Form **990-PF**

Return of Private Foundation

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 for instructions and the latest information.

2020

Department of the Treasury Internal Revenue Service

For calendar year 2020 or tax year beginning and ending Name of foundation A Employer identification number AMERICAN WATER CHARITABLE FOUNDATION, INC 27-4241172 Number and street (or P.O. box number if mail is not delivered to street address) Room/suite **B** Telephone number 1 WATER STREET 856-955-4092 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here 08102 CAMDEN, NJ G Check all that apply: Initial return Initial return of a former public charity **D** 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change **H** Check type of organization: X Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: Cash X Accrual If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here ...▶ 28,622,983. (Part I, column (d), must be on cash basis.) ▶\$ Part I Analysis of Revenue and Expenses (c) Adjusted net (d) Disbursements for charitable purposes (a) Revenue and (b) Net investment (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) expenses per books income income (cash basis only) 500,000. Contributions, gifts, grants, etc., received N/A2 Check if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 516,808. 516,808. STATEMENT 4 Dividends and interest from securities 5a Gross rents **b** Net rental income or (loss) 912,543. 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 1,830,822. 912,543. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less: Cost of goods sold c Gross profit or (loss) 11 Other income 1,929,351. 1,429,351 12 Total. Add lines 1 through 11 0. 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 1,095. 1,095. 16a Legal fees STMT 2 0. Administrative Expenses 21,959. 1,791. 20,168 b Accounting fees STMT 3 **c** Other professional fees 17 Interest 10,822. Taxes STMT 4 0. 0. Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses STMT 5 41,509. 7,177. 34,332. 24 Total operating and administrative <u>75,3</u>85. <u>55,</u>595. 8,968. expenses. Add lines 13 through 23 710,254. 1,701,050. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 1,785,639. 1,756,645. 8,968. Add lines 24 and 25 27 Subtract line 26 from line 12: 143,712. **a** Excess of revenue over expenses and disbursements 1,420,383. b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-)

| Fo | m 99 | 0-PF (2020) AMERICAN WATER CHARITAB | LE FOUNDATION, | INC 27- | 4241172 Page 2 |
|-----------------------------|--------|--|---------------------|------------------------|------------------------------|
| P | art | Balance Sheets Attached schedules and amounts in the description | Beginning of year | End of | |
| _ | art | column should be for end-of-year amounts only. | (a) Book Value | | (c) Fair Market Value |
| | 1 | Cash - non-interest-bearing | 43,582. | 39,528. | 39,528. |
| | 2 | Savings and temporary cash investments | 199,128. | 937,567. | 937,567. |
| | | Accounts receivable | | | |
| | | Less; allowance for doubtful accounts | | | |
| | 4 | Pledges receivable ▶ | | | |
| | - | Less; allowance for doubtful accounts | | | |
| | 5 | Grants receivable | | | |
| | 6 | Receivables due from officers, directors, trustees, and other | | | |
| | ľ | | | | |
| | 7 | disqualified persons Other notes and loans receivable | | | |
| | ′ | Less: allowance for doubtful accounts | | | |
| | 8 | Inventories for sale or use | | | |
| Assets | ١ | Prepaid expenses and deferred charges | | | |
| Ass | | Investments - U.S. and state government obligations | | | |
| 1 | | | 17 010 303 | 19,964,147. | 10 06/ 1/7 |
| | 0 | Investments - corporate stock STMT 6 | 6,544,933. | 7,681,719. | 7,681,719. |
| | L C | Investments - corporate bonds STMT 7 | 0,344,333. | 7,001,719. | 1,001,119. |
| | 11 | Investments - land, buildings, and equipment: basis | | | |
| | | Less: accumulated depreciation | | | |
| | | Investments - mortgage loans | | | |
| | 13 | Investments - other | | | |
| | 14 | Land, buildings, and equipment: basis | | | |
| | | Less: accumulated depreciation | 1 500 055 | 0.0 | |
| | | Other assets (describe) | 1,500,255. | 22. | 22. |
| | 16 | Total assets (to be completed by all filers - see the | 06 000 001 | 00 500 000 | 00 600 000 |
| _ | | instructions. Also, see page 1, item I) | 26,207,291. | 28,622,983. 51,138. | 28,622,983. |
| | 17 | Accounts payable and accrued expenses | 41,937. | 51,138. | |
| | 18 | Grants payable | | | |
| 8 | 19 | Deferred revenue | | | |
| Liabilities | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| jab | 21 | Mortgages and other notes payable | | 10- 11- | |
| _ | 22 | Other liabilities (describe) | 96,846. | 107,667. | |
| | | | | | |
| _ | 23 | Total liabilities (add lines 17 through 22) | 138,783. | 158,805. | |
| | | Foundations that follow FASB ASC 958, check here X | | | |
| Ş | | and complete lines 24, 25, 29, and 30. | | | |
| ű | 24 | Net assets without donor restrictions | 26,068,508. | 28,464,178. | |
| ala | 25 | Net assets with donor restrictions | | | |
| Net Assets or Fund Balances | | Foundations that do not follow FASB ASC 958, check here 🕨 🗌 | | | |
| μ | | and complete lines 26 through 30. | | | |
| <u>~</u> | 26 | Capital stock, trust principal, or current funds | | | |
| şţs | 27 | Paid-in or capital surplus, or land, bldg., and equipment fund | | | |
| SS | 28 | Retained earnings, accumulated income, endowment, or other funds \dots | | | |
| Ϋ́ | 29 | Total net assets or fund balances | 26,068,508. | 28,464,178. | |
| ž | | | | | |
| | 30 | Total liabilities and net assets/fund balances | 26,207,291. | 28,622,983. | |
| P | art | Analysis of Changes in Net Assets or Fund B | alances | | |
| | | | | | |
| 1 | | net assets or fund balances at beginning of year - Part II, column (a), line | | | 26 060 500 |
| _ | | t agree with end-of-year figure reported on prior year's return) | | I . I | 26,068,508. |
| | | amount from Part I, line 27a | CATAGON TIME | 2 | 143,712. |
| | | increases not included in line 2 (itemize) UNREALIZED | | | 2,251,958. |
| | | ines 1, 2, and 3 | | | 28,464,178. |
| | | eases not included in line 2 (itemize) | | 5 | 28,464,178. |
| b | ı otal | net assets or fund balances at end of year (line 4 minus line 5) - Part II, of | column (b), line 29 | | ⊿0,404,1/ŏ • |

| Form 990-PF (2020) AMER | ICAN WATER CHAR | ITABLE F | OUNDATI | ION | ,INC | 2 | 7-4241 | L172 | Page 3 |
|--|---|------------------|----------------------------------|-----------------------------|-------------------------------------|---------------------|--------------------------------|-----------------------------|--------------|
| Part IV Capital Gains a | nd Losses for Tax on In | vestment In | ncome | | | | | | |
| | ne kind(s) of property sold (for exame house; or common stock, 200 shs | | | (b) H P - D - | ow acquired Purchase Donation | (c) Date (mo., d | acquired ay, yr.) | (d) Dat (mo., da | |
| 1a PUBLICLY TRADED | SECURITIES | <u>-</u> | | | Donation | | | | |
| b CAPITAL GAINS D | | | | | | | | | |
| С | | | | | | | | | |
| d | | | | | | | | | |
| е | | | | | | | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | | or other basis ense of sale | | | | ain or (loss) s (f) minus (| g)) | |
| a 1,150,000. | | | 918,27 | 9. | | | | 231 | ,721. |
| ь 680,822. | | | | | | | | 680 | ,822. |
| С | | | | | | | | | |
| d | | | | | | | | | |
| е | | <u> </u> | | | | | | | |
| Complete only for assets showing | gain in column (h) and owned by | | | | | | ol. (h) gain i | | |
| (i) FMV as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | | ss of col. (i) l. (j), if any | | | | not less than (from col. (b | ı)) ´ | |
| a | | | | | | | | 231 | ,721. |
| b | | | | | | | | 680 | ,822. |
| С | | | | | | | | | |
| d | | | | | | | | | |
| e | | | | _ | | | | | |
| Capital gain net income or (net capNet short-term capital gain or (loss | . (, , , , , , , , , , , , , , , , , , | | | . } | 2 | | | 912 | <u>,543.</u> |
| If gain, also enter in Part I, line 8, c Part I, line 8 | column (c). See instructions. If (los | s), enter -0- in | | } | 3 | | N/A | | |
| | der Section 4940(e) for | | | | | | | | |
| | N 4940(e) REPEALED C | N DECEME | BER 20, 20 | 19 - 1 | DO NOT C | OMPLE | TE. | | |
| 1 Reserved | | | | | | | | (4) | |
| (a) Reserved | (b) Reserved | | F | (c) Reserve | ed | | Res | (d) served | |
| Reserved | | | | | | | | | |
| Reserved | | | | | | | | | |
| Reserved | | | | | | | | | |
| Reserved | | | | | | | | | |
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| 2 Reserved | | | | | | . 2 | | | |
| 3 Reserved | | | | | | . 3 | | | |
| 4 Reserved | | | | | | | | | |
| 5 Reserved | | | | | | | | | |
| 6 Reserved | | | | | | | | | |
| | | | | | | | | | |
| 7 Reserved | | | | | | . 7 | | | |
| A RESERVED | | | | | | ı x l | | | |

| Part \ | VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see in | nstruction | ıs) | | |
|-----------------|--|------------|-----|-----|-----|
| 1a Exe | empt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. | | | | |
| Dat | te of ruling or determination letter: (attach copy of letter if necessary-see instructions) | | | | |
| | served | 1 | 1 | 9,7 | 43. |
| | other domestic foundations enter 1.39% of line 27b. Exempt foreign organizations, enter 4% | | | | |
| of I | Part I, line 12, col. (b) | | | | |
| | x under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) | 2 | | | 0. |
| 3 Add | d lines 1 and 2 | 3 | 1 | 9,7 | 43. |
| 4 Sul | btitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) | 4 | | | 0. |
| 5 Tax | x based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | 5 | 1 | 9,7 | 43. |
| | edits/Payments: | | | | |
| a 202 | 20 estimated tax payments and 2019 overpayment credited to 2020 6a 6 , 400 . | | | | |
| b Exe | empt foreign organizations - tax withheld at source 6b 0 • | | | | |
| | c paid with application for extension of time to file (Form 8868) 6c 6c | | | | |
| d Bac | ckup withholding erroneously withheld 6d 0 • | | | | |
| 7 Tot | tal credits and payments. Add lines 6a through 6d | 7 | | 6,4 | 00. |
| 8 Ent | ter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached | 8 | | | 0. |
| 9 Tax | x due. If the total of lines 5 and 8 is more than line 7, enter amount owed | 9 | 1 | 3,3 | 43. |
| | | 10 | | | |
| 11 Ent | | 11 | | | |
| Part \ | VII-A Statements Regarding Activities | | | | |
| 1a Du | ring the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in | | | Yes | No |
| any | political campaign? | | 1a | | X |
| b Did | I it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition | on | 1b | | Х |
| If ti | he answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or | | | | |
| dis | tributed by the foundation in connection with the activities. | | | | |
| c Did | the foundation file Form 1120-POL for this year? | | 1c | | Х |
| | ter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: | | | | |
| (1) | On the foundation. \blacktriangleright \$ (2) On foundation managers. \blacktriangleright \$ | | | | |
| | ter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation | | | | |
| ma | nagers. ► \$0 . | | | | |
| | s the foundation engaged in any activities that have not previously been reported to the IRS? | | 2 | | Х |
| If " | Yes," attach a detailed description of the activities. | | | | |
| 3 Has | s the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or | | | | |
| byl | aws, 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 | | |
| | is there a liquidation, termination, dissolution, or substantial contraction during the year? | | 5 | | Х |
| If " | Yes," attach the statement required by General Instruction T. | | | | |
| 6 Are | e the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: | | | | |
| • 8 | By language in the governing instrument, or | | | | |
| • 8 | By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state la | .W | | | |
| ren | nain 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 XV | | 7 | X | |
| | | | | | |
| 8a Ent | ter the states to which the foundation reports or with which it is registered. See instructions. 🕨 | | | | |
| N | IJ | | | | |
| b If the | he answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) | | | | |
| of e | each state as required by General Instruction G? If "No," attach explanation | | 8b | X | |
| 9 Is t | the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calend | ar | | | |
| yea | ar 2020 or the tax year beginning in 2020? See the instructions for Part XIV. If "Yes," complete Part XIV | | 9 | | X |
| 10 Did | any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses | <u></u> | 10 | | X |

| Pa | rt VII-A Statements Regarding Activities (continued) | | | |
|----|--|--------------|---------------|--|
| | | | Yes | No |
| 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? | 13 | X | |
| | Website address ► N/A | | | |
| 14 | The books are in care of ▶ MARGARET FLYNN, CFA Telephone no. ▶ 856-9 | <u> 55-4</u> | <u>092</u> | |
| | Located at ► 1 WATER STREET, CAMDEN, NJ ZIP+4 ►0 | | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here | | , > | <u>- </u> |
| | and enter the amount of tax-exempt interest received or accrued during the year | N | / <u>A</u> | T |
| 16 | At any time during calendar year 2020, did the foundation have an interest in or a signature or other authority over a bank, | | Yes | _ |
| | securities, or other financial account in a foreign country? | 16 | | X |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the | | | |
| _ | foreign country | | | |
| Pa | rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | V | T NI = |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | Yes | No |
| 1a | During the year, did the foundation (either directly or indirectly): | | | |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | | | |
| | a disqualified person? | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No | | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? X Yes No | | | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available | | | |
| | for the benefit or use of a disqualified person)? Yes X No | | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" | | | |
| | if the foundation agreed to make a grant to or to employ the official for a period after | | | |
| | termination of government service, if terminating within 90 days.) Yes X No | | | |
| | If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | 46 | | x |
| | section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions | 1b | | |
| | Organizations relying on a current notice regarding disaster assistance, check here | | | |
| · | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected | 1c | | х |
| 2 | before the first day of the tax year beginning in 2020? Taxes on failure to distribute income (costion 4042) (does not apply for years the foundation was a private operating foundation. | 10 | | 1 |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)): | | | |
| | At the end of tax year 2020, did the foundation have any undistributed income (Part XIII, lines | | | |
| • | | | | |
| | 6d and 6e) for tax year(s) beginning before 2020? Yes X No If "Yes," list the years | | | |
| h | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect | | | |
| _ | valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach | | | |
| | statement - see instructions.) N/A | 2b | | |
| c | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. | | | |
| | | | | |
| 3a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time | | | |
| | during the year? | | | |
| b | If "Yes," did it have excess business holdings in 2020 as a result of (1) any purchase by the foundation or disqualified persons after | | | |
| | May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose | | | |
| | of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, | | | |
| | Schedule C, to determine if the foundation had excess business holdings in 2020.) N/A | 3b | | |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | Х |
| | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that | | | |
| | had not been removed from jeopardy before the first day of the tax year beginning in 2020? | 4h | | l x |

| Part VII-B Statements Regarding Activities for Which F | orm 4/20 May Be R | equired (continu | ıed) | | Yes | No |
|---|--|-----------------------------------|--|--|------------------|---------------|
| 5a During the year, did the foundation pay or incur any amount to: | 10.157 \\0.10 | | □ ▼□ | | 162 | 140 |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section | | | s X No | | | |
| (2) Influence the outcome of any specific public election (see section 4955); or | | | s X No | | | |
| any voter registration drive? | | | S X NO | | | |
| (4) Provide a grant to an individual for travel, study, or other similar purposes | | re | S ZZ NU | | | |
| , , , | | □ v ₀ | s X No | | | |
| 4945(d)(4)(A)? See instructions (5) Provide for any purpose other than religious, charitable, scientific, literary, | | | 5 <u>21</u> NU | | | |
| the prevention of cruelty to children or animals? | ' ' ' | | s X No | | | |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und | | | 3 [22] 110 | | | |
| section 53.4945 or in a current notice regarding disaster assistance? See instru | | - | N/A | 5b | | |
| Organizations relying on a current notice regarding disaster assistance, check h | | | ····· | | | |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr | | | 🗀 | | | |
| expenditure responsibility for the grant? | | | s 🗆 No | | | |
| If "Yes," attach the statement required by Regulations section 53.4945-5(d). | . | | · | | | |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to provide the foundation of the fo | pay premiums on | | | | | |
| a personal benefit contract? | | Ye | s X No | | | |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a p | | | | 6b | | Х |
| If "Yes" to 6b, file Form 8870. | | | | | | |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s | helter transaction? | Ye | s X No | | | |
| b If "Yes," did the foundation receive any proceeds or have any net income attribu | table to the transaction? | | N/A | 7b | | |
| 8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$ | | | | | | |
| excess parachute payment(s) during the year? | | 🔲 Ye | s X No | | | |
| Part VIII Information About Officers, Directors, Truste | es, Foundation Mai | nagers, Highly | | | | |
| Paid Employees, and Contractors | | | | | | |
| 1 List all officers, directors, trustees, and foundation managers and the | · · · · · · · · · · · · · · · · · · · | 14 > 0 1 | (d) 0 | | | |
| (a) Name and address | (b) Title, and average hours per week devoted | (c) Compensation (If not paid, | (d) Contributions to employee benefit plans and deferred | s ac | e) Exp count, | ense other |
| - Carrie and address | to position | `enter -0-) | compensation | <u> </u> | allowaí | nces |
| | | | | | | |
| | | | • | | | • |
| SEE STATEMENT 10 | | 0. | 0 | <u>. </u> | | 0. |
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| | | | | | | |
| 2 Compensation of five highest-paid employees (other than those incl | luded on line 1) If none | enter "NONE " | | — | | |
| 2 Compensation of the highest-paid employees (other than those incl | (b) Title, and average | Onto NONE. | (d) Contributions to employee benefit plan | Τ, | e) Exp | ense |
| (a) Name and address of each employee paid more than \$50,000 | hours per week devoted to position | (c) Compensation | and deterred | 40 | count, | other |
| NONE | devoted to position | | compensation | +-' | allowar | ices |
| 1101111 | | | | | | |
| | | | | +- | | |
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| | | | | | | |
| | | | | + | | |
| | | | | | | |
| Total number of other employees paid over \$50,000 | 1 | 1 | | | | 0 |
| various or other proposed para ever weeken | <u></u> | | | | | |

| Part VIII Information About Officers, Directors, Truster Paid Employees, and Contractors (continued) | es, Foundation Managers, Highly | |
|--|-----------------------------------|------------------|
| 3 Five highest-paid independent contractors for professional services | s. If none, enter "NONE." | |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | | |
| | | |
| | | |
| | | |
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| | | |
| | | |
| | | |
| | | |
| | | |
| Total number of others receiving over \$50,000 for professional services | | ▶ 0 |
| Part IX-A Summary of Direct Charitable Activities | | |
| List the foundation's four largest direct charitable activities during the tax year. Inclinumber of organizations and other beneficiaries served, conferences convened, resi | | Expenses |
| | earch papers produced, etc. | · |
| 1 <u>N/A</u> | | |
| | | |
| | | |
| 2 | | |
| | | |
| 3 | | |
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| 4 | | |
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| | | |
| Part IX-B Summary of Program-Related Investments | <u> </u> | |
| Describe the two largest program-related investments made by the foundation during | ng the tax year on lines 1 and 2. | Amount |
| 1 N/A | | |
| | | |
| | | |
| 2 | | |
| | | |
| | | |
| All other program-related investments. See instructions. | | |
| 3 | | |
| | | |
| | | |
| | | |
| | | |
| Takal Add San d Abusunb O | | 0. |
| Total. Add lines 1 through 3 | | U • |

| P | Minimum Investment Return (All domestic foundations must | st con | nplete this | part. Foreign four | ndations, s | see instructions.) | |
|--------|--|---------------------|--------------|------------------------|--------------|--------------------|--------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, e | etc., pi | irposes: | | | | |
| а | Average monthly fair market value of securities | | | | 1a | 25,351 | ,578. |
| | Average of monthly cash balances | | | | 1b | 47 | ,830. |
| С | Fair market value of all other assets | | | | 1c | | |
| d | | | | | 1d | 25,399 | ,408. |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | | | | | | |
| | 1c (attach detailed explanation) | e | | 0. | | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | | | | 2 | | 0. |
| 3 | Subtract line 2 from line 1d | | | | 3 | 25,399 | |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see | e instr | uctions) | | 4 | 380 | <u>,991.</u> |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Pa | art V, | ine 4 | | 5 | 25,018 | |
| 6 | Minimum investment return. Enter 5% of line 5 | | | | 6 | 1,250 | <u>,921.</u> |
| P | Distributable Amount (see instructions) (Section 4942(j)(3) and (foreign organizations, check here | (j)(5) | orivate oper | ating foundations ar | ıd certain | | |
| 1 | Minimum investment return from Part X, line 6 | | | | 1 | 1,250 | ,921. |
| 2a | Tax on investment income for 2020 from Part VI, line 5 | a | | 19,743. | | | |
| b | Income tax for 2020. (This does not include the tax from Part VI.) | b | | | | | |
| C | Add lines 2a and 2b | | | | 2c | 19 | ,743. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | | | | 3 | 1,231 | ,178. |
| 4 | Recoveries of amounts treated as qualifying distributions | | | | 4 | | 0. |
| 5 | Add lines 3 and 4 | | | | 5 | 1,231 | <u>,178.</u> |
| 6 | Deduction from distributable amount (see instructions) | | | | 6 | | 0. |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII | | | | 7 | 1,231 | <u>,178.</u> |
| Ξ | Qualifying Distributions (see instructions) | | | | | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purpose | | | | 10 | 1 756 | 615 |
| | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | | | | 1a 1b | 1,756 | 0. |
| | Program-related investments - total from Part IX-B | | | | 2 | | 0. |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, or | eic., p | urposes | | - | | |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | | | | 20 | | |
| a | Suitability test (prior IRS approval required) | | | | 3a | | |
| | Cash distribution test (attach the required schedule) | | | | 3b 4 | 1,756 | 6/15 |
| 4 5 | Qualifying distributions . Add lines 1a through 3b. Enter here and on Part V, line 8; and P Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment. | | II, IIIIE 4 | | + | 1,750 | , 0 = 3 • |
| ð | • | | | | 5 | | 0. |
| 6 | income. Enter 1% of Part I, line 27b Adjusted qualifying distributions. Subtract line 5 from line 4 | | | | 6 | 1,756 | |
| U | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when | | | | | | , 0 4 3 • |
| | 4940(e) reduction of tax in those years. | ii baibi | natiliy Wilt | iloi die loulluation (| μαιιτισο 101 | เกษ 360เกษก | |

Part XIII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2019 | (c) 2019 | (d) 2020 |
|--|---------------|----------------------------|-------------|-------------|
| 1 Distributable amount for 2020 from Part XI, | оогриз | τοαι ο μποι το 2010 | 2013 | 2020 |
| line 7 | | | | 1,231,178. |
| 2 Undistributed income, if any, as of the end of 2020: | | | | |
| a Enter amount for 2019 only | | | 738,346. | |
| b Total for prior years: | | 0 | | |
| Excess distributions carryover, if any, to 2020: | | 0. | | |
| a From 2015 | | | | |
| b From 2016 | | | | |
| c From 2017 | | | | |
| d From 2018 | | | | |
| e From 2019 | | | | |
| f Total of lines 3a through e | 0. | | | |
| 4 Qualifying distributions for 2020 from | | | | |
| Part XII, line 4: ►\$ 1,756,645. | | | | |
| a Applied to 2019, but not more than line 2a | | | 738,346. | |
| b Applied to undistributed income of prior | | | · | |
| years (Election required - see instructions) | | 0. | | |
| c Treated as distributions out of corpus | | | | |
| (Election required - see instructions) | 0. | | | |
| d Applied to 2020 distributable amount | | | | 1,018,299. |
| e Remaining amount distributed out of corpus | 0. | | | , |
| Excess distributions carryover applied to 2020 (If an amount appears in column (d), the same amount | 0. | | | 0. |
| must be shown in column (a).) 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 | | 0. | | |
| assessed d Subtract line 6c from line 6b. Taxable | | 0. | | |
| amount - see instructions | | 0. | | |
| e Undistributed income for 2019. Subtract line | | , , | | |
| 4a from line 2a. Taxable amount - see instr. | | | 0. | |
| f Undistributed income for 2020. Subtract | | | | |
| lines 4d and 5 from line 1. This amount must | | | | |
| be distributed in 2021 | | | | 212,879. |
| 7 Amounts treated as distributions out of | | | | , |
| corpus to satisfy requirements imposed by | | | | |
| section 170(b)(1)(F) or 4942(g)(3) (Election | | | | |
| may be required - see instructions) | 0. | | | |
| 8 Excess distributions carryover from 2015 | | | | |
| not applied on line 5 or line 7 | 0. | | | |
| 9 Excess distributions carryover to 2021. | | | | |
| Subtract lines 7 and 8 from line 6a | 0. | | | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2016 | | | | |
| b Excess from 2017 | | | | |
| c Excess from 2018 | | | | |
| d Excess from 2019 | | | | |
| e Excess from 2020 | | | | |

PURPOSES OF THE FOUNDATION

023601 12-02-20

Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year ACTIVE SOUTHERN WEST VIRGINIA, INC. PC GENERAL PURPOSE NONE 116 NORTH HERBER STREET, SUITE B BECKLEY, WV 25801 1,000. AMERICAN NATIONAL RED CROSS PAYMENT NONE PC GENERAL PURPOSE 431 18TH STREET, NW WASHINGTON, DC 20006 12,500. AMERICAN WATER WORKS ASSOCIATION NONE PC GENERAL PURPOSE 6666 W. QUINCY AVE DENVER, CO 80235 3,500. BACKPACKBUDDY ORG INC NONE PC GENERAL PURPOSE P.O. BOX 830 WINFIELD, WV 25213 1,000. BIG BROTHERS BIG SISTERS NONE PC GENERAL PURPOSE 2502 N. ROCKY POINT DRIVE, SUITE 550 TAMPA, FL 33607 5,000. SEE CONTINUATION SHEET(S) **▶** 3a 1,691,050. Total **b** Approved for future payment THE BENEVITY COMMUNITY IMPACT FUND NONE PC GENERAL PURPOSE PO BOX 1010 SAFETY HARBOR, FL 34695 51,140. 51,140.

Total

Unrelated business income

Part XVI-A **Analysis of Income-Producing Activities**

| Enter gross amounts unless otherwise indicated. | Unrelate | ed business income | | ded by section 512, 513, or 514 | (e) |
|---|-----------------|----------------------|--------------------------|---------------------------------|-----------------------------------|
| • | (a) Business | (b) Amount | (C) Exclusion code | (d) Amount | Related or exempt function income |
| 1 Program service revenue: | code | 7 11110 21111 | code | 7 in ount | Tunotion moonio |
| a | | | | | |
| b | | | | | |
| C | | | | | |
| d | | | | | |
| e | | | | | |
| f | | | | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash | | | | | |
| investments | | | | | |
| 4 Dividends and interest from securities | | | 14 | 516,808. | |
| 5 Net rental income or (loss) from real estate: | | | | | |
| a Debt-financed property | | | | | |
| b Not debt-financed property | | | | | |
| 6 Net rental income or (loss) from personal | | | | | |
| property | | | | | |
| 7 Other investment income | | | | | |
| 8 Gain or (loss) from sales of assets other | | | | | |
| | | | 18 | 912,543. | |
| than inventory 9 Net income or (loss) from special events | | | 1 | 712,343. | |
| | | | | | |
| 10 Gross profit or (loss) from sales of inventory | | | | | |
| 11 Other revenue: | | | | | |
| a | | | | | |
| b | | | | | |
| c | | | | | |
| d | | | | | |
| e | | | | 1 400 251 | |
| 12 Subtotal. Add columns (b), (d), and (e) | | | | 1,429,351. | 0. |
| 13 Total . Add line 12, columns (b), (d), and (e) | | | | 13 | 1,429,351. |
| (See worksheet in line 13 instructions to verify calculations.) | | | | | |
| Part XVI-B Relationship of Activities to | the Acco | mplishment of Exe | empt | Purposes | |
| Line No. Explain below how each activity for which incom | | | contrib | outed importantly to the accon | nplishment of |
| the foundation's exempt purposes (other than b | | | | | |
| 8 LONG TERM CAPITAL GAINS | DIAIDE | ENDS | | | |
| | | | | | |
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Form **990-PF** (2020) 023621 12-02-20

0) AMERICAN WATER CHARITABLE FOUNDATION, INC 27-4241172 Information Regarding Transfers to and Transactions and Relationships With Noncharitable Part XVII **Exempt Organizations**

| 1 | Did the | organization directly or indir | ectly engage in any o | f the followin | g with any other organization | on described in sect | ion 501(c) | | Yes | No |
|--|-----------|---|---------------------------------------|-------------------|-------------------------------|--|----------------------------|--------------------------------|-------------|-----------|
| (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? | | | | | | | | | | |
| a Transfers from the reporting foundation to a noncharitable exempt organization of: | | | | | | | | | | 77 |
| | | h | | | | | | | | <u>X</u> |
| L | | er assets | | | | | | 1a(2) | | <u> </u> |
| D | | ansactions: | ala avamat arganizati | an. | | | | 1b(1) | | X |
| | | es of assets to a noncharitat chases of assets from a nor | | | | | | | | X |
| | | ital of facilities, equipment, (| | | | | | | | <u>x</u> |
| | | mbursement arrangements | | | | | | | | X |
| | | ns or loan guarantees | | | | | | | | X |
| | | formance of services or mer | | | | | | 141.40 | | X |
| C | Sharing | of facilities, equipment, mai | iling lists, other assets | s, or paid em | | | | | | X |
| d | If the an | swer to any of the above is ' | "Yes," complete the fo | llowing sche | dule. Column (b) should alv | ways show the fair ı | market value of the g | joods, other ass | ets, | |
| | | ces given by the reporting fo | | | ed less than fair market valu | ie in any transaction | n or sharing arranger | ment, show in | | |
| , , | | (d) the value of the goods, of | · · · · · · · · · · · · · · · · · · · | | | 1 | | | | |
| (a) ∟ | ine no. | (b) Amount involved | (c) Name of | | e exempt organization | (d) Description | n of transfers, transactio | ns, and sharing arra | angemen | ts |
| | | | | N/A | | | | | | |
| | | | | | | | | | | |
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| _ | | | | | | | | | | |
| 2a | | undation directly or indirect | • | | | | | V | Ū | No |
| | | n 501(c) (other than section complete the following sche | | 11011 527? | | | | Yes | Δ |] NO |
| D | ii tes, | (a) Name of org | | | (b) Type of organization | 1 | (c) Description of re | elationship | | |
| | | N/A | | | (2) Type or organization | | (2) 2 300 (p. 10) () | ланопотпр | | |
| | | | | | | | | | | |
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| | | | | | | | | | | |
| ۵. | | er penalties of perjury, I declare the belief, it is true, correct, and com | | , , | . , , | · | , . | May the IRS of | liscuss t | nis |
| Sig He | gn 📐 | | prote: Decidiation of prop | aror (ouror unarr | I | | - | return with the shown below | ? See ins | er tr. |
| пе | | · " | | | | TREASU | JRER | _ X Yes | | No |
| | Si | gnature of officer or trustee | | Droporo-la - | Date | Title | Check if | DTIN | | |
| | | Print/Type preparer's na | iiie | Preparer's si | ignature | Date | Check if self- employed | PTIN | | |
| Pa | id | KERRI N. BO | OGDA, CPA | Kin | 1 Hoad | 5/14/21 | 3011 Chipioyed | P00760 | 4 02 | |
| | eparer | | | IS T.T.I | P Jack | <u>ı </u> | Firm's EIN ► 3 | | | |
| | e Only | | | , | - | | I IIIII S LIN F J | - 55555 | _ 0 | |
| | - | Firm's address ▶ 15 | 70 FRUITVI | LLE P | IKE, SUITE 40 | 0 0 | | | | |
| | | | NCASTER, I | | • | | Phone no. 71 | 7.740.4 | 863 | |
| | | | - | | | | | Form 99 0 | | (2020) |

Supplementary Information Part XV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient BLUE GRASS COMMUNITY FOUNDATION NONE PC GENERAL PURPOSE 499 E. HIGH STREET, #112 LEXINGTON, KY 40507 1,500. NONE BONA VISTA PROGRAMS INC PC GENERAL PURPOSE P.O. BOX 2496 KOKOMO, IN 46904 1,000. BOYS AND GIRLS CLUB OF LIVINGSTON NONE PC GENERAL PURPOSE COUNTY 1303 E. INDIANA AVE PONTIAC, IL 61764 2,500. BOYS AND GIRLS CLUBS OF UNION COUNTY NONE PC GENERAL PURPOSE 1050 JEANETTE AVE UNION, NJ 07083 14,970. BREAD BASKET OF NEPA NONE PC GENERAL PURPOSE 550 MADISON AVE SCRANTON, PA 18510 1,000. BRIGHT FUTURES JOPLIN NONE PC GENERAL PURPOSE 825 S. PEARL AVE JOPLIN, MO 64801 1,000. CARING CUPBOARD NONE PC GENERAL PURPOSE 131 NORTH RAILROAD STREET PALMYRA, PA 17078 500. CARPENTER'S SHELTER INC NONE PC GENERAL PURPOSE 930 N HENRY STREET ALEXANDRIA, VA 22314 15,000. CATHEDRAL KITCHEN NONE PC GENERAL PURPOSE 1514 FEDERAL STREET CAMDEN , NJ 08105 25,000. CENTER FOR AQUATIC SCIENCES NONE PC GENERAL PURPOSE 1 RIVERSIDE DRIVE CAMDEN , NJ 08103 25,000.

1,668,050.

Total from continuation sheets

Supplementary Information Part XV

| 3 Grants and Contributions Paid During the | | T | | |
|---|--|--------------------------------------|----------------------------------|---------|
| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
| | or substantial contributor | roupidit | | |
| CHILDRENS SERVICE CENTER | NONE | PC | GENERAL PURPOSE | |
| 335 SOUTH FRANKLIN STREET | | | | |
| WILKES-BARRE, PA 18702 | | | | 1,000 |
| COMMISSION ON ECONOMIC OPPORTUNITY 165 AMBER LANE | NONE | PC | GENERAL PURPOSE | |
| WILKES-BARRE, PA 18702 | | | | 1,000 |
| | | | | |
| COMMUNITY CARE CENTER 112 S. CENTER STREET | NONE | PC | GENERAL PURPOSE | 2 500 |
| BRAIDWOOD, IL 60408 | | | | 3,500 |
| COMMUNITY FOUNDATION FOR MONTEREY COUNTY | NONE | PC | GENERAL PURPOSE | |
| 2354 GARDEN ROAD MONTEREY, CA 93940 | | | | 7,500 |
| | | | | ., |
| | | | | |
| COMMUNITY FOUNDATION OF NEW JERSEY | NONE | PC | GENERAL PURPOSE | |
| 35 KNOX HILL ROAD MORRISTOWN, NJ 07960 | | | | 125,000 |
| | | | | 220,000 |
| | | | | |
| COMMUNITY FOUNDATION | NONE | PC | GENERAL PURPOSE | |
| 945 S. MAIN STREET, #207 SALINAS, CA 93901 | | | | 1,000 |
| BIBLINID, OIL 30301 | | | | 1,000 |
| | | | | |
| COMMUNITY INTERFAITH FOOD PANTRY | NONE | PC | GENERAL PURPOSE | |
| 1218 W. MAIN STREET BELLEVILLE, IL 62220 | | | | 3,500 |
| , | | | | 3,330 |
| | | | | |
| COMMUNITY INTERVENTION CENTER | NONE | PC | GENERAL PURPOSE | |
| 445 N. 6TH AVE SCRANTON, PA 18503 | | | | 1,000 |
| DEMINION, IN 1888 | | | | 1,000 |
| | | | | |
| COVENANT HOUSE, INC. | NONE | PC | GENERAL PURPOSE | |
| 461 EIGHTH AVE NEW YORK, NY 10001 | | | | 1,000 |
| 10111, NI 10001 | | | | 1,000 |
| | | | | |
| CRISIS FOOD CENTER INC. | NONE | PC | GENERAL PURPOSE | |
| 21 E. 6TH STREET | | | | 3 500 |
| ALTON, IL 62002 Total from continuation sheets | | | | 3,500 |

Part XV **Supplementary Information**

| 3 Grants and Contributions Paid During the Year (Continuation) | | | | | | |
|--|---|----------------------|----------------------------------|----------|--|--|
| Recipient | If recipient is an individual, show any relationship to | Foundation status of | Purpose of grant or contribution | Amount | | |
| Name and address (home or business) | any foundation manager or substantial contributor | recipient | Contribution | 1 | | |
| | | | | | | |
| DINNERS FOR KIDS | NONE | PC | GENERAL PURPOSE | | | |
| 84 S. WYOMING AVENUE EDWARDSVILLE, PA 18704 | | | | 1,000. | | |
| 2525.1122, 111 10.01 | | | | 2,000. | | |
| | | | | | | |
| EAGLES NEST OF ST. CLAIR COUNTY | NONE | PC | GENERAL PURPOSE | | | |
| 5020 STATE STREET EAST ST. LOUIS, IL 62205 | | | | 3,500. | | |
| <u> </u> | | | | 3,300. | | |
| | | | | | | |
| ELK RIVER BACKPACK BLESSINGS | NONE | PC | GENERAL PURPOSE | | | |
| P.O. BOX 662 | | | | 1 000 | | |
| PINCH, WV 25156 | | | | 1,000. | | |
| | | | | | | |
| EQUAL JUSTICE INITIATIVE | NONE | PC | GENERAL PURPOSE | | | |
| 122 COMMERCE STREET | | | | | | |
| MONTGOMERY, AL 36104 | | | | 10,000. | | |
| | | | | | | |
| FAMILY RESOURCES INC | NONE | PC | GENERAL PURPOSE | | | |
| 5180 62 AVE | | | | | | |
| NORTH PINELLAS PARK, FL 33781 | | | | 5,000. | | |
| | | | | | | |
| FAMILY SERVICE ASSOCIATION | NONE | PC | GENERAL PURPOSE | | | |
| 31 WEST MARKET STREET | | | | | | |
| WILKES-BARRE, PA 18701 | | | | 1,000. | | |
| | | | | | | |
| FAYETTE COUNTY COMMUNITY ACTION | NONE | PC | GENERAL PURPOSE | | | |
| AGENCY INC 108 N. BEESON BLVD | | | | | | |
| UNIONTOWN, PA 15401 | | | | 1,500. | | |
| · | | | | , | | |
| | | | | | | |
| FEEDING AMERICA | NONE | PC | GENERAL PURPOSE | | | |
| 1627 I STREET, NW WASHINGTON, DC 20006 | | | | 50,000. | | |
| minimizer, be 2000 | | | | 30,000. | | |
| | | | | | | |
| FOOD FINDERS FOOD BANK INC | NONE | PC | GENERAL PURPOSE | | | |
| 1204 GREENBUSH STREET | | | | 1 500 | | |
| LAFAYETTE, IN 47904 | | | | 1,500. | | |
| FRIENDS OF NEW RIVER GORGE NATIONAL | NONE | PC | GENERAL PURPOSE | | | |
| RIVER | | | | | | |
| P.O. BOX 246 | | | | | | |
| GLEN JEAN, WV 25846 | | | | 11,900. | | |
| Total from continuation sheets | | | | <u> </u> | | |

Part XV Supplementary Information

| 3 Grants and Contributions Paid During the Y | | 1 | | |
|---|--|----------------------|----------------------------------|---------|
| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager | Foundation status of | Purpose of grant or contribution | Amount |
| - Hamo and address (nome or suchnoss) | or substantial contributor | recipient | | |
| FRIENDS OF THE OCCOQUAN | NONE | PC | GENERAL PURPOSE | |
| P.O. BOX 1452 | | | | |
| WOODBRIDGE, VA 22195 | | | | 7,500. |
| | | 7.0 | | |
| FUND FOR THE WATER WORKS 640 WATER WORKS DRIVE | NONE | PC | GENERAL PURPOSE | |
| PHILADELPHIA, PA 19130 | | | | 9,900. |
| THIBADBURITA, TA 1913V | | | | 3,500. |
| GODS PANTRY FOOD BANK | NONE | PC | GENERAL PURPOSE | |
| 1685 JAGGIE FOX WAY | | | | |
| LEXINGTON, KY 40511 | | | | 10,000. |
| | | | | |
| GOLDEN GIRL INC | NONE | PC | GENERAL PURPOSE | |
| P.O. BOX 3403 | | | | |
| CHARLESTON, WV 25334 | | | | 1,500. |
| | | | | |
| GREATER WASHINGTON COUNTY FOOD BANK | NONE | PC | GENERAL PURPOSE | |
| 909 NATIONAL PIKE WEST | | | | 2,000. |
| BROWNSVILLE, PA 15417 | | | | 2,000. |
| HANDS OF HOPE FOOD PANTRY | NONE | PC | GENERAL PURPOSE | |
| P.O. BOX 1057 | NONE | FC | GENERAL FORFOSE | |
| EDISON, NJ 08818 | | | | 3,500. |
| | | | | |
| HARFORD COMMUNITY ACTION AGENCY INC | NONE | PC | GENERAL PURPOSE | |
| 1321 WOODBRIDGE STATION WAY B | | | | |
| EDGEWOOD, MD 21040 | | | | 15,000. |
| | | | | |
| HEART HAVEN OUTREACH | NONE | PC | GENERAL PURPOSE | |
| 201 CANTEBURY LANE, SUITE C | | | | 2 500 |
| BOLINGBROOK, IL 60440 | | | | 2,500. |
| HEARTLANDS CONSERVANCY | NONE | PC | GENERAL PURPOSE | |
| 29 E. MAIN STREET | | | | |
| BELLEVILLE, IL 62220 | | | | 10,000. |
| | | | | |
| HELPING HANDS FOOD PANTRY | NONE | PC | GENERAL PURPOSE | |
| 61 MONROE STREET ST. JOHNSVILLE, NY 13452 | | | | 1,000. |
| Total from continuation sheets | ı | 1 | 1 | 2,000. |

Supplementary Information Part XV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient HELPING HARVEST NONE PC GENERAL PURPOSE 117 MORGAN DRIVE READING, PA 19608 4,000. NONE JACKSON COUNTY UNITED WAY PC GENERAL PURPOSE P.O. BOX 94 SEYMOUR , IN 47274 2,100. JAMES RIVER ASSOCIATION NONE PC GENERAL PURPOSE 211 ROCKETTS WAY, #200 RICHMOND , VA 23231 7,500. JOS OUTREACH NONE PC GENERAL PURPOSE 195 RIVER ROAD EAST STROUDSBURG, PA 18301 500. KANE AREA FOOD PANTRY NONE PC GENERAL PURPOSE 342 CHASE STREET KANE, PA 16735 1,500. KOKOMO HUMANE SOCIETY NONE PC GENERAL PURPOSE 729 E. HOFFER STREET KOKOMO, IN 46902 1,000. LA PAZ DE DIOS NONE PC GENERAL PURPOSE 1402 BAILEY AVE CHATTANOOGA, TN 37404 2,500. LINCOLN LOGAN FOOD PANTRY NONE PC GENERAL PURPOSE 125 N. LOGAN STREET 1,000. LINCOLN, IL 62656 MANNA CONEJO VALLEY FOOD BANK NONE PC GENERAL PURPOSE 3020 CRESCENT WAY THOUSAND OAKS, CA 91362 2,500.

PC

GENERAL PURPOSE

5,000.

P.O. BOX 681

SEQUATCHIE, TN 37374

MARION CO.COMMUNITY MINISTRIES INC

Total from continuation sheets

NONE

Supplementary Information Part XV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient MEALS ON WHEELS OF NEPA NONE PC GENERAL PURPOSE 541 WYOMING AVE SCRANTON, PA 18509 1,000. MEALS ON WHEELS OF NORTHWEST INDIANA NONE PC GENERAL PURPOSE 8446 VIRGINIA STREET MERRILLVILLE, IN 46410 5,000. MEARTH (ME-EARTH) NONE PC GENERAL PURPOSE PO BOX 223702 CARMEL, CA 93922 18,925. MENTAL HEALTH AMERICA NONE PC GENERAL PURPOSE 500 MONTGOMERY STREET, #820 ALEXANDRIA, VA 22314 1,000. MON/YOUGH TRAIL COUNCIL NONE PC GENERAL PURPOSE P.O. BOX 1452 MCKEESPORT, PA 15135 19,200. MOUNT SINAI SOUTH NASSAU NONE PC GENERAL PURPOSE ONE HEALTHY WAY OCEANSIDE, NY 11572 7,500. NAHANT MARSH EDUCATION CENTER NONE PC GENERAL PURPOSE 4220 WAPELLO AVE DAVENPORT, IA 52802 15,000. NATIONAL RECREATION AND PARK ASSOC NONE PC GENERAL PURPOSE 22377 BELMONT RIGE ROAD ASHBURN, VA 20148 600,000. NORTHEASTERN PA YOUTH SHELTER NONE PC GENERAL PURPOSE 541 WYOMING AVE SCRANTON, PA 18509 750. OPERATION ENDANGERED SPECIES NONE PC GENERAL PURPOSE 14366 N 1775 EAST ROAD PONTIAC, IL 61764 10,000. Total from continuation sheets

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient OPERATION FOOD SEARCH INC. NONE PC GENERAL PURPOSE 1644 LOTSIE BLVD ST. LOUIS, MO 63132 10,000. OSI FOUNDATION INC NONE PC GENERAL PURPOSE P.O. BOX 218070 FAIRFIELD, OH 45018 3,100. PEORIA PUBLIC SCHOOLS FOUNDATION NONE PC GENERAL PURPOSE 2503 N. UNIVERSITY STREET PEORIA, IL 61604 2,000. PHILANTHROPY WEST VIRGINIA NONE PC GENERAL PURPOSE P.O. BOX 1584 MORGANTOWN, VA 26505 10,000. PIVOTAL POINT TRANSITIONAL HOUSING NONE PC GENERAL PURPOSE 4826 FREDERICK AVE SAINT JOSEPH, MO 64506 2,500. RAINBOW KITCHEN COMMUNITY SERVICES NONE PC GENERAL PURPOSE 135 EAST 9TH AVENUE 4,500. HOMESTEAD, PA 15120 RITENOUR CO-CARE, INC. NONE PC GENERAL PURPOSE P.O. BOX 142542 SAINT LOUIS, MO 63114 1,000. RIVER BEND FOOD RESERVOIR NONE PC GENERAL PURPOSE 4010 KIMMEL DRIVE DAVENPORT, IA 52802 5,000. RIVERVIEW HOSPITAL FOUNDATION INC NONE PC GENERAL PURPOSE P.O. BOX 220 NOBELSVILLE, IN 46061 1,000. SACRAMENTO FOOD BANK AND FAMILY NONE PC GENERAL PURPOSE SERVICES 3333 THIRD AVENUE SACRAMENTO, CA 95817 5,000.

Total from continuation sheets

Part XV Supplementary Information

| Part XV Supplementary Information | | | | |
|--|--|----------------------|----------------------------------|----------|
| 3 Grants and Contributions Paid During the Y | ear (Continuation) | _ | | |
| Recipient | If recipient is an individual, show any relationship to any foundation manager | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | Contribution | |
| | | | | |
| SCRANTON TOMORROW | NONE | PC | GENERAL PURPOSE | |
| 307 LINDEN STREET | NONE | | CHARITIE I GRI ODE | |
| SCRANTON, PA 18503 | | | | 750. |
| | | | | |
| | | | | |
| SECOND HARVEST COMMUNITY FOOD BANK | NONE | PC | GENERAL PURPOSE | |
| 915 DOUGLAS | | | | 2 400 |
| ST. JOSEPH, MO 64505 | | | | 2,400. |
| | | | | |
| SEQUATCHIE CO FELLOWSHIP OF CHURCHES | NONE | PC | GENERAL PURPOSE | |
| P.O. BOX 2041 | | | | |
| DUNLAP, TN 37327 | | | | 2,500. |
| | | | | |
| TERRE HAUTE HUMANE SOCIETY | NONE | PC | GENERAL PURPOSE | |
| P.O. BOX 3307 | NONE | PC | GENERAL PORPOSE | |
| TERRE HAUTE, IN 47803 | | | | 1,800. |
| | | | | , - |
| | | | | |
| THE BENEVITY COMMUNITY IMPACT FUND | NONE | PC | GENERAL PURPOSE | |
| PO BOX 1010 | | | | |
| SAFETY HARBOR, FL 34695 | | | | 332,673. |
| | | | | |
| THE CONSERVATION FOUNDATION | NONE | PC | GENERAL PURPOSE | |
| 10S404 KNOCH KNOLLS ROAD | | | | |
| NAPERVILLE, IL 60565 | | | | 10,000. |
| | | | | |
| THE FOOD BANK FOR CENTRAL & NORTHEAST MISSOURI | NONE | PC | GENERAL PURPOSE | |
| 2101 VANDIVER DRIVE | | | | |
| COLUMBIA, MO 65202 | | | | 2,500. |
| | | | | |
| | | | | |
| THE HELP CENTER INC | NONE | PC | GENERAL PURPOSE | |
| 409 FAIRGROUND STREET MEXICO, MO 65265 | | | | 2,500. |
| MEXICO, NO 03203 | | | | 2,300. |
| | | | | |
| THE HOPE CHEST | NONE | PC | GENERAL PURPOSE | |
| 1106 DERBY STREET | | | | |
| PEKIN , IL 61555 | | | | 1,000. |
| | | | | |
| THE SOUTHSIDE COMMUNITY HOSPITAL | NONE | PC | GENERAL PURPOSE | |
| 800 OAK STREET | | | | |
| FARMVILLE, VA 23901 | | | | 2,000. |
| Total from continuation sheets | | | | |

Part XV Supplementary Information

| Part XV Supplementary Information | ו | | | |
|--|--|----------------------|----------------------------------|---------|
| 3 Grants and Contributions Paid During the Y | ear (Continuation) | | | |
| Recipient | If recipient is an individual, show any relationship to any foundation manager | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | Contribution | |
| | | | | |
| THIRD PHASE CHRISTIAN CENTER | NONE | PC | GENERAL PURPOSE | |
| 15755 ALLISONVILLE ROAD | | | | |
| NOBLESVILLE, IN 46060 | | | | 1,000. |
| | | | | |
| TRICITY FAMILY SERVICES | NONE | PC | GENERAL PURPOSE | |
| 1120 RANDALL CT | NONE | FC | GENERAL FORFOSE | |
| GENEVA, IL 60134 | | | | 12,500. |
| | | | | , |
| | | | | |
| UNITED FUND OF WARREN COUNTY | NONE | PC | GENERAL PURPOSE | |
| 305 W 3RD AVE | | | | 1 500 |
| WARREN, PA 16365 | | | | 1,500. |
| | | | | |
| UNITED NEIGHBORHOOD CENTERS | NONE | PC | GENERAL PURPOSE | |
| 1801 N 3RD STREET | | | | |
| HARRISBURG, PA 17102 | | | | 1,000. |
| UNITED WAY OF CENTRAL WEST VIRGINIA | NONE | PC | GENERAL PURPOSE | |
| INC | NONE | | CHARITIE I OKTOBE | |
| 1 UNITED WAY SQUARE | | | | |
| CHARLESTON, WV 25301 | | | | 2,500. |
| | | | | |
| UNITED WAY OF ESCAMBIA COUNTY | NONE | PC | GENERAL PURPOSE | |
| 1301 W. GOVERNMENT STREET | NONE | FC | GENERAL FORFOSE | |
| PENSACOLA, FL 32502 | | | | 110. |
| · | | | | |
| | | | | |
| UNITED WAY OF GREATER PHILADELPHIA | NONE | PC | GENERAL PURPOSE | |
| 1800 JOHN F KENNEDY BLVD, SUITE 1200 PHILADELPHIA, PA 19103 | | | | 45,986. |
| THIRDEBINIA, IA 19103 | | | | 43,500. |
| | | | | |
| UNITED WAY OF GREATER ST. LOUIS | NONE | PC | GENERAL PURPOSE | |
| 910 N. 11TH STREET | | | | |
| ST. LOUIS, MO 63101 | | | | 3,904. |
| | | | | |
| UNITED WAY OF JOHNSON COUNTY | NONE | PC | GENERAL PURPOSE | |
| 594 IRONWOOD DRIVE | | | | |
| FRANKLIN, IN 46131 | | | | 3,100. |
| | | | | |
| IINTED WAY OF MEMBODOLITHAN CUICAGO | MONE | P.C. | CEMEDAI DIIDDOCE | |
| UNITED WAY OF METROPOLITAN CHICAGO 333 S. WABASH AVE, 30TH FLOOR | NONE | PC | GENERAL PURPOSE | |
| CHICAGO, IL 60604 | | | | 12,500. |
| Total from continuation sheets | | | | |
| | | | | |

Supplementary Information Part XV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient UNITED WAY OF SOUTHERN WEST VIRGINIA NONE PC GENERAL PURPOSE 110 CROFT STREET BECKLEY, WV 25801 1,000. UNITED WAY OF THE RIVER CITIES INC. NONE PC GENERAL PURPOSE 820 MADISON AVE HUNTINGTON, WV 25704 1,000. WARRIOR RUN NEIGH HELPING NEIGHBORS NONE PC GENERAL PURPOSE 70 1ST STREET TURBOTVILLE, PA 17772 500. WATER FOR PEOPLE NONE PC GENERAL PURPOSE 100 E. TENNESSEE AVE DENVER, CO 80209 50,000. WHITWELL ELEMENTARY SCHOOL NONE PC GENERAL PURPOSE 150 TIGER TRAIL WHITWELL, TN 37397 18,482. WOUNDED WARRIOR PROJECT INC NONE PC GENERAL PURPOSE 4899 BELFORT ROAD, SUITE 300 JACKSONVILLE, FL 32256 15,000. YMCA OF METROPOLITAN CHATTANOOGA PC NONE GENERAL PURPOSE 301 WEST 6TH STREET CHATTANOOGA, TN 37402 5,000. Total from continuation sheets

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No. 1545-0047

2020

AMERICAN WATER CHARITABLE FOUNDATION, INC

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

Employer identification number

27-4241172

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

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 X 501(c)(3) exempt private foundation Form 990-PF 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 X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year ______ > \$ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

AMERICAN WATER CHARITABLE FOUNDATION, INC

27-4241172

| Part I | Contributors (see instructions). Use duplicate copies of Part I if addition | nal space is needed. | |
|------------|---|----------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | AMERICAN WATER CAPITAL CORP 1 WATER STREET CAMDEN, NJ 08102 | \$\$ | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | - - \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | - - - - | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) | (b) | (c) | (d) |
| No. | Name, address, and ZIP + 4 | Total contributions - \$ | Person Payroll Complete Part II for noncash contributions. |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | - \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | - - - \$ | Person Payroll Complete Part II for noncash contributions.) |

Name of organization Employer identification number

AMERICAN WATER CHARITABLE FOUNDATION, INC

27-4241172

| Part II | Noncash Property (see instructions). Use duplicate copies of Part II | if additional space is needed. | |
|------------------------------|--|---|----------------------|
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
| | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
| | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
| | | _ _ _ \$ | |

Name of organization Employer identification number

| MERIC | CAN WATER CHARITABLE FOU | | | 27-4241172 |
|---------------------------|--|---|------------------------------------|--------------------------------|
| Part III | Exclusively religious, charitable, etc., contribution from any one contributor. Complete columns (a) | through (e) and the following line ent | ry. For organizations | |
| | completing Part III, enter the total of exclusively religious, | charitable, etc., contributions of \$1,000 or | less for the year. (Enter this inf | o. once.) > \$ |
| (a) No. | 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) D | escription of how gift is held |
| raiti | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | (e) Transfer of gif | i | |
| | Transferee's name, address, and ZIP + 4 Relationship of transferor to | | | |
| | Transfered & Hame, address, an | | Tiolationiomp of | |
| | | | | |
| | | | | |
| (a) No | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) D | escription of how gift is held |
| Parti | | | | |
| | | | | |
| | | | | |
| - | | | | |
| | | (e) Transfer of gif | t | |
| | Transferee's name, address, ar | nd 7 IP ± 4 | Relationship of | transferor to transferee |
| | Transferee o name, address, ar | IN LIT | Ticidationionip of | transfer of to transfer ce |
| | | | | |
| | - | | | |
| (a) No | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) D | escription of how gift is held |
| raiti | | | | |
| | | | | |
| | | | | |
| - | | | | |
| | | (e) Transfer of gif | i | |
| | Transferee's name, address, ar | nd ZIP + 4 | Relationship of | transferor to transferee |
| | | | • | |
| | - | | | |
| | | | | |
| (a) No. | 1 | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) D | escription of how gift is held |
| | | | | |
| | | | | |
| | | | | |
| - | | / N == | L | |
| | | (e) Transfer of gif | ī | |
| | Transferee's name, address, ar | nd ZIP + 4 | Relationship of | transferor to transferee |
| ļ | | | | |
| | | | | |
| | | | | |

| FORM 990-PF DIVIDENT | DS AND INTER | EST FROM SECUR | ITIES S1 | PATEMENT 1 | | |
|--|---|--|---------------------------------------|---|--|--|
| GROSS AMOUNT | CAPITAL GAINS DIVIDEND | REVENUE | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | | |
| DIVIDEND INCOME 1,197,63 | 0. 680,82 | 2. 516,808. | 516,808. | | | |
| TO PART I, LINE 4 1,197,63 | 680,82 | 516,808. | 516,808. | | | |
| FORM 990-PF LEGAL FEES STATEMENT 2 | | | | | | |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES | | |
| LEGAL FEES | 1,095. | 0. | | 1,095. | | |
| TO FM 990-PF, PG 1, LN 16A | 1,095. | 0. | · · · · · · · · · · · · · · · · · · · | 1,095. | | |
| FORM 990-PF | ACCOUNTI | NG FEES | | TATEMENT 3 | | |
| | | | | | | |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) | | |
| DESCRIPTION AUDIT/ACCOUNTING FEES | EXPENSES | NET INVEST- | (C) ADJUSTED | (D) CHARITABLE | | |
| | EXPENSES PER BOOKS | NET INVEST- MENT INCOME | (C) ADJUSTED | (D) CHARITABLE PURPOSES | | |
| AUDIT/ACCOUNTING FEES | EXPENSES PER BOOKS 21,959. | MENT INCOME 1,791. | (C) ADJUSTED | (D) CHARITABLE PURPOSES 20,168. | | |
| AUDIT/ACCOUNTING FEES | EXPENSES PER BOOKS 21,959. | NET INVEST- MENT INCOME 1,791. | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES 20,168. | | |
| AUDIT/ACCOUNTING FEES TO FORM 990-PF, PG 1, LN 16B | EXPENSES PER BOOKS 21,959. 21,959. | NET INVEST- MENT INCOME 1,791. | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES 20,168. 20,168. TATEMENT 4 (D) | | |
| AUDIT/ACCOUNTING FEES TO FORM 990-PF, PG 1, LN 16B FORM 990-PF | EXPENSES PER BOOKS 21,959. 21,959. TAX (A) EXPENSES | NET INVEST- MENT INCOME 1,791. 1,791. ES (B) NET INVEST- | (C) ADJUSTED NET INCOME ST | (D) CHARITABLE PURPOSES 20,168. 20,168. TATEMENT 4 (D) CHARITABLE | | |

| FORM 990-PF | OTHER E | OTHER EXPENSES | | | STATEMENT 5 | |
|--|------------------------------|--------------------|------------------------------|---------------------|---------------------------------|--|
| DESCRIPTION | EXPENSES NET INVEST- ADD | | (C) ADJUSTED NET INCOM | | | |
| BANK/CHECK FEES BENEVITY FEE OTHER FEES | 4,054. 21,978. 15,477. | | 0. 0. ,177. | | 4,054. 21,978. 8,300. | |
| TO FORM 990-PF, PG 1, LN 23 | 41,509. | 7, | 177. | | 34,332 | |
| FORM 990-PF DESCRIPTION | CORPORAT | E STOCK | PO | OK VALUE | STATEMENT 6 FAIR MARKET VALUE | |
| DESCRIPTION VANGUARD FTSE ALL-WORLD EX-US | Tam | | | 7,564,723. | 7,564,723. | |
| VANGUARD FISE ALL-WORLD EX-US VANGUARD INST INDEX FUND INST | | | 12,399,424. | | 12,399,424. | |
| TOTAL TO FORM 990-PF, PART II | , LINE 10B | | 19 | 9,964,147. | 19,964,147. | |
| FORM 990-PF | CORPORAT | E BONDS | | | STATEMENT 7 | |
| DESCRIPTION | | | вос | OK VALUE | FAIR MARKET VALUE | |
| VANGUARD TOTAL BOND MKT INDEX | ADM | | | 7,681,719. | 7,681,719. | |
| TOTAL TO FORM 990-PF, PART II | , LINE 10C | | | 7,681,719. | 7,681,719. | |
| FORM 990-PF | OTHER | ASSETS | | | STATEMENT 8 | |
| DESCRIPTION | | NING OF K VALUE | | OF YEAR OK VALUE | FAIR MARKET VALUE | |
| CONTRIBUTIONS RECEIVABLE INTEREST RECEIVABLE | 1, | 500,000. | | 0. 22. | 0. | |

1,500,255.

TO FORM 990-PF, PART II, LINE 15

22.

22.

| FORM 990-PF | OTHER LIABILITIES | | STATEMENT 9 |
|--|-------------------|-------------------|--------------------|
| DESCRIPTION | | BOY AMOUNT | EOY AMOUNT |
| DEFERRED EXCISE TAX LIABILITY CURRENT EXCISE TAX LIABILITY | _ | 87,785. 9,061. | 91,073. 16,594. |
| TOTAL TO FORM 990-PF, PART II, | LINE 22 | 96,846. | 107,667. |

| FORM 990-PF | LIST OF OFFICERS, AND FOUNDATION MA | | STAT | EMENT 10 |
|--|--|-----------------------|---------------------------------|--------------------|
| NAME AND ADDRESS | TITLE AND AVRG HRS/WK | COMPEN- SATION | EMPLOYEE BEN PLAN CONTRIB | EXPENSE ACCOUNT |
| CAROLINE GRAY 1 WATER STREET CAMDEN, NJ 08102 | SECRETARY 8.00 | 0. | 0. | 0. |
| CARRIE WILLIAMS 1 WATER STREET CAMDEN, NJ 08102 | PRESIDENT 35.00 | 0. | 0. | 0. |
| DARLENE WILLIAMS 1 WATER STREET CAMDEN, NJ 08102 | BOARD MEMBER 0.50 | L (LEFT 10/5/20 0. | 0. | 0. |
| DEBORAH DEGILLIO 1 WATER STREET CAMDEN, NJ 08102 | BOARD MEMBER 0.50 | 0. | 0. | 0. |
| ERIC PALM 1 WATER STREET CAMDEN, NJ 08102 | BOARD MEMBER 0.50 | 0. | 0. | 0. |
| FRED MYERS 1 WATER STREET CAMDEN, NJ 08102 | CHAIR 0.50 | 0. | 0. | 0. |
| JOHN QUINN 1 WATER STREET CAMDEN, NJ 08102 | ASST. TREASU | URER 0. | 0. | 0. |
| KEVIN TILDEN 1 WATER STREET CAMDEN, NJ 08102 | BOARD MEMBER | 0. | 0. | 0. |
| LAURA MARTIN 1 WATER STREET CAMDEN, NJ 08102 | BOARD MEMBER | 0. | 0. | 0. |
| MARGARET FLYNN 1 WATER STREET CAMDEN, NJ 08102 | TREASURER 0.50 | 0. | 0. | 0. |

| | | | 27 | 7-4241172 |
|---|----------------------|----|----|-----------|
| RANDY MOORE 1 WATER STREET CAMDEN, NJ 08102 | BOARD MEMBER 0.50 | 0. | 0. | 0. |
| VALORIA ARMSTRONG 1 WATER STREET CAMDEN, NJ 08102 | BOARD MEMBER 0.50 | 0. | 0. | 0. |
| TOTALS INCLUDED ON 990-PF, PAGE 6, | PART VIII | 0. | 0. | 0. |