

EXTENDED UNTIL MAY 15, 2025

Form **990-PF****Return of Private Foundation**

OMB No. 1545-0047

Department of the Treasury  
Internal Revenue Service

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

Do not enter social security numbers on this form as it may be made public.

Go to [www.irs.gov/Form990PF](http://www.irs.gov/Form990PF) for instructions and the latest information.**2023**

Open to Public Inspection

For calendar year 2023 or tax year beginning **JUL 1, 2023**, and ending **JUN 30, 2024**

Name of foundation <b>PHOENIXVILLE COMMUNITY HEALTH FOUNDATION</b>		A Employer identification number <b>23-2912035</b>
Number and street (or P.O. box number if mail is not delivered to street address) <b>821 GAY STREET</b>		B Telephone number <b>6109179890</b>
City or town, state or province, country, and ZIP or foreign postal code <b>PHOENIXVILLE, PA 19460</b>		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Initial return  <input type="checkbox"/> Final return  <input type="checkbox"/> Address change         </div> <div> <input type="checkbox"/> Initial return of a former public charity  <input type="checkbox"/> Amended return  <input type="checkbox"/> Name change         </div> </div>		D 1. Foreign organizations, check here <input type="checkbox"/>  2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ <b>61,713,121.</b>		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>
J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____		
(Part I, column (d), must be on cash basis.)		

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received	8,250.			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	1,681,830.	1,681,830.	1,681,830.	STATEMENT 1
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	-361,107.			
	b Gross sales price for all assets on line 6a	45,240,908.			
	7 Capital gain net income (from Part IV, line 2)		0.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less: Cost of goods sold				
	c Gross profit or (loss)				
	11 Other income				
	12 Total. Add lines 1 through 11	1,328,973.	1,681,830.	1,681,830.	
	13 Compensation of officers, directors, trustees, etc.	149,099.	0.	0.	149,099.
	14 Other employee salaries and wages	167,595.	0.	0.	167,595.
	15 Pension plans, employee benefits	47,865.	0.	0.	47,865.
	16a Legal fees STMT 2	2,084.	0.	0.	2,084.
	b Accounting fees STMT 3	15,473.	0.	0.	15,473.
	c Other professional fees STMT 4	6,046.	0.	0.	6,046.
	17 Interest				
	18 Taxes STMT 5	28,892.	0.	0.	28,892.
	19 Depreciation and depletion	25,353.	0.	25,353.	
	20 Occupancy	33,945.	0.	0.	33,945.
	21 Travel, conferences, and meetings	4,046.	0.	0.	4,046.
	22 Printing and publications				
	23 Other expenses STMT 6	236,779.	87,550.	0.	149,246.
	24 Total operating and administrative expenses. Add lines 13 through 23	717,177.	87,550.	25,353.	604,291.
	25 Contributions, gifts, grants paid	2,072,609.			2,072,609.
	26 Total expenses and disbursements. Add lines 24 and 25	2,789,786.	87,550.	25,353.	2,676,900.
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	-1,460,813.			
	b Net investment income (if negative, enter -0-)		1,594,280.		
	c Adjusted net income (if negative, enter -0-)			1,656,477.	

LHA For Paperwork Reduction Act Notice, see instructions.

323501 12-20-23

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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only.		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing .....	2,169,312.		
	2 Savings and temporary cash investments .....	366,514.	11,961,438.	11,961,438.
	3 Accounts receivable .....			
	Less: allowance for doubtful accounts .....	8,000.		
	4 Pledges receivable .....			
	Less: allowance for doubtful accounts .....			
	5 Grants receivable .....			
	6 Receivables due from officers, directors, trustees, and other disqualified persons .....			
	7 Other notes and loans receivable .....			
	Less: allowance for doubtful accounts .....			
	8 Inventories for sale or use .....			
	9 Prepaid expenses and deferred charges .....	8,917.	17,240.	17,240.
	10a Investments - U.S. and state government obligations STMT 7 .....	0.	1,322,356.	1,322,356.
	b Investments - corporate stock STMT 8 .....	39,348,048.	43,201,452.	43,201,452.
	c Investments - corporate bonds STMT 9 .....	14,799,737.	3,572,253.	3,572,253.
Liabilities	11 Investments - land, buildings, and equipment: basis .....			
	Less: accumulated depreciation .....			
	12 Investments - mortgage loans .....			
	13 Investments - other STMT 10 .....	0.	1,151,411.	1,151,411.
	14 Land, buildings, and equipment: basis 966,127. STMT 11 .....	479,156.		
	Less: accumulated depreciation .....			
	15 Other assets (describe .....			
	16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I) .....	57,212,852.	61,713,121.	61,713,121.
	17 Accounts payable and accrued expenses .....	2,439.	31,911.	
	18 Grants payable .....			
Net Assets or Fund Balances	19 Deferred revenue .....			
	20 Loans from officers, directors, trustees, and other disqualified persons .....			
	21 Mortgages and other notes payable .....			
	22 Other liabilities (describe 401K WITHHOLDING) .....	125.	125.	
	23 Total liabilities (add lines 17 through 22) .....	2,564.	32,036.	
	Foundations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 24, 25, 29, and 30. .....			
	24 Net assets without donor restrictions .....	55,142,956.	59,613,753.	
	25 Net assets with donor restrictions .....	2,067,332.	2,067,332.	
	Foundations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 26 through 30. .....			
	26 Capital stock, trust principal, or current funds .....			
	27 Paid-in or capital surplus, or land, bldg., and equipment fund .....			
	28 Retained earnings, accumulated income, endowment, or other funds .....			
	29 Total net assets or fund balances .....	57,210,288.	61,681,085.	
	30 Total liabilities and net assets/fund balances .....	57,212,852.	61,713,121.	

### Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return) .....	1	57,210,288.
2 Enter amount from Part I, line 27a .....	2	-1,460,813.
3 Other increases not included in line 2 (itemize) <u>UNREALIZED GAINS/LOSSES</u> .....	3	5,931,610.
4 Add lines 1, 2, and 3 .....	4	61,681,085.
5 Decreases not included in line 2 (itemize) .....	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 .....	6	61,681,085.

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**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a VANGUARD BROKERAGE ACCOUNT		07/01/23	06/30/24
b HAVERFORD BROKERAGE ACCOUNT		07/01/23	06/30/24
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))
a 675,541.		450,000.	225,541.
b 44,565,367.		45,152,015.	-586,648.
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			225,541.
b			-586,648.
c			
d			
e			

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	-361,107.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8	}	3	0.

**Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see instructions)**

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary - see instructions)		1	22,160.
b All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		2	0.
3 Add lines 1 and 2		3	22,160.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	22,160.
6 Credits/Payments:			
a 2023 estimated tax payments and 2022 overpayment credited to 2023	6a 26,280.		
b Exempt foreign organizations - tax withheld at source	6b 0.		
c Tax paid with application for extension of time to file (Form 8868)	6c 0.		
d Backup withholding erroneously withheld	6d 0.		
7 Total credits and payments. Add lines 6a through 6d		7	26,280.
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached		8	0.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10	4,120.
11 Enter the amount of line 10 to be: Credited to 2024 estimated tax 4,120. Refunded		11	0.

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**Part VI-A Statements Regarding Activities**

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? .....		X
1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition ..... If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. ....		X
1c Did the foundation file Form 1120-POL for this year? .....		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. \$ 0 . (2) On foundation managers. \$ 0 .		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$ 0 .		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? ..... If "Yes," attach a detailed description of the activities. ....	2	X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes .....	3	X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? .....	4a	X
b If "Yes," has it filed a tax return on Form 990-T for this year? ..... N/A	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? ..... If "Yes," attach the statement required by General Instruction T. ....	5	X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? .....	6	X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV .....	7	X
8a Enter the states to which the foundation reports or with which it is registered. See instructions. NONE		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation .....	8b	X
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2023 or the tax year beginning in 2023? See the instructions for Part XIII. If "Yes," complete Part XIII .....	9	X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses .....	10	X
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions .....	11	X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions .....	12	X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? ..... Website address WWW.PCHF1.ORG	13	X
14 The books are in care of TAMELA LUCE Telephone no. 6109179890 Located at 821 GAY STREET, PHOENIXVILLE, PA ZIP+4 19460		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here ..... and enter the amount of tax-exempt interest received or accrued during the year ..... 15 N/A		
16 At any time during calendar year 2023, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? ..... See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country .....	16	X

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**Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
<b>1a</b> During the year, did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? .....	1a(1)	X
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? .....	1a(2)	X
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? .....	1a(3)	X
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? .....	1a(4)	X
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? .....	1a(5)	X
(6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) .....	1a(6)	X
<b>b</b> If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions .....	1b	X
<b>c</b> Organizations relying on a current notice regarding disaster assistance, check here <input type="checkbox"/>		
<b>d</b> Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2023? .....	1d	X
<b>2</b> Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
<b>a</b> At the end of tax year 2023, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2023? .....	2a	X
If "Yes," list the years _____, _____, _____		
<b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement - see instructions.) .....	2b	N/A
<b>c</b> If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here. _____, _____, _____		
<b>3a</b> Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? .....	3a	X
<b>b</b> If "Yes," did it have excess business holdings in 2023 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2023.) .....	3b	N/A
<b>4a</b> Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? .....	4a	X
<b>b</b> Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2023? .....	4b	X

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**Part VI-B** Statements Regarding Activities for Which Form 4720 May Be Required (continued)

	Yes	No
<b>5a</b> During the year, did the foundation pay or incur any amount to:		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	5a(1)	X
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	5a(2)	X
(3) Provide a grant to an individual for travel, study, or other similar purposes?	5a(3)	X
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions	5a(4)	X
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	5a(5)	X
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions	5b	X
<b>c</b> Organizations relying on a current notice regarding disaster assistance, check here <input type="checkbox"/>		
<b>d</b> If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	5d	
If "Yes," attach the statement required by Regulations section 53.4945-5(d).		
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	6a	X
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6b	X
If "Yes" to 6b, file Form 8870.		
<b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	7a	X
<b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	7b	N/A
<b>8</b> Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	8	X

**Part VII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1** List all officers, directors, trustees, and foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 12		149,099.	15,565.	0.

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

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
TAMELA LUCE - 821 GAY STREET, PHOENIXVILLE, PA 19460	PRESIDENT/CEO 40.00	149,099.	15,565.	0.
JEANETTE HALL - 821 GAY STREET, PHOENIXVILLE, PA 19460	DIRECTOR OF FINANCE AND OPERATIONS 40.00	93,833.	18,709.	0.
VIVIANN SCHORLE - 821 GAY STREET, PHOENIXVILLE, PA 19460	PROGRAM OFFICER 40.00	58,929.	8,804.	0.

<b>Total</b> number of other employees paid over \$50,000	0
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**Part VII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)***3** Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
VANGUARD INVESTMENT PO BOX 1101, VALLEY FORGE, PA 19482-1101	MANAGEMENT FEE	87,550.
Total number of others receiving over \$50,000 for professional services		0

**Part VIII-A** Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 N/A	
2	
3	
4	

**Part VIII-B** Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	0.

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**Part IX Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	51,697,629.
b	Average of monthly cash balances	1b	7,248,632.
c	Fair market value of all other assets (see instructions)	1c	17,079.
d	<b>Total</b> (add lines 1a, b, and c)	1d	58,963,340.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	58,963,340.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions)	4	884,450.
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3	5	58,078,890.
6	<b>Minimum investment return.</b> Enter 5% (0.05) of line 5	6	2,903,945.

**Part X Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here ☐ and do not complete this part.)

1	Minimum investment return from Part IX, line 6	1	2,903,945.
2a	Tax on investment income for 2023 from Part V, line 5	2a	22,160.
b	Income tax for 2023. (This does not include the tax from Part V.)	2b	
c	Add lines 2a and 2b	2c	22,160.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2,881,785.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	2,881,785.
6	Deduction from distributable amount (see instructions)	6	0.
7	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1	7	2,881,785.

**Part XI Qualifying Distributions** (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	2,676,900.
b	Program-related investments - total from Part VIII-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part XII, line 4	4	2,676,900.

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**Part XII** Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2022	(c) 2022	(d) 2023
1 Distributable amount for 2023 from Part X, line 7 .....				2,881,785.
2 Undistributed income, if any, as of the end of 2023:				
a Enter amount for 2022 only .....			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2023:				
a From 2018 .....				
b From 2019 .....				
c From 2020 .....				
d From 2021 .....	144,374.			
e From 2022 .....				
f Total of lines 3a through e .....	144,374.			
4 Qualifying distributions for 2023 from Part XI, line 4: \$ 2,676,900.				
a Applied to 2022, but not more than line 2a ...			0.	
b Applied to undistributed income of prior years (Election required - see instructions) ...		0.		
c Treated as distributions out of corpus (Election required - see instructions) .....	0.			
d Applied to 2023 distributable amount .....				2,676,900.
e Remaining amount distributed out of corpus .....	0.			
5 Excess distributions carryover applied to 2023 (If an amount appears in column (d), the same amount must be shown in column (a).) .....	144,374.			144,374.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 .....	0.			
b Prior years' undistributed income. Subtract line 4b from line 2b .....		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed .....		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions .....		0.		
e Undistributed income for 2022. Subtract line 4a from line 2a. Taxable amount - see instr. ...			0.	
f Undistributed income for 2023. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2024 .....				60,511.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) .....	0.			
8 Excess distributions carryover from 2018 not applied on line 5 or line 7 .....	0.			
9 Excess distributions carryover to 2024. Subtract lines 7 and 8 from line 6a .....	0.			
10 Analysis of line 9:				
a Excess from 2019 ...				
b Excess from 2020 ...				
c Excess from 2021 ...				
d Excess from 2022 ...				
e Excess from 2023 ...				

**Part XIII Private Operating Foundations** (see instructions and Part VI-A, question 9) **N/A**

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2023, enter the date of the ruling \_\_\_\_\_

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

2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part IX for each year listed

Tax year	Prior 3 years			(e) Total
(a) 2023	(b) 2022	(c) 2021	(d) 2020	
b 85% (0.85) of line 2a				
c Qualifying distributions from Part XI, line 4, for each year listed				
d Amounts included in line 2c not used directly for active conduct of exempt activities				
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c				
3 Complete 3a, b, or c for the alternative test relied upon:				
a "Assets" alternative test - enter:				
(1) Value of all assets				
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)				
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part IX, line 6, for each year listed				
c "Support" alternative test - enter:				
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)				
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)				
(3) Largest amount of support from an exempt organization				
(4) Gross investment income				

**Part XIV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.)****1 Information Regarding Foundation Managers:**

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

NONE

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

NONE

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

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

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

**SEE STATEMENT 13**

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

- c Any submission deadlines:

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



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

Recipient		If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)					
a Paid during the year					
CAPACITY BUILDING MINI GRANT SEE ATTACHED SEE ATTACHED, PA 19460		NONE		SUPPORT FOR DEVELOPMENT OF STRATEGIC PLAN	19,200.
CHAMPIONS GRANTS SEE ATTACHED SEE ATTACHED, PA 19460		NONE		CHAMPIONS OF THE COMMUNITY	4,000.
HEALTH EDUCATION MINI GRANT SEE ATTACHED SEE ATTACHED, PA 19460		NONE		SUPPORT FOR HEALTH EDUCATION	3,000.
MAJOR GRANTS SEE ATTACHED SEE ATTACHED, PA 19460		NONE		MAJOR GRANTS	1,961,996.
MATCHING GIFTS SEE ATTACHED SEE ATTACHED, PA 19460		NONE		MATCHING GIFTS	12,585.
Total		SEE CONTINUATION SHEET(S)			3a 2,072,609.
b Approved for future payment					
NONE					
Total					3b 0.





## Part XVI Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

- |   |              |            |           |
|---|--------------|------------|-----------|
| <b>1</b> Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c)(3) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?   |              | <b>Yes</b> | <b>No</b> |
| <b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of:   |              |            |           |
| (1) Cash .....  | <b>1a(1)</b> |            | <b>X</b>  |
| (2) Other assets .....  | <b>1a(2)</b> |            | <b>X</b>  |
| <b>b</b> Other transactions:  |              |            |           |
| (1) Sales of assets to a noncharitable exempt organization .....  | <b>1b(1)</b> |            | <b>X</b>  |
| (2) Purchases of assets from a noncharitable exempt organization .....  | <b>1b(2)</b> |            | <b>X</b>  |
| (3) Rental of facilities, equipment, or other assets .....  | <b>1b(3)</b> |            | <b>X</b>  |
| (4) Reimbursement arrangements .....  | <b>1b(4)</b> |            | <b>X</b>  |
| (5) Loans or loan guarantees .....  | <b>1b(5)</b> |            | <b>X</b>  |
| (6) Performance of services or membership or fundraising solicitations .....  | <b>1b(6)</b> |            | <b>X</b>  |
| Sharing of facilities, equipment, mailing lists, other assets, or paid employees .....  | <b>1c</b>    |            | <b>X</b>  |
| <b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. |              |            |           |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No
- b** If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

**Sign  
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer or trustee

Date \_\_\_\_\_

PRESIDENT

Title

May the IRS discuss this return with the preparer shown below? See instr.

☒ Yes ☐ No

**Paid  
Preparer  
Use Only**

Print/Type preparer's name

GREGORY S. CARE,  
CPA

Preparer's signature

Date \_\_\_\_\_

Check ☐ self-employed

PTIN

P01409701

Firm's name **MAILLIE LLP**

Firm's EIN	23-1518888
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Firm's address	500 NORTH LEWIS RD LIMERICK, PA 19468
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Phone no. (610) 935-1420

## Part XIV Supplementary Information

**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
MINI GRANTS AED SEE ATTACHED SEE ATTACHED, PA 19460	NONE		MINI GRANT LIST AED	20,579.
MINI GRANTS IT SEE ATTACHED SEE ATTACHED, PA 19460	NONE		MINI GRANTS TO SUPPORT IT PROGRAM	9,499.
MINI GRANTS TRANSPORTATION SEE ATTACHED SEE ATTACHED, PA 19460	NONE		MINI GRANTS TO SUPPORT TRANSPORTATION ACCESS	2,750.
SCHOLARSHIPS SEE ATTACHED SEE ATTACHED, PA 19460			SUPPORT FOR SCHOLARSHIP PROGRAM	39,000.
Total from continuation sheets .....				71,828.



**Schedule B**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

Attach to Form 990, 990-EZ, or 990-PF.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2023**

Name of the organization

PHOENIXVILLE COMMUNITY HEALTH FOUNDATION

Employer identification number

23-2912035

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

- ☐ 501(c)( ) (enter number) organization
- ☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- ☐ 527 political organization

Form 990-PF

- ☒ 501(c)(3) exempt private foundation
- ☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
- ☐ 501(c)(3) taxable private foundation

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

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

**General Rule**

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

**Special Rules**

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... \$ .....

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

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2023)

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

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DIANE ALTHOUSE - PHOENIXVILLE HOSPITAL MED STAFF  140 NUTT ROAD  PHOENIXVILLE, PA 19460	\$ 8,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Employer identification number

23-2912035

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

[illegible]

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

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

Use duplicate copies of Part III if additional space is needed.

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



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FORM 990-PF	DIVIDENDS AND INTEREST FROM SECURITIES	STATEMENT	1
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SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
SECURITIES	1,681,830.	0.	1,681,830.	1,681,830.	1,681,830.
TO PART I, LINE 4	1,681,830.	0.	1,681,830.	1,681,830.	1,681,830.

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FORM 990-PF	LEGAL FEES	STATEMENT	2
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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES	2,084.	0.	0.	2,084.
TO FM 990-PF, PG 1, LN 16A	2,084.	0.	0.	2,084.

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FORM 990-PF	ACCOUNTING FEES	STATEMENT	3
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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	15,473.	0.	0.	15,473.
TO FORM 990-PF, PG 1, LN 16B	15,473.	0.	0.	15,473.

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FORM 990-PF	OTHER PROFESSIONAL FEES	STATEMENT	4
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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OTHER PROFESSIONAL FEES	6,046.	0.	0.	6,046.
TO FORM 990-PF, PG 1, LN 16C	6,046.	0.	0.	6,046.

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FORM 990-PF	TAXES			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
PAYROLL TAXES	25,195.	0.	0.	25,195.	
OTHER TAXES	3,697.	0.	0.	3,697.	
TO FORM 990-PF, PG 1, LN 18	28,892.	0.	0.	28,892.	

FORM 990-PF	OTHER EXPENSES			STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
BANK FEES	179.	0.	0.	179.	
BOARD MEETING EXPENSES	11,433.	0.	0.	11,433.	
COMMUNITY RELATIONS	60,525.	0.	0.	60,525.	
DUES AND SUBSCRIPTIONS	1,791.	0.	0.	1,791.	
INSURANCE	13,723.	0.	0.	13,723.	
MANAGEMENT FEES	87,550.	87,550.	0.	0.	
MEMBERSHIP DUES	18,272.	0.	0.	18,272.	
OFFICE SUPPLIES	5,885.	0.	0.	5,885.	
PAYROLL SERVICES	5,919.	0.	0.	5,919.	
POSTAGE	215.	0.	0.	215.	
SECURITY	346.	0.	0.	346.	
STAFF DEVELOPMENT	7,365.	0.	0.	7,365.	
TELEPHONE & INTERNET	6,629.	0.	0.	6,629.	
TRASH, WATER, SEWER	798.	0.	0.	815.	
UTILITIES	5,075.	0.	0.	5,075.	
PROGRAM SUPPORT	5,524.	0.	0.	5,524.	
REPAIR & EQUIPMENT	5,550.	0.	0.	5,550.	
TO FORM 990-PF, PG 1, LN 23	236,779.	87,550.	0.	149,246.	

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FORM 990-PF	U.S. AND STATE/CITY GOVERNMENT OBLIGATIONS	STATEMENT	7
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DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKET VALUE
US GOVERNMENT OBLIGATIONS	X		1,322,356.	1,322,356.
TOTAL U.S. GOVERNMENT OBLIGATIONS			1,322,356.	1,322,356.
TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGATIONS				
TOTAL TO FORM 990-PF, PART II, LINE 10A			1,322,356.	1,322,356.

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FORM 990-PF	CORPORATE STOCK	STATEMENT	8
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DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
CORPORATE STOCK	43,201,452.	43,201,452.
TOTAL TO FORM 990-PF, PART II, LINE 10B	43,201,452.	43,201,452.

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FORM 990-PF	CORPORATE BONDS	STATEMENT	9
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DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
CORPORATE BONDS	3,572,253.	3,572,253.
TOTAL TO FORM 990-PF, PART II, LINE 10C	3,572,253.	3,572,253.

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FORM 990-PF	OTHER INVESTMENTS	STATEMENT	10
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DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
MORTGAGE-BACKED BONDS	COST	1,151,411.	1,151,411.
TOTAL TO FORM 990-PF, PART II, LINE 13		1,151,411.	1,151,411.



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FORM 990-PF      DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT      STATEMENT 11

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DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
BUILDING	725,000.	286,605.	438,395.
LANDSCAPING-SCHNATZ & ROHRER	2,691.	1,775.	916.
CURBING-PAUL R. SAVILLE	8,500.	6,237.	2,263.
NEW ROOF-GSM ROOFING	33,300.	22,200.	11,100.
DIAMOND QUALITY BUILDERS	13,519.	9,011.	4,508.
SPECTRUM	622.	622.	0.
OFFICE FURNITURE	558.	558.	0.
OFFICE DESK SET	1,109.	1,109.	0.
RT WORK-DESIGN OF PCH	8,500.	8,500.	0.
ART WORK	450.	450.	0.
DESKS	2,869.	2,869.	0.
ART WORK	2,760.	2,760.	0.
ART WORK	370.	370.	0.
ART WORK	574.	574.	0.
OFFICE FURNITURE	2,168.	2,168.	0.
REFRIGERATORS	457.	457.	0.
OFFICE FURNITURE	315.	315.	0.
FILING CABINET	777.	777.	0.
DESK & TABLE ED OFFICE	1,993.	1,993.	0.
CHAIR	504.	504.	0.
FILE CABINET	622.	622.	0.
AED	1,595.	1,595.	0.
CONFERENCE ROOM TABLE, RUG	12,312.	12,312.	0.
WINDOW TREATMENT DEPOSIT	4,500.	4,500.	0.
CHAIR DEPOSIT	3,100.	3,100.	0.
LAMP PURCHASE	1,075.	1,075.	0.
RUG PURCHASE	3,356.	3,356.	0.
RUG PURCHASE	1,194.	1,194.	0.
WINDOW TREATMENTS	7,927.	7,927.	0.
RUG PURCHASE	985.	985.	0.
PRESIDENTS OFFICE, PROGRAM			
OFFICER OFFICE	8,902.	8,902.	0.
TELEPHONE SYSTEM	5,135.	5,135.	0.
OFFICE COPIER	6,145.	6,145.	0.
RUGS, LAMPS	6,863.	6,863.	0.
FILING CABINET	1,558.	1,558.	0.
2 FILE CABINETS	994.	994.	0.
RUGS	1,734.	1,734.	0.
SECURITY CAMERA	1,303.	1,303.	0.
BOOK CASE	789.	789.	0.
LJB WINDOW TREATMENTS	1,100.	1,100.	0.
SIGNAGE	4,025.	4,025.	0.
ELAND GALLERY			
PAINTING-DOWNSTAIRS BATHROOM	300.	300.	0.
SHADE FOR PRES OFFICE	1,088.	1,088.	0.
OFFICE COPIER 2ND FLOOR XPO	1,298.	1,298.	0.
COMPUTER EQUIP	1,525.	1,525.	0.

## PHOENIXVILLE COMMUNITY HEALTH FOUNDATION

23-2912035

COMPUTER EQUIP	1,343.	1,343.	0.
COMPUTER EQUIP	3,426.	3,426.	0.
COMPUTER EQUIP	1,791.	1,791.	0.
LATERAL FILES	1,866.	1,866.	0.
LATERAL FILES	1,749.	1,749.	0.
FLAG POLE	1,355.	1,355.	0.
LED OUTDOOR PATHWAY LIGHTS	6,050.	6,050.	0.
OVERHEAD PROJECTOR	2,969.	2,969.	0.
DELL OFFICE COMPUTERS & INSTALLATION	11,761.	11,761.	0.
LED PATH LIGHTS	4,719.	4,719.	0.
RESEOURCE PARTNERS	1,968.	1,968.	0.
RUG-CHES-MONT CARPET ONE	2,296.	2,296.	0.
SHELVING FOR BASEMENT	688.	688.	0.
SHUTTERS (CAROLS OFFICE	3,010.	3,010.	0.
DELL COMPUTER (CAROL)	863.	863.	0.
HP PRINTER	530.	530.	0.
NEW ROOF-GSM ROOFING (FINAL)	14,606.	8,603.	6,003.
HVAC SYSTEM	7,325.	1,504.	5,821.
DELL OFFICE COMPUTER CAROL	5,024.	5,024.	0.
DELL OFFICE COMPUTER LYNN	3,309.	3,309.	0.
LED LIGHT PATH	2,325.	2,325.	0.
TOTAL TO FM 990-PF, PART II, LN 14	965,434.	496,428.	469,006.

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FORM 990-PF                      PART VII - LIST OF OFFICERS, DIRECTORS                      STATEMENT 12  
    TRUSTEES AND FOUNDATION MANAGERS

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NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
JESSICA CAPISTRANT 410 W. ANDERSON AVE PHOENIXVILLE, PA 19460	CHAIR 1.00	0.	0.	0.
BROOKE GINTY 353 WASHINGTON AVE PHOENIXVILLE, PA 19460	VICE CHAIR 1.00	0.	0.	0.
CHARLES HENRY 120 SUMMIT DRIVE PHOENIXVILLE, PA 19460	TREASURER 1.00	0.	0.	0.
JULIAN MCCrackEN 1001 GAY ST PHOENIXVILLE, PA 19460	INTERIM TREASURER 1.00	0.	0.	0.
NICHOLAS BUCCI 15 OVERLOOK CIRCLE PHOENIXVILLE, PA 19460	INTERIM SECRETARY 1.00	0.	0.	0.
JONATHAN EWALD 134 STARR ST PHOENIXVILLE, PA 19460	DIRECTOR 1.00	0.	0.	0.
FRANK GIARDINA 231 BEACON DRIVE PHOENIXVILLE, PA 19460	DIRECTOR 1.00	0.	0.	0.
TASHIR KASSAM 4513 STATE RD PHOENIXVILLE, PA 19460	DIRECTOR 1.00	0.	0.	0.
ALLEN KRAMER 31 KENALCON DRIVE PHOENIXVILLE, PA 19460	DIRECTOR 1.00	0.	0.	0.
BARBARA O'CONNOR 408 ABBEY LANE SCHWENKSVILLE, PA 19473	DIRECTOR 1.00	0.	0.	0.
REV. LEE PACZULLA 45 N. MAIN ST, APT. 4303 PHOENIXVILLE, PA 19460	DIRECTOR 1.00	0.	0.	0.



PHOENIXVILLE COMMUNITY HEALTH FOUNDATION

23-2912035

CHELSEA PERUGINI 982 SPRING CITY RD PHOENIXVILLE, PA 19460	DIRECTOR 1.00	0.	0.	0.
MARIA SCHWAB 132 FAIRFAX COURT PHOENIXVILLE, PA 19460	DIRECTOR 1.00	0.	0.	0.
DOLORES WINSTON 237 HIGH ST PHOENIXVILLE, PA 19460	DIRECTOR 1.00	0.	0.	0.
RICHARD DOWNS 415 COUNTRY CLUB RD PHOENIXVILLE, PA 19460	EMERITUS 1.00	0.	0.	0.
RICHARD KUNSCH, SR. 32 MEADOWBROOK LANE PHOENIXVILLE, PA 19460	EMERITUS 1.00	0.	0.	0.
JAMES READING 1077 BALFOUR CIRCLE PHOENIXVILLE, PA 19460	EMERITUS 1.00	0.	0.	0.
TAMELA LUCE 821 GAY STREET PHOENIXVILLE, PA 19460	CEO 40.00	149,099.	15,565.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VII		149,099.	15,565.	0.

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FORM 990-PF	GRANT APPLICATION SUBMISSION INFORMATION	STATEMENT 13
	PART XIV, LINES 2A THROUGH 2D	

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NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

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JEANETTE HALL  
821 GAY STREET  
PHOENIXVILLE, PA 19460

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TELEPHONE NUMBER

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610-917-9890

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FORM AND CONTENT OF APPLICATIONS

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THE FOUNDATION HAS DEVELOPED A GRANT APPLICATION FORM WHICH MAY BE REQUESTED OR DOWNLOADED FROM THE INTERNET.

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ANY SUBMISSION DEADLINES

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GRANT REQUESTS MUST BE RECEIVED AT LEAST 6 WEEKS PRIOR TO SCHEDULED GRANT MAKING MEETINGS.

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RESTRICTIONS AND LIMITATIONS ON AWARDS

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THE FOUNDATION SERVES 501(C)(3) ORGANIZATIONS/PUBLIC CHARITIES WHICH SUPPORT COMMUNITY OR PERSONAL HEALTH AND IS LIMITED TO 19 MUNICIPALITIES IN THE GREATER PHOENIXVILLE AREA.

2023 DEPRECIATION AND AMORTIZATION REPORT

FORM 990-PF PAGE 1

990-PF

Asset No.	Description	Date Acquired	Method	Life	Convention	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis*	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
1	BUILDING	01/01/10	SL	39.00	MM	16	725,000.				725,000.	268,015.		18,590.	286,605.
2	LANDSCAPING-SCHNATZ & ROHRER	06/05/08	SL	15.00		16	2,691.				2,691.	1,775.		0.	1,775.
3	CURBING-PAUL R. SAVILLE	10/14/11	SL	15.00		16	8,500.				8,500.	5,670.		567.	6,237.
4	NEW ROOF-GSM ROOFING	12/30/14	SL	15.00		16	33,300.				33,300.	19,980.		2,220.	22,200.
5	DIAMOND QUALITY BUILDERS	12/30/14	SL	15.00		16	13,519.				13,519.	8,110.		901.	9,011.
6	SPECTRUM	10/13/06	SL	5.00		16	622.				622.	622.		0.	622.
7	OFFICE FURNITURE	12/15/98	SL	7.00		16	558.				558.	558.		0.	558.
8	OFFICE DESK SEP	10/02/98	SL	7.00		16	1,109.				1,109.	1,109.		0.	1,109.
9	RT WORK-DESIGN OF PCH	06/30/98	SL	5.00		16	8,500.				8,500.	8,500.		0.	8,500.
10	ART WORK	09/30/98	SL	5.00		16	450.				450.	450.		0.	450.
11	DESKS	10/30/98	SL	7.00		16	2,869.				2,869.	2,869.		0.	2,869.
12	ART WORK	10/30/98	SL	5.00		16	2,760.				2,760.	2,760.		0.	2,760.
13	ART WORK	11/12/98	SL	5.00		16	370.				370.	370.		0.	370.
14	ART WORK	12/15/98	SL	5.00		16	574.				574.	574.		0.	574.
15	OFFICE FURNITURE	04/15/99	SL	7.00		16	2,168.				2,168.	2,168.		0.	2,168.
16	REFRIGERATORS	10/15/99	SL	5.00		16	457.				457.	457.		0.	457.
17	OFFICE FURNITURE	05/31/11	SL	7.00		16	315.				315.	315.		0.	315.
18	FILING CABINET	10/18/04	SL	5.00		16	777.				777.	777.		0.	777.

328111 04-01-23

(D) - Asset disposed

\* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone



2023 DEPRECIATION AND AMORTIZATION REPORT

FORM 990-PF PAGE 1

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

328111 04-01-23

(D) - Asset disposed

\* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2023 DEPRECIATION AND AMORTIZATION REPORT

FORM 990-PF PAGE 1

990-PF

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

328111 04-01-23

(D) - Asset disposed

\* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2023 DEPRECIATION AND AMORTIZATION REPORT

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
55	LED PATH LIGHTS	02/07/13	SL	5.00		16	4,719.				4,719.	4,719.		0.	4,719.
56	RESOURCE PARTNERS	10/23/13	SL	5.00		16	1,968.				1,968.	1,968.		0.	1,968.
57	RUG-CHES-MONT CARPET ONE	07/01/14	SL	5.00		16	2,296.				2,296.	2,296.		0.	2,296.
58	SHELVING FOR BASEMENT	06/30/13	SL	5.00		16	688.				688.	688.		0.	688.
69	SHUTTERS (CAROLS OFFICE	08/20/15	SL	5.00		16	3,010.				3,010.	3,010.		0.	3,010.
70	DELL COMPUTER (CAROL)	06/24/16	SL	5.00		16	863.				863.	863.		0.	863.
71	HP PRINTER	06/23/16	SL	5.00		16	530.				530.	530.		0.	530.
72	NEW ROOF-GSM ROOFING (FINAL)	09/14/15	SL	15.00		16	14,606.				14,606.	7,629.		974.	8,603.
73	HVAC SYSTEM	06/27/16	SL	39.00	MM	16	7,325.				7,325.	1,316.		188.	1,504.
84	DELL OFFICE COMPUTER CAROL	04/15/19	SL	5.00		16	5,024.				5,024.	4,773.		251.	5,024.
85	DELL OFFICE COMPUTER LYNN	04/11/19	SL	5.00		16	3,309.				3,309.	3,144.		165.	3,309.
96	LED LIGHT PATH	07/29/19	SL	5.00		16	2,325.				2,325.	2,286.		39.	2,325.
	* TOTAL 990-PF PG 1 DEPR						965,434.				965,434.	472,533.		23,895.	496,428.

328111 04-01-23

(D) - Asset disposed

\* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone