | | | |
| | before 2017? | | | |
| h | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect | | | |
| U | 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.) N/A | 2b | ishi.ida | film M |
| | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. | 经验 | 1863 | |
| ٠ | The provisions of seedon 4542(a)(2) and boning applied to any of the yours noted in 2a, not the yours note. | | | |
| 32 | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time | | | |
| Ja | during the year? | | | |
| b | of "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 Commissioner under section 4943(c)(7)) to dispose | | 基层 | |
| | 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, | | 建 型 | |
| | Form 4720, to determine if the foundation had excess business holdings in 2017.) N/A | 3b | | <u> مهنمت الند.</u> |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | X |
| | Did the foundation make any investment in a prior year (but after December 21, 1969) that could ignorative its charitable purpose that | 9398K | J#86-5 | 338 38 |

Form **990-PF** (2017)

had not been removed from jeopardy before the first day of the tax year beginning in 2017?

| Rart VII. B: Statements Regarding Activities for Which I | Form 4720 May Be I | Required (contin | ued) | | |
|--|---|-----------------------------------|--|-------------------------------|-----------------|
| 5a During the year, did the foundation pay or incur any amount to: | - | | | Yes | No |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section | n 4945(e))? | Y | es 🗶 No 🖟 | | 723 |
| (2) Influence the outcome of any specific public election (see section 4955); o | ectly, | · | | | |
| any voter registration drive? | Y | es X No | | 1 | |
| (3) Provide a grant to an individual for travel, study, or other similar purposes | ? | Y | es 🗶 No 🛭 | | - 3 |
| (4) Provide a grant to an organization other than a charitable, etc., organization | n described in section | | | TO THE | |
| 4945(d)(4)(A)? See instructions | | Y | es 🗶 No 🛭 | | |
| (5) Provide for any purpose other than religious, charitable, scientific, literary, | or educational purposes, or f | or | % 4 | | |
| the prevention of cruelty to children or animals? | | | es 🗶 No 🖔 | | |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und | der the exceptions described i | n Regulations | | | 1 |
| section 53.4945 or in a current notice regarding disaster assistance? See instru | uctions | | N/A | 5b | |
| Organizations relying on a current notice regarding disaster assistance, check h | | | | 注赞 | (A) |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr | om the tax because it mainta | ined | ร์ ซ | | 133 |
| expenditure responsibility for the grant? | N | [/A 🔲 Y | es 🔲 No 🛭 🥻 | | |
| If "Yes," attach the statement required by Regulations section 53.4945-5(d). | | | 5 | | |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to | pay premiums on | | i i | | 100 |
| a personal benefit contract? | | Y | es 🗶 No 🏻 🖟 | | |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a p | ersonal benefit contract? | | ľ | 6b | X |
| If "Yes" to 6b, file Form 8870. | | | 7 | Will With | 28KA |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s | helter transaction? | Y | es 🗶 No | | |
| b If "Yes," did the foundation receive any proceeds or have any net income attribu | table to the transaction? | | N/A | 7b | |
| Part VIII Information About Officers, Directors, Trusto | | nagers, Highl | y | | |
| Paid Employees, and Contractors | | | | | |
| 1 List all officers, directors, trustees, and foundation managers and t | | | | ····· | |
| (a) Name and address | (b) Title, and average hours per week devoted | (c) Compensation (If not paid, | (d) Contributions to employee benefit plans and deferred | (e) Exp | ense , other |
| | to position | `enter`-0-) | compensation | allowa | nces |
| | OFFICER | | | | |
| C/O THE POTTSTOWN MERCURY, 24 N HANOV | 1 00 | | | | _ |
| POTTSTOWN, PA 19464 | 1.00 | 0. | 0. | | 0. |
| | OFFICER | | | | |
| C/O THE POTTSTOWN MERCURY, 24 N HANOV | 1 00 | | | | ^ |
| POTTSTOWN, PA 19464 | 1.00 | 0. | 0. | <u> </u> | 0. • |
| | OFFICER | | - | | |
| C/O THE POTTSTOWN MERCURY, 24 N HANOV | 1 00 | | | | _ |
| POTTSTOWN, PA 19464 | 1.00 | 0. | 0. | <u> </u> | 0. |
| | OFFICER | | | | |
| C/O THE POTTSTOWN MERCURY, 24 N HANOV | | | | | ^ |
| POTTSTOWN, PA 19464 | 1.00 | 0. | 0. | | 0. |
| 2 Compensation of five highest-paid employees (other than those inc | (b) Title, and average | enter "NONE." | (d) Contributions to | (a) Exn | ense |
| (a) Name and address of each employee paid more than \$50,000 | hours per week devoted to position | (c) Compensation | employee benefit plans and deferred | (e) Exp account, allowa | other |
| NONE | devoted to position | | compensation | anowa | 1003 |
| NONE | | | | | |
| | - | | | 1 | |
| | | İ | | | |
| | - | | | | |
| | | | | | |
| | | | | | |
| | 1 | | | | |
| | | | | | |
| | | | | | |
| Total number of other employees paid over \$50,000 | | | | | 0 |
| | | | Form | 990-PF | (2017) |

| 3 Five highest-paid independent contractors for professional services. If none, ent | er "NONE." | |
|--|--|---------------------------------------|
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Total number of others receiving over \$50,000 for professional services | | > 0 |
| Part IX-A Summary of Direct Charitable Activities | | · · · · · · · · · · · · · · · · · · · |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant stat number of organizations and other beneficiaries served, conferences convened, research papers pro | istical information such as the oduced, etc. | Expenses |
| 1 N/A | | |
| | | |
| 2 | | |
| | | |
| 3 | | |
| | | |
| | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | <u> </u> |
| | | |
| Part IX-B Summary of Program-Related Investments | | |
| Describe the two largest program-related investments made by the foundation during the tax year o | n lines 1 and 2. | Amount |
| 1 N/A | | |
| | | |
| 2 | | |
| And the second s | | |
| All other program-related investments. See instructions. | | |
| 3 | | |
| | | |
| | | |
| | | |
| Total. Add lines 1 through 3 | • | 0. |
| | | Form 990-PF (2017) |

Page 8

| P | art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations | ndations, | , see instructions.) |
|----|--|--------------|----------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: | i i | |
| а | | 1a | 0. |
| b | Average of monthly cash balances | 1b | <u> </u> |
| c | Fair market value of all other assets | 10 | |
| | Total (add lines 1a, b, and c) | 1d | 32,586. |
| | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) 1e 0 • | [[4] | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 32,586. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 489. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 32,097. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 1,605. |
| P | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations, check here and do not complete this part.) | nd certain | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 1,605. |
| 2a | Tax on investment income for 2017 from Part VI, line 5 | ٠, | |
| ь | Income tax for 2017. (This does not include the tax from Part VI.) | | |
| C | Add lines 2a and 2b | 2c | 0. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 1,605. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 1,605. |
| 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 | 1,605. |
| P | art XII Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | E0 074 |
| | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | 1a | 50,874. |
| b | ů | 1b | <u> </u> |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | انجا | |
| | Suitability test (prior IRS approval required) | 3a | |
| | Cash distribution test (attach the required schedule) | 3b | FO 074 |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4 | 4 | 50,874. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment | _ | ^ |
| _ | income. Enter 1% of Part I, line 27b | 5 | 0. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 50,874. |
| | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of | qualifies fo | r the section |

Form **990-PF** (2017)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2016 | (c) 2016 | (d) 2017 |
|--|---------------|----------------------------|-------------|---------------------------|
| 1 Distributable amount for 2017 from Part XI, | | | | 1,605. |
| 2 Undistributed income, if any, as of the end of 2017 | | | | 2,000 |
| a Enter amount for 2016 only | | | 0. | |
| b Total for prior years: | | | | |
| · | | 0. | | |
| 3 Excess distributions carryover, if any, to 2017: | | | | |
| a From 2012 66,220. | | | | |
| bFrom 2013 36,638. | | | | |
| c From 2014 39,087. | | | | |
| dFrom 2015 37,235. | | | | |
| eFrom 2016 40,099. | | | | |
| f Total of lines 3a through e | 219,279. | | | |
| 4 Qualifying distributions for 2017 from | | | | |
| Part XII, line 4: ►\$ 50,874. | | | | |
| a Applied to 2016, but not more than line 2a | | | 0. | |
| b Applied to undistributed income of prior | | _ | | |
| years (Election required - see instructions) | · | 0. | | |
| c Treated as distributions out of corpus | | | | |
| (Election required - see instructions) | 0. | | | |
| d Applied to 2017 distributable amount | 10 050 | | | 1,605. |
| e Remaining amount distributed out of corpus | 49,269. | | | |
| 5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a)) | 0. | | | 0. |
| 6 Enter the net total of each column as indicated below: | | | | |
| & Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 268,548. | | | |
| b Prior years' undistributed income. Subtract | | | 777 | |
| line 4b from line 2b | | 0. | | |
| c Enter the amount of prior years' | | | | |
| undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously | | | | |
| assessed | | 0. | | |
| d Subtract line 6c from line 6b. Taxable | | | | |
| amount - see instructions | | 0. | | |
| e Undistributed income for 2016. Subtract line | | | 0 | |
| 4a from line 2a. Taxable amount - see instr. | | | 0. | |
| f Undistributed income for 2017. Subtract | | | | |
| lines 4d and 5 from line 1. This amount must | | | | 0. |
| be distributed in 2018 | | | | - |
| 7 Amounts treated as distributions out of | | | | |
| corpus to satisfy requirements imposed by | | | | |
| section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) | 0. | | • | |
| 8 Excess distributions carryover from 2012 | | -,,, | | , |
| not applied on line 5 or line 7 | 66,220. | | | |
| 9 Excess distributions carryover to 2018. | 00,2200 | | | |
| Subtract lines 7 and 8 from line 6a | 202,328. | | | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2013 36,638. | İ | | | |
| b Excess from 2014 39,087. | | | | İ |
| c Excess from 2015 37,235. | | | | |
| dExcess from 2016 40,099. | | | | , |
| e Excess from 2017 49, 269. | | | | ı İ |
| | | | | Form QQN_DF (2017) |

723581 01-03-18

| Part XV Supplementary Information | (continued) | _ | | |
|---|--|----------------------|---------------------------------------|-------------|
| 3 Grants and Contributions Paid During the Ye | ear or Approved for Future | Payment | · · · · · · · · · · · · · · · · · · · | |
| Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | Contribution | |
| a Paid during the year | | | | |
| OPERATION HOLIDAY-CHRISTMAS 2017-SEE | | PUBLIC | PROVIDING FOOD AND | |
| ATTACHED LISTING AND ATTACHED | İ | | TOYS TO INDIGENT AND | ļ |
| FOOTNOTE | | | NEEDY | |
| 24 N. HANOVER ST. | | | | |
| POTTSTOWN, PA 19464 | | | | 50,874. |
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| Total | | | ► 3a | 50,874. |
| b Approved for future payment | | | | |
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| Total | | | . > 3b | 0. |
| 17181 | | | | |

| Enter gros | s amounts unless otherwise indicated. | Unrelate | ed business income | | led by section 512, 513, or 514 | (e) |
|----------------------------|---|-----------------|--------------------|-----------------------|---------------------------------|-----------------------------------|
| | | (a) Business | (b) Amount | (C) Exclu- sion | (d) Amount | Related or exempt function income |
| 1 Program service revenue: | | code | | code | | |
| a — | | - | | + + | | |
| | | | | \dashv | | - |
| · : — | | | | | | |
| e — | | | | ++ | | |
| · - | | | | + | | |
| 7 Fee | s and contracts from government agencies | - | | + | | |
| | rship dues and assessments | | | ++ | | |
| | t on savings and temporary cash | | • | +++ | | . |
| investr | | | | 14 | 23. | |
| | ds and interest from securities | | | + | | |
| | tal income or (loss) from real estate: | | | + + | | |
| | t-financed property | | | + | | * * |
| | debt-financed property | | | + + | | · · · · |
| | tal income or (loss) from personal | | | + + | | |
| propert | | i | | | | |
| | nvestment income | | | | | • |
| | (loss) from sales of assets other | | | 1 1 | | |
| than inv | | | | - - | | |
| | ome or (loss) from special events | | | 1 1 | | |
| | profit or (loss) from sales of inventory | | · | | | |
| 11 Other re | | | | | | |
| а | | | | | | |
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| d | | | | | | |
| е | | | | | | |
| 12 Subtota | ıl. Add columns (b), (d), and (e) | | (|). | 23. | 0. |
| 13 Total. A | Add line 12, columns (b), (d), and (e) | • | | | 13 | 23. |
| (See works | heet in line 13 instructions to verify calculations.) | | | | | |
| Part X | VI-B Relationship of Activities | to the Acco | omplishment of | Exempt | Purposes | |
| Line No. | Explain below how each activity for which inco | | | | | hishment of |
| ▼ | the foundation's exempt purposes (other than | | | | ned importantly to the accomp | nishment of |
| | , | ,, , | , , , | | | |
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| Part XVII | Information Re Exempt Organ | | sfers to a | and Transactions a | and Relationsh | nips With Nonch | aritable | ; | |
|-----------------------|--|---------------------------|--|--|---|---------------------------------------|---|-----------|------------------------|
| 1 Did the o | | | of the following | ng with any other organizati | on described in secti | ion 501(c) | | Yes | No |
| | an section 501(c)(3) organ | | | | | - | | | |
| • | from the reporting founda | | | | | | | | ĺ |
| (1) Cash | | | | | | | | | |
| (2) Other assets | | | | | | | | | |
| b Other transactions: | | | | | | | | | |
| (1) Sale: | s of assets to a noncharitat | ole exempt organiza | tion | | | | 1b(1) | | X |
| (2) Purc | hases of assets from a nor | ncharitable exempt o | organization | | | | 1b(2) | | Х |
| (3) Rent | al of facilities, equipment, o | or other assets | | | | | 1b(3) | | Х |
| (4) Reim | bursement arrangements | | | | | | 1b(4) | 1 | X |
| | is or loan guarantees | | | | | | 1b(5) | - | X |
| | ormance of services or me | • | = | | | | 1b(6) | | X |
| _ | of facilities, equipment, mai | = | | | | | 1c | لــــا | X |
| or service | - | oundation. If the four | ndation receiv | edule. Column (b) should all ed less than fair market val | | | | sets, | |
| (a)Line no | (b) Amount involved | | | e exempt organization | (d) Description | of transfers, transactions, ar | nd sharing ar | ranneme | |
| (a)cilie ilo | (b) Amount involved | (e) Hame of | N/A | - CACHIPE OF GUINZULION | (G) Description | or carsies, carsactions, ar | | | |
| | | | 14/11 | | <u> </u> | | | | |
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| 2 1 1 6 | | | -1-11 | | | | | | |
| ın section | ndation directly or indirect i 501(c) (other than sectior omplete the following sche | 1 501(c)(3)) or in se | | or more tax-exempt organ | izations described | | Yes | X |] No |
| יו ע וויע, ט | (a) Name of orga | | | (b) Type of organization | 1 (| (c) Description of relation | nship | | |
| | N/A | | | , , , , , , , , , , , , , , , , , , , | | · · · · · · · · · · · · · · · · · · · | ···· | | |
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| Sign Here | elief, it is true, correct, and com | fiat I have examined this | s return, including eparer (other that | g accompanying schedules and n taxpayer) is based on all information of the Date | of statements, and to the mation of which preparer OFFICE Title | has any knowledge | May the IRS of turn with the hown below X Yes | ? See ins | his er str No |
| | Print/Type preparer's na | me | Preparer's s | | Date | Check if PTIN | | - | |
| | WILLIAM BR | | | | 1 11 . 12 | self- employed | | | |
| Paid | JR CPA | | Juli | a Bull of | 2/28/19 | P(| 1437 | 547 | |
| Preparer | Firm's name ► MAI | LLIE LLP | · | | | Firm's EIN ► 23-1 | | | |
| Use Only | | | | | | | | | |
| | Firm's address ▶ PO | | | | | | | | |
| | OA | KS, PA 19 | 456-06 | 80 | | Phone no. (610) | | | |
| | | | | | | | Form 99 0 |)-PF | 2017) |

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

Employer identification number

POTTSTOWN MERCURY FOUNDATION 23-6256419 Organization type (check one). Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III. year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year **\$** Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF) LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017) Name of organization

Employer identification number

POTTSTOWN MERCURY FOUNDATION

23-6256419

| Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) | Il for putions.) |
|---|------------------|
| No. Name, address, and ZIP + 4 Total contributions Type of contributions 1 BUDGET MAINTENANCE Person Payroll | Il for putions.) |
| 135 WALNUT ST \$ 10,000. Payroll Noncash | Il for putions.) |
| POTTSTOWN, PA 19464 noncash contrib | ribution |
| (a) (b) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contr | |
| Person Payroll Noncash (Complete Part I noncash contrib | |
| (a) (b) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contr | ribution |
| Person Payroll Noncash (Complete Part I noncash contrib | |
| (a) (b) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contr | ribution |
| Person [Payroll [Noncash [(Complete Part II noncash contribit | |
| (a) (b) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contri | ribution |
| Person Payroll Noncash (Complete Part II noncash contribu | |
| (a) (b) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contri | ribution |
| Person Payroll Noncash (Complete Part II noncash contribut | outions) |

Employer identification number

POTTSTOWN MERCURY FOUNDATION

23-6256419

| Part II | Noncash Property (see instructions). Use duplicate copies of Part II if | additional space 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 |
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| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
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| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
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| (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 |
| | | | |
| | | \$ | |
| 723453 11-01. | .17 | Schedule R (Form 9 | 990 990-FZ or 990-PE) (2017) |

| Schedule B | (Form 990, 990-EZ, or 990-PF) (2017) | | Page |
|---------------------------|---|--|---|
| Name of org | anization | | Employer identification number |
| | OWN MERCURY FOUNDATION | 1 | 23-6256419 |
| Part III | Exclusively religious, charitable, etc., column the year from any one contributor. Complete | ntributions to organizations described ii columns (a) through (e) and the followi | n section 501(c)(7), (8), or (10) that total more than \$1,000 for ng line entry. For organizations |
| | completing Part III, enter the total of exclusively religion | ous, charitable, etc., contributions of \$1,000 or le | uss for the year (Enter this info once) \$ |
| (a) No. | Use duplicate copies of Part III if addition | nai space is needed | |
| 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 ZIP + 4 | Relationship of transferor to transferee |
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| | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
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| | | | |
| | | (e) Transfer of gift | |
| | Transferee's name, address, a | and ZID + 4 | Relationship of transferor to transferee |
| | Transferee 3 harre, address, o | SIG ZIF T T | relationship of a disserve to a disserve |
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| | | | |
| (a) No. | | <u> </u> | |
| from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
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| | | (e) Transfer of gift | 1 |
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| - | Transferee's name, address, a | and ZIP + 4 | Relationship of transferor to transferee |
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| | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | | |
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| | | (e) Transfer of gift | |
| | Transferee's name, address, a | and 7IP + 4 | Relationship of transferor to transferee |
| | manareree a name, audress, c | reve mall T T | |
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| FORM 990-PF INTEREST ON SAV | INGS AND TEM | PORARY | CASH II | NVESTMENTS | STATEMENT | 1 |
|-------------------------------------|---------------------------------------|---------|------------------------|------------------------------|------------------------------|----------------|
| SOURCE | (A REVE PER B | | | (B) NVESTMENT NCOME | (C) ADJUSTED NET INCOM | |
| BB&T BANK | · · · · · · · · · · · · · · · · · · · | 23. | | 23. | | |
| TOTAL TO PART I, LINE 3 | | 23. | | 23. | | |
| FORM 990-PF | ACCOUNTI | NG FEES | 3 | | STATEMENT | 2 |
| DESCRIPTION _ | (A) EXPENSES PER BOOKS | NET IN | B) IVEST- INCOME | (C) ADJUSTED NET INCOM | | |
| ACCOUNTING FEES | 1,990. | | 0: | | | 0. |
| TO FORM 990-PF, PG 1, LN 16B | 1,990. | : ===== | 0. | | | 0. |
| FORM 990-PF | OTHER E | XPENSES | , | | STATEMENT | 3 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | | | | (D) CHARITAI E PURPOSI | |
| REGISTRATION CONTRACTED SERVICES | 100. 915. 11. | | 0. 0. 0. | | | 0. 0. 0. |
| SERVICE FEES | | | | | | |

SUPPLEMENTAL INFORMATION - FORM 990-PF, PART XV

ITEM 3, GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR OR APPROVED FOR FUTURE PAYMENTS

THE FOUNDATION PROVIDED ASSISTANCE TO INDIGENT AND NEEDY FAMILIES IN THE POTTSTOWN COMMUNITY THROUGH "OPERATION HOLIDAY."

THE FOUNDATION OBTAINED A LIST OF NAMES OF INDIGENT AND NEEDY FAMILIES FROM THE FOLLOWING IRC SEC. 501(C)(3) ORGANIZATIONS, GOVERNMENTAL ENTITIES AND "SECTION 8" APARTMENT COMPLEXES.

- COMMUNITY SERVICES OF DEVEREUX, 1041 W. BRIDGE ST. PHOENIXVILLE, PA 19460
- CREATIVE HEALTH SERVICES, 11 ROBINSON ST. POTTSTOWN PA 19464
- COMMUNITY HEALTH AND DENTAL, 11 ROBINSON ST POTTSTOWN, PA 19464
- NEW HOPE BAPTIST CHURCH, CENTRAL AVE, PAOLI, PA 19301
- HEART OF GOD FAMILY WORSHIP CENTER, 201 N. HANOVER ST POTTSTOWN, PA 19464
- MONTGOMERY COUNTY ASSISTANCE OFFICE, 1931 NEW HOPE ST NORRISTOWN, PA 19401
- MONTGOMERY COUNTY COMMUNITY COLLEGE, 101 COLLEGE DRIVE POTTSTOWN, PA 19464
- FAMILY SERVICES OF MONTGOMERY COUNTY, 3125 RIDGE PIKE, NORRISTOWN, PA 19406
- POTTSTOWN WORKS, THE SALVATION ARMY OF POTTSTOWN, 137 KING ST, POTTSTOWN, PA 19464
- MONTGOMERY CO. OFFICE OF CHILDREN/YOUTH, 1430 DEKALB ST NORRISTOWN, PA 19401
- NORTH COVENTRY FOOD PANTRY 148 W. MAIN ST POTTSTOWN PA 19464
- OWEN J. ROBERTS SCHOOL DISTRICT, 901 RIDGE ROAD POTTSTOWN, PA 19465
- PARK SPRING APARTMENTS, 1800 PARK SPRING BLVD SPRING CITY, PA 19475
- POTTSTOWN CLUSTER OF RELIGIOUS COMMUNITIES 57 N. FRANKLIN ST POTTSTOWN, PA 19464
- PHOENIXVILLE HOSPITAL, 140 NUTT ROAD PHOENIXVILLE PA 19460
- POTTSTOWN SCHOOL DISTRICT ADMINISTRATIVE ANNEX 940 N.FRANKLI

POTTSTOWN, PA 19464

ROLLING HILLS APARTMENTS, 2120 BUCHERT ROAD POTTSTOWN, PA 19464

WOMEN'S CENTER OF MONTGOMERY COUNTY, 1800 E. HIGH ST POTTSTOWN, PA 19464

COLEBROOKDALE ELEMENTARY SCHOOL, 1001 MONTGOMERY AVE, BOYERTOWN, PA 19512

| | NAME | | PHONE | CHILDRE | NOTAL |
|------------------|--|-----------|--|--|-------------|
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| | Children | | and a second second | | |
| 12 | | ·;~ - | e programme construction of the second construct | - u - A | , |
| | Community Health and Dental | - d | Michigan Committee Committ | ejent east a | · |
| | Linda Gambone 610-326-9460 | 4 | a or to have been spillar as a | | + |
| | Linda Gambone o 10-320-3400 | • | 1 | | |
| a~-{ | Allen, Sonya | - ' | 267-810-7484 | · ~ · · · · · · · · · · · · · · · · · · | |
| | Beasley, Nadie | Semantia. | 484-948-9819 | " ··· 7 | |
| | Lawrence, Shanelle | | 267-593-7848 | . 4 | ·, |
| | Freeman, Dorothy * | | 484-363-7808 | 2 | |
| | Eagle, Shawn | | 484-520-6359 | 6 | |
| | Carty, Ben | , i | 484-369-9750 | 1 | , |
| | Carter-Jones, Dorshelle | | 484-948-0547 | 4 | |
| | Sanchez, Betty | -a' | 484-300-7932 | 4 | • |
| | Sanchez, Piedad | 7 | 610-406-1492 | 4 | |
| , | Stehman, Megan * | | 484-709-5097 | · 3 | |
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| | THE PARTY SECTION AND ADMINISTRATION OF THE PARTY OF THE | • | - a +i. | , <u>.</u> . | -, 1- , |
| : | Community Services Devereux | | | | |
| | Nikita Kadiwar 610-422-1479 | | | 7407 / | |
| | and blooks over medical account and the assemble are a first translation of the second | ; | Mark Case & Mark St. St. Co. Co. | ; | 1000000 |
| • | Timmons, Alexis * | , | 610-310-4421 | · · · · · · · · · · · · · · · · · · · | y venerally |
| | Schaeffer, Anna | Žaka Ve | 484-326-7477 | ``~'3 | · |
| | Box, Vandelyn * | | 484-716-4431 | · · · 3 | |
| [| Briggs, Tarama | \$ | 484-624-3348 | - 1' | |
| | Moore, Mary | | 484-716-0288 | 5 | 7, |
| | Mayo, Joanne * | | 424-333-5771 | 1 | |
| 1 | Durante, Judy * | | 610-213-1969 | · 4 | • |
| | THE PROPERTY COMMENTS AND AND AND AND AND AND AND AND AND AND | | 4 CA1 7671 C 7 C 7 C 7 C 7 C 7 C 7 C 7 C 7 C 7 C | | , T18 |
| 7 | and the second s | •." | *************************************** | 1 | 1 " 1. |
| | Creative Health Services | | - १ र म्हा १ १ ४ व | * - · · · | Ç= 1 |
| | Jaime Tyson 610-326-9250 x 1215 | | ` - ' | • | |
| | | | _ | | • |
| | Singelton, Darshann | ď | 267-248-5975 | 4 | |
| | Yorgey, Dawn | • | 990-2614 | 2 | |
| | Seeber, Katrina | | 802-9752 | 3 | |
| • | Alderfer, Michelle | 1 | 896-7546 | 2 | |
| | Henderson, Marenda | 484- | 751-8111 | , 2 | |
| | Carbungcal, Chris | } | 484-854-1201 | 4 | |
| | Wilson, Jennifer | | 610-883-0350 | 2 | |
| - 5 | Walton, Laura | ! | 484-374-3600 | 4 | |
| | Kenny, Geneva | } | 484-688-3300 | 3 | - { |
| | THE COMMUNICATION OF THE PARTY | ļ | The second secon | | 26 |
| j | A CONTRACTOR OF THE PROPERTY O | | | |] |
| | The second secon |] | | | |
| i | A PARTY NAMED TO A PARTY OF THE | ٠د | | | |
| _ _ | and the second s | | مين در معود مدم در در مدم در در مد | Company of the second s | |

| 1 | Family Services of Montgomery County | normalises with the second control of the control o | million and comment | |
|---|--|---|--|----------|
| | Jane Boughter 610-326-1610 | Andrewson the property of the second securities of the second sec | and the second s | |
| <u> </u> | CONTRACTOR | The Markagan among re | | |
| <u>`</u> | Evankik, Autumn | 484-428-0781 | 7 | 1 7 |
| 1-1- | Carty, Jill | 267-918-0170 | The same of a contract of the same | |
| 177 | Hopkins, Ashley | 610-469-4392 | , | } |
| 1-1- | Gatlin, Alyssia | 484-366-9381 | 5 | ,, |
| | Wright, Felicia | 484-949-0190 | 3 | |
| 1 | Vasquez, Julia | 484-687-8822 | 3 | • |
| 1- | Gober, Amanda | 484-644-9436 | | |
| | Wood, Kari | 484-587-7518 | r``` "3' | |
| | production and the production of the second | for the | 7 July 1 | 22 |
| | | Tener w | A * 1 - | |
| | Heart of God Family Worship Center | | - v | |
| ļ | Linda Anthony 610-802-1000 | | | ; |
| | PERIOD AND THE SECOND CONTRACT OF THE SECOND CONTRACT OF THE SECOND CONTRACT OF THE SECOND CONTRACT OF THE SECOND CONTRACT OF THE SECOND CONTRACT OF THE SECOND CONTRACT OF THE SECOND CONTRACT OF THE SECOND CONTRACT OF T | ing of the second | , | 7 |
| | Johnson, Crystal * | 484-300-6851 | ······································ | -1 |
| | Cyrus, Kim | 610-864-4931 | - ,, ,,' ,- , 2 -, ,- | · |
| | Warren, Jessica | 443-608-0701 | · ~ · · · · · · · · · · · · · · · · · · | |
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| 1 Perry, Lisa | 484-626-6624 | | |
| 1 Pendleton, Kristina | 267-904-1382 | 3 | } |
| 1 Kehler, Ashley | 484-983-2195 | 2 - ~ M | |
| 1 Zekardi, Marina | 610-507-0472 | Tentral wasterseen from | } |
| 1 Thompson, Rachel | 610-718-6020 | | : |
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