

Form **990-PF**
 Department of the Treasury
 Internal Revenue Service

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

OMB No. 1545-0052
2019
Open to Public Inspection

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

For calendar year 2019, or tax year beginning 01-01-2019, and ending 12-31-2019

Name of foundation NORTHEASTERN PENNSYLVANIA HEALTH CARE FOUNDATION		A Employer identification number 27-5501471	
Number and street (or P.O. box number if mail is not delivered to street address) 615 JEFFERSON AVENUE NO 102	Room/suite	B Telephone number (see instructions) (570) 347-6203	
City or town, state or province, country, and ZIP or foreign postal code SCRANTON, PA 18510		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) ▶ \$ <u>16,130,074</u>		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)			

Part I Analysis of Revenue and Expenses <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1	Contributions, gifts, grants, etc., received (attach schedule)	5,042			
2	Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B				
3	Interest on savings and temporary cash investments	31,996	31,996		
4	Dividends and interest from securities	332,843	332,843		
5a	Gross rents				
b	Net rental income or (loss)				
6a	Net gain or (loss) from sale of assets not on line 10	178,943			
b	Gross sales price for all assets on line 6a <u>2,214,301</u>				
7	Capital gain net income (from Part IV, line 2)		178,943		
8	Net short-term capital gain				
9	Income modifications				
10a	Gross sales less returns and allowances				
b	Less: Cost of goods sold				
c	Gross profit or (loss) (attach schedule)				
11	Other income (attach schedule)				
12	Total. Add lines 1 through 11	548,824	543,782	0	
13	Compensation of officers, directors, trustees, etc.	0	0	0	0
14	Other employee salaries and wages				
15	Pension plans, employee benefits				
16a	Legal fees (attach schedule)				
b	Accounting fees (attach schedule)				
c	Other professional fees (attach schedule)	138,450	78,070	0	58,268
17	Interest				
18	Taxes (attach schedule) (see instructions)	5,912	5,912	0	0
19	Depreciation (attach schedule) and depletion				
20	Occupancy				
21	Travel, conferences, and meetings				
22	Printing and publications				
23	Other expenses (attach schedule)	9,702	0	0	9,702
24	Total operating and administrative expenses. Add lines 13 through 23	154,064	83,982	0	67,970
25	Contributions, gifts, grants paid	618,640			618,640
26	Total expenses and disbursements. Add lines 24 and 25	772,704	83,982	0	686,610
27	Subtract line 26 from line 12:				
a	Excess of revenue over expenses and disbursements	-223,880			
b	Net investment income (if negative, enter -0-)		459,800		
c	Adjusted net income (if negative, enter -0-)			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			
	2 Savings and temporary cash investments	175,451	111,492	111,492
	3 Accounts receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	4 Pledges receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (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			
	10a Investments—U.S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	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)	14,072,448	16,018,582	16,018,582
	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 instructions. Also, see page 1, item I)	14,247,899	16,130,074	16,130,074	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	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 ▶ _____)			
	23 Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> and complete lines 24, 25, 29 and 30.			
	24 Net assets without donor restrictions	14,247,899	16,130,074	
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ <input type="checkbox"/> and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds			
	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds			
29 Total net assets or fund balances (see instructions)	14,247,899	16,130,074		
30 Total liabilities and net assets/fund balances (see instructions) .	14,247,899	16,130,074		

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 29 (must agree with end-of-year figure reported on prior year's return)	1	14,247,899
2 Enter amount from Part I, line 27a	2	-223,880
3 Other increases not included in line 2 (itemize) ▶ _____	3	2,106,055
4 Add lines 1, 2, and 3	4	16,130,074
5 Decreases not included in line 2 (itemize) ▶ _____	5	0
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	6	16,130,074

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.)
1a See Additional Data Table			
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 See Additional Data Table			
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 See Additional Data Table			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	{	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7		}	2	178,943
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	19,301

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))
2018			
2017			
2016			
2015			
2014			

2 Total of line 1, column (d)	2	
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	
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	
5 Multiply line 4 by line 3	5	
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	
7 Add lines 5 and 6	7	
8 Enter qualifying distributions from Part XII, line 4	8	

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)

Table with 11 rows for excise tax calculation. Includes questions about exempt foundations, tax under section 511, and tax due. Total tax due is 629, with 629 refunded.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Includes questions about political campaigns, political expenditures, and state reporting. Includes Yes/No columns.

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.
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
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A - NONE
14 The books are in care of LAURA DUCCESCHI ADMINISTRATOR Telephone no. (570) 347-6203
Located at 615 JEFFERSON AVE SUITE 102 SCRANTON PA ZIP+4 18510
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 -check here and enter the amount of tax-exempt interest received or accrued during the year. 15
16 At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country

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.
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?
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?
(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)?
(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.)
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions. Organizations relying on a current notice regarding disaster assistance check here.
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 2019?
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 2019, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2019? 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.)
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?
b If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period?(Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2019.)
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?
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 2019?

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
NONE		
Total number of others receiving over \$50,000 for professional services. ▶		0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 THE FOUNDATION IS OPERATED TO PROVIDE GRANTS TO IRC 501 (C) (3) OPERATING EXEMPT ORGANIZATIONS	618,640
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	15,194,256
b	Average of monthly cash balances.	1b	130,956
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	15,325,212
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	15,325,212
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	229,878
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	15,095,334
6	Minimum investment return. Enter 5% of line 5.	6	754,767

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	754,767
2a	Tax on investment income for 2019 from Part VI, line 5.	2a	9,196
b	Income tax for 2019. (This does not include the tax from Part VI.).	2b	
c	Add lines 2a and 2b.	2c	9,196
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	745,571
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	745,571
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	745,571

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	686,610
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	686,610
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	686,610

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 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				745,571
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only.			0	
b Total for prior years: 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2019:				
a From 2014.				
b From 2015.				
c From 2016.				15,732
d From 2017.				83,105
e From 2018.				
f Total of lines 3a through e.	98,837			
4 Qualifying distributions for 2019 from Part XII, line 4: ▶ \$ _____ 686,610				
a Applied to 2018, 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 2019 distributable amount.				686,610
e Remaining amount distributed out of corpus				0
5 Excess distributions carryover applied to 2019. (If an amount appears in column (d), the same amount must be shown in column (a).)	58,961			58,961
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	39,876			
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 2018. Subtract line 4a from line 2a. Taxable amount—see instructions			0	
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				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 2014 not applied on line 5 or line 7 (see instructions).	0			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	39,876			
10 Analysis of line 9:				
a Excess from 2015.				
b Excess from 2016.				
c Excess from 2017.				39,876
d Excess from 2018.				
e Excess from 2019.				

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 2019, 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)
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:
LAURA DUCCESCHI
615 JEFFERSON AVENUE SUITE 102
SCRANTON, PA 18510
(570) 347-6203
LD@SAFDN.ORG

b The form in which applications should be submitted and information and materials they should include:
THE NORTHEASTERN PA HEALTH CARE FOUNDATION INVITES GRANT APPLICATIONS FROM 501(C)(3) ORGANIZATIONS FOR PROJECTS DESIGNED TO SUPPORT HEALTH AND WELLNESS INITIATIVES SERVING THE PEOPLE OF LACKAWANNA, LUZERNE, AND WYOMING COUNTIES IN PENNSYLVANIA. THE FOUNDATION HOLDS ONE ANNUAL GRANT CYCLE. THE NORTHEASTERN PENNSYLVANIA HEALTH CARE FOUNDATION IS DEDICATED TO IMPROVING THE HEALTH AND WELL-BEING OF THE PEOPLE OF THE REGION, PARTICULARLY THOSE MOST VULNERABLE AND UNDERSERVED. GRANT-FUNDED PROJECTS MUST BE CONSISTENT WITH THE MISSION OF THE FOUNDATION: TO SUPPORT THE HEALTH CARE NEEDS INCLUDING, BUT NOT LIMITED TO, HEALTH EDUCATION, COMMUNITY WELLNESS, PAYMENT FOR MEDICAL CARE OF UNINSURED AND UNDERINSURED REGARDLESS OF THE FACILITY OF TREATMENT, AND TO IMPROVE THE COMPLETE PHYSICAL, MENTAL, AND SOCIAL WELL-BEING OF THE RESIDENTS BEING SERVED.

c Any submission deadlines:
THE APPLICATION PROCESS BEGINS WITH A LETTER OF INTENT (LOI) SUBMITTED VIA EMAIL TO CATHYF@SAFDN.ORG

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:
IN GENERAL, THE NORTHEASTERN PENNSYLVANIA HEALTH CARE FOUNDATION DOES NOT SUPPORT: THE DEVELOPMENT AND IMPLEMENTATION OF ACADEMIC CURRICULUM AT COLLEGES OR UNIVERSITIES ACADEMIC OR COMMERCIAL RESEARCH NATIONAL ORGANIZATIONS WITHOUT A LOCAL BRANCH NEEDS ASSESSMENTS ANNUAL CAMPAIGNS GENERAL OPERATING EXPENSES NOT ASSOCIATED WITH A SPECIFIC PROGRAM OR INITIATIVE ORGANIZATIONS ARE INELIGIBLE FOR FUNDING FROM THE NORTHEASTERN PENNSYLVANIA HEALTH CARE FOUNDATION FOR TWO CONSECUTIVE YEARS. THE NORTHEASTERN PENNSYLVANIA HEALTH CARE FOUNDATION IS NOT MEANT AS A SUSTAINING SOURCE OF FUNDING FOR ANY ORGANIZATION. MULTI-YEAR GRANTS AND REPETITIVE FUNDING ARE DECIDED ON A CASE BY CASE BASIS.

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	618,640
b <i>Approved for future payment</i>				
Total			▶ 3b	0

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e.g., real estate, (a) 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.)
WILMINGTON TRUST	P	2019-01-01	2019-12-31
WILMINGTON TRUST	P	2018-01-01	2019-12-31
MORGAN STANLEY	P	2019-01-01	2019-12-31
MORGAN STANLEY	P	2018-01-01	2019-12-31
	P		
CAPITAL GAINS DIVIDENDS	P		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(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)
12,350			12,350
133,983		4,998	128,985
348,700		341,749	6,951
1,708,558		1,688,611	19,947
			0
10,710			10,710

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

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	
			12,350
			128,985
			6,951
			19,947
			0
			10,710

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
JAMES CLEMENTE	CHAIR / DIRECTOR 2.00	0	0	0
575 PIERCE ST STE 400 KINGSTON, PA 18704				
ROBERT KNOWLES JR	VICE-CHAIR / DIRECTOR 2.00	0	0	0
615 JEFFERSON AVE STE 102 SCRANTON, PA 18510				
MATTHEW HAGGERTY	SECRETARY / TREASURER/ DIR 2.00	0	0	0
615 JEFFERSON AVE STE 102 SCRANTON, PA 18510				
CHRISTOPHER J DRESSEL JR MD	DIRECTOR 1.00	0	0	0
615 JEFFERSON AVE STE 102 SCRANTON, PA 18510				
JEREMIAH W EAGEN MD	DIRECTOR 1.00	0	0	0
615 JEFFERSON AVE STE 102 SCRANTON, PA 18510				
MARK T MITCHELL	DIRECTOR 1.00	0	0	0
615 JEFFERSON AVE STE 102 SCRANTON, PA 18510				
HONORABLE TERRENCE R NEALON	DIRECTOR 1.00	0	0	0
615 JEFFERSON AVE STE 102 SCRANTON, PA 18510				
HENRY J SALLUSTI	DIRECTOR 1.00	0	0	0
615 JEFFERSON AVE STE 102 SCRANTON, PA 18510				
NATALIE GELB	DIRECTOR 1.00	0	0	0
615 JEFFERSON AVE STE 102 SCRANTON, PA 18510				
JAMES MILESKI	DIRECTOR 1.00	0	0	0
615 JEFFERSON AVE STE 102 SCRANTON, PA 18510				
KERRY O'GRADY	DIRECTOR 1.00	0	0	0
615 JEFFERSON AVE STE 102 SCRANTON, PA 18510				
MICHELLE M MCGOWAN	DIRECTOR 1.00	0	0	0
615 JEFFERSON AVE STE 102 SCRANTON, PA 18510				

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>				
ADVOCACY ALLIANCE 846 JEFFERSON AVE SCRANTON, PA 18501		PC	SUPPORT FOR PROGRAMS	30,000
ALLONE FOUNDATION 70 NORTH MAIN STREET WILKES BARRE, PA 18711		PC	SUPPORT FOR PROGRAMS	21,000
ARC OF LUZERNE COUNTY 512 NORTHAMPTON STREET EDWARDSVILLE, PA 18704		PC	SUPPORT FOR PROGRAMS	10,000
Total ▶ 3a				618,640

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>				
CASA OF LUZERNE COUNTY 667 N RIVER STREET PLAINS, PA 18705		PC	SUPPORT FOR PROGRAMS	40,000
CHILDREN'S ADVOCACY CENTER 1710 MULBERRY STREET SCRANTON, PA 18510		PC	SUPPORT FOR PROGRAMS	10,000
CHILDREN'S SERVICE CENTER 335 SOUTH FRANKLIN STREET WILKES BARRE, PA 18702		PC	SUPPORT FOR PROGRAMS	50,000
Total ▶ 3a				618,640

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>				
FAMILY SERVICE CENTER OF NORTHEASTERN PENNSYLVANIA 31 WEST MARKET STREET WILKES BARRE, PA 18701		PC	SUPPORT FOR PROGRAMS	10,000
GEISINGER COMMONWEALTH SCHOOL OF MEDICINE 525 PINE STREET SCRANTON, PA 18510		PC	SUPPORT FOR PROGRAMS	320,000
GREATER SCRANTON YMCA 706 N BLAKELY STREET DUNMORE, PA 18512		PC	SUPPORT FOR PROGRAMS	30,000
Total ▶ 3a				618,640

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>				
IGNATION VOLUNTEERS 801 ST PAUL STREET BALTIMORE, MD 21202		PC	SUPPORT FOR PROGRAMS	10,000
KINGS COLLEGE 133 NORTH RIVER STREET WILKES BARRE, PA 18711		PC	SUPPORT FOR PROGRAMS	20,000
LACKAWANNA COUNTY MEDICAL SOCIETY PO BOX 203 OLYPHANT, PA 18447		PC	SUPPORT FOR PROGRAMS	5,000
Total ▶ 3a				618,640

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>				
MOM N PA 521 MOUNT PLEASANT DRIVE SUITE 102 SCRANTON, PA 18503		PC	SUPPORT FOR PROGRAMS	20,000
NORTHEAST REGIONAL CANCER INSTITUTE 334 JEFFERSON AVE SCRANTON, PA 18510		PC	SUPPORT FOR PROGRAMS	15,000
RURAL HEALTH CORPORATION OF NORTHEAST PA 1048 ROUTE 315 WILKES BARRE, PA 18702		PC	SUPPORT FOR PROGRAMS	2,640
Total ▶ 3a				618,640

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>				
VOLUNTEERS OF AMERICA PENNSYLVANIA 2112 WALNUT STREET HARRISBURG, PA 17103		PC	SUPPORT FOR PROGRAMS	25,000
Total ▶ 3a				618,640

TY 2019 Investments - Other Schedule

Name: NORTHEASTERN PENNSYLVANIA HEALTH CARE
FOUNDATION

EIN: 27-5501471

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
WILMINGTON TRUST	FMV	8,103,205	8,103,205
MORGAN STANLEY	FMV	7,915,377	7,915,377

TY 2019 Other Expenses Schedule

Name: NORTHEASTERN PENNSYLVANIA HEALTH CARE
FOUNDATION

EIN: 27-5501471

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INSURANCE	1,398	0	0	1,398
BANK CHARGES	24	0	0	24
MISCELLANEOUS EXPENSE	8,280	0	0	8,280

TY 2019 Other Increases Schedule

Name: NORTHEASTERN PENNSYLVANIA HEALTH CARE
FOUNDATION

EIN: 27-5501471

Description	Amount
UNREALIZED GAIN ON INVESTMENTS	2,106,055

TY 2019 Other Professional Fees Schedule

Name: NORTHEASTERN PENNSYLVANIA HEALTH CARE
FOUNDATION

EIN: 27-5501471

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PROFESSIONAL FEES	60,380	0	0	58,268
INVESTMENT ADVISORY FEES	78,070	78,070	0	0

TY 2019 Taxes Schedule

Name: NORTHEASTERN PENNSYLVANIA HEALTH CARE
FOUNDATION

EIN: 27-5501471

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAX	5,912	5,912	0	0