

Form **990-PF****Return of Private Foundation**

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

OMB No 1545-0052

Department of the Treasury
Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990PF for instructions and the latest information.

2018

Open to Public Inspection

For calendar year 2018 or tax year beginning **DEC 1, 2018**, and ending **NOV 30, 2019**

Name of foundation POTTSTOWN MERCURY FOUNDATION		A Employer identification number 23-6256419
Number and street (or P.O. box number if mail is not delivered to street address) 390 EAGLEVIEW BOULEVARD	Room/suite	B Telephone number 610-323-3000
City or town, state or province, country, and ZIP or foreign postal code EXTON, PA 19341-1155		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply. <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input checked="" type="checkbox"/> Address change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 18,290.		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>
J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____		

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received		26,630.		N/A	
2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B					
3 Interest on savings and temporary cash investments		2.	2.		STATEMENT 1
4 Dividends and interest from securities					
5a Gross rents					
b Net rental income or (loss)					
6a Net gain or (loss) from sale of assets not on line 10					
b Gross sales price for all assets on line 6a					
7 Capital gain net income (from Part IV, line 2)			0.		
8 Net short-term capital gain					
9 Income modifications					
10a Gross sales less returns and allowances					
b Less: Cost of goods sold					
c Gross profit or (loss)					
11 Other income					
12 Total. Add lines 1 through 11		26,632.	2.		
13 Compensation of officers, directors, trustees, etc.		0.	0.		0.
14 Other employee salaries and wages					
15 Pension plans, employee benefits					
16a Legal fees					
b Accounting fees		2,170.	0.		0.
c Other professional fees					
17 Interest					
18 Taxes					
19 Depreciation and depletion					
20 Occupancy					
21 Travel, conferences, and meetings					
22 Printing and publications					
23 Other expenses		5,825.	0.		0.
24 Total operating and administrative expenses. Add lines 13 through 23		7,995.	0.		0.
25 Contributions, gifts, grants paid		33,919.			33,919.
26 Total expenses and disbursements. Add lines 24 and 25		41,914.	0.		33,919.
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements		-15,282.			
b Net investment income (if negative, enter -0-)			2.		
c Adjusted net income (if negative, enter -0-)				N/A	

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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value		
Assets	1 Cash - non-interest-bearing	33,572.	18,290.	18,290.		
	2 Savings and temporary cash investments					
	3 Accounts receivable ▶					
	Less: allowance for doubtful accounts ▶					
	4 Pledges receivable ▶					
	Less: allowance for doubtful accounts ▶					
	5 Grants receivable					
	6 Receivables due from officers, directors, trustees, and other disqualified persons					
	7 Other notes and loans receivable ▶					
	Less: allowance for doubtful accounts ▶					
	8 Inventories for sale or use					
	9 Prepaid expenses and deferred charges					
	10a Investments - U.S. and state government obligations					
	b Investments - corporate stock					
	c Investments - corporate bonds					
	Liabilities	11 Investments - land, buildings, and equipment basis ▶				
Less: accumulated depreciation ▶						
12 Investments - mortgage loans						
13 Investments - other						
14 Land, buildings, and equipment; basis ▶						
Less: accumulated depreciation ▶						
15 Other assets (describe ▶)						
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)		33,572.	18,290.	18,290.		
17 Accounts payable and accrued expenses						
18 Grants payable						
Net Assets or Fund Balances	19 Deferred revenue					
	20 Loans from officers, directors, trustees, and other disqualified persons					
	21 Mortgages and other notes payable					
	22 Other liabilities (describe ▶)					
23 Total liabilities (add lines 17 through 22)	0.	0.				
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26, and lines 30 and 31.					
	24 Unrestricted	18,348.	13,099.			
	25 Temporarily restricted	15,224.	5,191.			
	26 Permanently restricted					
	Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 27 through 31.					
	27 Capital stock, trust principal, or current funds					
	28 Paid-in or capital surplus, or land, bldg., and equipment fund					
29 Retained earnings, accumulated income, endowment, or other funds						
30 Total net assets or fund balances	33,572.	18,290.				
31 Total liabilities and net assets/fund balances	33,572.	18,290.				

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	33,572.
2 Enter amount from Part I, line 27a	2	-15,282.
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	18,290.
5 Decreases 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, column (b), line 30	6	18,290.

Part IV Capital Gains and Losses for Tax on Investment Income

(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) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a			
b	NONE		
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

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	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			
b			
c			
d			
e			

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	2	
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, column (c). If (loss), enter -0- in Part I, line 8		3	

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?

☐ Yes ☒ No

If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2017	50,874.	32,097.	1.585008
2016	42,050.	39,029.	1.077404
2015	39,278.	40,885.	.960695
2014	40,325.	24,775.	1.627649
2013	38,011.	27,471.	1.383677

2 Total of line 1, column (d)

2 6.634433

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 1.326887

4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5

4 20,647.

5 Multiply line 4 by line 3

5 27,396.

6 Enter 1% of net investment income (1% of Part I, line 27b)

6 0.

7 Add lines 5 and 6

7 27,396.

8 Enter qualifying distributions from Part XII, line 4

8 33,919.

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. See the Part VI instructions.

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Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		1	0.
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-)		- 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; others, enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	0.
6 Credits/Payments			
a 2018 estimated tax payments and 2017 overpayment credited to 2018	6a	0.	
b Exempt foreign organizations - tax withheld at source	6b	0.	
c Tax paid with application for extension of time to file (Form 8868)	6c	0.	
d 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 <input type="checkbox"/> if Form 2220 is attached	8	0.	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	0.	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		
11 Enter the amount of line 10 to be: Credited to 2019 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11		

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition. 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.		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. <input type="checkbox"/> \$ 0. (2) On foundation managers. <input type="checkbox"/> \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input type="checkbox"/> \$ 0.		
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.		X
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		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • 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?	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	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. <input type="checkbox"/> PA		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	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," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

N/A

Part VII-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		X
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		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ N/A	X	
14 The books are in care of ▶ POTTSTOWN MERCURY Telephone no. ▶ (610) 850-0233 Located at ▶ 390 EAGLEVIEW BOULEVARD, EXTON, PA ZIP+4 ▶ 19341		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year ▶ 15 N/A		
16 At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶		X

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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6) Agree to pay money or property to a government official? (Exception: Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
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. Organizations relying on a current notice regarding disaster assistance, check here N/A ▶	1b	
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 before the first day of the tax year beginning in 2018? ▶	1c	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)):		
a At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶		
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.) N/A	2b	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ▶		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If "Yes," did it have excess business holdings in 2018 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 of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2018.) N/A	3b	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b	X

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Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year, did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(1)(A)? See instructions

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions

N/A

Organizations relying on a current notice regarding disaster assistance, check here

☐

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A

☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If "Yes" to 6b, file Form 8870.

☐ Yes ☒ No

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

N/A

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?

8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?

☐ Yes ☒ No**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, and foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 5		0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000

0

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3** Five highest-paid independent contractors for professional services. If none, enter "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 statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 N/A	
2	
3	
4	

Part IX-B Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

	Amount
1 N/A	
2	
All other program-related investments. See instructions	
3	
Total. Add lines 1 through 3	0.

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Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	20,961.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	20,961.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	20,961.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	314.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	20,647.
6	Minimum investment return. Enter 5% of line 5	6	1,032.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	1,032.
2a	Tax on investment income for 2018 from Part VI, line 5	2a	
b	Income tax for 2018. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,032.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1,032.
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	1,032.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	33,919.
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:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	33,919.
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	33,919.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				1,032.
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only			0.	
b Total for prior years		0.		
3 Excess distributions carryover, if any, to 2018				
a From 2013	36,638.			
b From 2014	39,087.			
c From 2015	37,235.			
d From 2016	40,099.			
e From 2017	49,269.			
f Total of lines 3a through e	202,328.			
4 Qualifying distributions for 2018 from Part XII, line 4: ▶ \$	33,919.			
a Applied to 2017, 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 2018 distributable amount				1,032.
e Remaining amount distributed out of corpus	32,887.			
5 Excess distributions carryover applied to 2018 (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:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	235,215.			
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 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 2017. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2018. Subtract lines 4d and 5 from line 1. This amount must be 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.			
8 Excess distributions carryover from 2013 not applied on line 5 or line 7	36,638.			
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	198,577.			
10 Analysis of line 9:				
a Excess from 2014	39,087.			
b Excess from 2015	37,235.			
c Excess from 2016	40,099.			
d Excess from 2017	49,269.			
e Excess from 2018	32,887.			

N/A

- 4942(i)(3) or 4942(i)(5)

- (4) Gross investment income

[illegible]

2018.05080 POTTSTOWN MERCURY FOUNDATIO 69069 1

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year OPERATION HOLIDAY-CHRISTMAS 2018-SEE ATTACHED LISTING AND ATTACHED FOOTNOTE 390 EAGLEVIEW BLVD EXTON, PA 19341		PUBLIC	PROVIDING FOOD AND TOYS TO INDIGENT AND NEEDY	33,919.
Total			3a	33,919.
b Approved for future payment NONE				
Total			3b	0.

Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations





		Yes	No
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c)(3) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		
a	Transfers from the reporting foundation to a noncharitable exempt organization of:		
	(1) Cash	1a(1)	X
	(2) Other assets	1a(2)	X
b	Other transactions:		
	(1) Sales of assets to a noncharitable exempt organization	1b(1)	X
	(2) Purchases of assets from a noncharitable exempt organization	1b(2)	X
	(3) Rental of facilities, equipment, or other assets	1b(3)	X
	(4) Reimbursement arrangements	1b(4)	X
	(5) Loans or loan guarantees	1b(5)	X
	(6) Performance of services or membership or fundraising solicitations	1b(6)	X
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c	X
d	If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.		

[illegible]

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here     **OFFICER**

Signature of officer or trustee Date Title

May the IRS discuss this return with the preparer shown below? See instructions ☒ Yes ☐ No

Paid Preparer Use Only	Print/Type preparer's name WILLIAM BRESLAWSKI JR CPA	Preparer's signature <i>William Breslawski Jr</i>	Date 05/05/20	Check <input type="checkbox"/> if self-employed	PTIN P01437547
	Firm's name ▶ MAILLIE LLP			Firm's EIN ▶ 23-1518888	
	Firm's address ▶ PO BOX 680 OAKS, PA 19456-0680			Phone no (610)935-1420	

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
BB&T BANK	2.	2.	
TOTAL TO PART I, LINE 3	2.	2.	

FORM 990-PF ACCOUNTING FEES STATEMENT 2

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	2,170.	0.		0.
TO FORM 990-PF, PG 1, LN 16B	2,170.	0.		0.

FORM 990-PF OTHER EXPENSES STATEMENT 3

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
REGISTRATION	100.	0.		0.
CONTRACTED SERVICES	5,653.	0.		0.
SUPPLIES	72.	0.		0.
TO FORM 990-PF, PG 1, LN 23	5,825.	0.		0.

FOOTNOTES STATEMENT 4

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

ORION COMMUNITIES, 237 BRIDGE ST, PHOENIXVILLE, PA 19460

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

FORM 990-PF

PART VIII - LIST OF OFFICERS, DIRECTORS
TRUSTEES AND FOUNDATION MANAGERS

STATEMENT 5

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
PATRICIA PAUL C/O THE POTTSTOWN MERCURY, 390 EAGLEVIEW BLVD EXTON, PA 19341	OFFICER 1.00	0.	0.	0.
SHELLEY MEENAN C/O THE POTTSTOWN MERCURY, 390 EAGLEVIEW BLVD EXTON, PA 19341	OFFICER 1.00	0.	0.	0.
NANCY MARCH C/O THE POTTSTOWN MERCURY, 390 EAGLEVIEW BLVD EXTON, PA 19341	OFFICER 1.00	0.	0.	0.
GREG YERGEY C/O THE POTTSTOWN MERCURY, 390 EAGLEVIEW BLVD EXTON, PA 19341	OFFICER 1.00	0.	0.	0.
CYNTHIA LEVAN C/O THE POTTSTOWN MERCURY, 390 EAGLEVIEW BLVD EXTON, PA 19341	OFFICER 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		0.	0.	0.

POTTSTOWN MERCURY FOUNDATION				
EIN 23-6256419				
2018 FORM 990-PF				
PART XV - SUPPLEMENTAL INFORMATION - LINE 3			PAGE 1 OF 6	
	NAME	PHONE	CHILDREN	TOTAL
144	Families			
442	Children			
	Community Health and Dental			
	Linda Gambone 610-326-9460			
1	Birkhead, Charlie	484-362-4457	4	
1	Conly, Amber	484-427-0765	4	
1	Snachez, Piedad	610-406-1492	4	
1	Beasley, Nadie	484-948-9819	7	
1	Lawrence, Shanelle	267-593-7848	4	
1	West, Raelle	484-557-7752	3	
1	Freeman, Dorothy	484-363-7808	2	
1	Eagle, Shawn	484-977-0945	5	
1	Lofton, Shante	484-374-5438	5	
1	Kimbrow, Krystal	484-473-0102	4	
				42
	Community Services Devereux			
	Nikita Kadiwar 610-422-1479			
1	Bailey, Erica	484-944-4566	3	
1	Harp, Shannon	239-297-7755	4	
1	Rivera, Christina	484-925-3141	3	
1	Monterroso, Francisco/ Dubon, Julie	484-802-0301	3	
1	Stevens, Alina and Dwayne	484-784-7655	3	
1	Huber, Melissa	267-615-7637	3	
1	Miller, Helena	484-773-3822	3	
1	Jacobs, Parthenia	484-587-7050	3	
1	Kline, Denise	484-374-5281	7	
1	Hackman, Jennifer	484-477-9736	2	
				34
	Creative Health Services			
	Stacy Brown 610-326-9250 x 1207			
1	Didget, Alexis	609-760-6997	3	
1	Martin, Carly	484-908-2851	2	
1	Malachi, tamika	484-374-3772	2	
1	Scurry, Shasta	484-300-3164	5	

POTTSTOWN MERCURY FOUNDATION			
EIN 23-6256419			
2018 FORM 990-PF			
PART XV - SUPPLEMENTAL INFORMATION - LINE 3			PAGE 2 OF 6
	NAME	PHONE	CHILDREN TOTAL
	Creative Health Services - CONTINUED		
	Stacy Brown 610-326-9250 x 1207		
1	Bey, Curtis	267-439-8559	1
1	Haraczka, Dayna	610-547-8526	1
1	Eppheimer, Shannon	610-367-6152	2
1	Mason, Nicole	610-312-1130	2
1	Moreno, Juan	610-355-6473	4
1	Paschall, Nicole	484-587-6278	4
1	Ammouri, Ayat	484-480-1211	3
			29
	Family Services of Montgomery County		
	Jane Boughter 610-326-1610		
1	Poper, Ashlie and Miller, James	484-300-6474 / 484-447-6121	2
1	Williams, Iesha	610-803-9421	4
1	Hill, Sarai	484-752-2366	1
1	Trego, Stephanie	484-704-0561	3
1	Marina Perez, Angelica	484-428-0090 (Spanish only)	3
1	Hernandez, Rosceni	610-482-2729	4
1	Gomez, Maria	610-415-8797	2
1	Rogers, Linda	484-374-5031	4
1	Ahraifi, Malika	347-471-8386	2
			25
	Heart of God Family Worship Center		
	Linda Anthony 610-802-1000		
1	Singleton-Gray, Ayana	484-752-9720	1
1	Johnson, Crystal	484-300-6851	1
1	Figuroa, Joanna	610-803-8285	2
1	Salata, Rachelle	484-925-3445	5
1	Bell, Inez	484-402-0318	3
1	Crabbe, Jai	267-538-8584	3
1	Davis, Kapricia	484-948-0699	3
			18

POTTSTOWN MERCURY FOUNDATION

EIN 23-6256419

2018 FORM 990-PF

PART XV - SUPPLEMENTAL INFORMATION - LINE 3

PAGE 3 OF 6

Montgomery Co. Assistance Office

Margaret Bauer 610-327-5615

1	Hampton, Nyisha	267-575-7833	7
1	Carr, Brittany	610-507-3400	4
1	Sirmans, Bryan	484-374-5557	6
1	Cintron, Ana	484-791-8089	5
1	Watson, Brianna	267-455-6887	4
1	Carter-Johnson, Kandice	267-319-0252	5
1	Brown, Elizabeth	484-925-5457	4
1	Frisco, Nicole	484-447-6487	5

40

Montgomery Co. Community College

Lori Davidson 610-718-1841

1	Johnson, Malinda	484-838-2310	4
1	Bullen, Kathleen	484-369-1426	4
1	Carter, Casey	610-413-3501	1
1	Jones, Latasha	484-374-7220	3
1	King, Chardonay	610-316-5459	2
1	Wright, LaToya	610-633-3920	2
1	Carr, Amber	484-925-5782	2
1	Walderon, Aimee	267-471-1563	3

21

Montgomery Co. Office of Children/Youth

Krystal Dukes 610-278-5800 ext. 4235

1	Macaulay, Kathy and John	610-283-2591	3
1	Conley, Tonya	484-848-8365	2
1	Bryan, Maryann	484-529-4569	2
1	Whitaker, Joshua	904-742-3465	1

8

New Hope Baptist Church

Pastor Darrell Brown Jr.

610-296-4284

1	Martin, Audra	484-482-3548	4
1	Gass, Anita	610-327-3016	4

POTTSTOWN MERCURY FOUNDATION				
EIN 23-6256419				
2018 FORM 990-PF				
PART XV - SUPPLEMENTAL INFORMATION - LINE 3				PAGE 4 OF 6
	New Hope Baptist Church - CONTINUED			
	Pastor Darrell Brown Jr.			
	610-296-4284			
1	Ziegler, Corrine	484-925-5305	4	
1	Brown, Shanice	484-644-6024	3	
1	Jones, Adrienne	610-731-4688	4	
1	Jones, Kristin	484-477-5452	4	
1	Gans, Shantell	484-300-0778	4	
1	Brown, Tyair	484-838-4445	4	
1	Shawell, Chemere	484-908-5384	5	
1	Fulwood, Marian	610-246-8189	4	
1	Betts, Kelly	484-949-8643	3	
				43
	North Coventry Food Pantry			
	Ginny Wade			
	610-326-5659 or 484-614-0190			
1	Scott, Pam	267-317-5762	2	
1	Brown, Tonya	484-624-9415	2	
1	Hauglad, Bronca	610-550-6647	2	
1	Cushman, Amanda	484-300-6485	3	
1	Connelly, Wendy	484-338-4484	2	
1	Klemp, Sarah	267-312-6585	1	
1	Kristman, Carl	484-332-3429	2	
				14
	Orion Communities			
	Danielle Blanchard 610-415-1140			
1	Loper, Edwina	610-563-1492	2	
1	Simmons, Tonya	610-679-4999	2	
1	Faust, Cortina	484-366-9742	2	
1	Tinson, Asley	484-213-7222	4	
1	Box, Vandelyn	484-716-4431	3	
1	Morton, Kathryn	484-942-0490	4	
1	Saul, Samantha	610-800-4557	3	
				20

POTTSTOWN MERCURY FOUNDATION				
EIN 23-6256419				
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PART XV - SUPPLEMENTAL INFORMATION - LINE 3				PAGE 5 OF 6
	Owen J. Roberts School District			
	Sue Grashof 610-469-5184			
1	Jackson, Atiyya	484-624-2620	2	
1	Dolby, Crystal	484-925-5415	3	
1	Everingham, Yeukai	484-886-8265	2	
1	Taylor, Robert	610-937-1307	3	
1	Nice, Michelle	267-377-5270	2	
1	Detwiler, Candice	484-855-0361	3	
1	Johnson, Johnisha	409-229-6837	3	
1	Mayo, Joanne	424-333-5771	1	
1	Ronto, Jen	484-374-7035	2	
				21
	Pottstown Cluster of Religious Comm			
	Barbara Wilhelmy/Kelli DeSieno 610-970-5995			
1	Monkiewicz, Sherri	610-340-8379	2	
1	Carr-Brothers, Tara	267-401-7492	2	
1	Smith, Lakeytia	717-216-1868	5	
1	Williams, Margaret	215-800-4626	6	
1	Hill, Lauren	215-459-3356	7	
1	Hanna, Helena	484-773-3822	3	
1	Mayo, Joanne	424-333-5771	2	
1	Ulloa, Jane	954-226-1854	4	
1	Wingard, Zoe	484-300-0607	1	
1	Fleck, Jennifer	267-275-9179	4	
				36
	Pottstown School District Admin. Annex			
	Holly Lee 610-970-6691			
1	Wright, Charmeal	267-663-1851	1	
1	Bryant, Tiffany	272-202-1779	6	
1	Hayes, Darryl	484-264-4929	3	
1	Clary, Emmanuel	484-925-9174	2	
1	Singleton, Daisa	484-925-5006	5	
1	Colvin, Deanna	256-481-9467	2	
1	Springer, Janine	484-374-8474	2	
1	Watkins, Alex	484-687-0554	4	
1	Fellenbaum, Daniel	484-364-6205	2	
				27

POTTSTOWN MERCURY FOUNDATION				
EIN 23-6256419				
2018 FORM 990-PF				
PART XV - SUPPLEMENTAL INFORMATION - LINE 3				PAGE 6 OF 6
	Pottstown Works			
	Nancy March 610-326-1621 x 316			
1	Ali, Marwa	484-861-6718	2	
1	McKeever, Kelley	267-997-6780	5	
1	Robinson, Gregory	484-751-2762	3	
1	Andrews, Jodeci	484-350-4644	4	
1	Alexander-Dennis, Jane	267-230-5862	1	
1	Hodges, De'Neen	610-323-3234	1	
1	Jeanty, Maggie	267-262-0134	2	
				18
	Rolling Hills Apartments			
	Cessely Nixon 610-323-2554			
1	Sherman, Saisha	267-444-7228	3	
1	Cooper, Jasmine	484-925-5468	1	
1	Cottrell, LaSandra	215-920-0189	3	
1	Martin, Joseph	484-447-8564	3	
1	Bowers, Stacy	267-507-8844	4	
1	Charest, Kelly	484-792-1600	1	
1	Daniels, Vanesha	484-362-4594	4	
1	Harvey, Brian	267-324-4773	2	
				21
	Women's Center of Montgomery Co.			
	Niki Stansbury 610-970-7364			
1	Bitterman, Maria	484-300-5239	4	
1	Saltzer, Stacy	484-752-2768	2	
1	Porter, Gabrielle	610-718-6681	3	
1	Groff-Bungay, christina	267-461-7949	2	
1	Gadd, Kim	610-906-9572	1	
1	Loper, Dana	484-948-0400	5	
1	Kilian, Andrew	484-925-7492	1	
1	Walton, Lauren	484-657-9524	4	
1	Wanner, Heather	610-406-7231	3	
				25
144				442