Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

Inspection A For the 2022 calendar year, or tax year beginning and ending Check if applicable: D Employer identification number C Name of organization Address change THE COMMUNITY Y FOUNDATION Name change 23-2656276 Doing business as Initial return E Telephone number Number and street (or P.O. box if mail is not delivered to street address) Room/suite Final return/ 610-259-1661 2104 GARRETT RD. termin-ated 6,099,647. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended LANSDOWNE, PA 19050 H(a) Is this a group return]Applica-]tion F Name and address of principal officer: MICHAEL RANCK Yes X No for subordinates? L pending 2104 GARRETT ROAD, LANSDOWNE, PA 19050 H(b) Are all subordinates included? Yes No Tax-exempt status: X 501(c)(3) 501(c) (4947(a)(1) or 527 If "No," attach a list. See instructions (insert no.) HTTPS://CYEDC.ORG H(c) Group exemption number J Website: L Year of formation: 1991 M State of legal domicile: PA K Form of organization: X Corporation Association Other Trust Part I Summary Briefly describe the organization's mission or most significant activities: THE COMMUNITY Y FOUNDATION IS A CHARITABLE ORGANIZATION THAT FINANCIALLY SUPPORTS THE YOUNG MEN'S Activities & Governance if the organization discontinued its operations or disposed of more than 25% of its net assets. 10 Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 0 5 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 0 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 0. b Net unrelated business taxable income from Form 990 T, Part I, line 11 **Prior Year Current Year** 0. 0. Contributions and grants (Part VIII, line 1h) Revenue 0. 0. Program service revenue (Part VIII, line 2g) 538,533. 880,307. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 0. 0. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 538,533. 880,307. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) $325,1\overline{92}$. 118,564. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. Benefits paid to or for members (Part IX, column (A), line 4) 0. 0. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0. 0. 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 63,660. 68,838. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 182,22<u>4.</u> 394,030. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 356,309. 486,277. 19 Revenue less expenses, Subtract line 18 from line 12 Beginning of Current Year End of Year Б Assets 6,319,667. 7,919,494. 20 Total assets (Part X, line 16) 28,966. 14,750. 21 Total liabilities (Part X, line 26) 890,528. Net assets or fund balances. Subtract line 21 from line 20 Part I Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Date Signature of officer Sign MICHAEL RANCK, PRESIDENT Here Type or print name and title Date PTIN Check Preparer's signature Print/Type preparer's name 05/10/23 self-employed COLLEEN SURACE, CPA P03013233 COLLEEN SURACE, CPA Paid Firm's EIN 82-3555022 SURACE & STANTON, LLC Preparer Firm's name Firm's address 1974 SPROUL ROAD, STE. Use Only Phone no. (484 653-6380 BROOMALL, PA 19008

May the IRS discuss this return with the preparer shown above? See instructions

X Yes

| -orm Par | 990 (2022) THE COMMUNITY Y FOUNDATION 23-2656276 Page 2 III Statement of Program Service Accomplishments |
|-------------|--|
| 1,5841 | Check if Schedule O contains a response or note to any line in this Part III |
| 1 | Briefly describe the organization's mission: |
| - | SEE SCHEDULE O. |
| | |
| | |
| | |
| 2 | Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes X No |
| | And the state of t |
| 3 | If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? |
| 3 | If "Yes," describe these changes on Schedule O. |
| 4 | Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. |
| | Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and |
| | revenue, if any, for each program service reported. |
| 4a | (Code:) (Expenses \$ 325,192. including grants of \$ 325,192.) (Revenue \$) |
| | THE COMMUNITY Y FOUNDATION PROVIDES FINANCIAL MEANS TO SUPPORT THE |
| | YOUNG MEN'S CHRISTIAN ASSOCIATION OF DELAWARE COUNTY, A 501(C)(3) |
| | ORGANIZATION, AND ITS BUILDINGS AND PROGRAMS. IT ALLOWS FOR MAINTENANCE AND IMPROVEMENT OF THE BUILDINGS AND TO |
| | PROVIDE FINANCIAL AID FOR MEMBERS TO ATTEND THE PROGRAMS. |
| | INVIDU I LIGHTORIA 2210 I ON RELIEVED NO FILLENCE DE LA CONTRACTION DE LA CONTRACTIO |
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| 41- | (Code:) (Expenses \$ |
| 4b | (Code:) (Expenses \$ |
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| 4c | (Code:) (Expenses \$) (Revenue \$) |
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| | |
| 4d | Other program services (Describe on Schedule O.) |
| | (Expenses \$ including grants of \$) (Revenue \$) Total program service expenses 325,192. |
| <u>4e</u> | Form 990 (2022) |

23-2656276 THE COMMUNITY Y FOUNDATION Page 3 Part V Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? Х If "Yes," complete Schedule A Х 2 Is the organization required to complete Schedule B. Schedule of Contributors? See instructions 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for Х public office? If "Yes," complete Schedule C, Part I 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect Х 4 during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or X 5 similar amounts as defined in Rev. Proc. 98-197 If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to Х 6 provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space, Х 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D. Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes." complete X 8 Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? X 9 If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in donor-restricted endowments 10 Х 10 or in quasi endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X, 11 as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Х 11a Part VI b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total X 11b assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total Х assets reported in Part X, line 16? # "Yes," complete Schedule D, Part VIII d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in X 11d Part X, line 16? ff "Yes," complete Schedule D, Part IX X e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses X the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes." complete X 12a Schedule D. Parts XI and XII b Was the organization included in consolidated, independent audited financial statements for the tax year? Х 12b If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Х 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Х 14a 14a Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 X 14b or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any 15 Х 15 foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to X 16 or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, Х column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 18 X 18 1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes." Х 19

complete Schedule G, Part III

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II ...

Form 990 (2022)

20a

20b

| Form | 990 (2022) THE COMMUNITY Y FOUNDATION 23 | <u>-26562</u> | 76 | Pa | ige 4 |
|-------|---|---------------|------|---|----------|
| Par | TIV Checklist of Required Schedules (continued) | | | | |
| | | _ | | Yes | No |
| 22 | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on | | | | |
| | Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | | 22 | | <u>X</u> |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's currently | ent | Į. | | |
| | and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete | | | | |
| | Schedule J | | 23 | Х | |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of | the | | | |
| | last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete | | | - 1 | |
| | Schedule K. If "No," go to line 25a | 1 | 24a | | X_ |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | [2 | 24b | | |
| Ç | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease | | | - | |
| | any tax-exempt bonds? | <u>[</u> | 24c | | |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | <u>L</u> | 24d | | |
| 25a | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit | 1 | | | |
| | transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | | 25a | | X |
| b | is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and | | | | |
| | that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete | i i | | | |
| | Schedule L. Part I | | 25b | | X |
| 26 | Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current | | | 1 | |
| | or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% | | | | |
| | controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II | | 26 | | X |
| 27 | Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employe | | | | |
| | creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% con | | | | |
| | entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part | | 27 | | X |
| 28 | Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, | | | | apaiz. |
| | instructions for applicable filing thresholds, conditions, and exceptions): | 83 | | | |
| а | A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If | | | | |
| _ | "Yes," complete Schedule L, Part IV | | 28a | | Х |
| h | A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV | | 28b | | X |
| | A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? # | | Ĭ | | |
| _ | "Yes," complete Schedule L, Part IV | L | 28c | | X |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | | 29 | | X |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation | | | | |
| | contributions? If "Yes," complete Schedule M | . | 30 | | X |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I | | 31 | | Х |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete | Ī | | | |
| | Schedule N, Part II | | 32 | | X |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | | | | |
| | sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I | | 33 | | X |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and | | | | |
| | Part V, line 1 | Ŀ | 34 | X | |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | | 35a | | X |
| | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled enti- | | | | |
| ., | within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | | 35b | | |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization | | | | |
| | If "Yes," complete Schedule R, Part V, line 2 | | 36 | | X |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization | | | | |
| J. | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | | 37 | | x |
| 38 | Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? | | | *************************************** | |
| 55 | Note: All Form 990 filers are required to complete Schedule O | | 38 | Х | |
| Pai | | | | | |
| F | Check if Schedule O contains a response or note to any line in this Part V | | | | |
| | | | | Yes | No |
| 12 | Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable | 0 | | | |
| | Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable | 0 | | | |
| | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming | 3 | | | |
| Ü | (gambling) winnings to prize winners? | | 1c | | |
| 00000 | (4.12.22 | | Form | 990 | (2022) |

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THE COMMUNITY Y FOUNDATION

| Par | tV Statements Regarding Other IRS Filings and Tax Compliance (continued) | | | | | | | | |
|------------|--|--|--|--|--|--|--|--|--|
| <u> </u> | | | Yes | No | | | | | |
| 2 a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, | | | | | | | | |
| | filed for the calendar year ending with or within the year covered by this return 2a0 | | N AND | | | | | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | 2b | | | | | | | |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year? | За | | X | | | | | |
| b | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O | 3b | | | | | | | |
| 4a | The state of the s | | | | | | | | |
| | financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4a | | X | | | | | |
| b | If "Yes," enter the name of the foreign country | 3 | | | | | | | |
| | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). | | | | | | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | Х | | | | | |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | Х | | | | | |
| | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | 5c | | | | | | | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit | | | | | | | | |
| | any contributions that were not tax deductible as charitable contributions? | 6a | | x | | | | | |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts | | | | | | | | |
| | were not tax deductible? | 6b | | 1 | | | | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | g | 17444 | | | | | | |
| a | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? | 7a | | X | | | | | |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | | | | | | | |
| C | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required | | | | | | | | |
| J | to file Form 8282? | 7c | | Х | | | | | |
| d | If "Yes," indicate the number of Forms 8282 filed during the year 7d | | irdiani. | | | | | | |
| e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | Х | | | | | |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | | Х | | | | | |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g | | | | | | | |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | 7h | | | | | | | |
| 8 | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the | | | THE STATE OF THE S | | | | | |
| _ | sponsoring organization have excess business holdings at any time during the year? | 8 | | X | | | | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | | | | | | | | |
| а | Did the sponsoring organization make any taxable distributions under section 4966? | 9a | | Х | | | | | |
| b | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | 9b | | X | | | | | |
| 10 | Section 501(c)(7) organizations. Enter: | | p Pade a Manage Face of Wat Carryly In 19 7-19 St. Carryly In 19 7-19 St. Carryly In 19 | | | | | | |
| а | Initiation fees and capital contributions included on Part VIII, line 12 | | | | | | | | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | | | | | | | | |
| 11 | Section 501(c)(12) organizations. Enter: | 100 | | | | | | | |
| а | Gross income from members or shareholders | | 3.500 | | | | | | |
| b | Gross income from other sources. (Do not net amounts due or paid to other sources against | 7.7 | | | | | | | |
| | amounts due or received from them.) | 0-0-7-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1- | | | | | | | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | | | | | | | |
| b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | | | | | | | | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | | | | | | | |
| a | Is the organization licensed to issue qualified health plans in more than one state? | 13a | ļ | <u> </u> | | | | | |
| | Note: See the instructions for additional information the organization must report on Schedule O. | Control of the contro | | | | | | | |
| b | Enter the amount of reserves the organization is required to maintain by the states in which the | | | | | | | | |
| | organization is licensed to issue qualified health plans | To a familiar to | | | | | | | |
| С | Enter the amount of reserves on hand | 540.40 | | | | | | | |
| 14a | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | <u> </u> | X | | | | | |
| b | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O | 14b | | | | | | | |
| 15 | Is the organization 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? | 15 | | X | | | | | |
| | If "Yes," see the instructions and file Form 4720, Schedule N. | 6. 3 6 | | | | | | | |
| 16 | Is the organization an educational institution subject to the section 4968 excise tax on net investment income? | 16 | | X | | | | | |
| | If "Yes," complete Form 4720, Schedule O. | | | | | | | | |
| 17 | Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities | | | | | | | | |
| | that would result in the imposition of an excise tax under section 4951, 4952 or 4953? | 17 | | | | | | | |
| | if "Yes," complete Form 6069. | 2 - 2 | | | | | | | |

Form 990 (2022)

THE COMMUNITY Y FOUNDATION 23-2656276 Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response

| | to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. | | | |
|-----|---|---|----------------------|-----------|
| | Check if Schedule O contains a response or note to any line in this Part VI | | | X |
| Sec | tion A. Governing Body and Management | | | |
| | | | Yes | No |
| 1a | Enter the number of voting members of the governing body at the end of the tax year 1a 10 | | ojava Sya Na | |
| | If there are material differences in voting rights among members of the governing body, or if the governing | | ř. | |
| | body delegated broad authority to an executive committee or similar committee, explain on Schedule 0. | | | |
| b | Enter the number of voting members included on line 1a, above, who are independent | | | 14.124.51 |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other | | | |
| _ | officer, director, trustee, or key employee? | 2 | | X |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision | | | |
| • | of officers, directors, trustees, or key employees to a management company or other person? | 3 | | X |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | | X |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | -5 | | X |
| 6 | Did the organization have members or stockholders? | 6 | | Х |
| 7a | | | | |
| | more members of the governing body? | 7a | | Х |
| h | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or | | | |
| _ | persons other than the governing body? | 7b | | х |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | | |
| а | The governing body? | 8a | X | |
| b | Each committee with authority to act on behalf of the governing body? | . 8b | X | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the | | | |
| • | organization's mailing address? If "Yes." provide the names and addresses on Schedule O | 9 | | Х |
| Sec | tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) | | | |
| | THIS SECTION DISCOURS IN A CONTRACT AND A CONTRACT | | Yes | No |
| 10a | Did the organization have local chapters, branches, or affiliates? | 10a | | Х |
| | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, | , | | |
| | and branches to ensure their operations are consistent with the organization's exempt purposes? | 10b | | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 11a | X | |
| b | Describe on Schedule O the process, if any, used by the organization to review this Form 990. | Part of the second | 7992 774 | |
| 12a | Did the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | Х | |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | X | |
| C | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe | | | |
| | on Schedule O how this was done | 12c | X | |
| 13 | Did the organization have a written whistleblower policy? | 13 | X | |
| 14 | Did the organization have a written document retention and destruction policy? | 14 | X | |
| 15 | Did the process for determining compensation of the following persons include a review and approval by independent | Francisco de la companya del companya del companya de la companya | of the second of the | |
| | persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | ET-CENT | | |
| а | The organization's CEO, Executive Director, or top management official | 15a | | X |
| | Other officers or key employees of the organization | 15b | | X |
| | If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a | | 1,000 | |
| | taxable entity during the year? | 16a | <u> </u> | X |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation | | | |
| | in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's | | | 1.5 |
| | exempt status with respect to such arrangements? | 16b | | |
| Sec | tion C. Disclosure | | | |
| 17 | List the states with which a copy of this Form 990 is required to be filed PA | | | |
| 18 | Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3) | s only) | availa | ıble |
| - | for public inspection, Indicate how you made these available. Check all that apply. | | | |
| | Own website X Another's website X Upon request Other (explain on Schedule O) | | | |
| 19 | Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an | d finar | icial | |
| - | statements available to the public during the tax year. | | | |
| 20 | State the name, address, and telephone number of the person who possesses the organization's books and records | | | |
| - | MICHAEL RANCK - 610-259-1661 | | | |
| | 2104 GARRETT RD., LANSDOWNE, PA 19050 | | | |

Form 990 (2022)

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter 0 in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

| Check this box if neither the organization (A) | (B) | | | (C |) | | | (D) | (E) | (F) | |
|--|-------------------|---|-----------------------|----------|-----------------|---------------------------------|------------|---|---|-----------------------|--|
| Name and title | Average | Position (do not check more than one | | | l than c | | Reportable | Reportable | Estimated | | |
| | hours per | box, unless person is both an | | | | s both | an | compensation | compensation | amount of | |
| • | week | officer and a dire | | | rector/trustee) | | | from | from related | other | |
| | (list any | recto | | | | | | the | organizations (W-2/1099-MISC/ 1099-NEC) | compensation from the | |
| | hours for related | or d | 33 | | | Highest compensated employee | | organization (W-2/1099-MISC/ | | organization | |
| | organizations | Individual trustee or director | Institutional trustee | | 936 | lled iii | | 1099-NEC) | 10001120) | and related | |
| · | below | dual t | edions | 7 | Key employee | stco | ㅂ | , | | organizations | |
| | line) | Indivi | Instit | Officer | Key e | High en pi | Pormer | | | | |
| (1) MICHAEL RANCK | 40.00 | | | | | | | | | | |
| PRESIDENT | | | | X | | | | 0. | 152,724. | 43,975. | |
| (2) JOHN BEVILACQUA | 1.00 | | | | | | | | | | |
| SECRETARY | | X | | X | | | | 0. | 0. | 0. | |
| (3) RALPH CICALESE | 1.00 | | | | | | | | | _ | |
| MEMBER | | X | <u> </u> | | | | | 0. | 0. | 0. | |
| (4) NATE COLLETTE | 1.00 | | | | | ١ | | _ | _ | | |
| TREASURER | | X | ļ. <u>.</u> | Х | | ļ., | | 0. | 0. | 0. | |
| (5) VINCENT D. GORDON | 1.00 | | | | 1 | | | _ | | | |
| MEMBER | | X | | <u> </u> | | | | 0. | 0. | 0 | |
| (6) RUSSELL H, PYLE | 1.00 | | | | | ١. | | | | | |
| MEMBER | | X | <u> </u> | | <u> </u> | _ | | 0. | 0. | 0. | |
| (7) STEVE E. TAGERT | 1.00 | ļ | | | | | | | 1 | | |
| CHAIR | | X | | X | ļ. | ļ | <u> </u> | 0. | 0. | 0 | |
| (8) DENNIS WOLF | 1.00 | | | | l | | | | | _ | |
| VICE CHAIR | | X | <u> </u> | X | ļ | - | ├ | 0. | 0. | 0 | |
| (9) DAVID BRENNER | 1.00 | ١ | | İ | | | | | | 0 | |
| MEMBER | 4 00 | X | - | _ | - | — | ┡ | 0. | 0. | U | |
| (10) ROBERT SIMPSON | 1.00 | ۱., | | ļ | | | | 0. | 0. | 0 | |
| MEMBER | | X | - | ├ | ├ | | ┢ | 0. | 0. | 0 | |
| | | ┨ | | | 1 | | 1 | | | | |
| | | ┼ | | ┡ | ┼ | | - | | | | |
| | | ┨ | | | | | | | | | |
| | | - | - | - | ┼ | | ╁ | | | | |
| | | - | | İ | | | | | | | |
| | | | +- | | - | | ╁ | | | | |
| | | ┨ | | | | | l | | | | |
| | | \vdash | ╁╌ | ╂ | \vdash | + | ╀╌ | | | | |
| | | - | | | | 1 | | | | | |
| | | +- | ╁ | - | + | +- | + | | | | |
| | | 1 | | | | | | | | | |
| | | +- | + | 十 | +- | | ╁ | | | | |
| | | 4 | | 1 | 1 | | 1 | 1 | I | | |

Form 990 (2022)

| Part VII Section A. Officers, Directors | , Trustees, Key Emp | loyee | s, and | d Hig | hest | Co | mpensated Employee | s (continued) | |
|---|--|--------------------------------|------------|--|------------------------------|--------|---|---|--|
| (A) Name and title | (B) Average hours per week | (do not | (0 | C) ition more t rson is | than on a both e | e n | (D) Reportable compensation from | (E) Reportable compensation from related | (F) Estimated amount of other |
| | (list any hours for related organizations below line) | Individual frustee or director | Officer | Key employee | Highest compensated employee | Former | the organization (W-2/1099-MISC/ 1099-NEC) | organizations (W-2/1099-MISC/ 1099-NEC) | compensation from the organization and related organizations |
| | | | | | | | | | |
| | | | - | | | - | | | - |
| | | | | - | | | | | |
| | | | | | | | | | <u> </u> |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | - | | | | | | |
| 1b Subtotal | | | | | | | 0. | 152,724 | |
| c Total from continuation sheets to B d Total (add lines 1b and 1c) Total number of individuals (including | *************************************** | | <u></u> | | | | 0. 0. ceived more than \$100 | 0 152,724 .000 of reportable | |
| compensation from the organization | g but not innece to an | | | | , , , , , , | | | , | Ves No |
| 3 Did the organization list any former line 1a? If "Yes," complete Schedule | J for such individual | | | | | | | | 3 X |
| For any individual listed on line 1a, is and related organizations greater tha Did any person listed on line 1a rece | ın \$150,000? <i>If "Yes,</i> | " com | plete | Sche | edule | J fo | or such individual | *************************************** | 37 |
| 5 Did any person listed on line 1a rece rendered to the organization? If "Yes Section B. Independent Contractors | | | | | | | | | 5 X |
| Complete this table for your five high the organization. Report compensation. | | | | | | | the organization's tax | | |
| | (A) Isiness address | NOI | NE_ | | | | (B) Description of | services | (C) Compensation |
| | | - | , <u>-</u> | | | | | | |
| | | | | •••••••••••••••••••••••••••••••••••••• | | - | | | |
| | | | *** | | | | | | |
| | | | | | | | | | |
| Total number of independent contra \$100,000 of compensation from the | | ot limi | ted to | | se list O | ed | above) who received m | nore than | Form 990 (2022) |

| <u> </u> | | Check if Schedule O co | ontains a | response o | or note to any lin | e in this Part VIII | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | |
|---|----------|--------------------------------------|--------------|---------------|--------------------|--|--|--|--|
| | | SHOSK II SOFILOGIO O O | real 10 d 1 | - COPOTION C | | (A) Total revenue | (B) Related or exempt | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512 - 514 |
| 23 29 | 1 a | Federated campaigns | | 1a | | | | | militari de la martina (n. 1921). 1930: La companio de la companio de la companio de la companio de la companio de la companio de la companio de 1930: La companio de la companio de la companio de la companio de la companio de la companio de la companio de |
| Contributions, Gifts, Grants and Other Similar Amounts. | b | | | 1b | | | | | |
| اع ق | c. | Fundraising events | | 1c | | | | | |
| ξ¥ | 4 | | | 1d | | | | | |
| 2 5 | ۵ | Government grants (contril | | 1e | , | | | | |
| 옶沿 | f | All other contributions, gifts, g | | 16 | | | | | |
| 큪칠 | • | similar amounts not included | | 1f | | | | | |
| 문화 | ~ | Noncash contributions included in li | | 1g \$ | | | | | |
| <u> </u> | 9 | | nes 1a-1f | [ΙΫ]Φ | 1.44 | | | | |
| <u>O. ra</u> | <u>n</u> | Total. Add lines 1a-1f | ************ | | Business Code | | | | |
| | _ | | | ł | Busiliess Code | Control of the Contro | | | |
| <u> 8</u> | 2 a | | | - | | | | | |
| 중의 | b | | | | | | | | |
| Su | C | | | | | | | | |
| g a | d | | | | | | | | |
| Program Service Revenue | е | | | | | ••• | | | |
| - | | All other program service r | | - | | | | | |
| | | Total. Add lines 2a-2f | | | | | | | |
| | 3 | Investment income (includi | - | | | 161,876. | | | 161,876. |
| | | | | | | 301,070. | | | 202,070. |
| | 4 | Income from investment of | | - | | | | | |
| | 5 | Royalties | | | | Control of the Contro | | | |
| 1 | | | (1 |) Real | (ii) Personal | | The second of the second of the second particle of the second of the sec | The second of th | An area of the second flat and the second flat |
| | 6 a | Gross rents | 6a | | | A Property of the Control of the Con | A second | The second secon | 10 10 10 10 10 10 10 10 10 10 10 10 10 1 |
| | | Less: rental expenses | 6b | | | The state of the s | | The second secon | The state of the s |
| | | Rental income or (loss) | 6c | | | 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - | And the second s | The second secon | A SECTION OF THE PROPERTY OF T |
| | | Net rental income or (loss) | | | | | | | A STATE OF THE STA |
| Ì | 7 a | Gross amount from sales of | | ecurities | (ii) Other | A CONTROL OF THE PARTY OF THE P | With a first that a company for the second of the second o | The second secon | |
| | | assets other than inventory | 7a 5,5 | 937,771. | | property of the second | A STATE OF THE PROPERTY OF THE | The state of the s | A common control of the common |
| | b | Less: cost or other basis | | | | The second secon | The second secon | And the first of the second of | best had find a market between many and a harden and a second and a se |
| ine | | and sales expenses | | 219,340. | | The second secon | Company of the compan | A billion of the company of the comp | |
| Revenue | C | Gain or (loss) | 7c | 718,431. | <u> </u> | 5 - 1 - 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 | Section 1 and 1 an | After a second control of the second control | The second secon |
| | d | Net gain or (loss) | | | | 718,431. | | | 718,431. |
| je | 8 a | Gross income from fundraisin | ig events (r | not | | And the second s | The second secon | A second process of the second process of th | The state of the s |
| ₽ | | including \$ | | of | | Section 2015 and the section of the | A control of the cont | | The second secon |
| | | contributions reported on | line 1c). S | 00 | 1 | | The second secon | and the second s | The second secon |
| | | Part IV, line 18 | | 8a | | Control of the contro | The second secon | A control of the cont | The state of the s |
| | b | Less: direct expenses | | 8b | <u></u> | 1 | Section 1 and 1 an | Total Account to the control of the | The state of the s |
| | С | : Net income or (loss) from f | fundraising | g events | | | The second secon | | |
| | 9 a | Gross income from gamine | g activities | s. See | 1 | A first content of the content of th | | A CONTROL OF THE CONT | And the state of t |
| | | Part IV, line 19 | | 9a | | The second secon | The second secon | The second secon | The second secon |
| | b | Less: direct expenses | | 9b | | The second secon | 3 | The second secon | |
| | c | Net income or (loss) from (| gaming ac | tivities | <u></u> | | | | |
| | 10 a | Gross sales of inventory, le | ess return | s | | The second secon | The second secon | And the control of th | A district of the control of the con |
| | | and allowances | | 10a | | The state of the s | The state of the s | A Company of the Comp | The second secon |
| | b | Less: cost of goods sold | | | | A STATE OF THE STA | The second secon | The second secon | |
| | i | : Net income or (loss) from s | | · · · | | | | | |
| | | | | | Business Code | | The second secon | | V 27.0.0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 |
| Miscellaneous Revenue | 11 a | l | | <u> </u> | | | | 1 | |
| evenue | b |) | | | | W 14874-1171-1171 | | | |
| | c | | | | | | | | |
| <u> </u> | d | All other revenue | | ., | | | | | |
| 2 | e | Total. Add lines 11a-11d | | | | | international designation of the | | |
| | 12 | Total revenue. See instruction | | | | 880,307, | , 0 | , 0 | 880,307. |

Form 990 (2022) THE COMMUNITY

Part IX Statement of Functional Expenses

| Section | on 501(c)(3) and 501(c)(4) organizations must comp | | | ····· | |
|---------|---|---------------------------------------|--|--|--|
| | Check if Schedule O contains a respon | | | (C) | (D) |
| | ot include amounts reported on lines 6b, 3b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
| 1 | Grants and other assistance to domestic organizations | | | | |
| | and domestic governments. See Part IV, line 21 | 325,192. | 325,192. | | |
| 2 | Grants and other assistance to domestic | | · | | |
| | individuals. See Part IV, line 22 | | | | |
| 3 | Grants and other assistance to foreign | | | | |
| | organizations, foreign governments, and foreign | | | | |
| | individuals. See Part IV, lines 15 and 16 | | • | | |
| 4 | Benefits paid to or for members | | | | |
| 5 | Compensation of current officers, directors, | | | | |
| | trustees, and key employees | | | | |
| 6 | Compensation not included above to disqualified | | | | <u> </u> |
| - | persons (as defined under section 4958(f)(1)) and | | | | |
| | persons described in section 4958(c)(3)(B) | 40 | | | |
| 7 | Other salaries and wages | | | | |
| 8 | Pension plan accruals and contributions (include | | | | |
| - | section 401(k) and 403(b) employer contributions) | | 1 | 1 | |
| 9 | Other employee benefits | | | | |
| 10 | Payroli taxes | | | | |
| 11 | Fees for services (nonemployees): | | | | |
| | Management | • | | · | |
| a | | | | | |
| b | Legal | 9,750. | | 9,750. | i |
| C | Accounting | 3,730. | | 3,7301 | |
| a | Lobbying Professional fundamining gardens, See Part IV, line 17 | | | | |
| e | Professional fundraising services. See Part IV, line 17 | 54,088. | and the first war and appropriate the first state of a speciment ground and a speciment ground and a speciment ground and a speciment ground and a speciment ground and a speciment ground grou | 54,088. | |
| 1 | Investment management fees | J#,000. | | 34,000. | |
| g | Other. (If line 11g amount exceeds 10% of line 25, | 5,000. | | 5,000. | |
| | column (A), amount, list line 11g expenses on Sch O.) | 3,000. | | 3,000. | |
| 12 | Advertising and promotion | | | | |
| 13 | Office expenses | | | | |
| 14 | Information technology | | | | |
| 15 | Royalties | | | | |
| 16 | Occupancy | | | | |
| 17 | Travel | | | | |
| 18 | Payments of travel or entertainment expenses | | | | |
| | for any federal, state, or local public officials | | *************************************** | | |
| 19 | Conferences, conventions, and meetings | | | | |
| 20 | Interest | | | | |
| 21 | Payments to affiliates | | | | |
| 22 | Depreciation, depletion, and amortization | | | | |
| 23 | Insurance | | 1.00 mg (1.00 m | The second secon | The state of the s |
| 24 | Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) | | | | |
| а | | | | | |
| þ | | | | | |
| C | | · · · · · · · · · · · · · · · · · · · | | | |
| d | | | | | |
| е | All other expenses | | | <u> </u> | |
| 25 | Total functional expenses. Add lines 1 through 24e | 394,030. | 325,192. | 68,838. | 0. |
| 26 | Joint costs. Complete this line only if the organization | | | | |
| | reported in column (B) joint costs from a combined | | 1 | | |
| | educational campaign and fundraising solicitation. | | | | |
| | Check here If following SOP 98-2 (ASC 958-720) | | | | |

| | | Check if Schedule O contains a response or note to any line in this Part X | | , | |
|-----------------------------|-----|--|--|--------------|--|
| | | | (A) Beginning of year | | (B) End of year |
| | 1 | Cash - non-interest-bearing | 373,094. | 1 | 233,811. |
| | 2 | Savings and temporary cash investments | | 2 | |
| | 3 | Pledges and grants receivable, net | | 3 | |
| | 4 | Accounts receivable, net | | 4 | |
| | 5 | Loans and other receivables from any current or former officer, director, | | | |
| | | trustee, key employee, creator or founder, substantial contributor, or 35% | | | |
| | | controlled entity or family member of any of these persons | | 5 | |
| | 6 | Loans and other receivables from other disqualified persons (as defined | | | |
| | | under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) | | 6 | |
| Ø | 7 | Notes and loans receivable, net | | 7 | |
| Assets | 8 | Inventories for sale or use | | 8 | |
| As | 9 | Prepaid expenses and deferred charges | *** | 9 | |
| | 10a | | | ion. | |
| | | basis. Complete Part VI of Schedule D10a | | | The second secon |
| | b | Less: accumulated depreciation 10b | | 10c | |
| | 11 | Investments - publicly traded securities | 7,546,400. | 11 | 6,085,856. |
| | 12 | Investments - other securities. See Part IV, line 11 | | 12 | |
| | 13 | Investments - program-related. See Part IV, line 11 | | 13 | |
| | 14 | Intangible assets | | 14 | |
| | 15 | Other assets. See Part IV, line 11 | | 15 | |
| | 16 | Total assets. Add lines 1 through 15 (must equal line 33) | 1 · · · · · · · · · · · · · · · · · · · | 16 | 6,319,667. |
| | 17 | Accounts payable and accrued expenses | | 17 | |
| | 18 | Grants payable | | 18 | |
| | 19 | Deferred revenue | | 19 | |
| | 20 | Tax-exempt bond liabilities | | 20 | |
| | 21 | Escrow or custodial account liability. Complete Part IV of Schedule D | | 21 | |
| 40 | 22 | Loans and other payables to any current or former officer, director, | | | |
| Liabilities | | trustee, key employee, creator or founder, substantial contributor, or 35% | | 75 | A first desire of the control of the |
| Ιįς | | controlled entity or family member of any of these persons | ************************************** | 22 | |
| Ľ.a | 23 | Secured mortgages and notes payable to unrelated third parties | | 23 | |
| | 24 | Unsecured notes and loans payable to unrelated third parties | | 24 | |
| | 25 | Other liabilities (including federal income tax, payables to related third | | | |
| | | parties, and other liabilities not included on lines 17-24). Complete Part X | | | |
| | | of Schedule D | 28,966. | 25 | 14,750. |
| | 26 | Total liabilities. Add lines 17 through 25 | 28,966. | 26 | 14,750. |
| | 20 | Organizations that follow FASB ASC 958, check here | The second secon | 25.124 | a man to provide a man to the state of the s |
| S | İ | and complete lines 27, 28, 32, and 33. | | | A second control of the control of t |
| ĕ | 27 | Net assets without donor restrictions | 4,432,324. | 27 | 3,721,769. |
| 3ale | 28 | Net assets with donor restrictions | 0 4 5 0 0 0 4 | 28 | 2,583,148. |
| ਰੂ | | Organizations that do not follow FASB ASC 958, check here | | Table Table | |
| Ξ̈́ | | and complete lines 29 through 33. | | | And Andread An |
| p | 29 | Capital stock or trust principal, or current funds | | 29 | Planting Manager and Self-Self-Self-Self-Self-Self-Self-Self- |
| ets | 30 | Paid-in or capital surplus, or land, building, or equipment fund | | 30 | |
| 155 | 31 | Retained earnings, endowment, accumulated income, or other funds | | 31 | |
| Net Assets or Fund Balances | 32 | Total net assets or fund balances | | 32 | 6,304,917. |
| | J. | 1 State 105 GOOD OF TOTAl Maignood | 7,919,494. | | 6,319,667. |

Both consolidated and separate basis

Х

X

2

3

5

8

9

10

X Separate basis

Consolidated basis

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

or audits, explain why on Schedule O and describe any steps taken to undergo such audits

review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.

Uniform Guidance, 2 C.F.R. Part 200, Subpart F? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990)

Public Charity Status and Public Support

Complete if the organization is a section 501(e)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

2022

Open to Public Inspection

Name of the organization

THE COMMUNITY Y FOUNDATION

Employer identification number

23-2656276

| Рa | rt J | Rea | son for Public (| Charity Status. (| All organizations must co | omplete th | is part.) Se | ee instructions. | | | | | |
|----------|-------------|---|---------------------------------------|---|---|------------------------------------|--------------------|---|----------------------------|--|--|--|--|
| The | organ | | | | or lines 1 through 12, ch | | | | · | | | | |
| 1 | Ň | | - | | of churches described | | |)(A)(i). | | | | | |
| 2 | 一 | | | • | Attach Schedule E (Form | | | | | | | | |
| 3 | Ħ | | | | nization described in se | | (b)(t)(A)(iii | ١. | | | | | |
| 4 | H | - | - | | | | | ,, n 170(b)(1)(A)(iii). Enter t | the hospital's name | | | | |
| 4 | L | _ | d state: | ation opolated in con | janouon mura noopitai | 400011004 | iii boottoi | T Trotographing Emore | are mospital e maine, | | | | |
| . | \Box | | | or the benefit of a cell | ogo or university owned | or operate | od by a go | vernmental unit describe | d in | | | | |
| 5 | LJ | | | | ege of university owned | or operate | o by a go | vernimental unit describe | u III | | | | |
| _ | \Box | section 170(b)(1)(A)(iv). (Complete Part II.) | | | | | | | | | | | |
| 6 | | A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). | | | | | | | | | | | |
| 7 | <u> </u> | An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in | | | | | | | | | | | |
| | | | 170(b)(1)(A)(vi). (C | | | | | | | | | | |
| 8 | Ш | | | | 1)(A)(vi). (Complete Part | | | | | | | | |
| 9 | | An agri | cultural research org | ganization described i | n section 170(b)(1)(A)(i | x) operate | id in conju | nction with a land-grant | college | | | | |
| | | or unive | ersity or a non-land-q | grant college of agricu | Iture (see instructions). | Enter the r | name, city, | and state of the college | or | | | | |
| | | univers | ity: | ··· | | | | | | | | | |
| 10 | | An orga | an <mark>izatio</mark> n that norma | illy receives (1) more t | han 33 1/3% of its supp | ort from co | ontribution | s, membership fees, and | I gross receipts from | | | | |
| | | activitie | es related to its exen | npt functions, subject | to certain exceptions; a | and (2) no r | nore than | 33 1/3% of its support fr | om gross investment | | | | |
| | | income | and unrelated busin | ness taxable income (| less section 511 tax) fro | m busines | ses acquir | ed by the organization a | fter June 30, 1975. | | | | |
| | | See se | ction 509(a)(2). (Co | mplete Part III.) | | | | | | | | | |
| 11 | | An orga | anization organized : | and operated exclusiv | ely to test for public saf | ety. See 🥫 | section 50 | 9(a)(4). | | | | | |
| 12 | X | An orga | anization organized | and operated exclusiv | ely for the benefit of, to | perform th | ne function | ns of, or to carry out the p | purposes of one or | | | | |
| | | more p | ublicly supported or | ganizations described | l in section 509(a)(1) o | r section 8 | 509(a)(2). | See section 509(a)(3). C | Check the box on | | | | |
| | | | | | supporting organization | | | | | | | | |
| a | | | | | | | | anization(s), typically by (| giving | | | | |
| _ | | | | | | | | tors or trustees of the su | | | | | |
| | | | | complete Part IV, Se | | | | | ., , | | | | |
| b | Γ- | _ | | • | | ion with its | s supporte | d organization(s), by hav | ina | | | | |
| b | L | | | | | | | ntrol or manage the supp | | | | | |
| | | | | st complete Part IV, | | anio porco. | 10 11141 001 | inoro: manago ino oapp | , or to d | | | | |
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| | _ | | | | . You must complete F | | | | rotion(a) | | | | |
| d | L | | | | | | | vith its supported organiz | | | | | |
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| | Г | _ | | | plete Part IV, Sections | | | | | | | | |
| е | | - | - | | ritten determination from | _ | | Type I, Type II, Type III | | | | | |
| | | | , . | • • | ally integrated supporti | | | | 1 | | | | |
| | | | | | ,, | | | | <u> </u> | | | | |
| g | | | following information of supported | n about the supporte | organization(s). (iii) Type of organization | (iv) is the orga in your govern | inization listed | (v) Amount of monetary | (vi) Amount of other | | | | |
| | , | - | nization | (11) (2)(1 | (described on lines 1-10 | | ng document? No | support (see instructions) | support (see instructions) | | | | |
| Y1 T T | | | | | above (see instructions)) | Yes | | | | | | | |
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Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

| - 1-1 | |
|---|--|
| (Complete only if you checked the box on line 5, 7, or 8 of Part | or if the organization failed to qualify under Part III. If the organization |
| fails to qualify under the tests listed below, please complete Pa | t III.) |
| . Public Support | |

| Sec. | tion A. Public Support | | | | | · | |
|------|--|--|--|--|--|--|-----------------|
| ale | ndar year (or fiscal year beginning in) | (a) 2018 | (b) 2019 | (c) 2020 | (d) 2021 | (e) 2022 | (f) Total |
| | Gifts, grants, contributions, and | | | | | | • |
| | membership fees received. (Do not | | | | | | |
| | include any "unusual grants.") | | | | | | |
| 2 | Tax revenues levied for the organ- | | | | | | |
| | ization's benefit and either paid to | | | | | | |
| | or expended on its behalf | | | | | | |
| 3 | The value of services or facilities | | | | | | |
| | furnished by a governmental unit to | | | | | | |
| | the organization without charge | | | | | | |
| 4 | Total. Add lines 1 through 3 | | | · | | | * ' ' ' |
| | The portion of total contributions | | | | | A STATE OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF T | |
| | by each person (other than a | | The state of the s | The second secon | | A CONTRACT OF THE CONTRACT OF | |
| | governmental unit or publicly | promotion (act of promotion of | | | The state of the s | A CONTROL OF THE PROPERTY OF T | |
| | supported organization) included | | | | | | |
| | on line 1 that exceeds 2% of the | | | | 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | The state of the s | |
| | amount shown on line 11, | | | # 1 | | The state of the s | |
| | column (f) | No. 10 and 10 an | The second secon | | The second secon | The second secon | |
| 6 | Public support. Subtract line 5 from line 4. | | | | | The second secon | |
| | ction B. Total Support | | | | | | |
| ale | ndar year (or fiscal year beginning in) | (a) 2018 | (b) 2019 | (c) 2020 | (d) 2021 | (e) 2022 | (f) Total |
| 7 | Amounts from line 4 | - | | | | | |
| 8 | Gross income from interest, | | | | ļ | | |
| | dividends, payments received on | | | | | | |
| | securities loans, rents, royalties, | | | | | | |
| | and income from similar sources | | | | | | |
| 9 | Net income from unrelated business | | | | | | |
| | activities, whether or not the | | | | | | |
| | business is regularly carried on | | | | | | |
| 10 | Other income. Do not include gain | | | | | | |
| | or loss from the sale of capital | | | | | | |
| | assets (Explain in Part VI.) | | | | | | |
| 11 | Total support. Add lines 7 through 10 | The second secon | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | Part | | | |
| 12 | Gross receipts from related activities, | , etc. (see instruction | ons) | | | 12 | |
| 13 | First 5 years. If the Form 990 is for the | he organization's fir | rst, second, third, | fourth, or fifth tax y | year as a section 5 | 01(c)(3) | |
| | organization, check this box and sto | | | | | | |
| e e | ction C. Computation of Publ | ic Support Per | centage | | | , | |
| | Public support percentage for 2022 (| • | | | | 14 | <u>%</u> |
| | Public support percentage from 2021 | | | | | 15 | % |
| 16a | 33 1/3% support test - 2022. If the | | | | | | |
| | stop here. The organization qualifies | | | | | | |
| b | 33 1/3% support test - 2021. If the | | | | | | |
| | and stop here. The organization qua | | | | | | |
| 17a | 10% -facts-and-circumstances test | | | | | | |
| | and if the organization meets the fact | ts-and-circumstanc | es test, check this | box and stop he | re. Explain in Part | VI how the organiza | ation |
| | meets the facts-and-circumstances to | - | | | | | |
| b | 10% -facts-and-circumstances test | | | | | | 10% or |
| | more, and if the organization meets t | | | | | | |
| | organization meets the facts-and-circ | | | | | | |
| 18 | Private foundation. If the organization | on did not check a | box on line 13, 16 | a , 1 6b, 17a, or 17b | o, check this box a | | |
| | | | | | | Schedule A (| (Form 990) 2022 |

THE COMMUNITY Y FOUNDATION

r Organizations Described in Section 509(a)(2)

| Fd | Support Schedule for C | nganizations | Described in S | ection bos(a) | (4) | | |
|-------|--|---------------------------|-----------------------|---------------------|----------------------|--|---------------------------------------|
| | (Complete only if you checked | the box on line 10 | of Part I or if the o | rganization falled | I to qualify under P | art II. I f the organizat | ion fails to |
| A | qualify under the tests listed b | elow, please comp | lete Part II.) | | | | |
| | tion A. Public Support | r | | | | · · · · · · · · · · · · · · · · · · · | |
| | ndar year (or fiscal year beginning in) | (a) 2018 | (b) 2019 | (c) 2020 | (d) 2021 | (e) 2022 | (f) Total |
| | Gifts, grants, contributions, and | | | | | | |
| | membership fees received. (Do not include any "unusual greats.") | | | | | | |
| | include any "unusual grants.") | | | | | | |
| | Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | | | | | | |
| 3 | Gross receipts from activities that | | | | - | | |
| | are not an unrelated trade or bus- iness under section 513 | | | | | | |
| 4 | Tax revenues levied for the organ- | | | | | | _ |
| | ization's benefit and either paid to | | | | | | |
| | or expended on its behalf | | | | | | |
| 5 | The value of services or facilities | | | | | | |
| | furnished by a governmental unit to | | | | | | |
| | the organization without charge | | | | | | , |
| 6 | Total. Add lines 1 through 5 | | | | | | |
| | Amounts included on lines 1, 2, and | | | | | | |
| | 3 received from disqualified persons | | | | | | |
| | Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year | | | | | | |
| | Add lines 7a and 7b | | | | | | |
| | Public support. (Subtract line 7c from line 6.) | | | | of Section 1 | Service of the servic | |
| | tion B. Total Support | | | | | | |
| Caler | ndar year (or fiscal year beginning in) | (a) 2018 | (b) 2019 | (c) 2020 | (d) 2021 | (e) 2022 | (f) Total |
| | Amounts from line 6 | | | | | | |
| 10a | Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | | | | | | · · · · · · · · · · · · · · · · · · · |
| b | Unrelated business taxable income | | | | | | |
| | (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| | Add lines 10a and 10b | | | | | | |
| | Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on | | | | | | |
| 12 | Other income. Do not include gain or loss from the sale of capital | | | | | | |
| | assets (Explain in Part VI.) | <u> </u> | | · | | 1 | |
| | Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the | L ne organization'e fi | rst second third t | ourth, or fifth tax | vear as a section | 501(c)(3) organizatio | |
| , 7 | | | | | year as a section. | | |
| Sec | tion C. Computation of Publ | c Support Pe | rcentage | | | | |
| | Public support percentage for 2022 (| | | olumn (f)) | | 15 | % |
| | Public support percentage from 2021 | | | - | | 16 | % |
| | tion D. Computation of Inves | | | | | | |
| 17 | Investment income percentage for 20 | 022 (line 10c, colu | mn (f), divided by li | ne 13, column (f) |) | 17 | % |
| | Investment income percentage from | | | | | 18 | <u>%</u> |
| 19a | 33 1/3% support tests - 2022. If the | | | | | | ' is not |
| | more than 33 1/3%, check this box a | | | | | | |
| b | 33 1/3% support tests - 2021. If the | | | | | | |
| | line 18 is not more than 33 1/3%, che | | | | | | |
| ~~ | Drivete foundation. If the organization | | | | | | |

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in Part VI.
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

| | Yes | No |
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| Par | rt IV Supporting Organizations (continued) | | | |
|------|--|--|---|--|
| | | ********** | Yes | No |
| 11 | Has the organization accepted a gift or contribution from any of the following persons? | | | |
| а | A person who directly or indirectly controls, either alone or together with persons described on lines 11b and | | | |
| | 11c below, the governing body of a supported organization? | 11a | | X |
| b | A family member of a person described on line 11a above? | 11b | | X |
| C | A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide | | | 27.27.4.E |
| | detail in Part VI. | 11c | | X |
| Sect | tion B. Type I Supporting Organizations | | | |
| | | berry, nerveness | Yes | No |
| | Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one | | | |
| | more supported organizations have the power to regularly appoint or elect at least a majority of the organization's offic directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) | ers, | | 1100 |
| | effectively operated, supervised, or controlled the organization's activities. If the organization had more than one suppor | ted | | |
| | organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the | е 🗀 | | 1.5. |
| | supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. | 1 | | Warter. |
| | Did the organization operate for the benefit of any supported organization other than the supported | | | |
| | organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in | | | |
| | Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, | 2 | 21 222 | #EFERTS |
| Sect | supervised, or controlled the supporting organization. etion C. Type II Supporting Organizations | | <u> </u> | |
| | man a. Tha authorized a familiamentalia | · · · · · · · · · · · · · · · · · · · | Yes | No |
| 1 | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors | | 100 | |
| _ | or trustees of each of the organization's supported organization(s)? If "No." describe in Part VI how control | Part of the control o | | 44-8-5 |
| | or management of the supporting organization was vested in the same persons that controlled or managed | The second secon | | |
| | the supported organization(s). | 1 | | |
| Sect | tion D. All Type III Supporting Organizations | | • | |
| · | | | Yes | No |
| 1 | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the | The state of the s | 7 7 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 | |
| | organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax | Company of the Compan | 70.75 A | The second secon |
| | year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the | of the control of the | 2000000 | |
| | organization's governing documents in effect on the date of notification, to the extent not previously provided? | 1 | X | |
| 2 | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported | The second secon | 1 | |
| | organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how | di antico del control del cont | | TT VALUE |
| | the organization maintained a close and continuous working relationship with the supported organization(s). | 2 | X | |
| | By reason of the relationship described on line 2, above, did the organization's supported organizations have a | The second secon | | |
| | significant voice in the organization's investment policies and in directing the use of the organization's | The state of the s | *************************************** | |
| | income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's | The state of the s | | 37 |
| Cool | supported organizations played in this regard. Stion E. Type III Functionally Integrated Supporting Organizations | 3 | | X |
| | | rotions) | | |
| | Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instru | iononaj. | | |
| a | The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. | | | |
| b | | / (see instruction | ns) | |
| | Activities Test. Answer lines 2a and 2b below. | , poo monuonoi | Yes | No |
| | many transfer and the state of | Company of the compan | 10 | 5 |
| | the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify | The second secon | | 200 - 100 - |
| | those supported organizations and explain how these activities directly furthered their exempt purposes, | The second secon | | |
| | how the organization was responsive to those supported organizations, and how the organization determined | The state of the s | | |
| | that these activities constituted substantially all of its activities. | 2a | Х | |
| b | The state of the s | Comments of the comments of th | | |
| | one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in | Section of the sectio | 1000000 | |
| | Part VI the reasons for the organization's position that its supported organization(s) would have engaged in | Company of the Compan | | 7.55 Mary 2 |
| | these activities but for the organization's involvement. | 2b | X | . = |
| | Parent of Supported Organizations. Answer lines 3a and 3b below. | The state of the s | | |
| а | | | 10540 | |
| | trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI. | 3a | e Engraves | . Harara |
| b | • • • • • • • | Se Attended to the | 100-505 | |
| | of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard. | 3b | 1 | 1 |

| Pa | Type III Non-Functionally Integrated 509(a)(3) Supportin | g Orga | nizations | |
|------|--|--|--|--|
| 1 | Check here if the organization satisfied the Integral Part Test as a qualifyin | g trust or | n Nov. 20, 1970 (<i>explain in</i> Par | rt VI). See instructions. |
| | All other Type III non-functionally integrated supporting organizations must | | • | |
| Sect | ion A - Adjusted Net Income | | (A) Prior Year | (B) Current Year (optional) |
| 1 | Net short-term capital gain | 1 | | |
| 2 | Recoveries of prior-year distributions | 2 | | |
| 3 | Other gross income (see instructions) | 3 | | |
| 4 | Add lines 1 through 3. | 4 | | |
| 5 | Depreciation and depletion | 5 | | |
| 6 | Portion of operating expenses paid or incurred for production or | | | |
| | collection of gross income or for management, conservation, or | | | |
| | maintenance of property held for production of income (see instructions) | 6 | | |
| 7 | Other expenses (see instructions) | 7 | | , |
| 8 | Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) | 8 | | |
| Sect | ion B - Minimum Asset Amount | | (A) Prior Year | (B) Current Year (optional) |
| 1 | Aggregate fair market value of all non-exempt-use assets (see | | | |
| | instructions for short tax year or assets held for part of year): | # 1 - 4 | | |
| a | Average monthly value of securities | 1a | | |
| b | Average monthly cash balances | 1b | | |
| С | Fair market value of other non-exempt-use assets | 1c | | |
| d | Total (add lines 1a, 1b, and 1c) | 1d | | |
| e | Discount claimed for blockage or other factors | Control of Control | The second secon | A control of the cont |
| | (explain in detail in Part VI): | Problem of control of the control of | The second secon | |
| 2 | Acquisition indebtedness applicable to non-exempt-use assets | 2 | | |
| 3 | Subtract line 2 from line 1d. | 3 | | |
| 4 | Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, | | | |
| | see instructions). | 4 | | |
| 5 | Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | | |
| 6 | Multiply line 5 by 0.035. | 6 | | |
| 7 | Recoveries of prior-year distributions | 7 | | |
| 8 | Minimum Asset Amount (add line 7 to line 6) | 8 | | |
| Sect | ion C - Distributable Amount | | | Current Year |
| _1 | Adjusted net income for prior year (from Section A, line 8, column A) | 1 | We define the state of the stat | |
| 2 | Enter 0.85 of line 1. | 2 | The second secon | |
| 3 | Minimum asset amount for prior year (from Section B, line 8, column A) | 3 | And a second sec | |
| 4 | Enter greater of line 2 or line 3. | 4 | A CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF T | |
| 5 | Income tax imposed in prior year | 5 | Control of the part of the following the control of the part of th | |
| 6 | Distributable Amount. Subtract line 5 from line 4, unless subject to | | The second secon | |
| | emergency temporary reduction (see instructions). | 6 | The second secon | |
| 7 | Check here if the current year is the organization's first as a non-functional | lly integra | ated Type III supporting organi | zation (see |
| | instructions). | | | |

Schedule A (Form 990) 2022

Schedule A (Form 990) 2022

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.

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

OMB No. 1545-0047
2022

Open to Public Inspection

Name of the organization
THE COMMUNITY Y FOUNDATION

Employer identification number 23-2656276

| Pa | 1 Organizations Maintaining Donor Advised | d Funds or Other Similar Funds | or Accounts. Complete if the |
|--------|---|---|--------------------------------------|
| | organization answered "Yes" on Form 990, Part IV, line | e 6. | |
| | | (a) Donor advised funds | (b) Funds and other accounts |
| 1 | Total number at end of year | | |
| 2 | Aggregate value of contributions to (during year) | | |
| 3 | Aggregate value of grants from (during year) | | |
| 4 | Aggregate value at end of year | | |
| 5 | Did the organization inform all donors and donor advisors in v | writing that the assets held in donor advis | sed funds |
| | are the organization's property, subject to the organization's | exclusive legal control? | Yes No |
| 6 | Did the organization inform all grantees, donors, and donor a | dvisors in writing that grant funds can be | used only |
| | for charitable purposes and not for the benefit of the donor of | r donor advisor, or for any other purpose | conferring |
| | impermissible private benefit? | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | Yes No |
| Pai | til Conservation Easements. Complete if the org | ganization answered "Yes" on Form 990, | Part IV, line 7. |
| 1 | Purpose(s) of conservation easements held by the organization | on (check all that apply) | |
| | Preservation of land for public use (for example, recrea | tion or education) 🔃 Preservation o | f a historically important land area |
| | Protection of natural habitat | Preservation of | of a certified historic structure |
| | Preservation of open space | | |
| 2 | Complete lines 2a through 2d if the organization held a qualif | ied conservation contribution in the form | |
| | day of the tax year. | | Held at the End of the Tax Year |
| а | Total number of conservation easements | | 2a |
| b | | , | |
| C | Number of conservation easements on a certified historic stru | | 2c |
| . d | Number of conservation easements included in (c) acquired a | after July 25,2006, and not on a | |
| | historic structure listed in the National Register | | 2d |
| 3 | Number of conservation easements modified, transferred, rel | eased, extinguished, or terminated by the | e organization during the tax |
| | year | | |
| 4 | Number of states where property subject to conservation eas | | • |
| 5 | Does the organization have a written policy regarding the per | | |
| | violations, and enforcement of the conservation easements it | | |
| 6 | Staff and volunteer hours devoted to monitoring, inspecting, | handling of violations, and enforcing con | servation easements during the year |
| _ | A second of the | 18 C | |
| 7 | Amount of expenses incurred in monitoring, inspecting, hand | lling of violations, and enforcing conserva | ation easements during the year |
| • | Does each conservation easement reported on line 2(d) abov | e esticity the requirements of anotion 170 | 0/b\/4\/D\/i\ |
| 8 | | • | |
| 9 | In Part XIII, describe how the organization reports conservation | on agraments in its ravenue and expans | |
| Ð | balance sheet, and include, if applicable, the text of the footr | - | |
| | organization's accounting for conservation easements. | lote to the organization a mariotal statem | iena mat dobonboo trio |
| Pa | Till Organizations Maintaining Collections of | Art. Historical Treasures, or O | ther Similar Assets. |
| | Complete if the organization answered "Yes" on Form | | |
| | If the organization elected, as permitted under FASB ASC 95 | | and balance sheet works |
| | of art, historical treasures, or other similar assets held for put | | |
| | service, provide in Part XIII the text of the footnote to its finar | | |
| b | If the organization elected, as permitted under FASB ASC 95 | | |
| ~ | art, historical treasures, or other similar assets held for public | • | |
| | provide the following amounts relating to these items: | | |
| | (i) Revenue included on Form 990, Part VIII, line 1 | | \$ |
| | (ii) Assets included in Form 990, Part X | | |
| 2 | If the organization received or held works of art, historical tre | | |
| | the following amounts required to be reported under FASB A | | |
| 9 | Revenue included on Form 990, Part VIII, line 1 | | \$ |
| u k | Assets included in Form 990. Part X | | \$ |

Schedule D (Form 990) 2022

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

| Sche | | MUNITY Y FC | | ······································ | | 56276 | Page 2 |
|------|---|------------------------|-----------------------|--|--|-------------|----------------|
| Pai | Till Organizations Maintaining C | ollections of Art | , Historical Trea | asures, or Othe | r Similar Asset | S (continue | ed) |
| 3 | Using the organization's acquisition, accession | on, and other records | , check any of the fo | ollowing that make s | ignificant use of its | | |
| | collection items (check all that apply): | | | | | | |
| а | Public exhibition | d | Loan or exch | nange program | | | |
| b | Scholarly research | е | Other | | | | |
| C | Preservation for future generations | and the second | | | | | |
| 4 | Provide a description of the organization's co | ellections and explain | how they further the | e organization's exe | mpt purpose in Part | XIII. | |
| 5 | During the year, did the organization solicit of | | | | | | |
| Ū | to be sold to raise funds rather than to be ma | | | The second secon | p | Yes | ☐ No |
| Pai | TIV Escrow and Custodial Arrang | | | | | | |
| | reported an amount on Form 990, Par | | ion in organization | 14,00000 | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | , | |
| 10 | Is the organization an agent, trustee, custodia | | ary for contributions | or other assets not | included | | |
| Ia | on Form 990, Part X? | | = | | _ | Yes | □ No |
| la. | If "Yes," explain the arrangement in Part XIII | | | | | | |
| U | II 195, explain the arrangement in Part Ain a | and complete the foil | Owing table. | | | Amount | |
| | Desiration balance | | • | | 1c | | |
| C | Beginning balance | | | | ··· | | |
| a | Additions during the year | | | | | | |
| е | Distributions during the year | | | | l I | | |
| f | Ending balance | | | | | ٦,, | П. |
| | Did the organization include an amount on Fo | | | | | Yes | ⊢ No |
| | If "Yes," explain the arrangement in Part XIII. | | | | | | |
| Pai | tV Endowment Funds. Complete i | | | | (d) Three years back | (e) Four ye | nara baak |
| | | (a) Current year | (b) Prior year | (c) Two years back | ' ' | | |
| 1a | Beginning of year balance | 3,491,387. | 3,217,468. | 3,163,073. | 3,007,742 | , 3,0 | 07,742. |
| b | Contributions | | | | | | ~~ |
| C | Net investment earnings, gains, and losses | -526,572. | 374,170. | 371,934. | | | 80,646, |
| d | Grants or scholarships | 325,192. | 78,509. | 297,592. | 86,592 | | 82,568, |
| е | Other expenditures for facilities | | | | 1 | | |
| | and programs | | | | | | |
| f | Administrative expenses | 23,292. | 21,742. | 19,947. | 20,748 | | 20,424. |
| g | End of year balance | 2,616,331. | 3,491,387. | 3,217,468. | 3,163,073 | . 2,7 | 24,104. |
| 2 | Provide the estimated percentage of the curr | ent year end balance | (line 1g, column (a) |) held as: | | | |
| _ | Board designated or quasi-endowment | | % | , | | | |
| b | Permanent endowment | % | | | | | |
| ~ | | /5 % | | | | | |
| G | The percentages on lines 2a, 2b, and 2c sho | | | | | | |
| 2 | Are there endowment funds not in the posse | | tion that are held ar | nd administered for t | he | | |
| Ja | | ssion of the organiza | tion that are need ar | d administered for t | | ΓÝ | es No |
| | organization by: | | | | | | X |
| | (i) Unrelated organizations | | | | | 1 1 | $-\frac{x}{x}$ |
| | (ii) Related organizations | | | | | | 12 |
| b | If "Yes" on line 3a(ii), are the related organiza | | | *************************************** | | ., 3b | |
| 4 | Describe in Part XIII the intended uses of the | organization's endo | wment funds. | | | | |
| ۲a۱ | t VI Land, Buildings, and Equipm | | D 11.7 Phys. 44 22 | F 000 D | / lime 10 | | |
| | Complete if the organization answere | | 1 | | | | |
| | Description of property | (a) Cost or o | 1 , , | 1 , , | Accumulated | (d) Book | value |
| | | basis (investri | nent) basis | (other) d | epreciation | | |
| 1a | Land | | | | Spiriture and the spiriture an | <u></u> | |
| b | Buildings | | | | | | |
| С | Leasehold improvements | | | | | | |
| d | Equipment | | | | | | |
| | Other | | | | | | |
| | L Add lines to through to 10-10-10 of must a | | V I (D) line 1 | 0.1 | | | 0. |

Schedule D (Form 990) 2022

| Part VII | | E-w- 000 Davi II/ Kan | 11h Con Farma 000 Bent V line 10 | |
|--------------------|--|---|---|--|
| (a) Descrip | Complete if the organization answered "Yes" of the organization of security or category (including name of security) | (b) Book value | (c) Method of valuation: Cost or end | of-year market value |
| | | ODIAV NOOL (U) | (c) Welliod of Valdation. Cost of old | or your market value |
| | al derivativesheld equity interests | | | |
| (3) Other | Tield equity interests | | | |
| | | | | |
| (A) (B) | | | | |
| (C) | | | | |
| (D) | | | | |
| (E) | | | | |
| (F) | | | | |
| (G) | | | | |
| (H) | | | | |
| | b) must equal Form 990, Part X, col. (B) line 12.) | - | | The second secon |
| | Investments - Program Related. | | | |
| grander, to an inc | Complete if the organization answered "Yes" | on Form 990, Part IV, line | 11c. See Form 990, Part X, line 13. | |
| | (a) Description of investment | (b) Book value | (c) Method of valuation: Cost or end | -of-year market value |
| (1) | | • | | |
| (2) | | | | * |
| (3) | | | | |
| (4) | | | | |
| (5) | | | | |
| (6) | | | | |
| (7) | | | | |
| (8) | | | | |
| (9) | | | | , , , |
| | b) must equal Form 990, Part X, col. (B) line 13.) | | | A man and a man |
| Part IX | Other Assets. | | | |
| - L. V. V. 100. | Complete if the organization answered "Yes" | on Form 990, Part IV, line | 11d. See Form 990, Part X, line 15. | |
| | (a) | Description | | (b) Book value |
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | , | | | |
| (5) | | | | |
| (6) | | | | |
| (7) | | | | |
| (8) | | | | |
| (9) | | | | |
| | ımn (b) must equal Form 990, Part X, col. (B) line | 9 15.) | *************************************** | |
| Part X | Other Liabilities. | | | |
| | Complete if the organization answered "Yes" | on Form 990, Part IV, line | 11e or 11f. See Form 990, Part X, line 25 | |
| 1. | (a) Description of liability | | | (b) Book value |
| | leral income taxes | | | |
| (2) DU | E TO AFFILIATE | | | 14,750. |
| (3) | | | | |
| (4) | | - | | |
| (5) | | | | |
| (6) | | | | |
| (7) | | | | - |
| (8) | | | | |
| (9) | | | | |
| | ımn (b) must equal Form 990. Part X, col. (B) line | 25.) | | 14,750. |
| 2. Liability | for uncertain tax positions. In Part XIII, provide | the text of the footnote to | the organization's financial statements t | hat reports the |
| | ation's liability for uncertain tax positions under | | | |

SCHEDULEI (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

| Attach to Form 990. | So to wasse fre any/Enrmgon for the latest information |
|---------------------|--|

FOUNDATION

×

THE COMMUNITY

OMB No. 1545-0047

Open to Public Inspection

Employer identification number 23-2656276

| Part General Information on Grants and Assistance | nd Assistance | | | | | | |
|--|--|---|-----------------------------------|----------------------------------|---|---|---------------------------------------|
| 1 Does the organization maintain records to substantiate the amount of the criteria used to award the grants or assistance? | to substantiate the | amount of the grants | or assistance, the g | grantees' eligibility | for the grants or assis | ne grants or assistance, the grantees' eligibility for the grants or assistance, and the selection | in X Yes No |
| 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. | cedures for monit | oring the use of grant f | funds in the United | States. | | | |
| 등 | Domestic Organii \$5,000. Part II can | zations and Domestic be duplicated if addition | Governments. Conal space is neede | omplete if the orga ed. | nization answered "Y | Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any of if additional space is needed. | IV, line 21, for any |
| 1 (a) Name and address of organization or government | (b) EIN | (o) IRC section (if applicable) | (d) Amount of cash grant | (e) Amount of noncash assistance | (f) Method of valuation (book, EMV, appraisal, other) | (g) Description of noncash assistance | (h) Purpose of grant or assistance |
| THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF DELAWARE COUNTY - 2104 GARRETT ROAD - LANSDOWNE, PA 19050 | 23-1614045 | 501(C)(3) | 325,192. | • 0 | | | OVERALL SUPPORT FOR THE ORGANIZATION. |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | · | |
| | | | | | | | |
| 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3 Enter total number of other organizations listed in the line 1 table | nd government or s listed in the line | ganizations listed in the table | e line 1 table | | | | |
| ۱, | , see the Instructi | ions for Form 990. | | | | | Schedule I (Form 990) 2022 |

Schedule I (Form 990) 2022

232102 10-31-22

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

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

ZUZZ

OMB No. 1545-0047

pen to Public Inspection

Internal Revenue Service
Name of the organization

Department of the Treasury

THE COMMUNITY Y FOUNDATION

Employer identification number 23-2656276

| c.e. | Questions Regarding Compensation | | Yes | No |
|------|--|--|----------------------|--------------------------|
| 1a | Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, | to a second seco | | |
| | Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. | | | 12-12-12-1 |
| | First-class or charter travel Housing allowance or residence for personal use | | | ypuriu. Paga |
| | Travel for companions Payments for business use of personal residence | | | |
| | Tax indemnification and gross-up payments Health or social club dues or initiation fees | | | |
| | Discretionary spending account Personal services (such as maid, chauffeur, chef) | | | |
| | Stockhold har y sportating aboots it. | | | (1242-133) (1242-133) |
| h | If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or | | | |
| b | reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain | 1b | | |
| ^ | Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, | 22-22-33 1D | | |
| 2 | | 2 | 5-77-5-1-E | 1,2211,000 |
| | trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? | 2 | Proceed: | anaki. |
| _ | | The state of the s | | |
| 3 | Indicate which, if any, of the following the organization used to establish the compensation of the organization's | | | PARTY TO |
| | CEO/Executive Director, Check all that apply. Do not check any boxes for methods used by a related organization to | | | |
| | establish compensation of the CEO/Executive Director, but explain in Part III. | | | |
| | Compensation committee Written employment contract | | | 1 |
| | independent compensation consultant Compensation survey or study | | | (|
| | Form 990 of other organizations Approval by the board or compensation committee | Carlotte and the | | |
| | | | | And the second |
| 4 | During the year, dld any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing | 7.57 | 7.5 | |
| | organization or a related organization: | Committee of the commit | λ (*) (| |
| а | Receive a severance payment or change-of-control payment? | 4a | | X |
| b | Participate in or receive payment from a supplemental nonqualified retirement plan? | 4b | | Х |
| С | - 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | 4c | | X |
| | if "Yes" to any of lines 4a.c, list the persons and provide the applicable amounts for each item in Part III. | | | 7.7 |
| | | | - 127/124 | |
| | Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. | A Maria of the Control of the Contro | | 1000 |
| 5 | For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation | 200 | Andreas and a second | |
| • | contingent on the revenues of: | Section 1 to the section of the sect | | |
| а | | 5a | | Х |
| | Any related organization? | 5b | 1 | Х |
| Ŋ | If "Yes" on line 5a or 5b, describe in Part III. | S | 1011 | |
| e | For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation | 7 | | 100 |
| 6 | contingent on the net earnings of: | | | |
| | | 6a | | X |
| a | The organization? | 6b | | x |
| b | Any related organization? | OD | | - 22 |
| | if "Yes" on line 6a or 6b, describe in Part III. | 77777 - 7777 7777 - 7777 7777 - 7777 7777 - 7777 | | |
| 7 | For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments | | | Х |
| | not described on lines 5 and 6? If "Yes," describe in Part III | 7 | | <u>^</u> |
| 8 | Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the | | | 77 |
| | initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III | 8 | , | X |
| 9 | If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in | ustrae a | | 1 |
| | Regulations section 53.4958-6(c)? | 9 | | L |

Schedule J (Form 990) 2022

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

THE COMMUNITY Y FOUNDATION

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(0-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

| | | (B) Breakdown of W-2 and/or 1099-MiSC and/or 1099-NEC | 2 and/or 1099-MISC | and/or 1099-NEC | (C) Retirement and | (D) Nontaxable | (E) Total of columns | (F) Compensation |
|--------------------|----------|---|-------------------------------------|-------------------------------------|--------------------------------|----------------|----------------------|--|
| (A) Name and Title | | (f) Base compensation | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | other deferred compensation | benefits | (a)-(b)(a) | in column (B) reported as deferred on prior Form 990 |
| (1) MICHAEL RANCE | E ! | 7 11 | 0 | 0 | 0.000 | 16 075 | 106 600 | 0.0 |
| PRESIDENT | | 152,724. | 0 | • | - | ~ | - | ZI/,0/4. |
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| | | | | | | | Sched | Schedule J (Form 990) 2022 |

Schedule J (Form 990) 2022

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization

THE COMMUNITY Y FOUNDATION

Employer identification number 23-2656276

| FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: |
|---|
| CHRISTIAN ASSOCIATION OF DELAWARE COUNTY, ALSO A 501(C)(3) |
| ORGANIZATION. IT SHARES THE MISSION OF SERVICE TO THE COMMUNITY OF |
| CYEDC, WHICH IS A CHARITABLE ASSOCIATION FOUNDED ON CHRISTIAN |
| PRINCIPLES, DEDICATED TO BUILDING A HEALTHY SPIRIT, MIND AND BODY. THEY |
| ARE COMMITTED TO BEING A POSITIVE PART OF FAMILY LIFE BY PROMOTING THE |
| VALUES OF CARING, HONESTY, RESPECT AND RESPONSIBILITY. |
| |
| FORM 990, PART VI, SECTION B, LINE 11B: |
| FOR 990 IS PROVIDED TO THE FOUNDATION BOARD OF TRUSTEES FOR REVIEW PRIOR TO |
| BEING FILED. THE AUDITORS WHO PREPARED THE FORMS WITH INPUT FROM THE CEO |
| AND THE FINANCE DIRECTOR, PRESENT AND EXPLAIN FORM 990 TO THE COMMITTEE AND |
| ANSWER ANY QUESTIONS. |
| |
| FORM 990, PART VI, SECTION B, LINE 12C: |
| ANNUAL CONFLICT OF INTEREST AFFIRMATION STATEMENTS ARE RECEIVED FROM THE |
| OFFICERS AND DIRECTORS. PERIODIC REVIEWS OF THE POLICY ARE DONE BY THE |
| EXECUTIVE COMMITTEE. IF IT IS DETERMINED THAT A CONFLICT OF INTEREST |
| EXISTS, THE POLICY IS ENFORCED BY MAKING SURE THE PERSON WITH THE CONFLICT |
| DOES NOT PARTICIOATE IN THE DECISION MAKING PROCESS. THE RESOLUTION MADE |
| BY THE INDEPENDENT BODY IS DOCUMENTED. |
| |
| FORM 990, PART VI, SECTION C, LINE 19: |
| |

THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTERESTR POLICY AND

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

Schedule O (Form 990) 2022

Name of the organization **Employer identification number** THE COMMUNITY Y FOUNDATION 23-2656276 FINANCIALS ARE AVAILABLE TO THE PUBLIC UPON REQUEST. FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 FORM 990 IS PROVIDED TO THE FOUNDATION BOARD OF TRUSTEES FOR REVIEW PRIOR TO BEING FILED. THE AUDITORS WHO PREPARED THE FORMS WITH INPUT FROM THE CEO AND THE FINANCE DIRECTOR, PRESENT AND EXPLAIN FORM 990 TO THE COMMITTEE AND ANSWER ANY QUESTIONS. FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICT POLICY ANNUAL CONFLICT OF INTEREST AFFIRMATION STATEMENTS ARE RECEIVED FROM THE OFFICERS AND DIRECTORS. PERIODIC REVIEWS OF THE POLICY ARE DONE BY THE EXECUTIVE COMMITTEE. IF IT IS DETERMINED THAT A CONFLICT OF INTEREST EXISTS, THE POLICY IS ENFORCED BY MAKING SURE THE PERSON WITH THE CONFLICT DOES NOT PARTICIOATE IN THE DECISION MAKING PROCESS. THE RESOLUTION MADE BY THE INDEPENDENT BODY IS DOCUMENTED. FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTERESTR POLICY AND FINANCIALS ARE AVAILABLE TO THE PUBLIC UPON REQUEST. FORM 990, PART XII, LINE 2C: THE ORGANIZATION'S BOARD OF DIRECTORS HAS AN AUDIT COMMITTEE IN CHARGE SELECTING THE ORGANIZATION'S EXTERNAL AUDITOR, OVERSEEING THE AUDIT PROCESS, AND REVIEWING THE AUDIT RESULTS EACH YEAR. THE COMMITTEE MEETS REGULARLY TO ACCOMPLISH THIS TASK. NO CHANGES IN THE PROCESS HAVE OCCURRED IN THE CURRENT YEAR.

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Related Organizations and Unrelated Partnerships Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

Open to Public Inspection 2022

OMB No. 1545-0047

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

Part. | Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

THE COMMUNITY Y FOUNDATION

Employer identification number 23-2656276

| (a) Name, address, and EIN (if applicable) of disregarded entity | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Total income | (e) End-of-year assets | | (f) Direct controlling entity |
|---|---------------------------------------|---|-------------------------------|--|-------------------------------|---------------------------------------|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Part II Identification of Related Tax-Exempt Organizations. Complete organizations during the tax year. | tions. Complete if the organization a | if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax exempt | Part IV, line 34, be | cause it had one | or more related tax-exe | npt |
| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Exempt Code section | (e) Public charity status (if section 501(c)(3)) | (f) Direct controlling entity | Section 512(b)(13) controlled entity? |
| THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF DELAWARE COUNTY - 23-1614045, 2104 GARRETT ROAD. LANSDOWNE PA. 19050 | NON-PROFIT | PENNSYLVANIA | 501(C)(3) | LINE 10 | N/A | |
| | | | | | | |
| | | | | | | |
| | | | : | | | |

For Paperwork Reduction Act Notice, see the Instructions for Form 990. SEE PART VII FOR CONTINUATIONS

Schedule R (Form 990) 2022

232161 09-14-22 LHA

THE COMMUNITY Y FOUNDATION Schedule R (Form 990) 2022

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year. PartIII

| (f) (k) General or Percentage | ownersnip | | | | re related | Section 512(b)(13) controlled entity? | 1 | | | | | Schedule R (Form 990) 2022 |
|----------------------------------|--|-------|---|------------------|--|--|-------|-------|---|---------|-------|----------------------------|
| (j) Seneral or managing | partner? | | | | е от то | (h) Percentage ownership | | | | | | R (Forn |
| | 20 of Schedule K-1 (Form 1065) | | | | Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related | (g) Share of Pero end-of-year own assets | | | | | | Schedule |
| te . | allocations? | | | | art IV, line 34, | | | | | | | |
| (g) Share of | end-or-year assets | | | | Form 990, Pa | (f) / Share of total income | | | | <u></u> | | |
| tal | # ## ## ## ## ## ## ## ## ## ## ## ## # | | *************************************** | | ered "Yes" on | (e) Type of entity (C corp., S corp, or trust) | | | | | | |
| | | | | | ation answ | (d) Direct controlling entity | | | · | | | |
| (e) Inant income | excluded from tax under sections 512-514) | | | | the organiz | | | | | | | |
| Predom | excluded section | | | | Complete if | (C) Legal domicile (state or foreign country) | | | | | | |
| (d) Direct controlling | ÁTILI A | | | | ration or Trust. (| (b) Primary activity | | | | | | |
| (c) Legal domicile | (state or foreign country) | • | | | as a Corpo | Prim | | | | | | |
| (b) Primary activity | | | | | janizations Taxable a | Z c | | | | | | |
| (a) Name, address, and EIN | oi lelated otganization | | | | Part IV Identification of Related Organizations Taxable as a Corporation or Trust. organizations treated as a corporation or trust during the tax year. | (a) Name, address, and EIN of related organization | | | | | | 232162 09-14-22 |
| | | 1 1 1 | | 1 1 1 | 1 inchia | r | 1 1 1 | , , , | | 1 I I | 1 1 1 | ■ (4 |

Page 3

Schedule R (Form 990) 2022 THE COMMUNITY Y FOUNDATION

| Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. | | | | | Yes | Š |
|---|----------------------------------|---|--|--------------|--------|------|
| 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? | s with one or more re | lated organizations listed | in Parts II-IV? | | | |
| a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity | > | | | <u> 6</u> | | × |
| b Giff, grant, or capital contribution to related organization(s) | | | | 2 | × | |
| Œ | | | | ŕ | | × |
| | | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | 2 ; | | |
| | | | | 2 | † | 1 |
| e Loans or loan guarantees by related organization(s) | | *************************************** | | 9 | | × |
| | | | | | | |
| f Dividends from related organization(s) | | | | # | | × |
| | | | | 1g | | × |
| Purchase of assets from related organiza | | | | ÷ | | × |
| Exchange of assets with related organization(s) | | | | ÷ | | M |
| : Loco of facilities continued to other escate to related organization(s) | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | Ţ | | × |
| Lease of lactities, equipment, of ourer assets to related organization(s) | | | | | | 1 |
| k lease of facilities, equipment or other assets from related organization(s) | | | | ¥ | | M |
| | mization(s) | | | = | | × |
| | nization(s) | | | Ę | | × |
| | incauon(e) | | | Ş | | × |
| n Snaring of facilities, equipment, mailing lists, of other assets with related organization(s) | (s) | | | = | | 4 |
| Sharing of paid employees with related organization(s) | | | | 9 | | × |
| | | | | | | |
| p Reimbursement paid to related organization(s) for expenses | | | | 1 | × | |
| | | | - | 19 | | × |
| | | | | | | |
| r Other transfer of cash or property to related organization(s) | | | | Ť | | × |
| | | | | | | × |
| S Outlet Dansier of cash of property from related organization (s) | d+ o+olamoo +olamood | bereiter parketleri enil ei | eletionships and transportion thresholds | 2 | | : |
| Z If the answer to any of the above is "Yes, "see the instructions for injuringuous on w | vio mast complete u | ine, including covered | Flational lips at la dalescuol d'hestions. | | | |
| (a) Name of related organization | (b) Transaction type (a-s) | (c) Amount involved | (d) Method of determining amount involved | volved | | |
| THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF | В | 325,192. | PERCENTAGE OF ASSETS | | | |
| | | | | Ì | | |
| | | | | | | |
| (8) | | | | | | |
| (4) | | | | | | |
| (5) | | : | | | | |
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| (9) | | | | | | 1 |
| 232163 09-14-22 | | | Schedule R (Form 990) 2022 | R (Form | (066 (| 2022 |

232163 09-14-22

Page 4

Schedule R (Form 990) 2022

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

| Name, address, and EIN of entity | | | | | | 9 | - | 3 | 3 | Š |
|----------------------------------|------------------|------------------------|---|-----------------------------|-------------|-----------------------------|---------------------------------------|---|------------------------------------|-------------------------|
| | Primary activity | nicile preign y) | Predominant income partners sec. (related, unrelated, 50(6)(8) excluded from tax under ons. 2 sections 512-514) | Share of total total income | - | Share of end-of-year assets | Dispropor- tionate allocations? | Code V-UBi General or Percentage amount in box 20 managing ownership of Schedule K-1 partner? | General or managing partner? | Percentage ownership |
| | | | 1 (2) | | : | | 3 | | 3 | |
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| Schedule R (Form 990) 2022 THE COMMUNITY Y FOUNDATION | 23-2000270 Page 5 |
|--|--|
| Part VIII Supplemental Information Provide additional information for responses to questions on Schedule R. See instructions. | |
| PART II, IDENTIFICATION OF RELATED TAX-EXEMPT ORGANIZATIONS: | |
| FART 11, IDENTIFICATION OF REDATED TAX-EXEMPT ORGANIZATIONS. | |
| | |
| NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION: | |
| THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF DELAWARE COUNTY | |
| EIN: 23-1614045 | |
| 2104 GARRETT ROAD | |
| LANSDOWNE, PA 19050 | |
| PRIMARY ACTIVITY: NON-PROFIT | |
| DIRECT CONTROLLING ENTITY: N/A | |
| DIRECT CONTROLLING ENTITY: N/A | |
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The Community Y Foundation
Financial Statements
December 31, 2022 and 2021



The Community Y Foundation

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| STATEMENTS OF ACTIVITIES | 4 |
| STATEMENTS OF CASH FLOWS | 5 |
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To the Board of Trustees The Community Y Foundation Lansdowne, PA 19050

INDEPENDENT AUDITOR'S REPORT

Opinion

We have audited the accompanying financial statements of The Community Y Foundation (a nonprofit organization), which comprise the statements of financial position as of December 31, 2022 and 2021 and the related statements of activities and cash flows for the year then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of The Community Y Foundation as of December 31, 2022 and 2021, and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of The Community Y Foundation and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about The Community Y Foundation's ability to continue as a going concern within one year after the date that the financial statements are available to be issued.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute

assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit
 procedures that are appropriate in the circumstances, but not for the purpose of expressing an
 opinion on the effectiveness of The Community Y Foundation's internal control. Accordingly,
 no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about The Community Y Foundation's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control related matters that we identified during the audit.

Durace + Stanton
SURACE & STANTON, LLC
Certified Public Accountants

Broomall, PA

April 18, 2023

THE COMMUNITY Y FOUNDATION STATEMENTS OF FINANCIAL POSITION DECEMBER 31,

(See Independent Auditor's Report)

ASSETS

| | 2022 | 2021 | | | |
|----------------------------------|--------------|--------------|--|--|--|
| Current Assets | | | | | |
| Cash and cash equivalents | \$ 233,811 | \$ 373,094 | | | |
| Investment income receivable | 572 | 1,669 | | | |
| Investments | 6,085,284 | 7,544,731 | | | |
| Total Current Assets | \$ 6,319,667 | \$ 7,919,494 | | | |
| LIABILITIES AND NET ASSETS | | | | | |
| Current Liabilities | | | | | |
| Due to affiliate | \$ 14,750 | \$ 28,966 | | | |
| Net Assets | | | | | |
| Without donor restrictions | 3,721,769 | 4,432,324 | | | |
| With donor restrictions | 2,583,148 | 3,458,204 | | | |
| Total Net Assets | 6,304,917 | 7,890,528 | | | |
| TOTAL LIABILITIES AND NET ASSETS | \$ 6,319,667 | \$ 7,919,494 | | | |

THE COMMUNITY Y FOUNDATION
STATEMENTS OF ACTIVITIES
FOR THE YEARS ENDED DECEMBER 31,
(See Independent Auditor's Report)

| | | | | 2022 | | | | | 2021 | 21 | | |
|--|-------------|-------------------------------|------|----------------------------|--------------|----------------|-------------|-------------------------------|----------------|----------------------------|----|-----------|
| | Withol Rest | Without Donor Restrictions | Witt | With Donor Restrictions | Total | | With Res | Without Donor Restrictions | With Restri | With Donor Restrictions | | Total |
| Revenue Investment return, net | ↔ | 62,191 | ь | 45,597 | \$ 107,788 | 788 | €9 | 103,374 | ₩ | 81,377 | ↔ | 184,751 |
| Net realized and unrealized gain (loss) on investments | | (757,996) | | (595,461) | (1,353,457) | 457) | | 324,918 | 7 | 271,051 | | 595,969 |
| Total Public Support and Revenue |) | (695,805) | | (549,864) | (1,245,669) | (699 | | 428,292 | n | 352,428 | | 780,720 |
| Net Assets Released from Restrictions Restrictions satisfied by payments | | 325,192 | | (325, 192) | | - | | 75,180 | | (75,180) | | 1 |
| Total Revenue (Loss) and Net Assets Released From Restrictions | | (370,613) | | (875,056) | (1,245,669) | (699 | | 503,472 | 6 | 277,248 | | 780,720 |
| Expenses Program services Support - The Young Men's Christian Association of Delaware County | | 325,192 | | ı | 325,192 | 192 | | 118,564 | | 1 | | 118,564 |
| Supporting services Management and general Professional fees Administrative fees | | 9,750 | | 1 1 | ວັ ເກັ | 9,750 5,000 | | 9,250 | | 1 1 | | 9,250 |
| Total Supporting Services | | 14,750 | | 1 | 14, | 14,750 | | 14,250 | | 1 | | 14,250 |
| Total Expenses | | 339,942 | | 1 | 339,942 | 942 | | 132,814 | | 1 | | 132,814 |
| Change in Net Assets |) | (710,555) | | (875,056) | (1,585,611) | 511) | | 370,658 | Ø | 277,248 | | 647,906 |
| Net Assets - Beginning | 4 | 4,432,324 | 8 | 3,458,204 | 7,890,528 | 528 | | 4,061,666 | 3,1 | 3,180,956 | | 7,242,622 |
| NET ASSETS - ENDING | , 8 | 3,721,769 | \$ | 2,583,148 | \$ 6,304,917 | 917 | s | 4,432,324 | \$ 3,4 | 3,458,204 | \$ | 7,890,528 |

THE COMMUNITY Y FOUNDATION STATEMENTS OF CASH FLOWS FOR THE YEARS ENDED DECEMBER 31,

(See Independent Auditor's Report)

| | 2022 | 2021 | |
|---|--------------------------------|-----------------------------------|--|
| Cash Flows From Operating Activities Change in net assets Adjustments to reconcile change in net assets to cash provided (used) by operating activities | \$ (1,585,611) | \$ 647,906 | |
| Realized and unrealized gain (loss) on investments Reinvestment of dividend income Decrease (increase) in investment income receivable | 1,353,457 (27,555) 1,097 | (595,969) (172,927) (1,669) | |
| Net Cash Provided (Used) By Operating Activities | (258,612) | (122,659) | |
| Cash Flows From Investing Activities Proceeds from sale of investments Purchase of investments | 5,937,771 (5,804,226) | 1,216,453 (1,030,312) | |
| Net Cash Provided By Investing Activities | 133,545 | 186,141 | |
| Cash Flows From Financing Activities Increase (decrease) in due to affiliate | (14,216) | 27,669 | |
| Net Cash Provided (Used) By Investing Activities | (14,216) | 27,669 | |
| Increase in Cash and Cash Equivalents | (139,283) | 91,151 | |
| Cash and Cash Equivalents - Beginning | 373,094 | 281,943 | |
| CASH AND CASH EQUIVALENTS - ENDING | \$ 233,811 | \$ 373,094 | |
| Supplemental Schedules of Non-Cash Investing Activity Reinvestment of dividends | \$ 27,555 | \$ 172,927 | |

NOTE 1 Summary of Significant Accounting Policies

Nature of Operations

The Community Y Foundation (the Foundation) was organized on August 12, 1991 under the laws of Pennsylvania as a nonprofit organization.

The Foundation is a charitable association whose purpose is to hold in trust title to all the endowment funds and other similar property of The Young Men's Christian Association of Delaware County D/B/A The Community YMCA of Eastern Delaware County (the Community YMCA), and to expand, invest and disburse funds for the benefit of the association.

The Foundation's support comes primarily from members of the community.

Basis of Presentation

The financial statements are presented in accordance with the Financial Standards Accounting Board (FASB) Accounting Standard Codification (ASC) 958 *Not-for-Profit Entities*. Under the provisions of this guidance, net assets, revenues, and gains and losses are classified based on the existence or absence of donor-imposed restrictions. Accordingly, net assets and changes therein are classified and reported as follows:

<u>Net Assets Without Donor Restrictions-</u> Net assets available for general use and are not subject to donor restrictions. The Foundation's board may designate assets without restrictions for specific operational purposes from time to time.

Net Assets With Donor Restrictions- Net assets subject to stipulations imposed by donors. Some donor-imposed restrictions are temporary in nature, such as those that will be met by the passage of time or other events specified by the donor. Other donor restrictions are perpetual in nature, where the donor stipulates the resources maintained in perpetuity. The Community YMCA reports contributions restricted by donors as increases in net assets without donor restrictions if the restrictions expire (that is, when a stipulated time restriction ends or purpose restriction is accomplished) in the reporting period in which the revenue is recognized. All other donor-restricted contributions are reported as increases in net assets with donor restrictions, depending on the nature of the restrictions. When a restriction expires, net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the statements of activities as net assets released from restrictions.

Contributions and Grants

Cash contributions received are recorded as net assets with restrictions or without restrictions depending on the existence or nature of any donor restrictions. Non-cash contributions received are recorded at fair market value as net assets with restrictions or without restrictions depending on the existence and/or nature of donor restrictions. Contributions and grants are recognized when a donor makes a promise to give to the organization that is, in substance, unconditional. Donor restricted contributions and grants are reported as increases in net assets with restrictions depending on the nature of the restriction. When a restriction is satisfied (when a stipulated time restriction ends or purpose restriction is accomplished), net assets with restrictions are reclassified to net assets without restrictions.

NOTE 1 Summary of Significant Accounting Policies (cont'd)

Contributed Services

Volunteers contribute significant amounts of time to our program services, administration, and fundraising and development activities; however, the financial statements do not reflect the value of these contributed services because they do not meet recognition criteria prescribed by generally accepted accounting principles. No significant contributions of such goods or services were received during the years ended December 31, 2022 and 2021.

Cash and Cash Equivalents

For purposes of the statements of cash flows, the Foundation considers all unrestricted highly liquid investments with an original maturity of three months or less to be cash equivalents. As of December 31, 2022 and 2021, the Foundation held \$200,705 and \$339,911 in cash equivalents which were considered Level 1 investments.

Investments

Investments in marketable securities with readily determinable fair values and all investments in debt securities are reported at their quoted market values on the statements of financial position. Unrealized gains and losses are included in the statements of activities. Investment earnings are presented net of investment fees.

Functional Allocation of Expenses

The costs of providing financial support and the supporting service have been presented on a functional and natural basis in the statements of activities. Direct expenses are charged directly to the program or supporting service benefited.

Income Tax

The Foundation is a non-profit organization, exempt from federal income taxes under Section 501(c)(3) of the U.S. Internal Revenue Code. In addition, the Internal Revenue Service has determined the Foundation is not a private foundation.

The Foundation is required to recognize, measure, classify, and disclose in the financial statements uncertain tax positions taken or expected to be taken in the Foundation's tax returns. Management has determined that the Foundation does not have any uncertain tax positions and associated unrecognized benefits that materially impact the financial statements or related disclosures. Since tax matters are subject to some degree of uncertainty, there can be no assurance that the Foundation's tax returns will not be challenged by the taxing authorities and that the Foundation will not be subject to additional tax, penalties, and interest as a result of such challenge. Generally, the Foundation's tax returns remain open for three years for examination by applicable taxing authorities.

NOTE 1 Summary of Significant Accounting Policies (cont'd)

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

Reclassifications

Certain reclassifications may have been made to the 2021 financial statements presentation in order to conform to the 2022 financial statements presentation. Such reclassifications had no effect on the recorded income.

Subsequent Events

The Foundation has evaluated subsequent events through April 18, 2023, which represents the date the financial statements were available to be issued.

NOTE 2 Liquidity and Availability

Financial assets available for general expenditure, that is without donor or other restrictions limiting their use, within one year of the statements of financial position date, comprise the following:

| | 2022 | | 2021 |
|---|-------------------------|-----------|------------------|
| Financial assets at year-end: | | | |
| Cash and cash equivalents | \$ 233,811 | \$ | 373,094 |
| Investment income receivable | 572 | | 1,669 |
| Investments | 6,085,284 | | 7,544,731 |
| Total financial assets at year end | 6,319,667 | | 7,919,494 |
| Less amounts not available to be used within one year: | | | |
| Net assets with donor restrictions in endowment | 2,583,148 | | <u>3,458,204</u> |
| Financial assets available to meet general expenditures | | | |
| over the next twelve months | \$ 3,73 <u>6,519</u> | <u>\$</u> | 4,461,290 |

NOTE 2 Liquidity and Availability (cont'd)

The Community Y Foundation's endowment fund consists of a donor-restricted endowment. Income from this donor-restricted endowment is restricted for the benefit of the Community YMCA and the corpus is not available for general expenditure.

As part of the Foundation's liquidity management, it has a policy to structure its financial assets to be available as its general expenditures and other obligations come due.

NOTE 3 Concentration of Credit Risk

Financial instruments which potentially subject the Foundation to concentrations of credit risk consist primarily of cash. Cash in excess of the Foundation's operating requirements is placed in insured demand deposit accounts with a financial institution. At times throughout the year the Foundation may maintain certain bank accounts in excess of the FDIC insured limits. As of December 31, 2022 and 2021, there were no amounts on deposit at institutions that exceeded the \$250,000 federally insured limits. The Foundation does not believe that these accounts are exposed to any significant risk.

The Foundation maintains its investments at one financial institution covered by the Securities Investor Protection Corporation ("SIPC"). SIPC, a non-government entity, replaces missing stocks and other securities in customer accounts held by its members up to \$500,000, including up to \$250,000 in cash, if a member brokerage or bank brokerage subsidiary fails. At December 31, 2022 and 2021, the Foundation's cash balances with investment institutions totaled \$200,705 and \$339,911, all of which was not covered by SIPC.

NOTE 4 Related Party Transactions

The Community Y Foundation contributed \$325,192 and \$118,564 to the Community YMCA for the years ended December 31, 2022 and 2021, respectively.

The Community YMCA provides administrative support to the Foundation. Administrative support includes employee payroll and benefits allocated to the Foundation based on actual hours worked. Total costs allocated to the Foundation amounted to \$5,000 for the years ended December 31, 2022 and 2021.

NOTE 5 Fair Value Measurements

The Foundation's investments are reported at fair value. The FASB defines fair value as the price that would be received for an asset or paid to transfer a liability in the Foundation's principal or most advantageous market in an orderly transaction between market participants on the measurement date.

The accounting guidance provides a common definition of fair value and establishes a framework for conducting fair value measurements. The guidance establishes a fair value hierarchy of three levels based upon the transparency and availability of information used in measuring the fair value of assets or liabilities as of the measurement date. The levels are categorized as follows:

NOTE 5 Fair Value Measurements (cont'd)

Level 1 – Valuation is based on quoted prices for identical instruments in active markets. The Foundation values its common stock equity securities, U.S. Treasury securities, mutual funds and exchange traded funds using Level 1 inputs.

Level 2 – Valuation is based on quoted prices for similar instruments in active markets, quoted prices for identical or similar instruments in markets that are not active, and model derived valuations whose inputs are observable. The Foundation values its U.S. Government-sponsored securities and corporate bonds using Level 2 inputs.

Level 3 – Valuation is based on unobservable inputs that are supported by little or no market activity and that are significant to the fair value of assets or liabilities. Level 3 assets and liabilities include financial instruments whose value is determined using pricing models, or similar techniques, as well as instruments for which the determination of fair value requires significant judgement by management.

The fair value of an asset or liability may include inputs from more than one level in the fair value hierarchy. The lowest level of significant inputs used to value the asset or liability determines which level the asset or liability is classified in its entirety. Transfers between levels of the fair value hierarchy are reported at fair value as of the beginning of the period in which the transfers occur. During the years ended December 31, 2022 and 2021, the Foundation did not have any transfers between levels.

The following tables disclose the Foundation's investments at fair value as of December 31, 2022 and 2021:

| D | b | 24 | വ | ררו |
|-------|------|------|-----|-----|
| Decei | nber | IJΙ, | ιZU | 144 |

| Investment at fair value: Le | | Level 1 Lev | | Level 2 | | vel 3 |
|---------------------------------|-----------|-------------|----|----------|--|-------|
| Equity funds | \$ | 5,684,163 | \$ | - | \$ | - |
| Fixed income funds | | 220,693 | | _ | | - |
| REIT funds | | 90,159 | | - | | - |
| Commodities funds | | 90,269 | | | ······································ | |
| Total investments at fair value | <u>\$</u> | 6,085,284 | \$ | · - | \$ | |

December 31, 2021

| Investment at fair value: | Level 1 | Level 2_ | Level 3 |
|---------------------------------|---------------------|-----------|---------|
| Equity funds | \$ 5,182,070 | \$ | \$ - |
| Fixed income funds | 2,125,885 | - | - |
| REIT funds | 122,440 | - | - |
| Commodities funds | <u>114,336</u> | | |
| Total investments at fair value | <u>\$ 7,544,731</u> | <u>\$</u> | \$ |

NOTE 6 Investments

The cost or other basis, unrealized appreciation (depreciation), and market values of investments at December 31, 2022 and 2021 are summarized as follows:

| | | 2022 | |
|----------------------------|------------------------|---|---------------------|
| | Cost or Other Basis | Unrealized Appreciation/ (Depreciation) | Market Value |
| Without restrictions: | | | |
| Equity funds | \$ 3,698,719 | \$ (325,780) | \$ 3,372,939 |
| Fixed income funds | 145,265 | (12,730) | 132,535 |
| REIT funds | 59,412 | (8,587) | 50,825 |
| Commodities funds | 52,442 | 257 | 52,699 |
| Total without restrictions | 3,955,838 | (346,840) | 3,608,998 |
| With restrictions: | | | |
| Equity funds | 2,553,210 | (241,986) | 2,311,224 |
| Fixed income funds | 96,393 | (8,235) | 88,158 |
| REIT funds | 46,118 | (6,784) | 39,334 |
| Commodities funds | <u>37,335</u> | 235 | 37,570 |
| Total with restrictions | 2,733,056 | (257,270) | 2,476,286 |
| | | | |
| Total | \$ 6,688,894 | \$ (603,610) | <u>\$ 6,085,284</u> |

NOTE 6 Investments (cont'd)

| | 2021 | | | | | |
|----------------------------|------------------------|---|---------------------|--|--|--|
| | Cost or Other Basis | Unrealized Appreciation/ (Depreciation) | Market Value | | | |
| Without restrictions: | | | | | | |
| Equity funds | \$ 2,143,993 | \$ 765,607 | \$ 2,909,600 | | | |
| Fixed income funds | 1,149,365 | 44,176 | 1,193,541 | | | |
| REIT funds | 59,549 | 9,109 | 68,658 | | | |
| Commodities funds | 64,488 | (297) | <u>64,191</u> | | | |
| Total without restrictions | 3,417,395 | <u>818,595</u> | 4,235,990 | | | |
| With restrictions: | | | | | | |
| Equity funds | 1,673,177 | 599,293 | 2,272,470 | | | |
| Fixed income funds | 892,843 | 39,501 | 932,344 | | | |
| REIT funds | 46,807 | 6,975 | 53,782 | | | |
| Commodities funds | <u>50,346</u> | (201) | 50,145 | | | |
| Total with restrictions | 2,663,173 | 645,568 | 3,308,741 | | | |
| | | | | | | |
| Total | \$ 6,080,568 | <u>\$ 1,464,163</u> | <u>\$ 7,544,731</u> | | | |

Investment return, net for the years ended December 31, 2022 and 2021 consisted of the following:

| | <u></u> | 2022 | 2021 | | |
|---------------------------|----------|---------|---------------|--|--|
| Investment return, net: | - | | | | |
| Interest and dividends | \$ | 161,876 | \$ 234,160 | | |
| Less: Investment expenses | . | 54,088 | 49,409 | | |
| Investment return, net | \$ | 107,788 | \$ 184,751 | | |

NOTE 7 Endowment

The Foundation maintains a donor-restricted endowment fund from the Dilworth Estate. Endowment spending policies are informal and are at the discretion of the Foundation's Board of Trustees. Endowment funds must be used for the benefit of the Community YMCA of Eastern Delaware County. Endowment investment policies include the following:

- 1. Each class of equities shall be limited to no more than 15% of the fair value of the equity portfolio unless specifically authorized by the Foundation's Board of Trustees. Equity holdings in any one security shall not exceed 10% of the equity portion of the portfolio measured at fair value.
- 2. The average market-weighted rating of fixed income securities shall be AA or better and no security may be purchased which is rated below investment grade BBB, unless specifically authorized by the Foundation's Board of Trustees. Except for U.S. Treasury and Agency Obligations, no single fixed income security shall represent more than 10% of the fixed income securities portion of the portfolio measured at fair value.
- 3. If commercial paper or bankers' acceptances are used for short-term investments, they must be rated at least the equivalent of A-1 by Standard and Poor's or at least P-1 by Moody's.

NOTE 7 Endowment (conf'd)

A reconciliation of endowment activity by net asset class is summarized as follows:

| | Without | | | With | |
|-------------------------------------|-----------|---------------|----------|-------------|---------------------|
| | <u>Re</u> | strictions | <u>R</u> | estrictions | Total |
| | | | | | |
| Beginning balance - January 1, 2021 | \$ | 36,512 | \$ | 3,180,956 | \$ 3,217,468 |
| Investment income | | - | | 103,119 | 103,119 |
| Net realized and unrealized | | | | | |
| gain on investments | | - | | 271,051 | 271,051 |
| Support - Community YMCA of | | | | | |
| Eastern Delaware County | ٠ | (3,329) | | (75,180) | (78,509) |
| Investment fees | | her | | (21,742) | (21,742) |
| Balance - December 31, 2021 | | 33,183 | | 3,458,204 | 3,491,387 |
| Investment income | | (78) | | 68,967 | 68,889 |
| Net realized and unrealized | | | | | |
| gain on investments | | | | (595,461) | (595,461) |
| Support - Community YMCA of | | | | | |
| Eastern Delaware County | | - | | (325,192) | (325,192) |
| Investment fees | | | | (23,292) | (23,292) |
| Balance - December 31, 2022 | <u>\$</u> | <u>33,105</u> | \$ | 2,583,226 | <u>\$ 2,616,331</u> |