

For calendar year 2018, or tax year beginning 07-01-2018, and ending 06-30-2019

Name of foundation POTTSTOWN AREA HEALTH AND WELLNESS FOUNDATION		A Employer identification number 23-2344729	
Number and street (or P.O. box number if mail is not delivered to street address) 152 EAST HIGH STREET SUITE 500		Room/suite	B Telephone number (see instructions) (610) 323-2006
City or town, state or province, country, and ZIP or foreign postal code POTTSTOWN, PA 19464		C If exemption application is pending, check here ▶ <input type="checkbox"/>	
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name 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) ▶ \$ 79,590,740		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 type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)			

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) (see instructions).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	2,657			
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities . . .	2,048,486	2,048,486		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	3,377,492			
	b Gross sales price for all assets on line 6a 13,705,033				
	7 Capital gain net income (from Part IV, line 2) . . .		3,377,492		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	b Less: Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	5,428,635	5,425,978		
	13 Compensation of officers, directors, trustees, etc.	228,206	91,282		135,478
	14 Other employee salaries and wages	562,566	124,504		435,497
	15 Pension plans, employee benefits	172,420	42,255		121,477
	16a Legal fees (attach schedule)	3,732	3,732		0
	b Accounting fees (attach schedule)	22,000	4,400		2,800
	c Other professional fees (attach schedule)	147,007	68,361		99,358
	17 Interest				
	18 Taxes (attach schedule) (see instructions) . . .	129,882	15,442		46,238
	19 Depreciation (attach schedule) and depletion . . .	27,580	27,580		
	20 Occupancy	88,047	17,609		69,939
	21 Travel, conferences, and meetings	43,811	8,762		44,181
	22 Printing and publications	15,223	3,045		7,469
	23 Other expenses (attach schedule)	612,986	50,203		461,292
	24 Total operating and administrative expenses. Add lines 13 through 23	2,053,460	457,175		1,423,729
	25 Contributions, gifts, grants paid	2,732,467			2,858,625
	26 Total expenses and disbursements. Add lines 24 and 25	4,785,927	457,175		4,282,354
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	642,708			
	b Net investment income (if negative, enter -0-)		4,968,803		
	c Adjusted net income (if negative, enter -0-) . . .				

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	102,082	140,281	140,281
	2 Savings and temporary cash investments	70,176	42,562	42,562
	3 Accounts receivable ▶ <u>40,000</u>			
	Less: allowance for doubtful accounts ▶ _____		40,000	40,000
	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 ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges	25,612	92,723	92,723
	10a Investments—U.S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)	77,633,965	77,589,007	77,589,007
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment: basis ▶ _____			
Less: accumulated depreciation (attach schedule) ▶ _____				
12 Investments—mortgage loans				
13 Investments—other (attach schedule)	2,274,614	1,537,929	1,537,929	
14 Land, buildings, and equipment: basis ▶ <u>369,775</u>				
Less: accumulated depreciation (attach schedule) ▶ <u>307,135</u>	70,495	62,640	62,640	
15 Other assets (describe ▶ _____)	0	85,598	85,598	
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	80,176,944	79,590,740	79,590,740	
Liabilities	17 Accounts payable and accrued expenses	356,938	362,101	
	18 Grants payable	201,158	75,000	
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)	20,078,755	23,480,293	
	23 Total liabilities (add lines 17 through 22)	20,636,851	23,917,394	
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	59,540,093	55,673,346	
	25 Temporarily restricted			
	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 (see instructions)	59,540,093	55,673,346		
31 Total liabilities and net assets/fund balances (see instructions) .	80,176,944	79,590,740		

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	59,540,093
2 Enter amount from Part I, line 27a	2	642,708
3 Other increases not included in line 2 (itemize) ▶ _____	3	68,293
4 Add lines 1, 2, and 3	4	60,251,094
5 Decreases not included in line 2 (itemize) ▶ _____	5	4,577,748
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	55,673,346

Part IV Capital Gains and Losses for Tax on Investment Income

(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) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a TOO VOLUMINOUS TO LIST - DETAILS AVAILABLE AT TAXPAYER'S OFFICE	P		
b			
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 13,705,033		10,327,541	3,377,492
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			3,377,492
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	2	3,377,492
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) (see instructions). 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 does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see 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	4,129,739	80,212,290	0.051485
2016	4,326,460	78,157,377	0.055356
2015	4,599,469	77,310,316	0.059494
2014	4,063,803	82,159,403	0.049462
2013	3,727,529	81,008,575	0.046014

2 Total of line 1, column (d)	2	0.261811
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	0.052362
4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	4	77,189,949
5 Multiply line 4 by line 3	5	4,041,820
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	49,688
7 Add lines 5 and 6	7	4,091,508
8 Enter qualifying distributions from Part XII, line 4	8	4,282,354

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.

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	49,688
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	49,688
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	49,688
6	Credits/Payments:		
a	2018 estimated tax payments and 2017 overpayment credited to 2018	6a	65,195
b	Exempt foreign organizations—tax withheld at source	6b	
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	65,195
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	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶	10	15,507
11	Enter the amount of line 10 to be: Credited to 2019 estimated tax ▶ 15,507 Refunded ▶	11	0

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?		No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). <i>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.</i>		No
c Did the foundation file Form 1120-POL for this year?		No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ 0 (2) On foundation managers. ▶ \$ 0		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ 0		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>		No
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? <i>If "Yes," attach a conformed copy of the changes</i>		No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	Yes	
b If "Yes," has it filed a tax return on Form 990-T for this year?	Yes	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>		No
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?	Yes	
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>	Yes	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ 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? <i>If "No," attach explanation .</i>	Yes	
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 taxable year beginning in 2018? See the instructions for Part XIV. <i>If "Yes," complete Part XIV</i>		No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>		No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions.	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>WWW.POTTSTOWNFOUNDATION.ORG</u>	13	Yes	
14	The books are in care of ► <u>DAVID KRAYBILL EXECUTIVE DIRECTOR</u> Telephone no. ► <u>(610) 323-2006</u>			

Located at ► 152 E HIGH STREET SUITE 500 POTTSTOWN PAZIP+4 ► 19464

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here ► <input type="checkbox"/>			
	and enter the amount of tax-exempt interest received or accrued during the year ► 15			
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?	16	Yes	No
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ►			

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 checked="" type="checkbox"/> Yes <input 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 <input type="checkbox"/>	1b	No
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? <input type="checkbox"/>	1c	No
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 ► 20____, 20____, 20____, 20____		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions.) <input type="checkbox"/>	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. ► 20____, 20____, 20____, 20____		
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.) <input type="checkbox"/>	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	No
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	No

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:		Yes	No
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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		5b	
	Organizations relying on a current notice regarding disaster assistance check here.	<input type="checkbox"/>		
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?	<input type="checkbox"/> Yes <input type="checkbox"/> 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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6b	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.			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7b	
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 during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions				
(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 Additional Data Table				
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). 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
HOWARD BROWN	PROGRAM OFFICER	113,179	34,654	0
152 E HIGH ST STE 500 POTTSTOWN, PA 19464	40.00			
CRAIG COLISTRA	PROGRAM OFFICER	81,838	28,813	0
152 E HIGH ST STE 500 POTTSTOWN, PA 19464	40.00			
ROSEMARIE WALTERS	OFFICE MANAGER	77,472	30,580	0
152 E HIGH ST STE 500 POTTSTOWN, PA 19464	40.00			
ASHIA COOPER	PROGRAM OFFICER	79,739	6,252	0
152 E HIGH ST STE 500 POTTSTOWN, PA 19464	40.00			
LAURA DEFLAVIA	CONTROLLER	64,227	13,647	0
152 E HIGH ST STE 500 POTTSTOWN, PA 19464	40.00			
Total number of other employees paid over \$50,000.				0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
PUBLIC HEALTH MANAGEMENT CORP 1500 MARKET ST 1500 PHILADELPHIA, PA 19102	HEALTHCARE CONSULTING	171,752
THE ANDERSON GROUP 879 FRITZTOWN ROAD SINKING SPRING, PA 19608	COMMUNICATIONS CONSULTING	125,503
VERALON 1628 JOHN F KENNEDY BLVD 500 PHILADELPHIA, PA 19103	HEALTHCARE CONSULTING	73,278
URBAN LAND INSTITUTE 1818 MARKET STREET SUITE 3300 PHILADELPHIA, PA 19103	CONSULTING	65,000
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	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ►	0

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	78,156,767
b	Average of monthly cash balances.	1b	173,312
c	Fair market value of all other assets (see instructions).	1c	35,351
d	Total (add lines 1a, b, and c).	1d	78,365,430
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	78,365,430
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	1,175,481
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	77,189,949
6	Minimum investment return. Enter 5% of line 5.	6	3,859,497

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	3,859,497
2a	Tax on investment income for 2018 from Part VI, line 5.	2a	49,688
b	Income tax for 2018. (This does not include the tax from Part VI.).	2b	
c	Add lines 2a and 2b.	2c	49,688
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	3,809,809
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	3,809,809
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	3,809,809

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	4,282,354
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	4,282,354
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	5	49,688
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	4,232,666

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.

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				3,809,809
2	Undistributed income, if any, as of the end of 2018:				
a	Enter amount for 2017 only.			0	
b	Total for prior years: 20____, 20____, 20____		0		
3	Excess distributions carryover, if any, to 2018:				
a	From 2013.				
b	From 2014.	36,667			
c	From 2015.	797,761			
d	From 2016.	501,389			
e	From 2017.	201,012			
f	Total of lines 3a through e.	1,536,829			
4	Qualifying distributions for 2018 from Part XII, line 4: ► \$ 4,282,354				
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.				3,809,809
e	Remaining amount distributed out of corpus	472,545			
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	2,009,374			
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 instructions.			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 (see instructions).	0			
9	Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a.	2,009,374			
10	Analysis of line 9:				
a	Excess from 2014.	36,667			
b	Excess from 2015.	797,761			
c	Excess from 2016.	501,389			
d	Excess from 2017.	201,012			
e	Excess from 2018.	472,545			

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling. ▶

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test—enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.					
c "Support" alternative test—enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:

HOWARD BROWN CRAIG COLISTRA PROGRAM
152 EAST HIGH STREET SUITE 500
POTTSTOWN, PA 19464
(610) 323-2006

b The form in which applications should be submitted and information and materials they should include:

GRANT APPLICATIONS ARE TO BE COMPLETED AND POTENTIAL GRANTEEES NEED TO PROVIDE AN ORGANIZATION BUDGET, A PROGRAM BUDGET, AN IRS DETERMINATION LETTER, MOST RECENT AUDIT REPORT AND/OR FORM 990.

c Any submission deadlines:

SUBMISSION DEADLINES VARY BASED ON EACH FALL AND SPRING GRANT ROUND.

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

A POTENTIAL GRANTEE ORGANIZATION MUST BE A NON-PROFIT ORGANIZATION LOCATED WITHIN 10 MILES OF THE BOROUGH OF POTTSTOWN. THE GRANT MUST FALL WITHIN ONE OF THE ORGANIZATION'S THREE CORE PRIORITIES OF: (1) FUNDING PROGRAMS AND SOLUTIONS FOR LONG-TERM IMPROVEMENT IN HEALTHY BEHAVIORS; (2) FUNDING PROGRAMS FOR PHYSICAL HEALTH AND EMOTIONAL WELL-BEING; (3) FUNDING LEARNING OPPORTUNITIES AND STRATEGIC PLANNING TO STRENGTHEN NON-PROFITS.

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
See Additional Data Table				
Total			▶ 3a	
b <i>Approved for future payment</i>				
Total			▶ 3b	

Enter gross amounts unless otherwise indicated.

Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See instructions.)

Form **990-PF** (2018)

Part XVII

- | | | | |
|--|--|-----|----|
| | | Yes | No |
|--|--|-----|----|

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- | | | |
|-------|--|----|
| 1a(1) | | No |
| 1a(2) | | No |

--	--	--

- | | | |
|--------------|--|-----------|
| 1b(1) | | No |
| 1b(2) | | No |
| 1b(3) | | No |
| 1b(4) | | No |
| 1b(5) | | No |
| 1b(6) | | No |

1c		No
----	--	----

value
ue

[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

b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship

<p>Sign Here</p> <p>*****</p> <p>_____</p> <p>Signature of officer or trustee</p>	<p>2020-07-14</p> <p>_____</p> <p>Date</p>	<p>*****</p> <p>_____</p> <p>Title</p>
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May the IRS discuss this return with the preparer shown below (see instr.)? ☒ **Yes** ☐ **No**

Paid Preparer Use Only	STACY COLLEN		2020-07-14		
	Firm's name ► TAIT WELLER & BAKER LLP				Firm's EIN ► 23-1144520
	Firm's address ► 50 SOUTH 16TH STREET SUITE 2900 PHILADELPHIA, PA 19102				Phone no. (215) 979-8800

Form 990FP Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
DAVID KRAYBILL	PRESIDENT 40.00	228,206	65,397	0
152 EAST HIGH STREET SUITE 500 POTTSTOWN, PA 19464				
KEITH HARRISON DO FAFP	MEMBER 5.00	0	0	0
152 EAST HIGH STREET SUITE 500 POTTSTOWN, PA 19464				
MYRA GEHRET FORREST ED D	CHAIR 5.00	0	0	0
152 EAST HIGH STREET SUITE 500 POTTSTOWN, PA 19464				
TODD ALDERFER	MEMBER-AT-LARGE 5.00	0	0	0
152 EAST HIGH STREET SUITE 500 POTTSTOWN, PA 19464				
PHILIP COOK	MEMBER 5.00	0	0	0
152 EAST HIGH STREET SUITE 500 POTTSTOWN, PA 19464				
LINDA FLEDERBACH	MEMBER 5.00	0	0	0
152 EAST HIGH STREET SUITE 500 POTTSTOWN, PA 19464				
PETER GLENNON	MEMBER 5.00	0	0	0
152 EAST HIGH STREET SUITE 500 POTTSTOWN, PA 19464				
MATTHEW CAPPELLETTI	TREASURER 5.00	0	0	0
152 EAST HIGH STREET SUITE 500 POTTSTOWN, PA 19464				
B DOUGLAS TRAINER	VICE CHAIR 5.00	0	0	0
152 EAST HIGH STREET SUITE 500 POTTSTOWN, PA 19464				
DEBORAH LEE	SECRETARY 5.00	0	0	0
152 EAST HIGH STREET SUITE 500 POTTSTOWN, PA 19464				
ADAM CONISH	MEMBER 5.00	0	0	0
152 EAST HIGH STREET SUITE 500 POTTSTOWN, PA 19464				
JOHN FOSTER	MEMBER 5.00	0	0	0
152 EAST HIGH STREET SUITE 500 POTTSTOWN, PA 19464				
SONIA FRECON	MEMBER 5.00	0	0	0
152 EAST HIGH STREET SUITE 500 POTTSTOWN, PA 19464				
LORI MUSSON	MEMBER 5.00	0	0	0
152 EAST HIGH STREET SUITE 500 POTTSTOWN, PA 19464				
JEFFREY SPARAGANA	MEMBER 5.00	0	0	0
152 EAST HIGH STREET SUITE 500 POTTSTOWN, PA 19464				

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
ART GREEN 152 EAST HIGH STREET SUITE 500 POTTSTOWN, PA 19464	MEMBER 5.00	0	0	0
FRAN HEFFNER 152 EAST HIGH STREET SUITE 500 POTTSTOWN, PA 19464				
MATT HOWALD 152 EAST HIGH STREET SUITE 500 POTTSTOWN, PA 19464	MEMBER 5.00	0	0	0
CARL LANDIS 152 EAST HIGH STREET SUITE 500 POTTSTOWN, PA 19464				
NANCY MILLER 152 EAST HIGH STREET SUITE 500 POTTSTOWN, PA 19464	MEMBER 5.00	0	0	0
JUSTIN VALENTINE 152 EAST HIGH STREET SUITE 500 POTTSTOWN, PA 19464				

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ACLAMO512 W MARSHALL STREET NORRISTOWN, PA 19401		PUBLIC CHARITY	COMMUNITY HEALTH CONNECTIONS	62,725
BOROUGH OF POTTSTOWN 100 E HIGH STREET POTTSTOWN, PA 19464		GOVERNMENT ENTITY	ON YOUR PARK, GET SET, GO!, INFOCUS FILM FESTIVAL, MEMORIAL PARK AND WALK BIKE POTTSTOWN	30,500
BOYERTOWN AREA SCHOOL DISTRICT 911 MONTGOMERY AVENUE BOYERTOWN, PA 19512		GOVERNMENT ENTITY	BRAIN BODY CONNECTION	100,000
Total ▶ 3a				2,858,625

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BROOKSIDE MONTESSORI 1075 ROUTE 100 BECHTELSVILLE, PA 19505		SCHOOL	BE WELL	7,500
CAMPBILL VILLAGE KIMBERTON HILLS PO BOX 1045 KIMBERTON, PA 19442		PUBLIC CHARITY	AGING IN COMMUNITY PROGRAM	7,500
CARSON VALLEY CHILDREN'S AID 1314 DEKALB STREET NORRISTOWN, PA 19401		PUBLIC CHARITY	WOMEN'S VOICES, HEALTHY CHOICES	22,000
Total ▶ 3a				2,858,625

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CENTRO CULTURAL LATINO UNIDOS INC BOX 613 19 S KEIM STREET POTTSTOWN, PA 19464		PUBLIC CHARITY	DISTRESS TO DE-STRESS & BEAUTY	25,700
CHILD ADVOCACY CENTER OF MONTGOMERY COUNTY PO BOX 706 NORRISTOWN, PA 19404		PUBLIC CHARITY	FOSTERING RESILIENCY THROUGH FAMILY ADVOCACY	25,000
CRADLE OF LIBERTY COUNCIL BOY SCOUTS OF AMERICA 1485 VALLEY FORGE ROAD WAYNE, PA 19087		GOVERNMENT ENTITY	SCOUTING: WELLNESS, CITIZENSHIP, CHARACTER AND LEADERSHIP DEVELOPMENT FOR YOUTH IN POTTSTOWN	-2,525
Total ▶ 3a				2,858,625

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
DANIEL BOONE AREA SCHOOL DISTRICT 321 N FURNACE ST SUITE 200 BIRDSBORO, PA 19508		GOVERNMENT ENTITY	HEALTHY FOR A LIFETIME PROGRAM	95,000
DEVELOPMENTAL ENTERPRISES CORP 333 E AIRY STREET NORRISTOWN, PA 19401		PUBLIC CHARITY	HEALTHY EATING, HEALTHY LIVING	17,800
DOUGLASS TOWNSHIP 1320 EAST PHILADELPHIA AVENUE GILBERTSVILLE, PA 19525		GOVERNMENT ENTITY	ON YOUR PARK, GET SET, GO!	6,000
Total ► 3a				2,858,625

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
EXPRESSIVE THERAPY CONCEPTS INC 125 PROSPECT STREET PHOENIXVILLE, PA 19460		PUBLIC CHARITY	SMASHVILLE BADMINTON: KIDS AND ADULT FITNESS PROGRAMMING	20,000
FAMILY SERVICES OF MONTGOMERY COUNTY 3125 RIDGE PIKE EAGLEVILLE, PA 19403		PUBLIC CHARITY	BUILDING RESILIENCE AMONG YOUNG PARENTS & PROJECT HEARTH	16,500
FOUNDATION FOR BOYERTOWN EDUCATION 911 MONTGOMERY AVENUE BOYERTOWN, PA 19512		PUBLIC CHARITY	ORGANIZATION SUSTAINABILITY	30,925
Total ▶ 3a				2,858,625

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FOUNDATION FOR POTTSTOWN EDUCATION 230 BEECH STREET POTTSTOWN, PA 19464		PUBLIC CHARITY	EXECUTIVE DIRECTOR POSITION & PART TIME ADMINISTRATIVE ASSISTANT POSITION	40,000
GREATER POTTSTOWN TENNIS ASSOCIATION PO BOX 935 POTTSTOWN, PA 19464		PUBLIC CHARITY	GAME, SET COLLEGE AND TENNIS & EDUCATION CENTER	70,000
HEALTH CARE ACCESS 723 WHEATLAND STREET PHOENIXVILLE, PA 19460		PRIVATE FOUNDATION	HEALTH CARE ACCESS PROGRAMS	9,800
Total ▶ 3a				2,858,625

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HOBART'S RUN NEIGHBORHOOD DISTRICT 860 BEECH STREET POTTSTOWN, PA 19464		PRIVATE SCHOOL	POTTSTOWN AREA SOCIAL INNOVATION LAB	15,000
JULIAN DORSEY FOUNDATION 1014 CHERRINGTON DRIVE HARRISBURG, PA 17110		PUBLIC CHARITY	STRENGTHENING THE INFRASTRUCTURE OF THE JT DORSEY FOUNDATION	15,000
LAUREL HOUSE605 SWEDE STREET NORRISTOWN, PA 19401		PUBLIC CHARITY	POTTSTOWN AREA SERVICES	4,825
Total ▶ 3a				2,858,625

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MATERNAL AND CHILD HEALTH CONSORTIUM OF CHESTER COUNTY 30 W BARNARD ST STE 1 WEST CHESTER, PA 19382		PUBLIC CHARITY	HEALTHY START AND ACCESS TO BENEFITS FOR VULNERABLE FAMILIES IN POTTSTOWN	43,425
MATERNITY CARE COALITION 200 HAMILTON STREET SUITE 205 PHILADELPHIA, PA 19130		PUBLIC CHARITY	POTTSTOWN EARLY HEAD START AND PARENTING INITIATIVE	50,000
MEALS ON WHEELS OF CHESTER COUNTY INC 3 EAST STOW ROAD MARLTON, NJ 08053		PUBLIC CHARITY	ASSISTANCE IN PURCHASING MEALS FOR NEEDY, HOMEBOUND INDIVIDUAL IN SPRING CITY	2,000
Total ▶ 3a				2,858,625

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MONTGOMERY COUNTY COMMUNITY COLLEGE FOUNDATION 101 COLLEGE DRIVE POTTSTOWN, PA 19464		COLLEGE	DENTAL SEALANT DAY	27,000
NORTH COVENTRY TOWNSHIP 845 S HANOVER ST POTTSTOWN, PA 19465		GOVERNMENT ENTITY	ON YOUR PARK, GET SET, GO! AND RIVERSIDE PARK BOAT DOCK REPLACEMENT	21,000
OWEN J ROBERTS SCHOOL DISTRICT 901 RIDGE ROAD POTTSTOWN, PA 19465		GOVERNMENT ENTITY	FIT FOR LIFE PROGRAM	85,000
Total ► 3a				2,858,625

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
POTTSTOWN AREA POLICE ATHLETIC LEAGUE PO BOX 176 POTTSTOWN, PA 19464		PUBLIC CHARITY	POTTSTOWN PAL	40,000
POTTSTOWN ATHLETIC CLUB 21 N HANOVER STREET POTTSTOWN, PA 19464		AAU ORGANIZATION	FITNESSTOWN USA III & PADDLE POOL	94,235
POTTSTOWN CLUSTER OF RELIGIOUS COMMUNITIES 137 WALNUT STREET POTTSTOWN, PA 19464		PUBLIC CHARITY	BUILDING A HEALTHY COMMUNITY	70,000
Total ▶ 3a				2,858,625

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
POTTSTOWN DOWNTOWN IMPROVEMENT DISTRICT AUTHORITY 17 N HANOVER STREET POTTSTOWN, PA 19464		PUBLIC CHARITY	POTTSTOWN FARM	25,000
POTTSTOWN METROPOLITAN REGIONAL PLANNING COMMISSION PO BOX 311 NORRISTOWN, PA 19404		GOVERNMENT ENTITY	POTTSTOWN REGION PARKS MINI GRANT PROGRAM	100,000
POTTSTOWN SCHOOL DISTRICT 230 BEECH STREET POTTSTOWN, PA 19464		GOVERNMENT ENTITY	HEALTHY SCHOOL COMMUNITIES INITIATIVE	230,000
Total ▶ 3a				2,858,625

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PRESERVATION POTTSTOWN 1304 HIGH STREET POTTSTOWN, PA 19464		PUBLIC CHARITY	MOSAIC COMMUNITY GARDEN 2019	94,250
PROJECT PURPOSE 699 NORTH PLEASANTVIEW ROAD POTTSTOWN, PA 19464		PUBLIC CHARITY	PROJECT PURPOSE	60,000
ROYERSFORD OUTREACH 350 MAIN STREET ROYERSFORD, PA 19468		PUBLIC CHARITY	GENERAL OPERATING FUNDS FOR BUILDING AND PROGRAMS	20,000
Total ▶ 3a				2,858,625

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SCHUYLKILL RIVER GREENWAY ASSOCIATION 140 COLLEGE DRIVE POTTSTOWN, PA 19464		GOVERNMENT ENTITY	CIRCUIT RIDER	109,858
SPRING VALLEY HEAT2965 E HIGH ST POTTSTOWN, PA 19464		PUBLIC CHARITY	PA HEAT ALLSTARS	-10,000
SPRING-FORD AREA SCHOOL DISTRICT 857 S LEWIS ROAD ROYERSFORD, PA 19468		GOVERNMENT ENTITY	WELLNESS MATTERS!	55,000
Total ▶ 3a				2,858,625

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SPRING-FORD COUNSELING SERVICES 201 N 4TH AVE ROYERSFORD, PA 19468		SCHOOL	SIGNS OF SUICIDE	6,978
THE PENNSYLVANIA STATE UNIVERSITY 110 TECHNOLOGY CENTER BLDG UNIVERSITY PARK, PA 16802		COLLEGE	CUSTOM MODULE DEVELOPMENT FOR TRAUMA AWARENESS TRAINING	18,576
TRELLIS FOR TOMORROW 707 EAGLEVIEW BLVD SUITE 105 EXTON, PA 19341		PUBLIC CHARITY	YOUTH PROGRAMS FOR HEALTH AND WELL-BEING	60,000
Total ▶ 3a				2,858,625

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
TOWNSHIP OF UPPER POTTSGROVE 1409 FARMINGTON AVENUE POTTSTOWN, PA 19464		GOVERNMENT ENTITY	ON YOUR PARK, GET SET, GO!	6,000
TRICOUNTY ACTIVE ADULT CENTER 288 MOSER ROAD POTTSTOWN, PA 19464		PUBLIC CHARITY	PRIME TIME HEALTH - MAKING HEALTHIER LIVES POSSIBLE FOR OLDER ADULTS	60,000
TRICOUNTY AREA CHAMBER OF COMMERCE FOUNDATION INC 152 E HIGH STREET SUITE 360 POTTSTOWN, PA 19464		CHAMBER OF COMMERCE	WORKSITE WELLNESS INITIATIVE	17,094
Total ► 3a				2,858,625

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
TRICOUNTY COMMUNITY NETWORK 260 HIGH STREET POTTSTOWN, PA 19464		PUBLIC CHARITY	COMMUNITY CAMP, POTTSTOWN CHILDREN'S DISCOVERY CENTER AND COMMUNITY COLLABORATIVE AND CAPACITY BUILDING	210,060
UNITED WAY OF BOYERTOWN PO BOX 213 BOYERTOWN, PA 19512		PUBLIC CHARITY	MATCHING GRANT FOR ANNUAL CAMPAIGN	15,000
UNITED WAY OF GREATER PHILADELPHIA 1709 BENJAMIN FRANKLIN PARKWAY PHILADELPHIA, PA 19103		PUBLIC CHARITY	MATCHING GRANT FOR ANNUAL CAMPAIGN	33,721
Total ► 3a				2,858,625

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
VALLEY FORGE TOURISM & CONVENTION BOARD 1000 FIRST AVE SUITE 101 KING OF PRUSSIA, PA 19406		PUBLIC CHARITY	2019 VALLEY FORGE INVITATIONAL	50,500
VISITING NURSE ASSOCIATION 1963 E HIGH STREET POTTSTOWN, PA 19464		PUBLIC CHARITY	PERSONAL NAVIGATOR PROGRAM WITH EXPANDED LEGAL SUPPORT	25,000
WELLNESS COUNCIL OF BOYERTOWN PO BOX 87 GILBERTSVILLE, PA 19525		PUBLIC CHARITY	CONTINUING TO CREATE A CULTURE OF WELLNESS & PROFESSIONAL DEVELOPMENT SOFTWARE FOR NON-PROFIT FUNDRAISING	20,000
Total ► 3a				2,858,625

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
WEST-MONT CHRISTIAN ACADEMY 873 SOUTH HANOVER STREET POTTSTOWN, PA 19465		SCHOOL	PHYSICAL AND MENTAL RESILIENCY PROGRAM	40,000
YWCA TRI-COUNTY AREA 315 KING STREET POTTSTOWN, PA 19464		PUBLIC CHARITY	PHASE 2 STRATEGIC PLAN IMPLEMENTATION & YW HEALTHY PATHWAYS PROJECT	110,708
BOYERTOWN AREA MULTI-SERVICE INC 200 WEST SPRING STREET BOYERTOWN, PA 19512		PUBLIC CHARITY	FOOD ACCESS PROGRAMMING FOR WELLNESS	40,000
Total ► 3a				2,858,625

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
COLEBROOKDALE RAILROAD PRESERVATION TRUST 100 S CHESTNUT STREET BOYERTOWN, PA 19512		PUBLIC CHARITY	COMMUNITY RECREATION CENTER IN MEMORIAL PARK	120,000
COMMUNITY HEALTH AND DENTAL CARE 351 W SCHUYLKILL RD SUITE G-15A POTTSTOWN, PA 19465		PUBLIC CHARITY	SEALANT PROJECT	5,000
COVENTRY CHRISTIAN SCHOOL 699 NORTH PLEASANTVIEW ROAD POTTSTOWN, PA 19464		PRIVATE SCHOOL	CCS WELLNESS IMPROVEMENT PROJECT	15,000
Total ▶ 3a				2,858,625

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
EAST COVENTRY TOWNSHIP PARKS AND RECREATION 855 ELLIS WOODS ROAD POTTSTOWN, PA 19465		GOVERNMENT ENTITY	FINDING YOUR WAY TO OUR PARKS	20,000
FREDERICK MENNONITE COMMUNITY PO BOX 498 FREDERICK, PA 19435		PUBLIC CHARITY	COLLABORATIVE MONTESSORI INSPIRED DEMENTIA TRAINING	6,000
GRACE EARLY LEARNING CENTER 660 N CHARLOTTE ST POTTSTOWN, PA 19464		PUBLIC CHARITY	PLAYGROUND RUBBERIZED SURFACING	10,000
Total ▶ 3a				2,858,625

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
GREEN VALLEYS ASSOCIATION 1368 PRIZER ROAD POTTSTOWN, PA 19465		PUBLIC CHARITY	OUTDOOR EDUCATION PROGRAMS AT POTTSTOWN SCHOOLS	1,500
HABITAT FOR HUMANITY 533 FOUNDRY ROAD NORRISTOWN, PA 19403		PUBLIC CHARITY	POTTSTOWN RESIDENT LEADERSHIP TRAINING AND NEIGHBORHOOD REVITALIZATION	10,000
MICHAELS COMMUNITY SERVICES CORPORATION 3 EAST STOW ROAD MARLTON, NJ 08053		PUBLIC CHARITY	FOOD SECURITY FOR RESIDENTS OF ROLLING HILLS APARTMENTS	10,000
Total ▶ 3a				2,858,625

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MOTHER GOOSE - READ TO ME 1439 S 2ND STREET PHILADELPHIA, PA 19147		PUBLIC CHARITY	EXPANDED FREE BOOKS	1,500
OLIVET BOYS AND GIRLS CLUB 1161 PERSHING BLVD READING, PA 19611		PUBLIC CHARITY	TRIPLE PLAY/WEEKEND HOURS	110,000
POPE JOHN PAUL II HIGH SCHOOL 181 RITTENHOUSE RD ROYERSFORD, PA 19468		PRIVATE SCHOOL	PJP II WELL-BEING INITIATIVE	7,500
Total ▶ 3a				2,858,625

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
POTTSTOWN PUBLIC LIBRARY 550 E HIGH STREET POTTSTOWN, PA 19464		PUBLIC CHARITY	CREATING HEALTHY AND INFORMED PATRONS THROUGH COLLECTION DEVELOPMENT OF ADULT, TEEN AND JUVENILE NON-FICTION RESOURCES	8,500
SAVE ALLIANCE FOUNDATION 35 KING ROAD GREEN LANE, PA 18054		PUBLIC CHARITY	YOUTH GROW	32,500
SHARE FOOD PROGRAM INC 2901 W HUNTING PARK AVENUE PHILADELPHIA, PA 19129		PUBLIC CHARITY	MONTCO ANTI-HUNGER NETWORK REQUEST FOR GENERAL OPERATING FUNDS	5,000
Total ▶ 3a				2,858,625

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ST CATHERINE OF SIENA SCHOOL 2330 PERKIOMEN AVENUE READING, PA 19606		CATHOLIC SCHOOL	OPERATION RECESS REBOOT - AN INCLUSIVE PLAYGROUND PROJECT	10,000
WORK OPENS RESOURCES KEY TO SUCCESS 2589 WILLOW BROOK LN POTTSTOWN, PA 19464		PUBLIC CHARITY	ROAD TO GROWTH	70,000
STRIVE INITIATIVE INCPO BOX 1511 POTTSTOWN, PA 19464		PUBLIC CHARITY	IN SUPPORT OF THE ORGANIZATION	5,000
Total ▶ 3a				2,858,625

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
WASHINGTON TOWNSHIP 120 BARTO ROAD BARTO, PA 19504		GOVERNMENT ENTITY	RETURNED GRANT DOLLARS	-4,280
POTTSTOWN DOWNTOWN IMPROVEMENT DISTRICT AUTHORITY 17 N HANOVER STREET POTTSTOWN, PA 19464		PUBLIC CHARITY	RETURNED GRANT DOLLARS	-24,250
WELLNESS COUNCIL OF BOYERTOWN PO BOX 87 GILBERTSVILLE, PA 19525		PUBLIC CHARITY	RETURNED GRANT DOLLARS	-10,000
Total ► 3a				2,858,625

TY 2018 Accounting Fees Schedule

Name: POTTSTOWN AREA HEALTH AND WELLNESS
FOUNDATION

EIN: 23-2344729

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
AUDIT	22,000	4,400		2,800

TY 2018 Investments Corporate Stock Schedule

Name: POTTSTOWN AREA HEALTH AND WELLNESS
FOUNDATION

EIN: 23-2344729

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
MUTUAL FUNDS	77,589,007	77,589,007

TY 2018 Investments - Other Schedule

Name: POTTSTOWN AREA HEALTH AND WELLNESS
FOUNDATION

EIN: 23-2344729

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
OTHER INVESTMENTS	FMV	1,437,929	1,437,929
PROGRAM RELATED INVESTMENT	FMV	100,000	100,000

TY 2018 Legal Fees Schedule

Name: POTTSTOWN AREA HEALTH AND WELLNESS
FOUNDATION

EIN: 23-2344729

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	3,732	3,732		0

TY 2018 Other Assets Schedule

Name: POTTSTOWN AREA HEALTH AND WELLNESS
FOUNDATION

EIN: 23-2344729

Other Assets Schedule

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
OTHER RECEIVABLES	0	85,598	85,598

TY 2018 Other Decreases Schedule

Name: POTTSTOWN AREA HEALTH AND WELLNESS
FOUNDATION

EIN: 23-2344729

Description	Amount
UNREALIZED LOSS ON INVESTMENTS	243,080
PENSION EXPENSE - NONOPERATING EXPENSE	4,334,668

TY 2018 Other Expenses Schedule

Name: POTTSTOWN AREA HEALTH AND WELLNESS
FOUNDATION

EIN: 23-2344729

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK FEES	979	196		697
COMMUNICATION AND EDUCATIONAL PROGRAMS	123,217	24,643		82,047
OFFICE EXPENSE	13,329	2,666		14,515
DUES AND MEMBERSHIPS	11,776	2,355		16,281
INSURANCE	30,430	6,086		24,396
POSTAGE	1,867	373		2,090
WEBSITE LINK AND MAINTENANCE FEES	14,310	2,862		11,151
EQUIPMENT RENTAL AND SOFTWARE MAINTENANCE	50,082	10,016		38,412
MISCELLANEOUS	5,031	1,006		5,235
PROGRAM EXPENSES	228,370	0		242,273

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
NONPROFIT EVENTS SUPPORT	22,833	0		24,195
ACCOUNTING CARRYOVER	9,600	0		0
PENSION PLAN - PMMC	63,052	0		0
SEMINAR EXPENSE	38,110	0		0

TY 2018 Other Increases Schedule

Name: POTTSTOWN AREA HEALTH AND WELLNESS
FOUNDATION

EIN: 23-2344729

Description	Amount
EAST AUXILIARY GIFT SHOP - NONOPERATING INCOME	8,293
CREATIVE HEALTH SERVICES REIMBURSEMENT	60,000

TY 2018 Other Liabilities Schedule

Name: POTTSTOWN AREA HEALTH AND WELLNESS
FOUNDATION

EIN: 23-2344729

Description	Beginning of Year - Book Value	End of Year - Book Value
ACCRUED PENSION EXPENSE	20,078,755	23,480,293

TY 2018 Other Professional Fees Schedule

Name: POTTSTOWN AREA HEALTH AND WELLNESS
FOUNDATION

EIN: 23-2344729

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT MANAGEMENT AND ADVISORY FEES	48,700	48,700		0
CONSULTING	98,307	19,661		99,358

TY 2018 Taxes Schedule

Name: POTTSTOWN AREA HEALTH AND WELLNESS
FOUNDATION

EIN: 23-2344729

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PAYROLL TAXES	61,648	15,442		46,238
EXCISE TAX	68,234	0		0