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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.

OMB No 1545-0052 2018

Department of the Treasury Internal Revenue Service ▶ Go to www.irs.gov/Form990PF for instructions and the latest information. Open to Public Inspection For calendar year 2018 or tax year beginning May 1, 2018, and ending Dec 31, 2018 A Employer identification number Name of foundation FRIENDS FOUNDATION FOR THE AGING 22-1524182 Number and street (or P.O. box number if mail is not delivered to street address) B Telephone number (see instructions) Room/suite (215)478-6663PO BOX 1081 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here ▶ LANGHORNE PA 19047 Initial return of a former public charity Check all that apply Initial return D 1. Foreign organizations, check here П Amended return Final 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 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 Accounting method:

Cash

Accrual If the foundation is in a 60-month termination end of year (from Part II, col. (c), Other (specify) under section 507(b)(1)(B), check here line 16) ▶ \$ (Part I, column (d) must be on cash basis) 12,209,088. 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 éxpenses per income income purposes books the amounts in column (a) (see instructions).) (cash basis only) to the emilian. of my ton lights " of the Contributions, gifts, grants, etc., received (attach schedule) 1-9-24-52 Jane 6 1 or the first of the state of the 2 我这些是他的人 经存的 医生态管 Check ► 🖾 if the foundation is not required to attach 5ch. B To Brown Swall to the street 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities. 327,648. 327,648 Gross rents 5a TEPONE TAKE ! 金属的原始性的 医环境 医环境 化二乙基酚甲基二乙基酚酚二乙醇 h Net rental income or (loss) 697,593. (1) (1) (1) (1) (1) (1) (1) (1) (1) 6a Net gain or (loss) from sale of assets not on line 10 子也能(6) L-ba Stmt Gross sales price for all assets on line 6a 6, 305, 087 الم الله المراجعة 7 Capital gain net income_(from Part IV, line-2 697,593. 12 1 A. والمستمالة المستراءة Net short-term capital gain . RECEIVED 了我大大的好事。 1 11 201 q Income modifications 44 يزيلو جيان Gross sales less returns and allowances 4 4 6 6 6 7 7 10a b Less: Cost of goods sold 7 - 75 5 4 化烷二烷 地名 Gross profit or (loss) (attach schedule). C 11 Other income (attach schedul) GDEN. UT. Total. Add lines 1 through 11 . 四4、二、晚四城 12 1,025,241 1,025,241 13 Compensation of officers, directors, trustees, etc. 47,568. 47,568. Expenses 14 Other employee salaries and wages 15 Pension plans, employee benefits 0 L-16a Stmt 15,997. 16a Legal fees (attach schedule) . . 15,997. Accounting fees (attach schedule) L-1.6b. Stmt. 23,275. <u>23,275.</u> Operating and Administrative Other professional fees (attach schedule) L-16c .Stmt. 2,920. 281 2,637. 17 18 Taxes (attach schedule) (see instructions)e. Stmt. 23,639. 3,734. 至。如 為上海 19 Depreciation (attach schedule) and depletion . . . 37. <u>2,</u>931. 20 931 21 Travel, conferences, and meetings . 9,889 9,889. 22 Printing and publications . . . Other expenses (attach schedule) See .Stmt. 23 32,837. 30,361 2,476. 24 Total operating and administrative expenses. 159,093 30,679 108,507. 25 Contributions, gifts, grants paid . . . 16.18. 中华发展 234,000. 234,000. 26 Total:expenses and disbursements. Add lines 24 and 25 30,679. 342,507. 393,093 30,0 T. HE 27 Subtract line 26 from line 12. Excess of revenue over expenses and disbursements .3 632,148 深 光 海 数 防 下 報 J. 4 "2", 994,562. **Nethinvestment income** (if negative, enter -0-) .

For Paperwork Reduction Act Notice, see instructions.

Adjusted net income (if negative, enter -0-) .

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Pa	HELL	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	En	d of year
		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	4,911.	2,395	2,395.
	2	Savings and temporary cash investments	19,590.	130,082	
	3	Accounts receivable ►	3	1,175	
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶	43 43 79 31	1 1 1 1 Sugar	
		Less: allowance for doubtful accounts ▶			
	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) ▶	- 1 1 page		A 12" 1
	•	Less: allowance for doubtful accounts ▶		<u> </u>	
S	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
S	10a	Investments—U.S. and state government obligations (attach schedule)			
`	b	Investments—corporate stock (attach schedule) L-10b Stmt	6 360 003	- 400 370	5 400 370
	c	Investments—corporate bonds (attach schedule) L-10c Stmt		5,400,378	
	11	Investments—land, buildings, and equipment basis	2,968,711.	3,389,199	3,389,199.
	• •	Less: accumulated depreciation (attach schedule)	J.S. 145° 10"	The second secon	
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule) . L-13. Stmt	2 067 642	2 076 016	2 276 216
	14		3,967,643.	3,276,916	
	14	l and, buildings, and equipment; hasis ► 0.	and the state of t		
	45	Less: accumulated depreciation (attach schedule) ▶ 0.	78.	0	
	15	Other assets (describe ► L-15 Stmt)	30,860.	10,118	10,118.
	16	Total assets (to be completed by all filers—see the			
	47	instructions. Also, see page 1, item I)	13,353,996.	12,209,088	
	17	Accounts payable and accrued expenses	61,665.	41,683	
S	18	Grants payable			
Liabilities	19	Deferred revenue			-
ا ق	20	Loans from officers, directors, trustees, and other disqualified persons			1 t 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Ľ	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ► L-22 Stmt)	225,000.	125,000	
	23	Total liabilities (add lines 17 through 22)	286,665.	166,683	
ģ		Foundations that follow SFAS 117, check here ▶ 🗵			
Balances		and complete lines 24 through 26, and lines 30 and 31.			
<u>a</u>	24	Unrestricted	13,067,331.	12,042,405	
Ba	25	Temporarily restricted			100
ᅙ	26	Permanently restricted			Life E
Fund		Foundations that do not follow SFAS 117, check here ▶ □			
览		and complete lines 27 through 31.			
Net Assets or	27	Capital stock, trust principal, or current funds			
ë	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
SS	29	Retained earnings, accumulated income, endowment, or other funds			the state of the state of
T A	30	Total net assets or fund balances (see instructions)	13,067,331.	12,042,405	
S	31	Total liabilities and net assets/fund balances (see			
		instructions)	13,353,996.	12,209,088	
Pa	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			
		of-year figure reported on prior year's return)			13,067,331.
2	Ente	er amount from Part I, line 27a			632,148.
3	Othe	er increases not included in line 2 (itemize) ► UNREALIZED GA	IN/LOSS		-1,657,074.
4		lines 1, 2, and 3			
5		reases not included in line 2 (itemize) ▶			
6		I net assets or fund balances at end of year (line 4 minus line 5)-	Part II, column (b), III		

Part	V Capital Gains and	Losses for Tax on Investme	ent Income			
		d(s) of property sold (for example, real est e, or common stock, 200 shs. MLC Co)	ate,	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a_(COMPUTER			P	03/21/2014	10/01/2018
b	PUBLICLY TRADED SEC	URITIES		P	01/01/2000	12/31/2018
c_						
<u>d</u>				-		<u> </u>
е_	·					
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		in or (loss) (f) minus (g))
a_	0.	778.		819.		-41.
<u> </u>	6,305,087.			5,607,453.		697,634.
<u>c</u>			·	·	- -	
<u>d</u>						
e_	Complete only for assets show	ving gain in column (h) and owned b	v the foundation	on 12/31/69	m - /-	
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exces	ss of col. (i) . (j), if any	col (k), but n	ol. (h) gain minus ot less than -0-) or (from col. (h))
a						-41.
b						697,634.
<u>C</u> _						
d						
e_					 .	
2	Capital gain net income or	mer cabilariossi 7	ilso enter in Pa enter -0- in Pa		2	697,593.
3	If gain, also enter in Part I	or (loss) as defined in sections, line 8, column (c). See instruc	tions. If (loss)	, enter -0- in)		
Part		er Section 4940(e) for Redu			l 3 l	
		ate foundations subject to the s				
Was t	s," the foundation doesn't qu	section 4942 tax on the distribut ualify under section 4940(e). Do	not complete t	his part.		☐ Yes ⊠ No
1	·	unt in each column for each yea	r; see the instru	uctions before m	aking any entries	
Cale	(a) Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value o	(c) of noncharitable-use a		(d) stribution ratio divided by col (c))
	2017	756,25		13,234,8	314.	0.057141
	2016	636,78		12,300,6		0.051768
	2015	676,00		12,541,3		0.053902
	2014	661,55		12,684,3		0.052155
	2013	593,22	(1.1	12,279,	//5.	0.048309
2	Total of line 1, column (d)				. 2	0.263275
3		for the 5-year base penod—divi undation has been in existence			r by . 3	0.052655
4	Enter the net value of nonc	charitable-use assets for 2018 from	om Part X, line	5	. 4	12,721,111.
5	Multiply line 4 by line 3 .				. 5	669,830.
6	Enter 1% of net investmen	t income (1% of Part I, line 27b)			. 6	9,946.
7	Add lines 5 and 6				. 7	679,776.
8		ns from Part XII, line 4			. 8	342,507.
	Part VI instructions.	ter than line 7, check the box in	ran vi, line 1	o, and complete	that part using a	1% tax rate. See the

Part \	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see in	nstruction	s)		
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)	<u></u>	12 4		
b		19,891.			
_	here \buildress and enter 1% of Part I, line 27b		• 1		
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	0.			
3		19,891.			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	0.			
5	the control of the co	19,891.			
6	Credits/Payments.	,	·		
a	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 9,891.	31, 3	"		
ь	Exempt foreign organizations—tax withheld at source 6b		<u> </u>		
C	Tax paid with application for extension of time to file (Form 8868) . 6c 10,000.	1 3 3 18 / m	:]		
d	Backup withholding erroneously withheld	19,891.	1		
7 8	Total credits and payments. Add lines 6a through 6d	19,891.			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	0.			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	0.			
11	Enter the amount of line 10 to be. Credited to 2019 estimated tax > 0. Refunded > 11	0.			
	VII-A Statements Regarding Activities		—		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	Yes	No		
	participate or intervene in any political campaign?	1a	×		
b					
С	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. Did the foundation file Form 1120-POL for this year?	7. 7. 7. 5. 23. 7. 7. 1c	×		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	·	' l		
	(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 imposed		' · .		
•	on foundation managers. ► \$				
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	<u>×</u>		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes.	3	<u>.~ ∴.</u> ×		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	×		
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	×		
	If "Yes," attach the statement required by General Instruction T.		1		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		. 1		
	By language in the governing instrument, or	- -			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that				
_	conflict with the state law remain in the governing instrument?	6 x			
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7 ×			
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶		[*]		
	If the annual of War had been 7 been the foundation formicked a second form 000 DE to the Attended Opening				
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G?</i> If "No," attach explanation	8b ×			
_		OD X			
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes,"	<u>-</u>	/ لـــن		
	complete Part XIV	9	×		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				
	names and addresses	10	×		

Part	/II-A Statements Regarding Activities (continued)			
		· ,	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		×
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement, See instructions	12		×
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application		+	
	Website address ► WWW.FRIENDSFOUNDATIONAGING.ORG			
14	The books are in care of ► SUSAN_HOSKINS Telephone no. ► (215)		666.	3
45	Located at ▶ PO BOX 1081 LANGHORNE PA ZIP+4 ▶ 1904 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here	<i>!</i>		
15	and enter the amount of tax-exempt interest received or accrued during the year	• •	•	
16	At any time during calendar year 2018, 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		×
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name o	1 .		77.
	the foreign country ▶	<u> </u>	<u>'</u> ' .	
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly)		√' *	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ № (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	, [Į	
	disqualified person?			.
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes XIN	i i	<u>'</u>	. -
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? X Yes No.	1 6	- 1	1
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	1".	1.5	, e
	the benefit or use of a disqualified person)?	,	(Sr	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		, ,	1::
	foundation agreed to make a grant to or to employ the official for a penod after	[·, ·		- 1
	termination of government service, if terminating within 90 days.)		4 mj	1 7
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions			لبا
	Organizations relying on a current notice regarding disaster assistance, check here	1b		×
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		1	
·	were not corrected before the first day of the tax year beginning in 2018?	10	<u> </u>	×
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))		7	`
а	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and	'.	1	, ,-,-
	6e, Part XIII) for tax year(s) beginning before 2018?	, ,		፞ ∤∤
	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.))	نسناه	لنب∤
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	20	+	1
			, '	
3a	► 20 , 20 , 20 , 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		1, 1	
	at any time during the year?...................... 🗌 Yes 🛛 🛛 N	, ;	,,,	
b	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation of	٠ ١	٠ []	.] .]
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the		· 1.	1. 1
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of	f	1	1::
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		· **	<u> </u>
_	foundation had excess business holdings in 2018.)	3b	+	1
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes' Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize it			X
b	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018			J

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	0-PF (2018) VII-B Statements Regarding Activities	for W	Ibiah Farm	4700 1	May Do D		al (a a a tio	الم مديد			Page 6
				4/201	иау ве н	equire	a (contil	iuea)		Vaa	- N-
5a	During the year, did the foundation pay or incur a	•		- (- o - b	.o. 4045(a)	١,0	□v	⊡	7'	Yes	No
	(1) Carry on propaganda, or otherwise attempt t						∐ Yes	⊠ No	ľ	' .	.
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?								-		·
	(3) Provide a grant to an individual for travel, study, or other similar purposes?								1	1	
	(4) Provide a grant to an organization other than a charitable, etc., organization described in										
	section 4945(d)(4)(A)? See instructions						☐ Yes	⊠ No	•		
	(5) Provide for any purpose other than religious	, charita	able, scientifi	c, litera	ry, or educ	ational			\ . •		
	purposes, or for the prevention of cruelty to						☐ Yes	⊠ No	. I.	l:	
b	If any answer is "Yes" to 5a(1)–(5), did any of the							cribed	<u> </u>	ļ.	
	in Regulations section 53.4945 or in a current no	_	_						5b	ļ. —	
_	Organizations relying on a current notice regards	_						▶⊔	,	i,	
С	If the answer is "Yes" to question 5a(4), does to because it maintained expenditure responsibility										· .
	·		_				Yes	∐ No			
6a	If "Yes," attach the statement required by Regul- Did the foundation, during the year, receive any					miume			-	•	Y 14
Va	on a personal benefit contract?		•			111111111111111111111111111111111111111	□Yes	⊠ No	1		
b	Did the foundation, during the year, pay premiur					hanafıt		_	6b		<u></u> -
U	If "Yes" to 6b, file Form 8870.	iis, uii e	city or maire	July, Oil	a personal	Denem	Comiaci	٠.	00	 	-
7a	At any time during the tax year, was the foundation	a party t	to a prohibited	tax sh	elter transac	tion?	☐ Yes	X No	1	:	~"
b	If "Yes," did the foundation receive any proceed						_	_	7b	1	
8	Is the foundation subject to the section 4960 ta								1	 ;	1
	remuneration or excess parachute payment(s) d							⊠ No	, 0	' <i>ای</i>	. 3:
Par	VIII Information About Officers, Direct								mploy	ees,	
	and Contractors										
_1	List all officers, directors, trustees, and found										
	(a) Name and address	hou	e, and average rs per week ed to position	i (lf r	mpensation not paid, ter -0-)	emplo	Contribution byee benefit erred compo	plans	(e) Expe	ense ac allowar	
JAM	ES ERIC ANDREWS	V.PRESI	DENT/TREASUER								
_2_L(ONGVIEW TERRACE MORRISTOWN NJ 07960		3.00		0.			0.			0.
	N COOLEY	TRUS						_			
	B DUNDEE-HIMROD ROAD DUNDEE NY 14837		2.00		0	_		0.			0.
	AN HOSKINS	EXEC	DIRECTOR		47 560			0			^
	BROADVIEW AVE LANGHORNE PA 19047		20.00		47 <u>,568.</u>			0.			0.
<u>See</u>	Statement		15 00		0			0			0
2	Compensation of five highest-paid employe	es (oth	15.00	e incl	0.	ne 1 —	eaa instr	0.	e) If n	one	O. enter
_	"NONE."	cs (0til	er than tho.	56 IIIOI	aded on n	116 1	366 11130	uction.	3j. 11 11	ione,	GIILCI
	(a) Name and address of each employee paid more than \$50,0	00	(b) Title, and a hours per v devoted to p	veek	(c) Compe	nsation	(d) Contrib employee plans and compen	benefit deferred	(e) Expo	ense ac allowa	count,
NONE											
			1				ļ				
										_	
		 -	-								
Total	number of other employees paid over \$50,000 .		<u> </u>		<u> </u>		<u> </u>	_			
	Transcription employees paid over 400,000 .	• •		· · ·	• • •	· · ·	····		0 Form 9 9	90-PF	(2018)
DAA		DC	V 02/04/40 BBO							•	,,,

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Par	t VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Er and Contractors (continued)	nployees,
3	Five highest-paid independent contractors for professional services. See instructions. If none, enter "NON	E."
	(a) Name and address of each person pald more than \$50,000 (b) Type of service	(c) Compensation
NON	E	
		
		
		<u> </u>
		
	I number of others receiving over \$50,000 for professional services	0
	t IX-A Summary of Direct Charitable Activities	
	st the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ganizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1	NONE	
2		0.
_		
3		
4		
	rt IX-B Summary of Program-Related Investments (see instructions) escribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
_ <u></u> 1	NONE	74110011
		0.
2		
Al	other program-related investments. See instructions.	
3		
Tota	al. Add lines 1 through 3	0.
		Form 990-PF (2018
BAA	REV 02/01/19 PRO	

Part	winimum investment Heturn (All domestic foundations must complete this part. Forei see instructions.)	gn fol	undations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	12,922,637.
	Average of monthly cash balances	1b	-7,804.
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	12,914,833.
е	Reduction claimed for blockage or other factors reported on lines 1a and	Ī	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	12,914,833.
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	<u>193,</u> 722.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	12,721,111.
6	Minimum investment return. Enter 5% of line 5	6	426,942.
Part :	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations, check here ► and do not complete this part.)	ounda	ations
1	Minimum investment return from Part X, line 6	1	426,942.
2a	Tax on investment income for 2018 from Part VI, line 5	,	
b	Income tax for 2018. (This does not include the tax from Part VI.) 2b	<u> </u>	
С	Add lines 2a and 2b	2c	19,891.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	407,051.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	407,051.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	<u>Inne 1 </u>	7	407,051.
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	342,507.
b	Program-related investments—total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	· ·	
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	342,507.
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	342,507.
	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 whe	ther the foundation
		_	Form QQ0-PF (2018

Part	Undistributed Income (see instruction	ons)			
		(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1	Distributable amount for 2018 from Part XI, line 7				407 051
2	Undistributed income, if any, as of the end of 2018				407,051.
a	Enter amount for 2017 only			0.	
b	Total for prior years. 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2018				<u></u>
а	From 2013				
b	From 2014				
C	From 2015				,
d	From 2016	:	į	į	
e	From 2017			' •	i
f	Total of lines 3a through e	236,001.			
4	Qualifying distributions for 2018 from Part XII,	230,001.			
•	line 4: ► \$ 342,507.			! !	
a	Applied to 2017, but not more than line 2a .				
b	Applied to undistributed income of prior years (Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2018 distributable amount	· · · · · · · · · · · · · · · · · · ·			342,507.
е	Remaining amount distributed out of corpus	0.			.
5	Excess distributions carryover applied to 2018				
_	(If an amount appears in column (d), the same	1			
	amount must be shown in column (a).)	64,544.			64,544.
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	171,457.			
b	Prior years' undistributed income. Subtract	· · · · · · · · · · · · · · · · · · ·			
	line 4b from line 2b		0.		-
c	Enter the amount of prior years' undistributed		_		
	income for which a notice of deficiency has				I
	been issued, or on which the section 4942(a) tax has been previously assessed				
	•				
d	Subtract line 6c from line 6b. Taxable amount—see instructions		0.		<u></u>
0	Undistributed income for 2017. Subtract line				
	4a from line 2a. Taxable amount—see				
	instructions			0.	
f	Undistributed income for 2018. Subtract lines				
	4d and 5 from line 1. This amount must be	1	•		
	distributed in 2019				0.
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)				
0	Excess distributions carryover from 2013 not	-			
8	applied on line 5 or line 7 (see instructions).	0.			
9	Excess distributions carryover to 2019.		 		
3	Subtract lines 7 and 8 from line 6a	171,457.			
10	Analysis of line 9:	1/1/13/			
а	Excess from 2014 0 .				
b	Excess from 2015 28,112.	1			
c	Excess from 2016	†			
d	Excess from 2017	1			
_	Excess from 2018 0.	1			
_		i e		1	

_	4	•
Page	1	Ł

	00-FF (2010)					Page 10
Part .	XIV Private Operating Founda	tions (see instru	ictions and Part	VII-A, question	9)	N/A
1a	If the foundation has received a ruling	or determination	letter that it is a	private operating		
	foundation, and the ruling is effective for			` ' ŏ		
b	Check box to indicate whether the four			ation described in s	ection 4942(I)	(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
	investment return from Part X for each year listed			- · ·		
b	85% of line 2a			_	 	
c	Qualifying distributions from Part XII,					
_	line 4 for each year listed					
d	Amounts included in line 2c not used directly			 	 	
•	for active conduct of exempt activities					
е	Qualifying distributions made directly			 / 		 -
·	for active conduct of exempt activities.					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the		/	 		
Ū	alternative test relied upon:					
а	"Assets" alternative test—enter					
4	(1) Value of all assets					
	(2) Value of assets qualifying under				-	
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test—enter 2/3			 		 -
	of minimum investment return shown in					
•	Part X, line 6 for each year listed	/		 		
С	"Support" alternative test—enter.					
	(1) Total support other than gross investment income (interest,					
	dividends, rents, payments on					
	securities loans / (section					
	512(a)(5)), or royalties)				-	<u> </u>
	(2) Support from general public and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii)	· · · · · · · · · · · · · · · · · · ·	<u> </u>			
	(3) Largest amount of support from an exempt organization					
		<u> </u>				
Part	Gross investment income XV Supplementary Information	n (Complete t	is part only if:	the foundation	had \$5,000 or m	oro in accete at
ı aı t	any time during the year-	•	-	the roundation	iiau ψο,ουο οι iii	ore in assets at
1	Information Regarding Foundation			<u>_</u>	<u> </u>	
' a	List any managers of the foundation		uted more than 2	% of the total con	tributions received	by the foundation
u	before the close of any tax year (but of					by the realidation
,	NONE	only it they have e		. 10.1 40,000). (000	00011011007 (07(2)1)	
b	List any managers of the foundation	who own 10% o	r more of the sto	ock of a corporation	on (or an equally is	arge portion of the
•	ownership of a partnership or other e			•		arge portion or the
	NONE	indity) or innormalia	1001.001.1100	rozo er greater in		
2	Information Regarding Contribution	Grant Gift Lo	an Scholarchin	oto Programe:		
~	Check here ► 🗵 if the foundation				organizations and	l door not cocont
	unsolicited requests for funds. If the	-	•		_	•
	complete items 2a, b, c, and d. See it		girio, gianto, etc.	, to individuals of	organizations and	other conditions,
a	The name, address, and telephone no		dress of the ners	on to whom applie	eations should be a	ddraecad:
a	The flame, address, and telephone in	umber or email ac	diess of the pers	on to whom applic	ations should be a	dulessed.
h	The form in which applications should	t be submitted an	d information and	t materials they sh	ould include:	
b	The lotter without applications should	a de audimitteu an	o mormanon and	i materiais triey SH	odia miciale.	
	Any submission deadlines:					
_						
d	Any restrictions or limitations on av	wards, such as b	y geographical a	areas, charitable i	fields, kinds of ins	stitutions, or other
	factors:					

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

3 Grants and Contributions Paid During the Year or Approved for Future Payment							
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount			
Name and address (home or business)	or substantial contributor	reciplent	Contribution				
a Paid during the year NEW YORK YEARLY MEETING 15 RUTHERFORD PLACE	N/A		PASTORAL CARE FOR SENIORS AND ADULTS				
NEW YORK NY 10003 FRIENDS SERVICES FOR THE AGING 670 SENTRY PARKWAY #120	N/A	PUBLIC	WITH DISABILITIES-ARCH DEVELOP CAPABLE STAFF THROUGH LEADERSHIP	64,000.			
BLUE BELL PA 19422 FRIENDS HOUSE RETIREMENT COMMUNITY 17340 QUAKER LANE	N/A	PUBLIC	INSTITUTE & STUDENT INTERNSHIPS AGING WELL WITH FRIENDS PROGRAMS,	35,000.			
SANDY SPRING MD 20860 QUAKER LIVING CONSORTIUM FRIENDS LIFECARE PARTNERS 531 PLYMOUTH RD, STE 500	N/A	PUBLIC	TRANSPORTATION & SUPPORT STUDY ISOLATION AND LONELINESS IN	40,000.			
PLYMOUTH MEETING PA 19462 PHILIP JAISOHN FOUNDATION 6075 OLD YORK RD	N/A	PUBLIC	SENIOR LIVING DEVELOPE CARE NAVIGATOR SERVICES	30,000.			
PHILADELPHIA PA 19126 AMERICAN FRIENDS SERVICE COMMITTEE 1501 CHERRY STREET	N/A	PUBLIC	FOR KOREAN SENIORS EXPAND CAPACITY TO PROVIDE	15,000.			
PHILADELPHIA PA 19123		PUBLIC	SERVICE TO ISOLATED IMMIGRANT ELDERS	50,000.			
b Approved for future payment Total				234,000.			

Ente	gross	s amounts unless otherwise indicated.	Unrelated bu	isiness income	Excluded by sect	on 512, 513, or 514	(e)
	_		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
1		am service revenue:				-	
	a				ļ		_
	<u>ь</u> _						
	c _				ļ		
	d		<u></u>				
	e						
	<u> </u>						
_	_	ees and contracts from government agencies					
2		pership dues and assessments		<u> </u>			
3		st on savings and temporary cash investments			1.4	227 640	
4		ends and interest from securities			14	327,648.	
5		ental income or (loss) from real estate:		, si, (pt *	" ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	4 4 4 4 4	
		ebt-financed property			 		
c		ot debt-financed property			 		
6		ental income or (loss) from personal property			 		
7		investment income			10	607 500	
8		or (loss) from sales of assets other than inventory		<u> </u>	18	697,593.	
9		ncome or (loss) from special events					
10		s profit or (loss) from sales of inventory			 		
11	_	revenue: a			 		
	p				<u> </u>		<u> </u>
	<u> </u>			<u> </u>	 		<u> </u>
	d		<u>. </u>				
	е _						
40	Culata	skal Andra and unama (la) (rd) amari (ra)				1	
12	Subto	otal. Add columns (b), (d), and (e)				1,025,241.	1 005 041
13	Total.	. Add line 12, columns (b), (d), and (e)					1,025,241.
13 (See	Total. works	. Add line 12, columns (b), (d), and (e)	s.)				1,025,241.
13 (See Pa	Total.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 (See Pa Lin	Total. works t XVI-	. Add line 12, columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 (See Pa Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 (See Pa Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 (See Pa Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 (See Pa Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 (See Pa Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 (See Pa Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 (See Pa Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 (See Pa Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 (See Pa Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 (See Pa Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 (See Pa Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 (See Pa Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 (See Pa Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 (See Pa Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 (See Pa Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 (See Pa Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 (See Pa Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 (See Pa Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 (See Pa Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 (See Pa Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 (See Pa Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 (See Pa Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes	13	
13 (See Pa Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes	13	1,025,241.
13 (See Pa Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) Sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes	13	

Part	XVII	Information Organization	n Regarding Tra	ansfers to	and Transa	ection	s and R	elationship	os Wi	th No	nchari	able Ex	empt
	in sec organ Trans	ction 501(c) (ot izations? fers from the rep	rrectly or indirectly ther than section orting foundation	to a noncha	organization iritable exem	s) or pt org	in section	on 527, relation			olitical	Yes	
	(2) Other (1) Sa (2) Pu (3) Re (4) Re (5) Lo (6) Pe	her assets . transactions: ales of assets to archases of asset ental of facilities, embursement areans or loan guarerformance of se	a noncharitable exts from a nonchar equipment, or other angements	xempt orgar itable exemp ner assets ship or fund	nization pt organization	on						1a(1) 1a(2) 1b(1) 1b(2) 1b(3) 1b(4) 1b(5)	X X X X X X
	If the value	answer to any o	quipment, mailing of the above is "Y ther assets, or ser on or sharing arrar	'es," comple vices given	ete the follow by the repor	ving so	chedule. (undation.	Column (b) s If the found	should lation	l alway receiv	ys show ed less t	han fair r	narket
(a) Line	Is the descr	ibed in section 5	ectly or indirectly sold (c) (other than sold following schedu	affiliated wi	th, or relate	d to, c	one or m	ption of transfe			ations	Yes 2	
		(a) Name of organi	ization		b) Type of organ	nization			(c) Desc	cription	of relations	ship	
Sign Here	correc	r penalties of perjury, I ct, and complete Declar deture of officer or trus	declare that I have exam gratish of preparer (other	than taxpayer) is	including accomps based on all info	rmation o	chedules and of which prep	arer has any kno	to the b		May the IRS	e and belief, S discuss this parer shown ons XYes	return below?
Paid Prep Use	arer	Print/Type preparer M R EVANGE Firm's name ► Firm's address ►	s name	Preparer's ANGELISTA ROUTE 18	s signature Wangele	tas,	CFA LLC 08816	Date 11/07/2	019	EIN ►	ployed p 14-185 732)82	TIN 0037553 8342 8-2800 m 990-P l	

FRIENDS FOUNDATION FOR THE AGING

Form 990-PF: Return of Private Foundation

Continuation Statement Part VIII: Information about Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

0 0 . 0 0 0. 0 0 Expense account, other allowances 0 0 0 0 0 0 0 employee benefit plans and deferred Contributions to compensation 0. . 0 0 . 0. · 0 Compensation devoted to position Title, and average hours per week PRESIDENT 5.00 SECRETARY TRUSTEE 2.00 TRUSTEE 2.00 TRUSTEE TRUSTEE 2.00 2.00 2.00 Name and address 34 MOUNTAIN HEIGHTS AVE PHILADELPHIA, PA 19119 SHORT HILLS, NJ 07078 BALA CYNWYD, PA 19004 LINCOLN PK, NJ 07035 R.E.TYLER HOFF 353 CAMBRIDGE LANE LISA OGLETREE 12 LLANBERRIS ROAD 537 W. ALLENS LANE BETH HUDSON KELLER NEWTOWN, PA 18940 NEWTOWN, PA 18940 46 COLONIAL WAY 3 MARTIN COURT BETH YINGLING JAMES WHITELY CONRAD PERSON

Additional information from your Form 990-PF: Return of Private Foundation

Form 990-PF: Return of Private Foundation

Taxes

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
PAYROLL TAXES	3,734.	<u> </u>		3,734.
FEDERAL TAX -INVESTMENT I	19,891.			
FOREIGN TAXES	14.			
Total	23,639.			3,734.

Form 990-PF: Return of Private Foundation

Other Expenses

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
BANK/CUSTODIAL ACCOUNT FE	30,235.	30,235.		
INSURANCE	2,476.			2,476.
BANK FEES	126.	126.		
Total	32,837.	30,361.		2,476.

Name FRIENDS FOUNDATION FOR THE	ACINC	Employer Identification No
FRIENDS FOUNDATION FOR THE	AGING	22-1524182
Asset Information:		
	COMPUMED	
Description of Property	COMPUTER	
Business Code Exclus	ion Code <u>18</u>	
Date Acquired03/21/14	How Acquired Purchased	
Date Soid 10/01/18	Name of Buyer .	
Check Box, if Buyer is a Business		
Sales Price 0.	Cost or other basis (do not reduce by depreciat	ion) <u>81</u> 9.
Sales Expense	_ Valuation Method	
Total Gain (Loss)	-41. Accumulated Depreciation	778.
Description of Property <u>I</u>	PUBLICLY TRADED SECURITIES	
Business Code Exclus	ion Code <u>18</u>	
Date Acquired 01/01/00	How Acquired • Purchased	
Date Sold 12/31/18	Name of Buyer .	
Check Box, if Buyer is a Business		
Sales Price6, 305, 087.	Cost or other basis (do not reduce by depreciat	ion)5 <u>, 607, 453.</u>
Sales Expense	_ Valuation Method	
Total Gain (Loss) 697	, 634. Accumulated Depreciation	
Description of Property	·	
Business CodeExclus	ion Code 	
Date Acquired	How Acquired	
Date Sold	Name of Buyer .	
Check Box, if Buyer is a Business.		
Sales Price	Cost or other basis (do not reduce by depreciat	ion)
Sales Expense	_ Valuation Method 	
Total Gain (Loss)	Accumulated Depreciation	
Description of Property		
Dusiness CodeExclus	ion code	
Date Acquired .	How Acquired	
Date Sold	Name of Buyer .	
Check Box, if Buyer is a Business .		
Sales Price	Cost or other basis (do not reduce by depreciat	ion)
Sales Expense	_ Valuation Method	
Total Gain (Loss)	Accumulated Depreciation	• • • •
Description of Property		
Business Code Exclus	ion Code	
Date Acquired .	How Acquired	
Date Sold	Name of Buyer .	
Check Box, if Buyer is a Business .		
Sales Price	Cost or other basis (do not reduce by depreciat	ion)
Sales Expense	_ Valuation Method	
Total Gain (Loss)	Accumulated Depreciation	· · · ·
Totals:		
Total Gain (Loss) of all assets	697,593.	
Gross Sales Price of all assets		
Unrelated Business Income		
Excluded by section 512, 513, 514	697, 593. Exclusion Code . 18	-
Related/Exempt Function Income		-
	-18741111	<u> </u>
QuickZoom here to Form 990-PF, Pa	ge 1	
	ge 12	

Legal and Professional Fees

2018

Name Employer Identification No FRIENDS FOUNDATION FOR THE AGING 22-1524182

Line 16a - Legal Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MCCARTER & ENGLISH, LLP	LEGAL	15,997.			15,997.
Total to Form 990-	PF, Part I, Line 16a	15,997.			15,997.

Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FRAZER, EVANGELISTA & CO	ACCOUNTING	23,275.			23,275.
1					
Total to Form 990-	PF, Part I, Line 16b	23,275.			23,275.

Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PAYCHEX CPA ALTERNATIVE LLC ROUNDING	PAYROLL SERVICES BOOKKEEPING SERVICES ROUNDING	2,637. 281. 2.	281.		2,637
Total to Form 990-	PF, Part I, Line 16c	2,920.	281.		2,637

Name FRIENDS FOUNDATION FOR	THE AGING				yer Identification No. 524182
Line 10a - Investments - US and State Government Obligations:	End o State and Local Obligations Book Value	f Year State and Local Obligations FMV	US Govern Obligati Book Va	ment ons	f Year US Government Obligations FMV
Tot to Fm 990-PF, Pt II, Ln 10a					
Line 10b - Investm	ents - Corporate	Stock:	Bool Value	c	f Year Fair Market Value
EQUITY SECURITIES			5,400,	378.	5,400,378.
Totals to Form 990-PF, Part II, I	ine 10b		5,400,	378.	5,400,378.
Line 10c - Investme	ents - Corporate I	Bonds:	Bool Value	•	f Year Fair Market Value
FIXED INCOME SECURITIES	3		3,389,	199.	3,389,199.
Totals to Form 990-PF, Part II, I	Line 10c		3,389,	199.	3,389,199.
Line 12 - Investme	ents - Mortgage I	oans:	Bool Value	•	f Year Fair Market Value
Totals to Form 990-PF, Part II, I	ine 12				
				F- ·	
Line 13 - Inve	estments - Other	:	Book Value	•	f Year Fair Market Value
MUTUAL FUND	STMENTS GLER		2,551,	030. 464. 422.	482,030. 2,551,464. 243,422.
Totals to Form 990-PF, Part II, I	_ine 13		3,276,	916.	3,276,916.

Form 990-PF Part II, Line 11

Investments — Land, Buildings, and Equipment

2018

Name FRIENDS FOUNDATION FOR THE AGING				ver Identification No
Line 11b - Description of Investments	(a) Cost/Other	(b) Accumul	ated	(c) Book Value

Line 11b - Description of Investments Land, Buildings and Equipment	(a) Cost/Other Basis	(b) Accumulated Depreciation	(c) Book Value
ls to Form 990-PF, Part II, Line 11			

Form 990-PF Part II, Line 14

Land, Buildings, and Equipment

Line 14b - Description of Land, Buildings, and Equipment	(a) Cost/Other Basis	(b) Accumulated Depreciation	(c) Book Value
ACCUMULATED DEPRECIATION	0.	0.	0.
Totals to Form 990-PF, Part II, Line 14	0.	0.	0.

Name Employer Identification No FRIENDS FOUNDATION FOR THE AGING 22-1524182

Line 15 - Other Assets:	Beginning Year Book Value	End o Book Value	f Year Fair Market Value
OTHER RECEIVABLES PREPAID INSURANCE ACCRUED INTEREST RECEIVAB ROUNDING	28,352. 1,714. 794. 0.	5,786. 3,009. 1,324. -1.	5,786. 3,009. 1,3241.
Totals to Form 990-PF, Part II, line 15	30,860.	10,118.	10,118.

Line 22 - Other Liabilities:	Beginning Year Book Value	Ending Year Book Value
ZIEGLER FUND CAPITAL COMM	225,000.	125,000.
Totals to Form 990-PF, Part II, line 22	225,000.	125,000.