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2019

OMB No. 1545-0052

## **Return of Private Foundation**

Department of the Treasury Internal Revenue Service

Form 990-PF

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.
 Go to <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

or	caler	ndar year 2019, or tax year beginning 07-01-20	)19 , aı	nd ending 06-30-	2020	·		
		ındation		A Employer id	entification numbe	r		
VN	IA FOUN	NDATION OF GREATER NORTH PENN		23-1396799	23-1396799			
Number and street (or P.O. box number if mail is not delivered to street address)  Room/suite  51 MEDICAL CAMPUS DRIVE					<b>B</b> Telephone number (see instructions)			
City	or town	, state or province, country, and ZIP or foreign postal code		(215) 847-440:	l .			
		PA 19446		C If exemption	application is pendin	g, check here		
G Cł	neck al	l that apply: $\qed$ Initial return $\qed$ Initial return of a	former public charity	<b>D 1.</b> Foreign or	ganizations, check he	ere		
		☐ Final return ☐ Amended return			ganizations meeting			
		$\square$ Address change $\square$ Name change		·	k here and attach co			
	•	rpe of organization: ✓ Section 501(c)(3) exempt private			undation status was t n 507(b)(1)(A), chec			
			e private foundation					
of	year (f	xet value of all assets at end from Part II, col. (c),  ▶\$ 17,580,527    J Accounting method:   □ Other (specify) _   (Part I, column (d) must	☐ Cash ☐ Accru		ation is in a 60-mont n 507(b)(1)(B), chec			
Pa	rt I	Analysis of Revenue and Expenses (The total	( ) 5 .			(d) Disbursements		
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)		
	1	Contributions, gifts, grants, etc., received (attach	108			(cash sasie shiry)		
	2	schedule)  Check ▶ ☑ if the foundation is <b>not</b> required to attach	100					
		Sch. B						
	3	Interest on savings and temporary cash investments	275.245	275.245				
	4	Dividends and interest from securities	375,345	375,345				
	5a b	Net rental income or (loss)						
æ	6a	Net gain or (loss) from sale of assets not on line 10	753,499					
Revenue	b	Gross sales price for all assets on line 6a						
Şe√	_	Canital gain not income (from Part IV) line 2)		753,499				
_	7 8	Capital gain net income (from Part IV, line 2)		733,499				
	9	Income modifications						
	10a	Gross sales less returns and allowances						
	b	Less: Cost of goods sold						
	c	Gross profit or (loss) (attach schedule)						
	11	Other income (attach schedule)	209	209				
	12	Total. Add lines 1 through 11	1,129,161	1,129,053				
	13	Compensation of officers, directors, trustees, etc.	80,000	0		72,000		
	14	Other employee salaries and wages	25,000	0		22,500		
es	15	Pension plans, employee benefits						
ens	16a	Legal fees (attach schedule)						
X.	b	Accounting fees (attach schedule)	9,350			(		
e e	_ c	Other professional fees (attach schedule)	3,092	. 0		775		
Operating and Administrative Expenses	17	Interest	<b>9</b> 27,749	21,500		E (2)		
<u> </u>	18 19	Taxes (attach schedule) (see instructions)  Depreciation (attach schedule) and depletion	27,749	21,500		5,624		
Ē			E 053	0		F 266		
ΑĠ	20 21	Occupancy	5,853 4,872			5,268 4,158		
ם	22	Printing and publications	4,072			4,130		
ල ලැ	23	Other expenses (attach schedule)	52,646	30,556		18,753		
E E	24	Total operating and administrative expenses.	<u> </u>			<u>, , , , , , , , , , , , , , , , , , , </u>		
<u> </u>		Add lines 13 through 23	208,562	52,056		129,078		
<u> </u>	25	Contributions, gifts, grants paid	656,040			656,040		
	26	<b>Total expenses and disbursements.</b> Add lines 24 and 25	221.55	50.655		705 ::::		
	27	Subtract line 26 from line 12:	864,602	52,056		785,118		
	a	Excess of revenue over expenses and						
		disbursements	264,559					
	b	Net investment income (if negative, enter -0-)		1,076,997				
	C	Adjusted net income (if negative, enter -0-)		Cat. No. 11399)		m 990-BE (2019		
or.	raner	WALK MODULITION ACT NOTICE COS INSTRUCTIONS		Cat No. 11300)	, г.,	UUII-DE /2010		

Beginning of year

Page 2

17,475,472

17,580,527

End of year

13,735,060

13,840,115

11,125

13,556,081

13,556,081

13,567,206

19,475

19,475

13,820,640

13,820,640

13,840,115

13,556,081

13,820,640

13,820,640 Form **990-PF** (2019)

264,559

0

1

2

3 4

5

6

		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 (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less: allowance for doubtful accounts ▶			
ß	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges	10,538	14,537	14,537
As	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			
	1				

## 12 Investments-mortgage loans . . . . 13,509,822 Investments—other (attach schedule) 13 14 Land, buildings, and equipment: basis ▶ Less: accumulated depreciation (attach schedule) 15 Other assets (describe 16 Total assets (to be completed by all filers—see the 13,567,206 instructions. Also, see page 1, item I) 17 Accounts payable and accrued expenses . 11,125 18 Grants payable 19

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule). . . . . .

Total liabilities(add lines 17 through 22) . . . . . . . . . . . . .

Foundations that do not follow FASB ASC 958, check here ▶ □

Foundations that follow FASB ASC 958, check here ▶

Capital stock, trust principal, or current funds . . .

Paid-in or capital surplus, or land, bldg., and equipment fund

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions) . . . . .

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

**Analysis of Changes in Net Assets or Fund Balances** 

Attached schedules and amounts in the description column

Form 990-PF (2019)

**Balance Sheets** 

Part II

Liabilities

Net Assets or Fund Balances

20

21

22

23

24

25

26

27 28

29

30

Part III

2

Other liabilities (describe -\_

and complete lines 24, 25, 29 and 30.

Net assets without donor restrictions .

Net assets with donor restrictions . . .

and complete lines 26 through 30.

of-year figure reported on prior year's return)

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Page **3** 

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)				<b>(b)</b> How acquired P—Purchase D—Donation		(c) te acquired o., day, yr.)	<b>(d)</b> Date sold (mo., day, yr.)
1 a PUBLICLY TRADED MUT	UAL FUNDS				20	019-07-15	2020-06-30
b PUBLICLY TRADED MUT	b PUBLICLY TRADED MUTUAL FUNDS				20	019-06-15	2020-06-30
c CAPITAL GAINS DIVIDE	NDS			Р			
d							
e							
	(f)			(g)	+	/1	1)
(e)	Depreciation allo	wed		other basis			r (loss)
Gross sales price	(or allowable)			ense of sale			minus (g)
a	99,374			93,2	02		6,172
<b>b</b> 2,43	36,408			1,886,6	77		549,731
	97,596			_,,-			197,596
d	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				-		257,050
e				12/21/22	-		
Complete only for asset	s showing gain in column (h) ar	id owned b					l) a) gain minus
(i)	(j) Adjusted basi:			( <b>k)</b> of col. (i)	0.0		n) gain minus less than -0-) <b>or</b>
F.M.V. as of 12/31/69	as of 12/31/6			. (j), if any	"		om col.(h))
a	<u> </u>			(3),		<u> </u>	6,172
b							549,731
C							197,596
d							,
e							
		( If gai	n, also enter in Pa	art I line 7			
2 Capital gain net income	e or (net capital loss)		ss), enter -0- in P		}   _		752 400
B. Nick chart towns constal		` : 1222/	=) (C).		' <del>  2</del>		753,499
·	gain or (loss) as defined in sect art I, line 8, column (c) (see ins	-					
in Part I, line 8	art 1, illie 8, coluillii (c) (see ills				}   з		
					,		
Part V Qualification	Under Section 4940(e) fo	r Reduce	ed Tax on Net	Investment:	Income	}	
For optional use by domestic (	private foundations subject to tl	ne section 4	1940(a) tax on ne	t investment inc	ome.)		
	·		. ,		•		
If section 4940(d)(2) applies, l	eave this part blank.						
Was the foundation liable for th	he section 4942 tax on the distr	ibutable an	nount of any year	in the base peri	od?	∐ Y€	es 🔽 No
if "Yes," the foundation does n	ot qualify under section 4940(e	). Do not co	omplete this part.				
1 Enter the appropriate ar	mount in each column for each	ear; see ir	structions before	making any ent	ries.		
(a) Base period years Calendar	(b)		(c)			(d) Distribution rati	0
year (or tax year beginning in)	Adjusted qualifying distribution	s Net \	alue of noncharitabl	le-use assets	(col.	(b) divided by c	
2018	813	,550		17,005,338			0.047841
2017							
2016							
2015							
2014							
2 Total of line 1, column (	(d)			2	2		0.047841
	o for the 5-year base period—d				.		0.047041
	ndation has been in existence if oncharitable-use assets for 2019			· · · ·   3			0.047841 17,101,706
			•				<del></del>
5 Multiply line 4 by line 3				5			818,163
	ent income (1% of Part I, line 2	,		6			10,770
					_		828,933
8 Enter qualifying distribut	tions from Part XII, line 4 <mark>,</mark> eater than line 7, check the box	in Dart VI	line 1b and a	<u>{</u>		/ tay rata C-	785,118
instructions.	eater than line /, check the box	. III PAFT VI,	inie ib, and com	piete triat part u	sing a 15	o tax rate. Se	e uie Pait VI

	990-F1 (2019)		- 4-20.14	<b>-</b>			P	age (
श्च		ing Activities for Which	Form 4720 May Be	Required (continued)				
ā	During the year did the foundation p	·					Yes	No
	(1) Carry on propaganda, or otherw	ise attempt to influence legisl	ation (section 4945(e))?	☐ Yes 5	<b>⊘</b> No			
	(2) Influence the outcome of any sp	ecific public election (see sect	tion 4955); or to carry					
	on, directly or indirectly, any vot	er registration drive?	· · 🔲 Yes	✓ No				
	(3) Provide a grant to an individual (	for travel, study, or other sim	☐ Yes S	☑ No				
	(4) Provide a grant to an organization	rganization other than a charitable, etc., organization described						
	in section 4945(d)(4)(A)? See in	structions	· · □ v •	✓ No				
	(5) Provide for any purpose other th	an religious, charitable, scien	tific, literary, or	· · Yes	✓ No			
	educational purposes, or for the		* * * * * * * * * * * * * * * * * * * *	— —	<del>,</del>			
b	If any answer is "Yes" to $5a(1)-(5)$ ,	•		centions described in	<b>⊻</b> No			
_	Regulations section 53.4945 or in a c	•				5b		
	Organizations relying on a current no			_	_,			
_	If the answer is "Yes" to question 5a			[	_			
C	•	• • •	•		_			
	tax because it maintained expenditu	, ,		''	⊔ No			
	If "Yes," attach the statement requir	· -						
ia	Did the foundation, during the year,	receive any funds, directly or	indirectly, to pay premi	ums on				
	a personal benefit contract?			· 🗌 Yes	Z No │			
b	Did the foundation, during the year,	pay premiums, directly or ind	lirectly, on a personal be		[	6b		No
	If "Yes" to 6b, file Form 8870.							
'a	At any time during the tax year, was	the foundation a party to a p	prohibited tax shelter tra	nsaction?	✓ No			
b	If "Yes", did the foundation receive a	iny proceeds or have any net	income attributable to the	ne transaction?	<u>-                                    </u>	7b		
3	Is the foundation subject to the secti	ion 4960 tax on payment(s) o	of more than \$1,000,000	in remuneration or	Γ			
	excess parachute payment during th				<del>.</del>			
					✓ No L			
Pai	and Contractors	fficers, Directors, Trust	lees, roundation Ma	magers, migniy Paid	Employ	ees,		
_								
1	List all officers, directors, trustee				1			
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans a			se acc	
	(-,	devoted to position	-0-)	deferred compensation		her al	lowand	es
ee A	Additional Data Table							
								,,
2	Compensation of five highest-pai	d employees (other than ti	nose included on line :		none, en	ter "	NONE.	
- \ I	Name and address of each employee :	(b) Title, and average		(d) Contributions to employee benefit	(a) F	vnanc	se acco	unt
u ,	more than \$50,000	nours per week	(c) Compensation	plans and deferred			owance	
	. ,	devoted to position		compensation				
ONE								
ota	I number of other employees paid ove	r \$50,000	<u></u> .					
					Forr	n <b>99</b> 0	D-PF (	2019

Form 990-PF (2019)		Page <b>7</b>
Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	aid Employees,
3 Five highest-paid independent contractors for professional servic	es (see instructions). If none, enter	"NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
<b>Total</b> 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 rele organizations and other beneficiaries served, conferences convened, research papers produ		r of Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see i	nstructions)	
Describe the two largest program-related investments made by the foundation during the	<u> </u>	Amount
1	,	
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		• o
Total Add Mico Landagn 5		Form <b>990-PF</b> (2019)

2c

3

4

5

6

7

1a

1b

2

3a 3b

4

5

21,540

833,545

833.545

833.545

785,118

785,118

785.118

Form 990-PF (2019)

Distributable amount before adjustments. Subtract line 2c from line 1. . . . . . . . . . . . . . . .

Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . .

Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26. . . . . . . . . . . .

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

income. Enter 1% of Part I, line 27b. See instructions.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

the section 4940(e) reduction of tax in those years.

3

4 5

6

1

2

3

4

5

b

Part XII

767,001

66,544

Form **990-PF** (2019)

18,117

ľ	art XIII	Į
4	Dictributable	

FORM 990-PF (2)	019)
Part XIII	Und

Form 990-PF (2019)				Page <b>9</b>
Part XIII Undistributed Income (see instruct	ions)			
	(a) Corpus	(b) Years prior to 2018	<b>(c)</b> 2018	( <b>d)</b> 2019
1 Distributable amount for 2019 from Part XI, line 7				833,545
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only			18,117	
<b>b</b> Total for prior years: 20, 20, 20		0		
3 Excess distributions carryover, if any, to 2019:				

**b** From 2015. . c From 2016. . **d** From 2017. .

e From 2018. . . . f Total of lines 3a through e. . . . . . . 4 Qualifying distributions for 2019 from Part XII, line 4: ► \$ a Applied to 2018, but not more than line 2a

6 Enter the net total of each column as

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) . . . . . . . . . 8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a . . .

10 Analysis of line 9: a Excess from 2015. **b** Excess from 2016. . c Excess from 2017. . d Excess from 2018. . e Excess from 2019. .

a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 **b** Prior years' undistributed income. Subtract line 4b from line 2b . . . . . . . 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. . . . . **d** Subtract line 6c from line 6b. Taxable amount e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions . . . . . . . f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020 . . . . . .

indicated below:

**b** Applied to undistributed income of prior years

(Election required—see instructions). . . . .

c Treated as distributions out of corpus (Election

**d** Applied to 2019 distributable amount. . .

e Remaining amount distributed out of corpus

**5** Excess distributions carryover applied to 2019. (If an amount appears in column (d), the

same amount must be shown in column (a).)

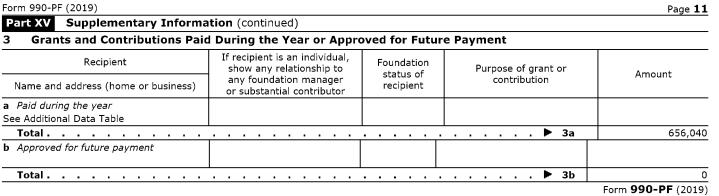
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

GRANTS ARE AWARDED TO ORGANIZATIONS THAT BENEFIT THE HEALTH AND WELL-BEING OF THE NORTH PENN COMMUNITY. THE AREAS

c Any submission deadlines:

IN ACCORDANCE WITH PUBLISHED DEADLINES

SERVED ARE THE NORTH PENN, WISSAHICKON AND SOUDERTON SCHOOL DISTRICTS AS WELL AS WORCESTER TOWNSHIP. Form 990-PF (2019)



ter gross amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded by section		(e) Related or exempt
Program service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	(d) Amount	function income (See instructions.)
a b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash investments					
Dividends and interest from securities			18	375,345	
Net rental income or (loss) from real estate:					
a Debt-financed property					
<b>b</b> Not debt-financed property					
Net rental income or (loss) from personal property Other investment income.			01	209	
Gain or (loss) from sales of assets other than			01	209	
inventory			18	753,499	
Net income or (loss) from special events:				,	
Gross profit or (loss) from sales of inventory					
Other revenue: a					
b					
c					
d					
e				4 420 052	
e		0	1'	1,129,053	
e Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculated as the columns (b).	lations.)		1,	1,129,053 <b>3</b>	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculart XVI-B  Relationship of Activities to the	lations.) ne Accomplis	hment of Exemp	pt Purposes	3	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculant XVI-B  Relationship of Activities to the second section of the foundation of th	lations.)  ne Accomplis  income is report	hment of Exemp	ot Purposes Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculant XVI-B  Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below to the accomplishment of the foundation's explain the accomplishment of the foundation is a complishment of the foundation.	lations.)  ne Accomplis  income is report	hment of Exemp	ot Purposes Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculant XVI-B  Relationship of Activities to the second section of the foundation of th	lations.)  ne Accomplis  income is report	hment of Exemp	ot Purposes Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculant XVI-B  Relationship of Activities to the second section of the foundation of th	lations.)  ne Accomplis  income is report	hment of Exemp	ot Purposes Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculant XVI-B  Relationship of Activities to the second s	lations.)  ne Accomplis  income is report	hment of Exemp	ot Purposes Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculat XVI-B  Relationship of Activities to the second se	lations.)  ne Accomplis  income is report	hment of Exemp	ot Purposes Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculate to the columns.  Explain below how each activity for which the accomplishment of the foundation's explain to the columns.	lations.)  ne Accomplis  income is report	hment of Exemp	ot Purposes Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculate to the columns.  Explain below how each activity for which the accomplishment of the foundation's explain to the columns.	lations.)  ne Accomplis  income is report	hment of Exemp	ot Purposes Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calcurt XVI-B  Relationship of Activities to the second sec	lations.)  ne Accomplis  income is report	hment of Exemp	ot Purposes Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculate to the columns.  Explain below how each activity for which the accomplishment of the foundation's explain to the columns.	lations.)  ne Accomplis  income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculate to the columns.  Explain below how each activity for which the accomplishment of the foundation's explain to the columns.	lations.)  ne Accomplis  income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculate to the columns.  Explain below how each activity for which the accomplishment of the foundation's explain to the columns.	lations.)  ne Accomplis  income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculat XVI-B  Relationship of Activities to the second se	lations.)  ne Accomplis  income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculat XVI-B  Relationship of Activities to the second se	lations.)  ne Accomplis  income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculat XVI-B  Relationship of Activities to the second se	lations.)  ne Accomplis  income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculat XVI-B  Relationship of Activities to the second se	lations.)  ne Accomplis  income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculat XVI-B  Relationship of Activities to the second se	lations.)  ne Accomplis  income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculate to the columns.  Explain below how each activity for which the accomplishment of the foundation's explain to the columns.	lations.)  ne Accomplis  income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculate to the columns.  Explain below how each activity for which the accomplishment of the foundation's explain to the columns.	lations.)  ne Accomplis  income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculate to the columns.  Explain below how each activity for which the accomplishment of the foundation's explain to the columns.	lations.)  ne Accomplis  income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculat XVI-B  Relationship of Activities to the second se	lations.)  ne Accomplis  income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculate to the columns.  Explain below how each activity for which the accomplishment of the foundation's explain to the columns.	lations.)  ne Accomplis  income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculant XVI-B  Relationship of Activities to the second section of the foundation of th	lations.)  ne Accomplis  income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3	1,129,053

Form 990	-PF (2019)				Pa	ge <b>13</b>
Part X	VII Information R Exempt Organ		ions and Relationships With Nonchari	table		
1 Did th	e organization directly or the than section 501(c)(3	ndirectly engage in any of the following with a ) organizations) or in section 527, relating to	any other organization described in section 501 political organizations?		Yes	No
a Trans	fers from the reporting fou	ndation to a noncharitable exempt organization	on of:			
(1) Cash						No
(2) Other assets						No
<b>b</b> Other	transactions:					
(1)	Sales of assets to a noncha	ritable exempt organization		1b(1)		No
(2)	Purchases of assets from a	noncharitable exempt organization		1b(2)		No
(3)	Rental of facilities, equipme	ent, or other assets		1b(3)		No
(4)	Reimbursement arrangeme	nts		1b(4)		No
(5)	oans or loan guarantees.			1b(5)		No
<b>(6)</b> P	erformance of services or i	membership or fundraising solicitations		1b(6)		No
<b>c</b> Shari	ng of facilities, equipment,	mailing lists, other assets, or paid employees		1c		No
of the	goods, other assets, or se transaction or sharing arr		iolumn (b) should always show the fair market was to be foundation received less than fair market valuate goods, other assets, or services received.  (d) Description of transfers, transactions, and sha	ie	ngemen	ts
-						
-						

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?							
<b>b</b> If "Yes," complete the following schedule.							
(a) Name of organization	(b) Type of organizati	on (c) Description of relationship					

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. May the IRS discuss this 2020-09-24 return with the preparer shown Signature of officer or trustee Title Date (see instr.) 🗹 Yes 🗆 No Print/Type preparer's name Preparer's Signature Date PTIN Check if self-P00163568 employed ▶ 🔲 JULIA L DAVIS 2020-09-24

Sign Here Paid **Preparer** Firm's name ▶ **DUNLAPSLK PC** Firm's EIN ▶23-3018514 **Use Only** Firm's address ▶ 1300 HORIZON DRIVE SUITE 106 Phone no. (267) 594-3755 CHALFONT, PA 18914 Form **990-PF** (2019)

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If Expense account, (d) Contributions to hours per week not paid, enter (e) other allowances (b) devoted to position employee benefit plans -0-) and deferred compensation KATHLEEN FITZGERALD PRESIDENT ٥ 2.00 51 MEDICAL CAMPUS DRIVE LANSDALE, PA 19446 WILLIAM LEISTER VICE PRESIDENT 1.00 51 MEDICAL CAMPUS DRIVE LANSDALE, PA 19446 DAVE CROSSON TREASURER 2.00 51 MEDICAL CAMPUS DRIVE LANSDALE, PA 19446 ANNE FRANK SECRETARY 0 1.00 51 MEDICAL CAMPUS DRIVE LANSDALE, PA 19446 CURTIS DEARDORFE MEMBER 1.00 51 MEDICAL CAMPUS DRIVE LANSDALE, PA 19446 F LEE MANGAN MEMBER 1.00 51 MEDICAL CAMPUS DRIVE LANSDALE, PA 19446 **NEAL PEARLSTINE** MEMBER 0 1.00 51 MEDICAL CAMPUS DRIVE LANSDALE, PA 19446 JEROME SAG MEMBER O O 1.00 51 MEDICAL CAMPUS DRIVE LANSDALE, PA 19446 TERRENCE WALTON MEMBER 1.00 51 MEDICAL CAMPUS DRIVE LANSDALE, PA 19446 EXECUTIVE DIRECTOR DIANA DOHERTY 80,000 25.00 51 MEDICAL CAMPUS DRIVE

LANSDALE, PA 19446

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ABINGTON-JEFFERSON HEALTH NONE PC DENTAL CARE ACCESS 45,000

1200 OLD YORK ROAD ABINGTON, PA 19101			PROGRAM	·
BUCKS-MONT COLLABORATIVE PO BOX 66 HARLEYSVILLE, PA 19438	NONE	PC	SUPPORT FOR OPERATING EXPENSES, LEADERSHIP TRAINING, EDUCATION PROGRAMS	41,500

PO BOX 66 HARLEYSVILLE, PA 19438	NONE		EXPENSES, LEADERSHIP TRAINING, EDUCATION PROGRAMS	11,500
FAMILY SERVICES OF MONTGOMERY COUNTY 3125 RIDGE PIKE NORRISTOWN, PA 19403	NONE	PC	OPERATIONS AND SENIOR SERVING PROGRAMS	30,000

FAMILY SERVICES OF MONTGOMERY COUNTY 3125 RIDGE PIKE NORRISTOWN, PA 19403	NONE	PC	OPERATIONS AND SENIOR SERVING PROGRAMS	30,000
Total			▶ 3a	656,040

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

GREATER HARLEYSVILLE AND NORTH PENN SENIOR SERVICES 312 ALUMNI AVE HARLEYSVILLE, PA 19438	NONE	PC	GENERAL OPERATIONS (\$10,000)INCREASING COMMUNICATION CAPACITY (\$10,000)	20,000
INDIAN CREEK FOUNDATION 420 COWPATH ROAD SOUDERTON, PA 18964	NONE	PC	STAFF DEVELOPMENT (\$10,000) OPERATIONS (\$5,000)	15,000

INDIAN CREEK FOUNDATION 420 COWPATH ROAD SOUDERTON, PA 18964	NONE	PC	STAFF DEVELOPMENT (\$10,000) OPERATIONS (\$5,000)	15,000
INDIAN VALLEY PUBLIC LIBRARY 100 E CHURCH AVE	NONE	PC	OPERATIONS	5,000

SOUDERTON, PA 18964			OPERATIONS (\$3,000)	
INDIAN VALLEY PUBLIC LIBRARY 100 E CHURCH AVE TELFORD, PA 18969	NONE	PC	OPERATIONS	5,00

Total .

656,040

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year INTER-FAITH HOUSING ALLIANCE NONE PC FIRE SYSTEM UPGRADES 33,810 31 S SPRING GARDEN STREET (49 310)CENSUS OUTREACH

AMBLER, PA 19002			AND EDUCATION INITIATIVE (\$4,500)GENERAL OPERATIONS (\$20,000)	
KEYSTONE OPPORTUNITY CENTER 104 N MAIN STREET SOUDERTON, PA 18964	NONE	PC	RESTRUCTURING, CONSULTANTS (\$10,000) CENSUS (\$5,000)OPERATIONS	40,00

KEYSTONE OPPORTUNITY CENTER 104 N MAIN STREET SOUDERTON, PA 18964	NONE	PC	RESTRUCTURING, CONSULTANTS (\$10,000) CENSUS (\$5,000)OPERATIONS (\$25,000)	40,000
LANSDALE LIBRARY ASSOCIATION	NONE	PC	INTERNATIONAL SPRING FLING	8,000

104 N MAIN STREET SOUDERTON, PA 18964	NONE	FC	CONSULTANTS (\$10,000) CENSUS (\$5,000)OPERATIONS (\$25,000)	40,00
LANSDALE LIBRARY ASSOCIATION 301 VINE STREET	NONE	PC	INTERNATIONAL SPRING FLING (\$1,000)BUILDING PROJECT	8,00

,			(\$25,000)	
LANSDALE LIBRARY ASSOCIATION 301 VINE STREET LANSDALE, PA 19446	NONE	PC	INTERNATIONAL SPRING FLING (\$1,000)BUILDING PROJECT (\$5,000)CENSUS KIOSK (\$2,000)	8,000

Total			▶ 3a	656,040
LANSDALE LIBRARY ASSOCIATION 301 VINE STREET LANSDALE, PA 19446	NONE	PC	(\$1,000)BUILDING PROJECT (\$5,000)CENSUS KIOSK (\$2,000)	8,000

П	301 VINE STREET LANSDALE, PA 19446		(\$1,000)BUILDING PROJECT (\$5,000)CENSUS KIOSK (\$2,000)	
ı				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year LAUREL HOUSEPO BOX 764 NONE PC MOBILE TECHNOLOGY TOOLS 17,000 NORRISTOWN, PA 19404 FOR CENSUS (\$2,000) OPERATIONS (\$10 000)

			FUNDRAISING EDUCATION (\$5000)	
LEGAL AID OF SOUTHEASTERN PENNSYLVANIA 625 SWEDE STREET NORRISTOWN, PA 19401	NONE	PC	OPERATIONS	5,000
MANNA ON MAIN STREET 606 E MAIN STREET SUITE 1001 LANSDALE, PA 19446	NONE	PC	LEADERSHIP TRAINING (\$7,710) OPERATIONS (\$25,000)NORTH PENN COMMONS TOWN HALL CENSUS PROMOTION (\$2,500) POSTSECONDARY FOOD INSECURITY RESEARCH INITIATIVE (\$10,000)	45,210

▶ 3a

656,040

Total . .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year MENTAL HEALTH PARTNERSHIPS NONE PC YOUTH AND FAMILY PEER 5,000 1210 STANBRIDGE STREET SUPPORT FOR THE GREATER

NORRISTOWN, PA 19401			NORTH PENN REGION	
MITZVAH CIRCLE FOUNDATION 1561 GEHMAN ROAD HARLEYSVILLE, PA 19438	NONE	PC	OPERATIONS	25,000
MONTGOMERY COUNTY FOUNDATION 4 SENTRY PARKWAY BLUE BELL, PA 19422	NONE	PC	YOUR WAY HOME MONTGOMERY COUNTY NORTH PENN HOUSING RESOURCE CENTER PROGRAM (\$21,000)COVID RESPONSE FUND (\$25,000)	46,000

Total .

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656,040

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient

Name and address (nome or business)	or substantial contributor	•		
a Paid during the year				
NORTH PENN VALLEY BOYS AND GIRLS CLUB 16 SUSQUEHANNA AVENUE	NONE	PC	SAFETY UPDATES (\$10,000) GENERAL OPERATIONS (\$20,000)	30,000

16 SUSQUEHANNA AVENUE LANSDALE, PA 19446			(\$20,000)	
NORTH WALES AREA LIBRARY 233 SOUTH SWARTLEY STREET	NONE	PC	2020 CENSUS SUPPORT (\$4,250)TECH UPGRADE	19,250
NODTH WALES DA 104E4			/ ¢10 000 ODEDATIONS (¢5 000)	

NORTH WALES AREA LIBRARY 233 SOUTH SWARTLEY STREET NORTH WALES, PA 19454	NONE	PC	2020 CENSUS SUPPORT (\$4,250)TECH UPGRADE (\$10,000)OPERATIONS (\$5,000)	19,250
PEACEFUL LIVING569 YODER ROAD	NONE	PC	OPERATIONS	5,000

233 SOUTH SWARTLEY STREET NORTH WALES, PA 19454			(\$4,250)TECH UPGRADE (\$10,000)OPERATIONS (\$5,000)	,
PEACEFUL LIVING569 YODER ROAD	NONE	PC	OPERATIONS	5,000

NORTH WALES, PA 19454			(\$10,000)OPERATIONS (\$5,000)	
PEACEFUL LIVING569 YODER ROAD HARLEYSVILLE, PA 19438	NONE	PC	OPERATIONS	5,000
Total			▶ 3a	656,040

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year PENN FOUNDATION807 LAWN AVENUE NONE PC STRATEGIC PLAN DEVELOPMENT 10,000 SELLERSVILLE, PA 18960

PHILIP JAISOHN MEMORIAL FOUNDATION 6705 OLD YORK ROAD PHILADELPHIA, PA 19126	NONE	PC	PEDIATRIC SERVICE EXPANSION (\$10,000)CENSUS INCLUSION FOR KOREAN AND CHINESE COMMUNITIES (\$4,000) OPERATIONS (\$15,000)	29,000
SEBASTIAN RIDING	NONE	PC	STAFFING AT CAPACITY	5,000

656,040

PHILADELPHIA, PA 19126			COMMUNITIES (\$4,000) OPERATIONS (\$15,000)	
SEBASTIAN RIDING 3589 WATER STREET ROAD COLLEGEVILLE, PA 19426	NONE	PC	STAFFING AT CAPACITY	5,00

Total . .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

SENIOR ADULT ACTIVITIES CENTER OF MONTGOMERY COUNTY 536 GEORGE STREET	NONE	PC	TECHNOLOGY UPDATE (\$5,000) OPERATIONS (\$5,000)	10,000
NORRISTOWN, PA 19401				
THE CENTER FOR LOSS AND	NONE	PC	CAPACITY BUILDING (\$9,250)	14,250

NORRISTOWN, PA 19401				
THE CENTER FOR LOSS AND BEREAVEMENT 3847 SKIPPACK PIKE SKIPPACK, PA 19474	NONE	PC	CAPACITY BUILDING (\$9,250) OPERATIONS (\$5,000)	14,250
THE PARTNERSHIP TMA OF MONTGOMERY COUNTY	NONE	PC	TECHNOLOGY AND SUPPLY UPDATING (\$5,000)	10,500

BEREAVEMENT 3847 SKIPPACK PIKE SKIPPACK, PA 19474		OPERATIONS (\$5,000)	·
THE PARTNERSHIP TMA OF MONTGOMERY COUNTY 595 BETHLEHEM PIKE MONTGOMERYVILLE, PA 18936	NONE	TECHNOLOGY AND SUPPLY UPDATING (\$5,000) OPERATIONS (\$5,000)CENSUS INCLUSION (\$500)	10,500
·			

SKIPPACK, PA 19474				
THE PARTNERSHIP TMA OF MONTGOMERY COUNTY 595 BETHLEHEM PIKE MONTGOMERYVILLE, PA 18936	NONE	PC	TECHNOLOGY AND SUPPLY UPDATING (\$5,000) OPERATIONS (\$5,000)CENSUS INCLUSION (\$500)	10,500
Total			656,040	

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year THE SALVATION ARMY CHILDREN'S NONE PC CIRCLE OF SUPPORT RESOURCE 10,000 SERVICES FAMILY RETENTION INITIATIVE (\$5,000)OPERATIONS (\$5,000) 426 MAIN STREET

HARLEYSVILLE, PA 19438			(4-1)	
VOL MEDICAL SERVICE CORPS OF LANSDALE 175 MEDICAL CAMPUS DRIVE LANSDALE, PA 19446	NONE	PC	STRATEGIC PLANNING PROJECT	10,000
WISSAHICKON VALLEY PUBLIC LIBRARY 650 SKIPPACK PIKE	NONE	PC	GENERAL OPERATING	5,000

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656,040

BLUE BELL, PA 19422

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

or substantial contributor

Name and address (home or business)

	or substantial contributor			
a Paid during the year				
WOMEN'S CENTER OF MONTGOMERY COUNTY 2506 NORTH BROAD STREET	NONE	PC	OPERATIONS (\$10,000) COMMUNICATIONS ENHANCEMENT (\$5,000)	15,000

COLMAR, PA 18915			ENHANCEMENT (\$5,000)	
ACLAMO FAMILY CENTERS 512 WEST MARSHALL STREET NORRISTOWN, PA 19401	NONE	PC	OPERATIONS (\$10,000)CENSUS PROJECT, CAPACITY BUILDING (\$15,000)	25,000

ACLAMO FAMILY CENTERS 512 WEST MARSHALL STREET NORRISTOWN, PA 19401	NONE	PC	OPERATIONS (\$10,000)CENSUS PROJECT, CAPACITY BUILDING (\$15,000)	25,000
AMBLER NAACPPO BOX 64	NONE	PC	CENSUS	4,500

STATES OF THE ST	NONE	PC	PROJECT, CAPACITY BUILDING (\$15,000)	25,00
AMBLER NAACPPO BOX 64	NONE	PC	CENSUS	4,50

NORRISTOWN, PA 19401			PROJECT, CAPACITY BUILDING (\$15,000)	
AMBLER NAACPPO BOX 64 AMBLER, PA 19002	NONE	PC	CENSUS	4,500

AMBLER NAACPPO BOX 64	NONE	PC	CENSUS	4,50
AMBLER, PA 19002				

AMBLER, PA 19002	NONE	PC	CENSUS	4,	
Total			▶ 3a	656,040	

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year GENERATIONS OF INDIAN VALLEY NONE PC CENSUS ASSISTANCE (\$3000) 13,000

259 N SECOND STREET SOUDERTON, PA 18964			PROVIDING FOR FUTURE GENERATIONS (\$10,000)	
KOREAN AMERICAN ASSOC OF GREATER PHILADELPHIA 1001 WEST 70TH AVENUE PHILADELPHIA, PA 19126	NONE	PC	CENSUS 2020	4,000
MATTIE N DIXON COMMUNITY	NONE	PC	OPERATIONS (\$10,000) ADDRESSING DIETARY NEEDS	18,520

1001 WEST 70TH AVENUE PHILADELPHIA, PA 19126			
MATTIE N DIXON COMMUNITY CUPBOARD 150 N MAIN STREET	NONE	OPERATIONS (\$10,000) ADDRESSING DIETARY NEEDS OF FOOD INSECURE	18,52

За

656,040

PHILADELPHIA, PA 19126				
MATTIE N DIXON COMMUNITY CUPBOARD 150 N MAIN STREET AMBLER, PA 19002	NONE	PC	OPERATIONS (\$10,000) ADDRESSING DIETARY NEEDS OF FOOD INSECURE HOUSEHOLDS (\$8,520)	18,5

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

a Paid during the year			
MISSION KIDS CHILD ADVOCACY CENTER	NONE	TECHNOLOGY (\$5,500) OPERATIONS (\$5,000)	10,500

PO BOX 413 BLUE BELL, PA 19422			OPERATIONS (\$5,000)	
VNA COMMUNITY SERVICES INC 1421 HIGHLAND AVENUE	NONE	PC	OPERATIONS (\$20,000)CENSUS OUTREACH (\$3,000)OUTCOME	26

Total .

ı	BLUE BELL, PA 19422				
	VNA COMMUNITY SERVICES INC 1421 HIGHLAND AVENUE ABINGTON, PA 19001	NONE	PC	OPERATIONS (\$20,000)CENSUS OUTREACH (\$3,000)OUTCOME MEASUREMENT SYSTEM (\$3,000)	26,000

VNA COMMUNITY SERVICES INC NONE 1421 HIGHLAND AVENUE ABINGTON, PA 19001	PC	OPERATIONS (\$20,000)CENSUS OUTREACH (\$3,000)OUTCOME MEASUREMENT SYSTEM (\$3,000)	26,000
---	----	---	--------

656,040

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491281010170								
TY 2019 Accounting Fees Schedule								
Name: VNA FOUNDATION OF GREATER NORTH PENN EIN: 23-1396799								
Category	Amount		nvestment ncome	Adjusted Net Income	Disbursements for Charitable Purposes			
ACCOUNTING	9,3	50	0		0			

erile GRAPHIC Print - DO NOT PROCESS	AS Fileu Data -	DLN: 93491261010170
TY 2019 Investments - Other	Schedule	
Name:	VNA FOUNDATION OF GRI	EATER NORTH PENN

DIN. 02/01/201010170

17,475,472

13,735,060

ofile CRADUIC print - DO NOT PROCESS | As filed Data -

PUBLICLY TRADED SECURITIES

<b>EIN:</b> 23-1396/99							
Investments Other Schedule 2							
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value				

AT COST

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	: 93491281010170			
TY 2019 Other Expenses Sche	dule		·	·			
Name:	Name: VNA FOUNDATION OF GREATER NORTH PENN						
EIN:	23-1396799						
Other Expenses Schedule				1			
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT FEES	30,556	30,556		0

	Books	Income	Income	Purposes
INVESTMENT FEES	30,556	30,556		0
COMPUTER EXPENSE	10,915	0		9,823
ADVERTISING AND PUBLIC RELATIONS	431	0		388

6,685

2,539

1,460

60

DUES AND SUBSCRIPTIONS

INSURANCE

OFFICE EXPENSES

STAFF DEVELOPMENT

6,017

1,483

988

54

Name: VNA FOUNDATION OF GREATER NORTH PENN

OTHER

efile GRAPHIC print - DO NOT PROCESS

**EIN:** 23-1396799

Other Income Schedule Description Revenue And

As Filed Data -

Net Investment Adjusted Net Income **Expenses Per Books** 

209

Income

209

209

DLN: 93491281010170

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491281010170								
TY 2019 Other Professional Fees Schedule								
Name: VNA FOUNDATION OF GREATER NORTH PENN								
E	<b>IN:</b> 23-1396799							
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes				

775

3,092

OTHER CONTRACTED SERVICES

efile GRAPHIC print - DO NOT PROCESS   As Filed Data - DLN: 93491281010170					N: 93491281010170
TY 2019 Taxes Schedul	e				
	Name	VNA FOLIND	ATION OF GREATE	R NORTH PENN	
				IN NORTH LINE	
	EIN:	23-1396799			
Category	А	mount	Net Investment	Adjusted Net	Disbursements
			Income	Income	for Charitable
					Purposes
IRS		21,500	21,500		0
PAYROLL TAXES		6,249	0		5,624