SCANNED MAR 2 9 2022

ORIGINAL
For Taxing Authorit 2019

Form **990-PF**

Department of the Treasury

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

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	1 1	177	١,
-			_

Name of foundation TOM AND WENDY COLEMAN FAMILY FOUNDATION Number and street (or P O box number if mail is not delivered to street address) 400 BERWYN BAPTIST RD. City or town, state or province, country, and ZIP or foreign postal code BERWYN, PA 19312 A Employer identification number 82-331556 B Telephone number 215-785-4600 C if exemption application is pending, 63-66-666.	
Number and street (or P O box number if mail is not delivered to street address) 400 BERWYN BAPTIST RD. City or town, state or province, country, and ZIP or foreign postal code BERWYN PA 19312 Room/suite B Telephone number 215-785-4600 C if exemption application is pending.	, check here
Number and street (or P O box number if mail is not delivered to street address) 400 BERWYN BAPTIST RD. City or town, state or province, country, and ZIP or foreign postal code BERWYN PA 19312 Room/suite B Telephone number 215-785-4600 C if exemption application is pending.	, check here
400 BERWYN BAPTIST RD. City or town, state or province, country, and ZIP or foreign postal code BERWYN, PA 19312 City or town, state or province, country, and ZIP or foreign postal code	, check here
City or town, state or province, country, and ZIP or foreign postal code BERWYN , PA 19312	, check here
BERWYN, PA 19312	, check here
G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check	ck here
Final return Amended return	·
Address change Name change 2. Foreign organizations meeting the check here and attach computation	he 85% test, tion
H Check type of organization: X Section 501(c)(3) exempt private foundation	as terminated
Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), ch	heck here
I Fair market value of all assets at end of year J Accounting method: X Cash Accrual F If the foundation is in a 60-mor	
(from Part II, col. (c), line 16) Under section 507(b)(1)(B), ch	heck here
The Aut Applying of Payanus and Evanges	(d) Disbursements
(The total of amounts in columns (b), (c), and (d) may not expenses nor books	r charitable purposes (cash basis only)
	EFECT LIBERT
2 Check ▶ If the foundation is not re	的不少和夏季得到
	Harry Mary
	ATEMENT#1
	HER MINES SEEN
	地址企为独立门 科
6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 9.2 / 1.7	ETAY, MERGINA
assets on line 6a	是一种证明。 2008年1月20日
7 Capital gain net income (from Part IV, line 2) 作品等的的数据的数据 27,877。 编码器设施设施设施设施设施设施设施设施设施设施设施设施设施设施设施设施设施设施设施	WELLOW DESIGNATION AND A SECOND PROPERTY OF THE PROPERTY OF TH
	AND ARTEST
Crees cales less returns	
· · · · · · · · · · · · · · · · · · ·	N. SEC. ST. TREESE
	CHARLES AND THE COLUMN
11 Other Income	Street Thought and I
	用。在政治的主义
13 Compensation of officers, directors, trustees, etc 0 • 0 •	0.
14 Other employee salaries and wages	
15 Pension plans, employee benefits 16a Legal fees	<u> </u>
ěl., , , ,	<u>. ,</u>
호 D Accounting tees 다 가입니다.	
c Other professional fees	<u> </u>
19 Depreciation and depletion	Carrent Contract
E 20 Occupancy	
21 Travel, conferences, and meetings	
22 Printing and publications	
23 Other expenses STMT 2 75. 75.	0.
물 24 Total operating and administrative	0
23 Other expenses STMT 2 75. 75. 24 Total operating and administrative expenses. Add lines 13 through 23 75. 75. 25 Contributions, gifts, grants paid 60,000.	60,000.
25 Contributions, girts, grants paid	60,000.
26 Total expenses and disbursements. Add lines 24 and 25 60,075.	60,000.
a Excess of revenue over expenses and disbursements <26,365	
· · · · · · · · · · · · · · · · · · ·	the atthemost
	物。中2种流域社

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 29	П	Т	
	(must agree with end-of-year figure reported on prior year's return)	1		48,364.
2	Enter amount from Part I, line 27a	2	Τ	<26,365.
3	Other increases not included in line 2 (itemize)	3	T	0.
4	Add lines 1, 2, and 3	4	Т	21,999.
5	Decreases not included in line 2 (itemize)	5	Τ	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	Ι	21,999.

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part. 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) (d) Distribution ratio (b) (c) Adjusted qualifying distributions Net value of noncharitable-use assets (col. (b) divided by col. (c)) 10,000 19,381 .515969 2018 2017 2016 2015

2 Total of line 1, column (d)

2014

Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years

4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5

5 Multiply line 4 by line 3

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

7 Add lines 5 and 6

8 Enter qualifying distributions from Part XII, line 4

3	.515969
4_	27,718.
5	14,302.
6	281.
7	14,583.

2

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.

Form 990-PF (2019)

60,000.

🗌 Yes 🗶 No

.515969

Form 990-PF (2019) TOM AND WENDY COLEMAN FAMI			315556 Page 4
Part VI · Excise Tax Based on Investment Income (Section		948 - s	see instructions)
1a Exempt operating foundations described in section 4940(d)(2), check here	and enter "N/A" on line 1.	. 3 44	4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Date of ruling or determination letter: (attach copy of letter	ter if necessary-see instructions)		
b Domestic foundations that meet the section 4940(e) requirements in Part V, check h	here 🕨 🗶 and enter 1%	1	281.
of Part I, line 27b		· T '	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 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-)	2	0.
3 Add lines 1 and 2		3	281.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations	s 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	281.
6 Credits/Payments:			
a 2019 estimated tax payments and 2018 overpayment credited to 2019	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.	 	3, 0
7 Total credits and payments. Add lines 6a through 6d		7	0.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 222	20 is attached	8	0.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	>	9	281.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount over	· · · · · · · · · · · · · · · · · · ·	10	
11 Enter the amount of line 10 to be: Credited to 2020 estimated tax	Refunded ▶	11	
Part VII-A Statements Regarding Activities			- 124 124
1a During the tax year, did the foundation attempt to influence any national, state, or lo	ical legislation or did it participate or intervene	IN	v. Yes No
any political campaign?			1a X
b Did it spend more than \$100 during the year (either directly or indirectly) for political	• •	ition	1b X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	copies of any materials published or		
distributed by the foundation in connection with the activities.			السخوا أحسقا السحدا
c Did the foundation file Form 1120-POL for this year?			1c X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed du			
(1) On the foundation. ► \$ 0. (2) On foundation m		-	, <u></u>
e Enter the reimbursement (if any) paid by the foundation during the year for political managers. ► \$ 0 •	expenditure tax imposed on foundation		
2 Has the foundation engaged in any activities that have not previously been reported	to the IRS?		2 X
If "Yes," attach a detailed description of the activities.			1.
3 Has the foundation made any changes, not previously reported to the IRS, in its gov	verning instrument, articles of incorporation, o	r	
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change	ges		3 X
4a Did the foundation have unrelated business gross income of \$1,000 or more during			4a X
b If "Yes," has it filed a tax return on Form 990-T for this year?		N/	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the	he year?	•	5 X
If "Yes," attach the statement required by General Instruction T	-		
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) sat	tisfied either;		
By language in the governing instrument, or			, .
By state legislation that effectively amends the governing instrument so that no m	nandatory 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	s." complete Part II. col. (c). and Part XV		7 X
	-,		- 1 - 1 - 1
8a Enter the states to which the foundation reports or with which it is registered. See in	nstructions.		' 1
PA			 [. [- ₁ [.
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	to the reteriner denotes (or designate)		8b X
9 Is the foundation claiming status as a private operating foundation within the meaning	ing of section 4942(1)(3) or 4942(1)(5) for cale	ndar	1.1.1.1
year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Ye			9 X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach			10 X
any persons second second interest contributors during the tax year. If ites, attach	a senseule noung men names and addresses		

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GE 1 OF

Part IV Capital Gains and Lo	sses for Tax on Investment Income				
(a) List and 2-story bi	describe the kind(s) of property solution describe the kind(s) of property solution (s) describe the kind(s) of property solution (s) of property	d, e.g., real estate, 00 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (d) Date so (mo., day, yr.) (mo., day, y	
1a HAVERFORD QUAL	ITY GROWTH STOCK	FUND (HAVGX)	D	12/20/1802/15/	19
b HAVERFORD QUAL			D	03/29/1905/29/	
c HAVERFORD QUAL			D	06/28/1908/06/	
d HAVERFORD QUAL				09/30/1910/22/	
	ITY GROWTH STOCK	· · · · · · · · · · · · · · · · · · ·		12 2 1 2 2 1 2 2 2 2 1 2 2 1 2 2 1 2 2 2 1 2 2 2 1 2	$\overline{19}$
	ITY GROWTH STOCK			03/06/1205/29/	
	ITY GROWTH STOCK		D	03/06/12/08/06/	
	ITY GROWTH STOCK		D	03/06/12/06/06/	
	ITY GROWTH STOCK				
			D	03/06/12/12/20/	
	OBLIGATIONS IS	FUND 5 (GOIXX)	P	01/04/1912/31/	<u> 19</u>
<u>k</u>				 	
				<u> </u>	
<u>m</u>					
<u>n</u>					
0					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale) Gain or (loss) plus (f) minus (g)	
a 2,665.		2,399.		26	
b 98.		98.			0.
c 106.		106.			0.
d 77.		76.			1.
e 12,335.		7,841.		4,49	4.
f 5,202.		3,275.		1,92	7.
g 9,894.		5,973.		3,92	
h 11,923.		6,846.	··········	5,07	
42.					2.
40,075.		27,926.		12,14	
<u>k</u>					<u> </u>
1				-	
m	· · - · ·				—
n					
0					
	ng gain in column (h) and owned by	the foundation on 12/31/69	(1) 1 o	sses (from col. (h))	—
(i) F.M.V. as of 12/31/69	(i) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	Gains (excess	of col. (h) gain over col. (k), not less than "-0-")	
		- (,,,)		26	5
<u>a</u>					0.
<u>b</u>					~
<u>c</u>					1
<u>d</u>					<u>+•</u>
<u>e</u>				4,49	
<u> </u>				1,92	
<u>g</u>				3,92	
<u>h</u>				5,07	
1					2.
1				12,14	<u>9.</u>
<u>k</u>				<u> </u>	
1					
m					
n					
0					
2 Capital gain net income or (net ca	apital loss) { If gain, also enter "-0"	in Part I, line 7	2	27,87	7.
3 Net short-term capital gain or (lo	ss) as defined in sections 1222(5) an				_
If gain, also enter in Part I, line 8, If (loss), enter "-0-" in Part I, line		,	3	N/A	
(), 5.1.0.	-			41/44	

 $\overline{\mathbf{x}}$

3b

4a

N/A

during the year?

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Schedule C, to determine if the foundation had excess business holdings in 2019.)

had not been removed from jeopardy before the first day of the tax year beginning in 2019?

b If "Yes," did it have excess business holdings in 2019 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 Form 4720,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Part VII-B	Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)			
5a During the	year, did the foundation pay or incur any amount to:				-	Yes	No
(1) Carry	on propaganda, or otherwise attempt to influence legislation (section	on 4945(e))?	Y	es 🗶 No			1
(2) Influer	ce the outcome of any specific public election (see section 4955);	or to carry on, directly or indire			-`,	.,	
-	ter registration drive?		<u></u>	es 🗶 No	٠.,		[, ']
,	e a grant to an individual for travel, study, or other similar purpose:		Y	es 🗶 No	I. 1	:	
• •	e a grant to an organization other than a charitable, etc., organization	on described in section		<u></u>			
•	f)(4)(A)? See instructions			es 💹 No 📗	, -		
• •	e for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or f		(T)			
•	evention of cruelty to children or animals?			es X No	4) ×	
-	er is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify ur	· ·	n Regulations			<u> </u>	
	4945 or in a current notice regarding disaster assistance? See inst			N/A	5b	ļ	Ļ;
-	ns relying on a current notice regarding disaster assistance, check					[.	
	er is "Yes" to question 5a(4), does the foundation claim exemption					Ι.	" :
•	e responsibility for the grant?	N	Γ/A	es L No			1
•	ach the statement required by Regulations section 53.4945-5(d).				r.] -
	ndation, during the year, receive any funds, directly or indirectly, to	pay premiums on	<u> </u>	<u>च्</u> चा	·	١.,	6.5
	benefit contract?		Y	es 🗶 No			
	ndation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?			6b	١	X
	ib, file Form 8870.			□		ŀ	
•	during the tax year, was the foundation a party to a prohibited tax		, ₹	es X No	76		<u> </u>
•	the foundation receive any proceeds or have any net income attrib		_	N/A	7b	├	
	dation subject to the section 4960 tax on payment(s) of more than	\$ 1,000,000 in remuneration of		es X No			
Part VIII	achute payment(s) during the year?	toon Foundation Ma			- F	14	1, 1
rait VIII	Information About Officers, Directors, Trus Paid Employees, and Contractors	tees, roundation wa	inagers, riigni	y			
1 List all offi	cers, directors, trustees, and foundation managers and	their compensation.					
		(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to		(e) Ex	ense , other
	(a) Name and address	hòurs per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plan and deferred compensation	s a	ccount	t, other
THOMAS	COLEMAN	DIRECTOR/OFFI		compensation	+		
	WYN BAPTIST ROAD	1					
	PA 19312	1.00) o.) o	.1		0.
WENDY C		DIRECTOR/OFFI	CER		\top		
	WYN BAPTIST ROAD	1					
BERWYN,	PA 19312	1.00	0.	l о			0.
		1			T		
		1					
		1			1		
				1			
		Ī					
2 Compensa	tion of five highest-paid employees (other than those in		enter "NONE."				
(a) Nar	ne and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plan	s a	(e) Exp	ense , other
		devoted to position	(C) Compensation	and deferred compensation		allowa	nces
N	ONE]	1		
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		_	1				
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		1	1	1	1		
		ļ	<u> </u>				
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			L	<u> </u>	Ш	_	
Total number o	f other employees paid over \$50,000						0

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	
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 Part IX-A Summary of Direct Charitable Activities		<u>▶</u> 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic	al information such as the	<u> </u>
number of organizations and other beneficiaries served, conferences convened, research papers produc	ced, 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 lin	nes 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
Total Add lines 1 through 3		0.

	Meader (2015) TOM AND WEND! COLEMAN PARTE! FOUNDATION	02	-3313336 Page 8
P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations	, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	l "	
a	Average monthly fair market value of securities	1a	13,006.
b		1b	13,006. 15,134.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	28,140.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •	1	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	28,140.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	422.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	27,718.
6	Minimum investment return. Enter 5% of line 5	6	1,386.
F	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations at	nd certain	
_	foreign organizations, check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	1,386.
2a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019. (This does not include the tax from Part VI.)][
C	Add lines 2a and 2b	2c	281.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,105.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1,105.
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	1,105.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	_ 1	
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	60,000.
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		3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	60,000.
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	281.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	59,719.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies fo	
	4940(e) reduction of tax in those years.		

Part XIII Undistributed Income (see instructions)

	,	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from Part XI,			·.	1,105.
2	Undistributed income, if any, as of the end of 2019		-		*37.5
	Enter amount for 2018 only			0.	6 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m
	Total for prior years:	·			u 19 14
	,		0.		
3	Excess distributions carryover, if any, to 2019:				1.2
ê	a From 2014		_		,
	From 2015		İ		, ,
	From 2016				; ;
	d From 2017	'		•	
	e From 2018 9,008.	0 000			
	Total of lines 3a through c	9,008.			,
4	Qualifying distributions for 2019 from				,
	Part XII, line 4: >\$ 60,000.	.[0.	
	Applied to 2018, but not more than line 2a Applied to undistributed income of prior				
٠	years (Election required - see instructions)		0.	•	,
,	Treated as distributions out of corpus				
١	(Flection required - see instructions)	0.]			
	d Applied to 2019 distributable amount				1,105.
	B Remaining amount distributed out of corpus	58,895.	: .		
	Excess distributions carryover applied to 2019 (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:				
á	Corpus Add lines 3f, 4c, and 4e Subtract line 5	67,903.		•	,
	Prior years' undistributed income. Subtract			•	
	line 4b from line 2b		0.	X	
(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 2018. Subtract line	,		_	
	4a from line 2a. Taxable amount - see instr.			0.	
1	Undistributed income for 2019. Subtract				
	lines 4d and 5 from line 1. This amount must	1			0.
7	be distributed in 2020 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 2014				
-	not applied on line 5 or line 7	0.			İ
9	Excess distributions carryover to 2020.				
	Subtract lines 7 and 8 from line 6a	67 <u>,</u> 903.			
10	Analysis of line 9:			-	-
i	a Excess from 2015				
i	b Excess from 2016			•	
	c Excess from 2017	}	•		
	d Excess from 2018 9,008.]			
_	e Excess from 2019 58,895.				

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▶ 3b

Total

D 1 1/1/1/ A					
Part XVI-A	Analy	/SIS OT I	ncome-	Producing	Activities

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		by section 512, 513, or 514	(e)
	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a					
b					
c					
d		·			
8		<u>`</u>			
f	·				
g Fees and contracts from government agencies					
2 Membership dues and assessments			1		
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities			14	333.	-
5 Net rental income or (loss) from real estate:		· · · · ·	+	,	. 虚 4
a Debt-financed property		•	 	· · · · · · · · · · · · · · · · · · ·	- fin-
b Not debt-financed property			+		<u>.</u>
6 Net rental income or (loss) from personal	 		+		
property	1 1		1 1		
7 Other investment income	<u> </u>		+ +		
8 Gain or (loss) from sales of assets other	 	 	+ + +		
than inventory			14	27,877.	
9 Net income or (loss) from special events	†		+	27,077	
10 Gross profit or (loss) from sales of inventory	-		+		
11 Other revenue:			+	-	
a b	·	 -	+		
c	·		+ +-		·
d	•		+ +		
	•		+ +		
12 Subtotal. Add columns (b), (d), and (e)	•	0		28,210.	0.
13 Total. Add line 12, columns (b), (d), and (e)	<u> </u>		•	13	28,210.
(See worksheet in line 13 instructions to verify calculations.)				13	20,210.
					*
Part XVI-B Relationship of Activities	to the Acco	mplishment of E	xempt P	urposes	
Line No. Explain below how each activity for which inci	nme is reported in	column (a) of Part VVI	A contributo	d importantly to the second	nlichment of
the foundation's exempt purposes (other than			~ continues	o importantity to the accomp	husuuugut ni
8 CAPITAL GAIN ON INVEST		100 101 00011 purposus).		·····	
CILLIIII GAIN ON INVEST	TALLITY I		-		
				-	
				<u></u>	 .
					

▼	the foundati	on's exemp	t purpo	ses (other than by providing funds for such purposes).
8	CAPITAL	GAIN	ON	INVESTMENT
	ļ			
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	1			

923621 12-17-19

[Part:XVIII] Information Regarding Transfers to and Transactions and Relationships With Noncharitable **Exempt Organizations**

i Dia the ort	ganization directly or mair	rectly engage in any of the following	ig with any other organization	i described in secu	טוו סט ו(ט)		65	INO
(other that	n section 501(c)(3) organ	nizations) or in section 527, relatin	g to political organizations?					
a Transfers	from the reporting founda	ation to a noncharitable exempt or	ganization of:					
(1) Cash						1a(1)		X
(2) Other	assets					1a(2)		X
b Other trans	sactions:					24		
(1) Sales	of assets to a noncharital	ble exempt organization				1b(1)		X
(2) Purch	ases of assets from a no	ncharitable exempt organization				1b(2)		X
(3) Renta	I of facilities, equipment,	or other assets				1b(3)		Х
• •	bursement arrangements					1b(4)	_	X
• •	s or loan guarantees					1b(5)		Х
• •	-	mbership or fundraising solicitation	ons			1b(6)		X
• •		iling lists, other assets, or paid em				1c		X
•		"Yes," complete the following sche	• •	avs show the fair m	narket value of the goods		le l	
		oundation. If the foundation receiv					ιο,	
		other assets, or services received.		in any transaction	or sharing arrangement, s	J.1.044 II.		
	(b) Amount involved	(c) Name of noncharitable		(d) Description	of transfers, transactions, and	sharing area	naeme	nte
<u> </u>	(-)	N/A	o onompt or gameation	(2) Besonphish	or denoted, and	Chaing and	- igo.iio	
		N/A		+				
								
				 	··			
				 				
				 				
								
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				ļ				
				<u> </u>				
				1				
2a Is the four	ndation directly or indirec	tly affiliated with, or related to, one	or more tax-exempt organiza	ations described				
		in 501(c)(3)) or in section 527?	, ,			Yes	X] No
b If "Yes." co	omplete the following sch	edule.						
	(a) Name of org		(b) Type of organization		(c) Description of relations	hip		
	N/A		1,,,,,		<u></u>	· · · · · · · · · · · · · · · · · · ·		
					· · · · · · · · · · · · · · · · · · ·			
			 					
Under	penalties of perfury, I declare	that I have examined this return, include	ng accompanying schedules and s	tatements, and to the	best of my knowledge			
Sign and be	elief, it is true, correspondend cor	that I have examined this retern, include mplete Declaration of preparer (other tha	an taxpayer) is based on all informa	ition of which preparer		ly the IRS dis urn with the	prepare	er
Here	Mar	1 (10/	2/20/202	CO-OMN		own below?	See ins	ו ר
	nature of officer or trustee		Data	Title	<u> </u>	X Yes	<u> </u>	J No∫
- Joigi			↑ Date (Chack To if I DTIN			
	Print/Type preparer's na	ame Preparer's	Signature	Date	Check if PTIN			
Paid	GADI G			42/2/	self- employed	06115		
	CARLO FERR	1 \ \	<u> </u>	1911/2V		06115		
Preparer	Firm's name ► KRE	SISCHER MILLER		' 1	Firm's EIN ▶ 23-1	98047	5	
Use Only								
		0 WITMER ROAD,						_
_	I HO	RSHAM, PA 19044	1-2369		Phone no. (215)			
					F	orm 990 -	·PF ((2019)

Carlo R. Ferri P00611568

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

➤ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2019

Name of the organization

Employer identification number

82-3315556 TOM AND WENDY COLEMAN FAMILY FOUNDATION Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)(
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) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990 EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Name of organization

Employer identification number

TOM AND WENDY COLEMAN FAMILY FOUNDATION

82-3315556

TOM A	ND WENDI COLLETAN PAMILI POUNDATION		3313330
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	THOMAS COLEMAN 400 BERWYN BAPTIST ROAD BERWYN, PA 19312	\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Occash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Omnicash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ 	Person Payroll Noncash Complete Part II for noncash contributions)

Name of orgànization

Employer identification number

TOM AND WENDY COLEMAN FAMILY FOUNDATION

82-3315556

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

Name of o	organization			Employer identification number				
TOM A	ND WENDY COLEMAN FAMILY	FOUNDATION		82-3315556				
Part III		tions to organizations described in through (e) and the following line of charitable, etc., contributions of \$1,000 o	ntry For organization	8), or (10) that total more than \$1,000 for the yea				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held				
								
		(e) Transfer of g	ift					
	Transferee's name, address, a	nd ZIP + 4	Relationsl	nip of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held				
		(e) Transfer of g	ift					
	Transferee's name, address, a	nd ZIP + 4	Relationsl	nip of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held				
		(e) Transfer of o	<u>_</u>	· · · · · · · · · · · · · · · · · · ·				
	(e) Transfer of gift							
	Transferee's name, address, a	nd ZIP + 4	Relationsl	nip of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held				
								
		(e) Transfer of g	ift					
	Transferee's name, address, a	nd ZIP + 4	Relations	nip of transferor to transferee				
ĺ								

FORM 990-PF	DIVIDENDS	S AND INTER	EST	FROM SECUR	ITIES	STATEMENT	1
SOURCE GROSS AMOUNT HAVERFORD TRUST ACCOUNT 333		CAPITAL GAINS DIVIDENDS 0.		(A) REVENUE PER BOOKS	(B) NET INVES MENT INCC		
				333.	33	33.	
TO PART I, LINE 4	333.	. 0.		333.	33	33.	
FORM 990-PF		OTHER E	XPE	NSES		STATEMENT	2
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOM		
HAVERFORD TRUST ACC	75.		75.			0.	
TO FORM 990-PF, PG	1, LN 23 =	75.	_	75.			0.
FORM 990-PF		CORPORAT	E S	TOCK		STATEMENT	3
DESCRIPTION				вос	K VALUE	FAIR MARKE' VALUE	т
HAVERFORD QUALITY GROWTH STOCK FUND					7,019.	13,2	44.
TOTAL TO FORM 990-PF, PART II, LINE 10B					7,019. 13,244		44.