

Return of Private Foundation

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

2020

Open to Public Inspection

Form **990-PF**

Department of the Treasury
Internal Revenue Service

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

For calendar year 2020 or tax year beginning **JUL 1, 2020**, and ending **JUN 30, 2021**

Name of foundation PHOENIXVILLE COMMUNITY HEALTH FOUNDATION		A Employer identification number 23-2912035
Number and street (or P.O. box number if mail is not delivered to street address) 821 GAY STREET	Room/suite	B Telephone number 6109179890
City or town, state or province, country, and ZIP or foreign postal code PHOENIXVILLE, PA 19460		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) ▶ \$ 67,376,817.	J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

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).)</small>		(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	72,730.			
	2 Check <input 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	1,030,171.	1,030,171.	1,030,171.	STATEMENT 1
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	11,818,641.			
	b Gross sales price for all assets on line 6a 29,464,980.				
	7 Capital gain net income (from Part IV, line 2)		11,818,641.		
	8 Net short-term capital gain			N/A	
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss)					
11 Other income					
12 Total. Add lines 1 through 11	12,921,542.	12,848,812.	1,030,171.		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	130,000.	26,000.	0.	104,000.
	14 Other employee salaries and wages	134,581.	26,916.	0.	107,665.
	15 Pension plans, employee benefits	59,703.	11,941.	0.	47,762.
	16a Legal fees STMT 2	7,040.	1,408.	0.	5,632.
	b Accounting fees STMT 3	13,500.	2,700.	0.	10,800.
	c Other professional fees STMT 4	14,341.	2,868.	0.	11,473.
	17 Interest				
	18 Taxes STMT 5	97,236.	19,448.	0.	77,788.
	19 Depreciation and depletion	26,534.	0.	26,534.	
	20 Occupancy	37,179.	7,436.	0.	29,743.
	21 Travel, conferences, and meetings	7,797.	1,559.	0.	6,238.
	22 Printing and publications	120.	24.	0.	96.
	23 Other expenses STMT 6	119,994.	24,000.	0.	95,994.
	24 Total operating and administrative expenses. Add lines 13 through 23	648,025.	124,300.	26,534.	497,191.
	25 Contributions, gifts, grants paid	2,355,171.			2,355,171.
26 Total expenses and disbursements. Add lines 24 and 25	3,003,196.	124,300.	26,534.	2,852,362.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	9,918,346.				
b Net investment income (if negative, enter -0-)		12,724,512.			
c Adjusted net income (if negative, enter -0-)			1,003,637.		

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only.		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing	445,180.	480,700.	480,700.
	2 Savings and temporary cash investments			
	3 Accounts receivable			
	Less: allowance for doubtful accounts			
	4 Pledges receivable			
	Less: allowance for doubtful accounts			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable			
	Less: allowance for doubtful accounts			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges	11,243.	6,504.	6,504.
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock	STMT 7 40,167,701.	48,407,743.	48,407,743.
	c Investments - corporate bonds	STMT 8 13,178,473.	17,918,047.	17,918,047.
	11 Investments - land, buildings, and equipment: basis			
Less: accumulated depreciation				
12 Investments - mortgage loans				
13 Investments - other				
14 Land, buildings, and equipment: basis	966,127.			
Less: accumulated depreciation	STMT 9 402,304.	590,358.	563,823.	
15 Other assets (describe)	STATEMENT 10 203,924.	0.	0.	
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	54,596,879.	67,376,817.	67,376,817.	
Liabilities	17 Accounts payable and accrued expenses	2,714.	21,500.	
	18 Grants payable	55,000.	9,000.	
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe)			
	23 Total liabilities (add lines 17 through 22)	57,714.	30,500.	
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	52,471,833.	65,278,985.	
	25 Net assets with donor restrictions	2,067,332.	2,067,332.	
	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	54,539,165.	67,346,317.	
30 Total liabilities and net assets/fund balances	54,596,879.	67,376,817.		

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	54,539,165.
2 Enter amount from Part I, line 27a	2	9,918,346.
3 Other increases not included in line 2 (itemize) UNREALIZED GAINS/LOSSES	3	2,894,935.
4 Add lines 1, 2, and 3	4	67,352,446.
5 Decreases not included in line 2 (itemize) INCOME FROM SUBSIDIARY - UNREALIZED	5	6,129.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	67,346,317.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a VANGUARD BROKERAGE ACCOUNT	P		06/30/20
b VANGUARD BROKERAGE ACCOUNT	P		06/30/20
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 28,393,603.		17,004,700.	11,388,903.
b 1,071,377.		641,639.	429,738.
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) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			11,388,903.
b			429,738.
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	11,818,641.
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	429,738.

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

SECTION 4940(e) REPEALED ON DECEMBER 20, 2019 - DO NOT COMPLETE.

1 Reserved	(a) Reserved	(b) Reserved	(c) Reserved	(d) Reserved
	Reserved			
	Reserved			
	Reserved			
	Reserved			
	Reserved			

2 Reserved	2	
3 Reserved	3	
4 Reserved	4	
5 Reserved	5	
6 Reserved	6	
7 Reserved	7	
8 Reserved	8	

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 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 Reserved		1	176,871.
c All other domestic foundations enter 1.39% 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	176,871.
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	176,871.
6 Credits/Payments:			
a 2020 estimated tax payments and 2019 overpayment credited to 2020	6a	57,600.	
b Exempt foreign organizations - tax withheld at source	6b	0.	
c Tax paid with application for extension of time to file (Form 8868)	6c	135,000.	
d Backup withholding erroneously withheld	6d	0.	
7 Total credits and payments. Add lines 6a through 6d		7	192,600.
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached		8	241.
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	15,488.
11 Enter the amount of line 10 to be: Credited to 2021 estimated tax 15,488. 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?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. \$ 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? If "Yes," attach a detailed description of the activities.		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year? N/A		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. PA		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2020 or the tax year beginning in 2020? See the instructions for Part XIV. If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

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 STMT 11
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?
Website address WWW.PCHF1.ORG
14 The books are in care of TAMELA LUCE Telephone no. 6109179890
Located at 821 GAY STREET, PHOENIXVILLE, PA ZIP+4 19460
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year 15 N/A
16 At any time during calendar year 2020, 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 2020?
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 2020, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2020?
If "Yes," list the years
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.)
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?
b If "Yes," did it have excess business holdings in 2020 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2020.)
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 2020?

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	X
	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		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		6b	X
	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		
b	If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	N/A	7b	
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	<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, and foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
TAMELA LUCE 821 GAY STREET PHOENIXVILLE, PA 19460	PRESIDENT AND	CEO	40.00	130,000. 16,268. 0.

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

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
JEANETTE HALL - 821 GAY STREET, PHOENIXVILLE, PW 19460	DIRECTOR OF FINANCE AND OPERATIONS	40.00	70,000. 18,377. 0.	

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. If none, enter "NONE."

Table with 3 columns: (a) Name and address of each person paid more than \$50,000, (b) Type of service, (c) Compensation. Row 1: VANGUARD INVESTMENT, PO BOX 1101, VALLEY FORGE, PA 19482-1101, MANAGEMENT FEE, 53,502.

Total number of others receiving over \$50,000 for professional services 0

Part IX-A Summary of Direct Charitable Activities

Table with 2 columns: Description of activity, Expenses. Row 1: 1 N/A

Part IX-B Summary of Program-Related Investments

Table with 2 columns: Description of investment, Amount. Row 1: 1 N/A

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	59,835,982.
b	Average of monthly cash balances	1b	462,940.
c	Fair market value of all other assets	1c	110,836.
d	Total (add lines 1a, b, and c)	1d	60,409,758.
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	60,409,758.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	906,146.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	59,503,612.
6	Minimum investment return. Enter 5% of line 5	6	2,975,181.

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	2,975,181.
2a	Tax on investment income for 2020 from Part VI, line 5	2a	176,871.
b	Income tax for 2020. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	176,871.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2,798,310.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	2,798,310.
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	2,798,310.

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	2,852,362.
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	2,852,362.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	2,852,362.

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 2019	(c) 2019	(d) 2020
1 Distributable amount for 2020 from Part XI, line 7				2,798,310.
2 Undistributed income, if any, as of the end of 2020:				
a Enter amount for 2019 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2020:				
a From 2015	636,759.			
b From 2016	334,135.			
c From 2017				
d From 2018				
e From 2019				
f Total of lines 3a through e	970,894.			
4 Qualifying distributions for 2020 from Part XII, line 4: ▶ \$	2,852,362.			
a Applied to 2019, 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 2020 distributable amount				2,798,310.
e Remaining amount distributed out of corpus	54,052.			
5 Excess distributions carryover applied to 2020 (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	1,024,946.			
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 2019. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2020. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2021				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 2015 not applied on line 5 or line 7	636,759.			
9 Excess distributions carryover to 2021. Subtract lines 7 and 8 from line 6a	388,187.			
10 Analysis of line 9:				
a Excess from 2016	334,135.			
b Excess from 2017				
c Excess from 2018				
d Excess from 2019				
e Excess from 2020	54,052.			

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

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2020, enter the date of the ruling ▶

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

	Tax year				(e) Total
	(a) 2020	(b) 2019	(c) 2018	(d) 2017	
2 a 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).)

NONE

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.

NONE

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.

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

SEE STATEMENT 12

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

c Any submission deadlines:

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

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 Paid during the year				
ACADEMIC SCHOLARSHIP GRANTS SEE ATTACHED SEE ATTACHED, PA 19460	NONE		ACADEMIC SCHOLARSHIP GRANTS	30,000.
AED PURCHASE MINI GRANT SEE ATTACHED SEE ATTACHED, PA 19460	NONE		SUPPORT FOR AED PURCHASE	15,700.
CAPACITY BUILDING MINI GRANT SEE ATTACHED SEE ATTACHED, PA 19460	NONE		SUPPORT FOR DEVELOPMENT OF STRATEGIC PLAN	2,500.
CHAMPIONS OF THE COMMUNITY GRANTS SEE ATTACHED SEE ATTACHED, PA 19460	NONE		SUPPORT FOR PHOENIXVILLE OUTREACH	3,000.
COVID-19 SEE ATTACHED SEE ATTACHED, PA 19460	NONE		COVID-19 GRANTS	4,732.
Total	SEE CONTINUATION SHEET(S)			2,355,171.
b Approved for future payment				
NONE				
Total				0.

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
GENERAL GRANTS SEE ATTACHED SEE ATTACHED, PA 19460	NONE		SUPPORT FOR GENERAL OPERATING EXPENSES	2,274,873.
HEALTH EDUCATION MINI GRANT SEE ATTACHED SEE ATTACHED, PA 19460	NONE		SUPPORT FOR HEALTH EDUCATION	2,000.
MATCH CONTRIBUTION SEE ATTACHED SEE ATTACHED, PA 19460	NONE		MATCH CONTRIBUTIONS	16,366.
MINI CENSUS SEE ATTACHED SEE ATTACHED, PA 19460	NONE		MINI GRANT LIST CENSUS	6,000.
Total from continuation sheets				2,299,239.

Schedule B

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

Name of the organization

PHOENIXVILLE COMMUNITY HEALTH FOUNDATION

Employer identification number

23-2912035

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)() (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

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

Name of organization PHOENIXVILLE COMMUNITY HEALTH FOUNDATION	Employer identification number 23-2912035
---	---

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	LAND SERVICES USA 920 GERMANTOWN PIKE, STE 201 PLYMOUTH MEETING, PA 19462	\$ 40,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	LC CONSTRUCTION DE 105 FOULK ROAD WILMINGTON, DE 19803	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization PHOENIXVILLE COMMUNITY HEALTH FOUNDATION	Employer identification number 23-2912035
---	---

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	

Name of organization PHOENIXVILLE COMMUNITY HEALTH FOUNDATION	Employer identification number 23-2912035
---	---

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

Underpayment of Estimated Tax by Corporations

▶ Attach to the corporation's tax return. **FORM 990-PF**

2020

▶ Go to www.irs.gov/Form2220 for instructions and the latest information.

Name **PHOENIXVILLE COMMUNITY HEALTH FOUNDATION** Employer identification number **23-2912035**

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

Part I Required Annual Payment			
1	Total tax (see instructions)	1	176,871.
2a	Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1	2a	
2b	Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method	2b	
2c	Credit for federal tax paid on fuels (see instructions)	2c	
2d	Total. Add lines 2a through 2c	2d	
3	Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. The corporation does not owe the penalty	3	176,871.
4	Enter the tax shown on the corporation's 2019 income tax return. See instructions. Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5	4	57,563.
5	Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3	5	57,563.

Part II Reasons for Filing - Check the boxes below that apply. If any boxes are checked, the corporation **must** file Form 2220 even if it does not owe a penalty. See instructions.

- 6 The corporation is using the adjusted seasonal installment method.
- 7 The corporation is using the annualized income installment method.
- 8 The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

Part III Figuring the Underpayment		(a)	(b)	(c)	(d)	
9	Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year. Filers with installments due on or after April 1, 2020, and before July 15, 2020, see instructions	g	11/15/20	12/15/20	03/15/21	06/15/21
10	Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Sch A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column	10	14,391.	14,391.	14,390.	14,391.
11	Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions	11			43,200.	14,400.
Complete lines 12 through 18 of one column before going to the next column.						
12	Enter amount, if any, from line 18 of the preceding column	12				28.
13	Add lines 11 and 12	13			43,200.	14,428.
14	Add amounts on lines 16 and 17 of the preceding column	14		14,391.	28,782.	
15	Subtract line 14 from line 13. If zero or less, enter -0-	15	0.	0.	14,418.	14,428.
16	If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0-	16		14,391.	0.	
17	Underpayment. If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18	17	14,391.	14,391.		
18	Overpayment. If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column	18			28.	

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

Part IV Figuring the Penalty

	(a)	(b)	(c)	(d)
19 Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. (C corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.) See instructions	19			
20 Number of days from due date of installment on line 9 to the date shown on line 19	20			
21 Number of days on line 20 after 4/15/2020 and before 7/1/2020	21			
22 Underpayment on line 17 x $\frac{\text{Number of days on line 21} \times 5\% (0.05)}{366}$	22 \$	\$	\$	\$
23 Number of days on line 20 after 6/30/2020 and before 10/1/2020	23			
24 Underpayment on line 17 x $\frac{\text{Number of days on line 23} \times 3\% (0.03)}{366}$	24 \$	\$	\$	\$
25 Number of days on line 20 after 9/30/2020 and before 1/1/2021	25			
26 Underpayment on line 17 x $\frac{\text{Number of days on line 25} \times 3\% (0.03)}{366}$	26 \$	\$	\$	\$
27 Number of days on line 20 after 12/31/2020 and before 4/1/2021	27	SEE ATTACHED WORKSHEET		
28 Underpayment on line 17 x $\frac{\text{Number of days on line 27} \times 3\% (0.03)}{365}$	28 \$	\$	\$	\$
29 Number of days on line 20 after 3/31/2021 and before 7/1/2021	29			
30 Underpayment on line 17 x $\frac{\text{Number of days on line 29} \times \%}{365}$	30 \$	\$	\$	\$
31 Number of days on line 20 after 6/30/2021 and before 10/1/2021	31			
32 Underpayment on line 17 x $\frac{\text{Number of days on line 31} \times \%}{365}$	32 \$	\$	\$	\$
33 Number of days on line 20 after 9/30/2021 and before 1/1/2022	33			
34 Underpayment on line 17 x $\frac{\text{Number of days on line 33} \times \%}{365}$	34 \$	\$	\$	\$
35 Number of days on line 20 after 12/31/2021 and before 3/16/2022	35			
36 Underpayment on line 17 x $\frac{\text{Number of days on line 35} \times \%}{365}$	36 \$	\$	\$	\$
37 Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37 \$	\$	\$	\$
38 Penalty. Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 34; or the comparable line for other income tax returns	38			\$ 241.

* Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information.

FORM 990-PF	DIVIDENDS AND INTEREST FROM SECURITIES				STATEMENT	1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	
SECURITIES	1,030,171.	0.	1,030,171.	1,030,171.	1,030,171.	
TO PART I, LINE 4	1,030,171.	0.	1,030,171.	1,030,171.	1,030,171.	

FORM 990-PF	LEGAL FEES				STATEMENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
LEGAL FEES	7,040.	1,408.	0.	5,632.		
TO FM 990-PF, PG 1, LN 16A	7,040.	1,408.	0.	5,632.		

FORM 990-PF	ACCOUNTING FEES				STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
ACCOUNTING FEES	13,500.	2,700.	0.	10,800.		
TO FORM 990-PF, PG 1, LN 16B	13,500.	2,700.	0.	10,800.		

FORM 990-PF	OTHER PROFESSIONAL FEES				STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
OTHER PROFESSIONAL FEES	14,341.	2,868.	0.	11,473.		
TO FORM 990-PF, PG 1, LN 16C	14,341.	2,868.	0.	11,473.		

FORM 990-PF	TAXES			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
PAYROLL TAXES	20,214.	4,043.	0.	16,171.	
REAL ESTATE TAXES	10,354.	2,071.	0.	8,283.	
FEDERAL EXCISE TAX	66,668.	13,334.	0.	53,334.	
TO FORM 990-PF, PG 1, LN 18	97,236.	19,448.	0.	77,788.	

FORM 990-PF	OTHER EXPENSES			STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ADOPT A FAMILY	3,180.	636.	0.	2,544.	
BANK FEES	324.	65.	0.	259.	
BOARD MEETING EXPENSES	3,620.	724.	0.	2,896.	
COMMUNITY RELATIONS	8,654.	1,731.	0.	6,923.	
DUES AND SUBSCRIPTIONS	559.	112.	0.	447.	
INSURANCE	8,235.	1,647.	0.	6,588.	
MANAGEMENT FEES	53,502.	10,700.	0.	42,802.	
MEMBERSHIP DUES	12,175.	2,435.	0.	9,740.	
OFFICE SUPPLIES	5,995.	1,199.	0.	4,796.	
PAYROLL SERVICES	2,393.	479.	0.	1,914.	
POSTAGE	401.	80.	0.	321.	
SECURITY	240.	48.	0.	192.	
STAFF DEVELOPMENT	5,349.	1,070.	0.	4,279.	
TELEPHONE & INTERNET	7,210.	1,442.	0.	5,768.	
TRASH, WATER, SEWER	629.	126.	0.	503.	
UTILITIES	6,084.	1,217.	0.	4,867.	
CLERICAL SUPPORT	1,444.	289.	0.	1,155.	
TO FORM 990-PF, PG 1, LN 23	119,994.	24,000.	0.	95,994.	

FORM 990-PF	CORPORATE STOCK	STATEMENT	7
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE	
CORPORATE STOCK	48,407,743.	48,407,743.	
TOTAL TO FORM 990-PF, PART II, LINE 10B	48,407,743.	48,407,743.	

FORM 990-PF	CORPORATE BONDS	STATEMENT	8
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE	
CORPORATE BONDS	17,918,047.	17,918,047.	
TOTAL TO FORM 990-PF, PART II, LINE 10C	17,918,047.	17,918,047.	

FORM 990-PF	DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT	STATEMENT	9
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
BUILDING	725,000.	230,835.	494,165.
LANDSCAPING-SCHNATZ & ROHRER	2,691.	1,432.	1,259.
CURBING-PAUL R. SAVILLE	8,500.	4,536.	3,964.
NEW ROOF-GSM ROOFING	33,300.	15,540.	17,760.
DIAMOND QUALITY BUILDERS SPECTRUM	13,519.	6,308.	7,211.
OFFICE FURNITURE	622.	622.	0.
OFFICE DESK SET	558.	558.	0.
RT WORK-DESIGN OF PCH	1,109.	1,109.	0.
ART WORK	8,500.	8,500.	0.
DESKS	450.	450.	0.
ART WORK	2,869.	2,869.	0.
ART WORK	2,760.	2,760.	0.
ART WORK	370.	370.	0.
ART WORK	574.	574.	0.
OFFICE FURNITURE	2,168.	2,168.	0.
REFRIGERATORS	457.	457.	0.
OFFICE FURNITURE	315.	315.	0.
FILING CABINET	777.	777.	0.
DESK & TABLE ED OFFICE	1,993.	1,993.	0.
CHAIR	504.	504.	0.
FILE CABINET	622.	622.	0.
AED	1,595.	1,595.	0.
CONFERENCE ROOM TABLE, RUG	12,312.	12,312.	0.

WINDOW TREATMENT DEPOSIT	4,500.	4,500.	0.
CHAIR DEPOSIT	3,100.	3,100.	0.
LAMP PURCHASE	1,075.	1,075.	0.
RUG PURCHASE	3,356.	3,356.	0.
RUG PURCHASE	1,194.	1,194.	0.
WINDOW TREATMENTS	7,927.	7,927.	0.
RUG PURCHASE	985.	985.	0.
PRESIDENTS OFFICE, PROGRAM			
OFFICER OFFICE	8,902.	8,902.	0.
TELEPHONE SYSTEM	5,135.	5,135.	0.
OFFICE COPIER	6,145.	6,145.	0.
RUGS, LAMPS	6,863.	6,863.	0.
FILING CABINET	1,558.	1,558.	0.
2 FILE CABINETS	994.	994.	0.
RUGS	1,734.	1,734.	0.
SECURITY CAMERA	1,303.	1,303.	0.
BOOK CASE	789.	789.	0.
LJB WINDOW TREATMENTS	1,100.	1,100.	0.
SIGNAGE	4,025.	4,025.	0.
ELAND GALLERY			
PAINTING-DOWNSTAIRS BATHROOM	300.	300.	0.
SHADE FOR PRES OFFICE	1,088.	1,088.	0.
OFFICE COPIER 2ND FLOOR XPO	1,298.	1,298.	0.
COMPUTER EQUIP	1,525.	1,525.	0.
COMPUTER EQUIP	1,343.	1,343.	0.
COMPUTER EQUIP	3,426.	3,426.	0.
COMPUTER EQUIP	1,791.	1,791.	0.
LATERAL FILES	1,866.	1,866.	0.
LATERAL FILES	1,749.	1,749.	0.
FLAG POLE	1,355.	1,355.	0.
LED OUTDOOR PATHWAY LIGHTS	6,050.	6,050.	0.
OVERHEAD PROJECTOR	2,969.	2,969.	0.
DELL OFFICE COMPUTERS & INSTALLATION	11,761.	11,761.	0.
LED PATH LIGHTS	4,719.	4,719.	0.
RESEOURCE PARTNERS	1,968.	1,968.	0.
RUG-CHES-MONT CARPET ONE	2,296.	2,296.	0.
SHELVING FOR BASEMENT	688.	688.	0.
SHUTTERS (CAROLS OFFICE	3,010.	3,010.	0.
DELL COMPUTER (CAROL)	863.	863.	0.
HP PRINTER	530.	530.	0.
NEW ROOF-GSM ROOFING (FINAL)	14,606.	5,681.	8,925.
HVAC SYSTEM	7,325.	940.	6,385.
DELL OFFICE COMPUTER CAROL	5,024.	2,763.	2,261.
DELL OFFICE COMPUTER LYNN	3,309.	1,820.	1,489.
LED LIGHT PATH	2,325.	1,356.	969.
TOTAL TO FM 990-PF, PART II, LN 14	965,434.	421,046.	544,388.

FORM 990-PF	OTHER ASSETS		STATEMENT 10
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
INVESTMENT IN SUBSIDIARY	203,924.	0.	0.
TO FORM 990-PF, PART II, LINE 15	203,924.	0.	0.

FORM 990-PF

SCHEDULE OF CONTROLLED ENTITIES
PART VII-A, LINE 11

STATEMENT 11

NAME OF CONTROLLED ENTITY

EMPLOYER ID NO

CHES-MONT VALLEY VENTURES, INC.

23-2508198

ADDRESS

EXCESS BUSINESS HOLDING [] YES [X] NO

821 GAY STREET
PHOENIXVILLE, PA 19460

2020 DEPRECIATION AND AMORTIZATION REPORT

FORM 990-PF PAGE 1

990-PF

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
1	BUILDING	01/01/10	SL	39.00	MM	16	725,000.				725,000.	212,245.		18,590.	230,835.
2	LANDSCAPING-SCHNATZ & ROHRER	06/05/08	SL	15.00		16	2,691.				2,691.	1,253.		179.	1,432.
3	CURBING-PAUL R. SAVILLE	10/14/11	SL	15.00		16	8,500.				8,500.	3,969.		567.	4,536.
4	NEW ROOF-GSM ROOFING	12/30/14	SL	15.00		16	33,300.				33,300.	13,320.		2,220.	15,540.
5	DIAMOND QUALITY BUILDERS	12/30/14	SL	15.00		16	13,519.				13,519.	5,407.		901.	6,308.
6	SPECTRUM	10/13/06	SL	5.00		16	622.				622.	622.		0.	622.
7	OFFICE FURNITURE	12/15/98	SL	7.00		16	558.				558.	558.		0.	558.
8	OFFICE DESK SET	10/02/98	SL	7.00		16	1,109.				1,109.	1,109.		0.	1,109.
9	RT WORK-DESIGN OF PCH	06/30/98	SL	5.00		16	8,500.				8,500.	8,500.		0.	8,500.
10	ART WORK	09/30/98	SL	5.00		16	450.				450.	450.		0.	450.
11	DESKS	10/30/98	SL	7.00		16	2,869.				2,869.	2,869.		0.	2,869.
12	ART WORK	10/30/98	SL	5.00		16	2,760.				2,760.	2,760.		0.	2,760.
13	ART WORK	11/12/98	SL	5.00		16	370.				370.	370.		0.	370.
14	ART WORK	12/15/98	SL	5.00		16	574.				574.	574.		0.	574.
15	OFFICE FURNITURE	04/15/99	SL	7.00		16	2,168.				2,168.	2,168.		0.	2,168.
16	REFRIGERATORS	10/15/99	SL	5.00		16	457.				457.	457.		0.	457.
17	OFFICE FURNITURE	05/31/11	SL	7.00		16	315.				315.	315.		0.	315.
18	FILING CABINET	10/18/04	SL	5.00		16	777.				777.	777.		0.	777.

2020 DEPRECIATION AND AMORTIZATION REPORT

FORM 990-PF PAGE 1

990-PF

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
19	DESK & TABLE ED OFFICE	07/25/06	SL	5.00		16	1,993.				1,993.	1,993.		0.	1,993.
20	CHAIR	08/04/06	SL	5.00		16	504.				504.	504.		0.	504.
21	FILE CABINET	08/04/06	SL	5.00		16	622.				622.	622.		0.	622.
22	AED	12/14/06	SL	5.00		16	1,595.				1,595.	1,595.		0.	1,595.
23	CONFERENCE ROOM TABLE, RUG	07/13/07	SL	7.00		16	12,312.				12,312.	12,312.		0.	12,312.
24	WINDOW TREATMENT DEPOSIT	07/13/07	SL	7.00		16	4,500.				4,500.	4,500.		0.	4,500.
25	CHAIR DEPOSIT	07/25/07	SL	7.00		16	3,100.				3,100.	3,100.		0.	3,100.
26	LAMP PURCHASE	08/08/07	SL	7.00		16	1,075.				1,075.	1,075.		0.	1,075.
27	RUG PURCHASE	08/08/07	SL	7.00		16	3,356.				3,356.	3,356.		0.	3,356.
28	RUG PURCHASE	08/31/07	SL	7.00		16	1,194.				1,194.	1,194.		0.	1,194.
29	WINDOW TREATMENTS	08/31/07	SL	7.00		16	7,927.				7,927.	7,927.		0.	7,927.
30	RUG PURCHASE	08/31/07	SL	7.00		16	985.				985.	985.		0.	985.
31	PRESIDENTS OFFICE, PROGRAM OFFICER OFFICE	07/19/07	SL	7.00		16	8,902.				8,902.	8,902.		0.	8,902.
32	TELEPHONE SYSTEM	09/05/07	SL	5.00		16	5,135.				5,135.	5,135.		0.	5,135.
33	OFFICE COPIER	09/14/07	SL	5.00		16	6,145.				6,145.	6,145.		0.	6,145.
34	RUGS, LAMPS	09/26/07	SL	5.00		16	6,863.				6,863.	6,863.		0.	6,863.
35	FILING CABINET	09/26/07	SL	5.00		16	1,558.				1,558.	1,558.		0.	1,558.
36	2 FILE CABINETS	09/30/07	SL	5.00		16	994.				994.	994.		0.	994.

2020 DEPRECIATION AND AMORTIZATION REPORT

FORM 990-PF PAGE 1

990-PF

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
37	RUGS	10/03/07	SL	5.00		16	1,734.				1,734.	1,734.		0.	1,734.
38	SECURITY CAMERA	10/31/07	SL	5.00		16	1,303.				1,303.	1,303.		0.	1,303.
39	BOOK CASE	11/02/07	SL	5.00		16	789.				789.	789.		0.	789.
40	LJB WINDOW TREATMENTS	11/16/07	SL	5.00		16	1,100.				1,100.	1,100.		0.	1,100.
41	SIGNAGE	11/08/07	SL	5.00		16	4,025.				4,025.	4,025.		0.	4,025.
42	ELAND GALLERY PAINTING-DOWNSTAIRS BATHROOM	12/10/07	SL	5.00		16	300.				300.	300.		0.	300.
43	SHADE FOR PRES OFFICE	01/09/08	SL	5.00		16	1,088.				1,088.	1,088.		0.	1,088.
44	OFFICE COPIER 2ND FLOOR XPO	07/25/08	SL	5.00		16	1,298.				1,298.	1,298.		0.	1,298.
45	COMPUTER EQUIP	07/31/08	SL	5.00		16	1,525.				1,525.	1,525.		0.	1,525.
46	COMPUTER EQUIP	08/05/08	SL	5.00		16	1,343.				1,343.	1,343.		0.	1,343.
47	COMPUTER EQUIP	08/05/08	SL	5.00		16	3,426.				3,426.	3,426.		0.	3,426.
48	COMPUTER EQUIP	08/05/08	SL	5.00		16	1,791.				1,791.	1,791.		0.	1,791.
49	LATERAL FILES	01/11/10	SL	5.00		16	1,866.				1,866.	1,866.		0.	1,866.
50	LATERAL FILES	06/23/10	SL	5.00		16	1,749.				1,749.	1,749.		0.	1,749.
51	FLAG POLE	07/10/10	SL	5.00		16	1,355.				1,355.	1,355.		0.	1,355.
52	LED OUTDOOR PATHWAY LIGHTS	06/30/14	SL	5.00		16	6,050.				6,050.	6,050.		0.	6,050.
53	OVERHEAD PROJECTOR	07/07/10	SL	5.00		16	2,969.				2,969.	2,969.		0.	2,969.
54	DELL OFFICE COMPUTERS & INSTALLATION	08/06/12	SL	5.00		16	11,761.				11,761.	11,761.		0.	11,761.

2020 DEPRECIATION AND AMORTIZATION REPORT

FORM 990-PF PAGE 1

990-PF

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
55	LED PATH LIGHTS	02/07/13	SL	5.00		16	4,719.				4,719.	4,719.		0.	4,719.
56	RESEOURCE PARTNERS	10/23/13	SL	5.00		16	1,968.				1,968.	1,968.		0.	1,968.
57	RUG-CHES-MONT CARPET ONE	07/01/14	SL	5.00		16	2,296.				2,296.	2,296.		0.	2,296.
58	SHELVING FOR BASEMENT	06/30/13	SL	5.00		16	688.				688.	688.		0.	688.
69	SHUTTERS (CAROLS OFFICE	08/20/15	SL	5.00		16	3,010.				3,010.	2,910.		100.	3,010.
70	DELL COMPUTER (CAROL)	06/24/16	SL	5.00		16	863.				863.	692.		171.	863.
71	HP PRINTER	06/23/16	SL	5.00		16	530.				530.	424.		106.	530.
72	NEW ROOF-GSM ROOFING (FINAL)	09/14/15	SL	15.00		16	14,606.				14,606.	4,707.		974.	5,681.
73	HVAC SYSTEM	06/27/16	SL	39.00	MM	16	7,325.				7,325.	752.		188.	940.
84	DELL OFFICE COMPUTER CAROL	04/15/19	SL	5.00		16	5,024.				5,024.	1,758.		1,005.	2,763.
85	DELL OFFICE COMPUTER LYNN	04/11/19	SL	5.00		16	3,309.				3,309.	1,158.		662.	1,820.
96	LED LIGHT PATH	07/29/19	SL	5.00		16	2,325.				2,325.	891.		465.	1,356.
	* TOTAL 990-PF PG 1 DEPR						965,434.				965,434.	394,918.		26,128.	421,046.