

Form **990**

**Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

**2020**

Department of the Treasury  
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Open to Public Inspection

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

<b>B</b> Check if applicable:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>DELAWARE COMMUNITY FOUNDATION, INC</b> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>P.O. BOX 1636</b> City or town, state or province, country, and ZIP or foreign postal code <b>WILMINGTON, DE 19899</b> <b>F</b> Name and address of principal officer: <b>JOHN STUART COMSTOCK-GAY</b> <b>SAME AS C ABOVE</b>	<b>D</b> Employer identification number <b>22-2804785</b> <b>E</b> Telephone number <b>302-571-8004</b> <b>G</b> Gross receipts \$ <b>138,245,391.</b> <b>H(a)</b> Is this a group return for subordinates? ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions <b>H(c)</b> Group exemption number ▶
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
<b>J</b> Website: ▶ <b>WWW.DELCF.ORG</b>		
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L</b> Year of formation: <b>1986</b> <b>M</b> State of legal domicile: <b>DE</b>

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>OUR MISSION IS TO IMPROVE THE LIVES OF THE PEOPLE OF DELAWARE BY EMPOWERING AND GROWING</b> <b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets. <b>3</b> Number of voting members of the governing body (Part VI, line 1a) ..... <b>3</b> <b>52</b> <b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) ..... <b>4</b> <b>19</b> <b>5</b> Total number of individuals employed in calendar year 2020 (Part V, line 2a) ..... <b>5</b> <b>34</b> <b>6</b> Total number of volunteers (estimate if necessary) ..... <b>6</b> <b>95</b> <b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12 ..... <b>7a</b> <b>0.</b> <b>7b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11 ..... <b>7b</b> <b>0.</b>																									
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**Part II Signature Block**

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

<b>Sign Here</b>	Signature of officer <b>JOYCE DARLING, VP-FINANCE &amp; ADMINISTRATION</b> Type or print name and title	Date
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>KATHERINE L. SILICATO</b>	Preparer's signature Date Check if self-employed <input type="checkbox"/> PTIN <b>P00543107</b>
	Firm's name ▶ <b>GUNNIP &amp; COMPANY LLP</b> Firm's address ▶ <b>2751 CENTERVILLE RD., STE. 300 WILMINGTON, DE 19808</b>	Firm's EIN ▶ <b>51-0076769</b> Phone no. <b>302-225-5000</b>

May the IRS discuss this return with the preparer shown above? See instructions .....  Yes  No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: OUR MISSION IS TO IMPROVE THE LIVES OF THE PEOPLE OF DELAWARE BY EMPOWERING AND GROWING PHILANTHROPY THROUGH KNOWLEDGE AND RELATIONSHIPS, NOW AND IN THE FUTURE. WE ENVISION A DELAWARE WHERE GENEROSITY EXPANDS OPPORTUNITY FOR ALL AND ENHANCES THE COMMON GOOD.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 28,187,972. including grants of \$ 25,107,367. ) (Revenue \$ 962,375. ) IN THE FISCAL YEAR ENDED JUNE 30, 2021, THE DELAWARE COMMUNITY FOUNDATION INVESTED IN BUILDING OPPORTUNITY THROUGHOUT THE STATE BY AWARDING OVER \$30 MILLION IN GRANTS AND PROGRAM EXPENSES TO NONPROFIT ORGANIZATIONS AND LOCAL STUDENTS. THE MAJORITY OF THAT AMOUNT WAS GRANTED FROM DONOR ADVISED FUNDS. THE DCF ALSO AWARDED \$449,200 IN SCHOLARSHIPS TO 189 STUDENTS AND \$2,277,970 IN DIRECT GRANTS TO DOZENS OF DELAWARE NONPROFIT ORGANIZATIONS THROUGH OUR COMMUNITY IMPACT GRANTS PROGRAM.

4b (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses 28,187,972.

**Part IV Checklist of Required Schedules**

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	X	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	X	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	X	
c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> .....	<b>22</b> X	
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .....	<b>23</b> X	
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> .....	<b>24a</b>	X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....	<b>24b</b>	
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....	<b>24c</b>	
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....	<b>24d</b>	
<b>25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....	<b>25a</b>	X
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> .....	<b>25b</b>	X
<b>26</b> Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> .....	<b>26</b>	X
<b>27</b> Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> .....	<b>27</b>	X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28a</b>	X
<b>b</b> A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28b</b>	X
<b>c</b> A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28c</b>	X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....	<b>29</b> X	
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....	<b>30</b>	X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....	<b>31</b>	X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....	<b>32</b>	X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....	<b>33</b>	X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> .....	<b>34</b> X	
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....	<b>35a</b>	X
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....	<b>35b</b>	
<b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....	<b>36</b>	X
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> .....	<b>37</b>	X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? .....	<b>38</b> X	

**Note:** All Form 990 filers are required to complete Schedule O

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

	Yes	No
<b>1a</b> Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable .....	<b>1a</b> 75	
<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .....	<b>1b</b> 0	
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? .....	<b>1c</b> X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 16 regarding employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

**Part VI Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
	1a	52	
<b>b</b>	Enter the number of voting members included on line 1a, above, who are independent		
	1b	19	
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
<b>6</b>	Did the organization have members or stockholders?	X	
<b>7a</b>	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	X	
<b>b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body?	X	
<b>b</b>	Each committee with authority to act on behalf of the governing body?	X	
<b>9</b>	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates?		X
<b>b</b>	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
<b>10b</b>			
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
<b>b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
<b>b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
<b>c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
<b>12c</b>			
<b>13</b>	Did the organization have a written whistleblower policy?	X	
<b>14</b>	Did the organization have a written document retention and destruction policy?	X	
<b>15</b>	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
<b>a</b>	The organization's CEO, Executive Director, or top management official	X	
<b>b</b>	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
<b>b</b>	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		
<b>16b</b>			

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed **NONE**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website     Another's website     Upon request     Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **▶**  
**JOYCE DARLING - 302-504-5251**  
**P.O. BOX 1636, WILMINGTON, DE 19899**

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

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

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

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JOHN STUART COMSTOCK-GAY PRESIDENT & CEO	35.00			X			290,293.	0.	66,220.	
(2) ASHLEY R. ALTSCHULER BOARD MEMBER	2.00	X					0.	0.	0.	
(3) DAN CRUCE BOARD MEMBER	2.00	X					0.	0.	0.	
(4) CLAIRE DEMATTEIS BOARD MEMBER	2.00	X					0.	0.	0.	
(5) WILLIAM C. DUGDALE CHAIRPERSON	2.00	X		X			0.	0.	0.	
(6) DREW N. FENNEL VICE CHAIRPERSON	2.00	X		X			0.	0.	0.	
(7) KELLY FIRMENT IMMEDIATE PAST CHAIRPERSON	2.00	X		X			0.	0.	0.	
(8) LOSSIE FREEMAN BOARD MEMBER	2.00	X					0.	0.	0.	
(9) CHANTA HOWARD-WILKINSON BOARD MEMBER	2.00	X					0.	0.	0.	
(10) NICHOLAS LAMBROW BOARD MEMBER	2.00	X					0.	0.	0.	
(11) JAMES MAZARAKIS BOARD MEMBER	2.00	X					0.	0.	0.	
(12) HON. TAMIKA MONTGOMERY-REEVES BOARD MEMBER	2.00	X					0.	0.	0.	
(13) DONALD W. NICHOLSON, JR., CFP A BOARD MEMBER	2.00	X					0.	0.	0.	
(14) LOUISE PHILLIPS BOARD MEMBER	2.00	X					0.	0.	0.	
(15) VITA PICKRUM, ED. D, CFRE BOARD MEMBER	2.00	X					0.	0.	0.	
(16) THOMAS L. SAGER, ESQ. BOARD MEMBER	2.00	X					0.	0.	0.	
(17) DAVID W. SINGLETON TREASURER	2.00	X		X			0.	0.	0.	

**Part VII** Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) HON. GREGORY M. SLEET (RET.) BOARD MEMBER	2.00	X						0.	0.	0.
(19) ANDY STATON BOARD MEMBER	2.00	X						0.	0.	0.
(20) CINDY L. SZABO, ESQ. CORP. SECRETARY	2.00	X		X				0.	0.	0.
(21) MICHELLE A. TAYLOR BOARD MEMBER	2.00	X						0.	0.	0.
(22) MARIA LOPEZ WAITE BOARD MEMBER	2.00	X						0.	0.	0.
(23) THOMAS D. WREN BOARD MEMBER	2.00	X						0.	0.	0.
<b>1b Subtotal</b>								290,293.	0.	66,220.
<b>c Total from continuation sheets to Part VII, Section A</b>								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b>								290,293.	0.	66,220.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **1**

	Yes	No
3 Did the organization list any <b>former</b> officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

**Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
SEI INVESTMENT ONE FREEDOM VALLEY DRIVE, OAKS, PA 19456	INVESTMENT SERVICES	951,518.
CHRISTINE A CANNON INC 131 WYETH WAY, HOCKESSIN, DE 19707	PROGRAM SERVICES	195,000.
PGM CONSULTING INC 7431 TIMOTHY'S WAY, EASTON, MD 21601	PROGRAM SERVICES	127,257.
EPIC MARKETING CONSULTANTS CORP 501 MAIN STREET, ODESSA, DE 19730	MARKETING SERVICES	114,035.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **4**



**Part VIII Statement of Revenue**

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	<b>1 a</b> Federated campaigns	<b>1a</b>					
	<b>b</b> Membership dues	<b>1b</b>					
	<b>c</b> Fundraising events	<b>1c</b>					
	<b>d</b> Related organizations	<b>1d</b>					
	<b>e</b> Government grants (contributions)	<b>1e</b>	6,346,383.				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	75,004,842.				
	<b>g</b> Noncash contributions included in lines 1a-1f	<b>1g</b>	\$ 28,401,181.				
	<b>h Total.</b> Add lines 1a-1f			81,351,225.			
Program Service Revenue	<b>2 a</b> PROGRAM INCOME	Business Code	900099	593,950.	593,950.		
	<b>b</b> ADMINISTRATIVE FEE INCOME		561000	233,511.	233,511.		
	<b>c</b>						
	<b>d</b>						
	<b>e</b>						
	<b>f</b> All other program service revenue						
	<b>g Total.</b> Add lines 2a-2f			827,461.			
Other Revenue	<b>3</b> Investment income (including dividends, interest, and other similar amounts)			4,208,040.		4,208,040.	
	<b>4</b> Income from investment of tax-exempt bond proceeds						
	<b>5</b> Royalties						
	<b>6 a</b> Gross rents	<b>6a</b>	(i) Real	11,050.			
			(ii) Personal				
	<b>b</b> Less: rental expenses	<b>6b</b>		0.			
	<b>c</b> Rental income or (loss)	<b>6c</b>		11,050.			
	<b>d</b> Net rental income or (loss)			11,050.	11,050.		
	<b>7 a</b> Gross amount from sales of assets other than inventory	<b>7a</b>	(i) Securities	51,723,751.			
			(ii) Other				
	<b>b</b> Less: cost or other basis and sales expenses	<b>7b</b>		45,350,305.			
<b>c</b> Gain or (loss)	<b>7c</b>		6,373,446.				
<b>d</b> Net gain or (loss)			6,373,446.		6,373,446.		
<b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	<b>8a</b>						
<b>b</b> Less: direct expenses	<b>8b</b>						
<b>c</b> Net income or (loss) from fundraising events							
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19	<b>9a</b>						
<b>b</b> Less: direct expenses	<b>9b</b>						
<b>c</b> Net income or (loss) from gaming activities							
<b>10 a</b> Gross sales of inventory, less returns and allowances	<b>10a</b>						
<b>b</b> Less: cost of goods sold	<b>10b</b>						
<b>c</b> Net income or (loss) from sales of inventory							
Miscellaneous Revenue	<b>11 a</b> EVENT INCOME	Business Code	900099	104,158.	104,158.		
	<b>b</b> OTHER INCOME		900099	15,414.	15,414.		
	<b>c</b> LOAN INTEREST INCOME		900099	4,292.	4,292.		
	<b>d</b> All other revenue						
	<b>e Total.</b> Add lines 11a-11d			123,864.			
<b>12 Total revenue.</b> See instructions			92,895,086.	962,375.	0.	10,581,486.	

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	24,658,145.	24,658,145.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	449,222.	449,222.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	299,388.	70,179.	121,347.	107,862.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,277,234.	299,395.	517,682.	460,157.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	93,200.	17,440.	38,835.	36,925.
9 Other employee benefits	333,586.	78,459.	168,127.	87,000.
10 Payroll taxes	105,852.	26,703.	40,644.	38,505.
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	1,197,640.		1,197,640.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	1,080,350.	778,047.	273,125.	29,178.
12 Advertising and promotion	59,299.	3,500.	36,136.	19,663.
13 Office expenses	88,583.		71,245.	17,338.
14 Information technology	269,538.	14,052.	246,096.	9,390.
15 Royalties				
16 Occupancy	81,448.	29,878.	51,570.	
17 Travel	22,952.	6,621.	5,439.	10,892.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	33,910.		33,910.	
23 Insurance	26,384.	943.	25,441.	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a OTHER	1,798,197.	1,699,820.	7,679.	90,698.
b GIFT ANNUITY DISTRIBUTI	55,568.	55,568.	0.	0.
c				
d				
e All other expenses				
<b>25 Total functional expenses.</b> Add lines 1 through 24e	<b>31,930,496.</b>	<b>28,187,972.</b>	<b>2,834,916.</b>	<b>907,608.</b>
<b>26 Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here  if following SOP 98-2 (ASC 958-720)

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....		<b>1</b>	
	<b>2</b> Savings and temporary cash investments .....	30,951,943.	<b>2</b>	43,093,058.
	<b>3</b> Pledges and grants receivable, net .....	448,855.	<b>3</b>	212,998.
	<b>4</b> Accounts receivable, net .....		<b>4</b>	5,135.
	<b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....	2,094,551.	<b>7</b>	2,421,328.
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....		<b>9</b>	
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 511,507.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 384,743.	133,648.	<b>10c</b> 126,764.
	<b>11</b> Investments - publicly traded securities .....	191,493,490.	<b>11</b>	289,611,564.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	34,887,216.	<b>12</b>	39,918,320.
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....	403,025.	<b>15</b>	56,482.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	260,412,728.	<b>16</b>	375,445,649.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	193,531.	<b>17</b>	242,891.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....		<b>19</b>	
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>	
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....	35,364,928.	<b>25</b>	43,026,316.
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	35,558,459.	<b>26</b>	43,269,207.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	224,416,130.	<b>27</b>	331,998,455.
	<b>28</b> Net assets with donor restrictions .....	438,139.	<b>28</b>	177,987.
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
	<b>32</b> Total net assets or fund balances .....	224,854,269.	<b>32</b>	332,176,442.
	<b>33</b> Total liabilities and net assets/fund balances .....	260,412,728.	<b>33</b>	375,445,649.

**Part XI Reconciliation of Net Assets**

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	92,895,086.
2	Total expenses (must equal Part IX, column (A), line 25)	2	31,930,496.
3	Revenue less expenses. Subtract line 2 from line 1	3	60,964,590.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	224,854,269.
5	Net unrealized gains (losses) on investments	5	46,357,583.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	332,176,442.

**Part XII Financial Statements and Reporting**

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

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____	X	
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____	X	

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2020**

**Open to Public Inspection**

<b>Name of the organization</b> <b>DELAWARE COMMUNITY FOUNDATION, INC</b>	<b>Employer identification number</b> <b>22-2804785</b>
--	--

**Part I Reason for Public Charity Status.** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2  A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9  An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: \_\_\_\_\_
- 10  An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
  - f Enter the number of supported organizations .....
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
<b>Total</b>						

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	12222176.	32629913.	18520055.	22862448.	41112270.	127346862
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....	12222176.	32629913.	18520055.	22862448.	41112270.	127346862
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) .....						45848258.
<b>6 Public support.</b> Subtract line 5 from line 4.						81498604.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>7</b> Amounts from line 4 .....	12222176.	32629913.	18520055.	22862448.	41112270.	127346862
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....	3475926.	4000122.	4351772.	4629129.	4208040.	20664989.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>11 Total support.</b> Add lines 7 through 10						148011851
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	
<b>13 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f)) .....	<b>14</b>	55.06	%
<b>15</b> Public support percentage from 2019 Schedule A, Part II, line 14 .....	<b>15</b>	58.94	%
<b>16a 33 1/3% support test - 2020.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....			<input checked="" type="checkbox"/>
<b>b 33 1/3% support test - 2019.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....			<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2020.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....			<input type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2019.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....			<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....			<input type="checkbox"/>

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

**14 First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** .....

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2019 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2020</b> (line 10c, column (f), divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from <b>2019</b> Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2020.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization .....

**b 33 1/3% support tests - 2019.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization .....

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions .....

**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

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



**Part IV Supporting Organizations** (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?		
<b>11a</b>		
<b>b</b> A family member of a person described in line 11a above?		
<b>11b</b>		
<b>c</b> A 35% controlled entity of a person described in line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
<b>11c</b>		

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
<b>1</b>		
<b>2</b> Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		
<b>2</b>		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		
<b>1</b>		

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
<b>1</b>		
<b>2</b> Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
<b>2</b>		
<b>3</b> By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
<b>3</b>		

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).			
<b>2</b> Activities Test. Answer lines 2a and 2b below.			
<b>a</b> Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>			
<b>2a</b>			
<b>b</b> Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>			
<b>2b</b>			
<b>3</b> Parent of Supported Organizations. Answer lines 3a and 3b below.			
<b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No" provide details in Part VI.</i>			
<b>3a</b>			
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>			
<b>3b</b>			

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

1  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 ( *explain in Part VI*). **See instructions.**  
 All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

<b>Section A - Adjusted Net Income</b>		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	8	

<b>Section B - Minimum Asset Amount</b>		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors ( <i>explain in detail in Part VI</i> ):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

<b>Section C - Distributable Amount</b>			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** (continued)

<b>Section D - Distributions</b>		<b>Current Year</b>
<b>1</b>	Amounts paid to supported organizations to accomplish exempt purposes	<b>1</b>
<b>2</b>	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	<b>2</b>
<b>3</b>	Administrative expenses paid to accomplish exempt purposes of supported organizations	<b>3</b>
<b>4</b>	Amounts paid to acquire exempt-use assets	<b>4</b>
<b>5</b>	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i> )	<b>5</b>
<b>6</b>	Other distributions ( <i>describe in Part VI</i> ). See instructions.	<b>6</b>
<b>7</b>	<b>Total annual distributions.</b> Add lines 1 through 6.	<b>7</b>
<b>8</b>	Distributions to attentive supported organizations to which the organization is responsive ( <i>provide details in Part VI</i> ). See instructions.	<b>8</b>
<b>9</b>	Distributable amount for 2020 from Section C, line 6	<b>9</b>
<b>10</b>	Line 8 amount divided by line 9 amount	<b>10</b>

<b>Section E - Distribution Allocations</b> (see instructions)	<b>(i) Excess Distributions</b>	<b>(ii) Underdistributions Pre-2020</b>	<b>(iii) Distributable Amount for 2020</b>
<b>1</b> Distributable amount for 2020 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2020 (reasonable cause required - <i>explain in Part VI</i> ). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2020			
<b>a</b> From 2015			
<b>b</b> From 2016			
<b>c</b> From 2017			
<b>d</b> From 2018			
<b>e</b> From 2019			
<b>f</b> <b>Total</b> of lines 3a through 3e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2020 distributable amount			
<b>i</b> Carryover from 2015 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
<b>4</b> Distributions for 2020 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2020 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from line 4.			
<b>5</b> Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
<b>6</b> Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
<b>7</b> <b>Excess distributions carryover to 2021.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b> Excess from 2016			
<b>b</b> Excess from 2017			
<b>c</b> Excess from 2018			
<b>d</b> Excess from 2019			
<b>e</b> Excess from 2020			

**Part VI** **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.  
(See instructions.)

COPY

**Schedule A** **Identification of Excess Contributions** **2020**  
**Included on Part II, Line 5**

**\*\* Do Not File \*\***  
**\*\*\* Not Open to Public Inspection \*\*\***

Contributor's Name	Total Contributions	Excess Contributions
MT CUBA	12,250,000.	9,289,763.
PAUL H. BOERGER	25,086,135.	22,125,898.
BCBS/HIGHMARK	8,006,494.	5,046,257.
LONGWOOD FDN	6,719,300.	3,759,063.
DELAWARE COMMUNITY BLOOD FOUNDATION, INC	4,975,000.	2,014,763.
MR. AND MRS. RODMAN WARD III	3,794,300.	834,063.
MRS. HELEN L. ELIASON	3,040,454.	80,217.
EXELON CORPORATION	4,000,000.	1,039,763.
BRANDYWINE CREEK STATE PARK TRUST	4,618,708.	1,658,471.
Total Excess Contributions to Schedule A, Part II, Line 5 .....		45,848,258.

**Schedule A**

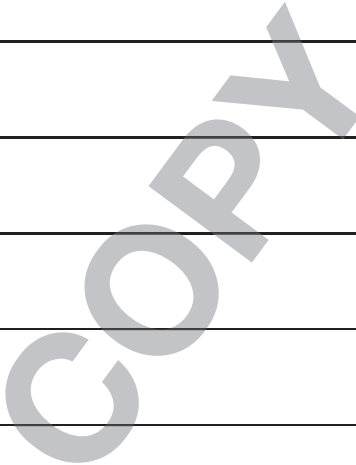
**Identification of Unusual Grants**

**2020**

**\*\* Do Not File \*\***

**\*\*\* Not Open to Public Inspection \*\*\***

Contributor's Name	Description of Grant	Date of Grant	Amount
HIGHMARK BLUE CROSS BLUE SHIELD	HEALTH	08/28/20	8,952,301.
HIGHMARK BLUE CROSS BLUE SHIELD	HEALTH	12/30/20	25,000,000.
Total Unusual Grants .....			33,952,301.



**SCHEDULE C**  
**(Form 990 or 990-EZ)**

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2020**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527  
 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.  
 ► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization <b>DELAWARE COMMUNITY FOUNDATION, INC</b>	Employer identification number <b>22-2804785</b>
---	---

**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political campaign activity expenditures ..... ► \$ \_\_\_\_\_
- 3 Volunteer hours for political campaign activities ..... \_\_\_\_\_

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ..... ► \$ \_\_\_\_\_
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ..... ► \$ \_\_\_\_\_
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? .....  Yes  No
- 4a Was a correction made? .....  Yes  No
- b If "Yes," describe in Part IV.

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... ► \$ \_\_\_\_\_
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ..... ► \$ \_\_\_\_\_
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ..... ► \$ \_\_\_\_\_
- 4 Did the filing organization file Form 1120-POL for this year? .....  Yes  No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

**Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

- A** Check  if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check  if the filing organization checked box A and "limited control" provisions apply.

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b> Total lobbying expenditures to influence public opinion (grassroots lobbying) .....														
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying) .....														
<b>c</b> Total lobbying expenditures (add lines 1a and 1b) .....														
<b>d</b> Other exempt purpose expenditures .....														
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d) .....														
<b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:35%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width:65%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e.													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.													
Over \$17,000,000	\$1,000,000.													
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f) .....														
<b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0- .....														
<b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0- .....														
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No												

**4-Year Averaging Period Under Section 501(h)**  
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
<b>2a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					



**Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

	(a)		(b)
	Yes	No	Amount
<b>1</b> During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
<b>a</b> Volunteers? .....		X	
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..		X	
<b>c</b> Media advertisements? .....		X	
<b>d</b> Mailings to members, legislators, or the public? .....		X	
<b>e</b> Publications, or published or broadcast statements? .....		X	
<b>f</b> Grants to other organizations for lobbying purposes? .....		X	
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body? .....		X	
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .....		X	
<b>i</b> Other activities? .....	X		7,500.
<b>j</b> Total. Add lines 1c through 1i .....			7,500.
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? .....		X	
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912 .....			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .....			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? .....			

**Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

	Yes	No
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members? .....	1	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less? .....	2	
<b>3</b> Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? .....	3	

**Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."**

<b>1</b> Dues, assessments and similar amounts from members .....	1	
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
<b>a</b> Current year .....	2a	
<b>b</b> Carryover from last year .....	2b	
<b>c</b> Total .....	2c	
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .....	3	
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? .....	4	
<b>5</b> Taxable amount of lobbying and political expenditures (See instructions) .....	5	

**Part IV Supplemental Information**

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

**PART II-B, LINE 1, LOBBYING ACTIVITIES:**

**MISCELLANEOUS LOBBYING EXPENSES.**

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization: DELAWARE COMMUNITY FOUNDATION, INC. Employer identification number: 22-2804785

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions regarding donor property and grant fund usage.

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Form with multiple questions (1-9) regarding conservation easements, including checkboxes for various purposes, a table for 2a-2d, and yes/no questions about monitoring and reporting.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Form with questions 1a, 1b, and 2 regarding art and historical treasures, including checkboxes and dollar amount fields for revenue and assets.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a  Public exhibition
  - b  Scholarly research
  - c  Preservation for future generations
  - d  Loan or exchange program
  - e  Other \_\_\_\_\_
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- |                                 | Amount |
|---------------------------------|--------|
| c Beginning balance             | 1c     |
| d Additions during the year     | 1d     |
| e Distributions during the year | 1e     |
| f Ending balance                | 1f     |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

**Part V Endowment Funds.** Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	1,505,670.	1,639,673.	1,651,621.	1,650,497.	1,554,921.
b Contributions					
c Net investment earnings, gains, and losses	314,605.	64,801.	62,931.	104,943.	184,150.
d Grants or scholarships					
e Other expenditures for facilities and programs	70,398.	198,804.	74,879.	103,819.	88,574.
f Administrative expenses					
g End of year balance	1,749,877.	1,505,670.	1,639,673.	1,651,621.	1,650,497.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment  100 %
  - b Permanent endowment  .0000 %
  - c Term endowment  .0000 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |   | Yes | No |
|---|-----|----|
| (i) Unrelated organizations   |     | X  |
| (ii) Related organizations  |     | X  |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | 3b  |    |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		511,507.	384,743.	126,764.
e Other				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				126,764.

**Part VII Investments - Other Securities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) SEI - FLAGSHIP -		
(B) MULTI-STRATEGY HEDGE FUND	26,656,017.	END-OF-YEAR MARKET VALUE
(C) ENERGY DEBT LP	5,851,383.	END-OF-YEAR MARKET VALUE
(D) REIT - CORE PROPERTY	6,118,263.	END-OF-YEAR MARKET VALUE
(E) ANNUITY CONTRACTS	29,740.	END-OF-YEAR MARKET VALUE
(F) GLOBAL PRIVATE ASSETS, LP	776,228.	END-OF-YEAR MARKET VALUE
(G) STOCK-AWAITING-SALE	486,689.	END-OF-YEAR MARKET VALUE
(H)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	<b>39,918,320.</b>	

**Part VIII Investments - Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

**Part IX Other Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

**Part X Other Liabilities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) CHARITABLE GIFT ANNUITY	335,506.
(3) NON PROFIT ENDOWMENTS	42,690,810.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.)	<b>43,026,316.</b>

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total revenue, gains, and other support per audited financial statements		<b>1</b>
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
<b>a</b>	Net unrealized gains (losses) on investments	<b>2a</b>	
<b>b</b>	Donated services and use of facilities	<b>2b</b>	
<b>c</b>	Recoveries of prior year grants	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>		<b>2e</b>
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>		<b>3</b>
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>		<b>4c</b>
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)		<b>5</b>

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total expenses and losses per audited financial statements		<b>1</b>
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
<b>a</b>	Donated services and use of facilities	<b>2a</b>	
<b>b</b>	Prior year adjustments	<b>2b</b>	
<b>c</b>	Other losses	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>		<b>2e</b>
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>		<b>3</b>
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>		<b>4c</b>
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)		<b>5</b>

**Part XIII Supplemental Information.**

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

**PART V, LINE 4**

DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS: THE FOUNDATION'S ENDOWMENT CONSISTS OF ONE INDIVIDUAL FUND ESTABLISHED TO HELP SUPPORT THE FOUNDATION'S FUTURE OPERATIONS.

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2020**

Open to Public  
Inspection

Name of the organization

**DELAWARE COMMUNITY FOUNDATION, INC**

Employer identification number  
**22-2804785**

**Part I General Information on Grants and Assistance**

**1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No

**2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section (if applicable)	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
1 IN 7B FOUNDATION 162 WALNUT RUN ROAD LANDENBERG, PA 19350	84-4436370	501(C)(3)	7,500.	0.			RESTRICTED TO SUPPORT SUNDAY BREAKFAST MISSION THROUGH THE SUPPLY OF FOOD & HYGIENE PACKETS TO SUPPORT FOR INDIVIDUAL GRANTS TO CHILDREN AND ORGANIZATIONS, SUPPORT FOR PROVIDING GRANTS FOR
21ST CENTURY FUND FOR DELAWARE'S CHILDREN - PO BOX 368 - HOCKESSIN, DE 19707	20-2869892	501(C)(3)	16,500.	0.			SUPPORT OF A WEEKLY RADIO PROGRAM - ENTIRE NOSOTRES, OUT OF SUSSEX COUNTY.
ACLU FOUNDATION OF DELAWARE 100 WEST 10TH ST., STE 706 WILMINGTON, DE 19801	51-0220856	501(C)(3)	6,000.	0.			RESTRICTED SUPPORT FOR PENINSULA UNITED METHODIST CHURCH AND UNRESTRICTED SUPPORT.
ACTS MISSION & PUMH FOUNDATIONS PO BOX 90 WEST POINT, PA 19486	91-2161987	501(C)(3)	7,480.	0.			2021 FOCUS GRANT: EASTSIDE PRIDE - WE MATTER AND RESTRICTED SUPPORT FOR SCHOLARSHIPS
AFRO-AMERICAN HISTORICAL SOCIETY OF DELAWARE - 900 N. PINE STREET - WILMINGTON, DE 19801	51-0309254	501(C)(3)	47,157.	0.			DELAWARE SUPPORT GROUP.
ALLIANCE FOR EATING DISORDERS AWARENESS - 1649 FORUM PLACE, SUITE 2 - WEST PALM BEACH, FL 33401	65-1080905	501(C)(3)	19,500.	0.			

**2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ..... **416.**

**3** Enter total number of other organizations listed in the line 1 table .....

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.  
**SEE PART IV FOR COLUMN (H) DESCRIPTIONS**

Schedule I (Form 990) 2020

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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AMERICAN ACADEMY OF PEDIATRICS, DE CHAPTER - 100 W. 10TH STREET - WILMINGTON, DE 19801	51-0323207	501(C)(3)	10,000.	0.			RESTRICTED TO PURCHASE BOOKS FOR RAINBOW PEDIATRICS REACH OUT AND READ PILOT.
AMERICAN CANCER SOCIETY INC. P. O. BOX 472 NEW CASTLE, DE 19720	13-1788491	501(C)(3)	67,000.	0.			RESTRICTED SUPPORT "CVC OFF THE COURT, HPV CANCER FREE CAMPAIGN, SUPPORT TO PROMOTE THE GOALS OF THE SUPPORT FOR DELAWARE
AMERICAN HEART ASSOCIATION 131 CONTINENTAL DR., SUITE 407 NEWARK, DE 19713	13-5613797	501(C)(3)	50,250.	0.			HYPERTENSION CONTROL NETWORK AND UNRESTRICTED SUPPORT.
AMERICAN LEGION POST 8 INC. P. O. BOX 387 GEORGETOWN, DE 19947	51-6018018	501(C)(19)	250,000.	0.			RESTRICTED SUPPORT FOR AMBULANCE SERVICES AS STIPULATED IN THE PROPOSAL (GRANT)
AOPA FOUNDATION, INC 421 AVIATION WAY FREDERICK, MD 21701	20-8817225	501(C)(3)	10,000.	0.			RESTRICTED TO HELP FUND AOPA'S STEM PROGRAM.
APOSTOLIC NETWORK OF GLOBAL AWAKENING INC - 1451 CLARK STREET - MECHANICSBURG, PA 17055	20-3938700	501(C)(3)	20,000.	0.			UNRESTRICTED SUPPORT
ARCHMERE ACADEMY 3600 PHILADELPHIA PIKE CLAYMONT, DE 19703	51-0095439	501(C)(3)	17,000.	0.			SUPPORT IN HONOR OF DREW CLARK'S BIRTHDAY AND UNRESTRICTED SUPPORT.
ART FOR LIFE DELAWARE 303 WEST LEA BOULEVARD WILMINGTON, DE 19802	45-4655559	501(C)(3)	55,000.	0.			RESTRICTED TO SUPPORT CHILDREN'S BOOK TO BE SOLD TO SUPPORT AFL AND RESTRICTED SUPPORT FOR
ARTS CONSORTIUM OF DELAWARE, INC. 818 N MARKET ST; FLOOR 2R WILMINGTON, DE 19801	51-0351748	501(C)(3)	20,170.	0.			UNRESTRICTED SUPPORT

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ASPCA 424 EAST 92ND STREET NEW YORK, NY 10128	13-1623829	501(C)(3)	7,880.	0.			UNRESTRICTED SUPPORT.
ATLANTIC SALMON FEDERATION PO BOX 807 CALAIS, ME 04619	13-2618801	501(C)(3)	5,000.	0.			UNRESTRICTED SUPPORT
AUTISM DELAWARE 924 OLD HARMONY ROAD, SUITE 201 NEWARK, DE 19713	20-2110190	501(C)(3)	126,500.	0.			AUTISM CARE TEAM (ACT) PROGRAM EXPANSION AND RESTRICTED TO SUPPORT AUTISM PROGRAMS WITHIN RESTRICTED TO SUPPORT OUR WISH CHARITABLE FUND(DAF) AT BANK OF AMERICA AND UNRESTRICTED SUPPORT.
BANK OF AMERICA CHARITABLE GIFT FUND - PO BOX 55850 - BOSTON, MA 02205	04-6010342	501(C)(3)	40,159.	0.			BAYHEALTH FAMILY MEDICINE RESIDENCY, RESTRICTED SUPPORT FOR GME EDUCATION AND UNRESTRICTED SUPPORT.
BAYHEALTH FOUNDATION 640 SOUTH STATE STREET DOVER, DE 19901	22-2559843	501(C)(3)	116,669.	0.			MARCH 2021 ROUND: GENERAL OPERATING AND AT HOME AND HEALTHY IN HILLTOP PROJECT.
BE BEY COMMUNITY DEVELOPMENT CORPORATION - 1411 WEST 4TH STREET - WILMINGTON, DE 19805	51-0381849	501(C)(3)	75,000.	0.			SUPPORT TO PREVENT CHILD ABUSE AND UNRESTRICTED SUPPORT.
BEEBE MEDICAL FOUNDATION 902 SAVANNAH ROAD LEWES, DE 19958	51-0319455	501(C)(3)	19,748.	0.			SUPPORT FOR WARREN \$ ALEXA OF 1916 AND UNRESTRICTED SUPPORT.
BENEDICTINE SISTERS OF DELAWARE ST. GERTRUDE MONASTERY, 25 GENDER R NEWARK, DE 19713	52-0787237	501(C)(3)	19,541.	0.			UNRESTRICTED SUPPORT

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BERNARD AND RUTH SIEGEL JEWISH COMMUNITY CENTER - 101 GARDEN OF EDEN ROAD - WILMINGTON, DE 19803	51-0075823	501(C)(3)	13,415.	0.			RESTRICTED TO SUPPORT CAPITAL CAMPAIGN FOR THE PAUL AND GLORIA FINE EARLY CHILDHOOD CENTER AT
BETHLEHEM UNITED METHODIST CHURCH 4 WESTTOWN ROAD THORNTON, PA 19373	58-2424339	501(C)(3)	38,500.	0.			\$1000 FOR STAFF APPRECIATION AND UNRESTRICTED SUPPORT.
BIG BROTHERS BIG SISTERS OF DELAWARE INC. - 413 LARCH CIRCLE - WILMINGTON, DE 19804	51-6018399	501(C)(3)	19,003.	0.			RESTRICTED SUPPORT REHOBOTH LOCATION AND UNRESTRICTED SUPPORT.
BLACK GIRLS CODE 1736 FRANKLIN STREET, 10TH FLOOR OAKLAND, CA 94612	45-4930539	501(C)(3)	15,000.	0.			RESTRICTED SUPPORT WEST COAST EXPANSION; TO BE ALLOCATED \$4,000 FOR CODING BOOT CAMPS, \$2,000
BLADES VOLUNTEER FIRE COMPANY 200 EAST 5TH STREET BLADES, DE 19973	51-1148671	501(C)(3)	250,000.	0.			RESTRICTED SUPPORT FOR THE PURCHASE OF A NEW AMBULANCE.
BOYS AND GIRLS CLUBS OF DELAWARE, INC. - 669 SOUTH UNION ST. - WILMINGTON, DE 19805	51-0068712	501(C)(3)	203,451.	0.			RESTRICTED SUPPORT FOR CHARLES F GUMMEY JR YOUTH FUND, RESTRICTED SUPPORT FOR DAGSBORO CLUB,
BURTON FOUNDATION FOR LEGAL ACHIEVEMENT - 245 PARK AVENUE, 39TH FLOOR - NEW YORK, NY 10167	11-3513330	501(C)(3)	10,000.	0.			UNRESTRICTED SUPPORT FOR THE BURTON AWARDS.
CAB CALLOWAY SCHOOL FUND PO BOX 4642 WILMINGTON, DE 19807	20-0581573	501(C)(3)	22,208.	0.			RESTRICTED TO SUPPORT PROGRAMS, STUDENTS AND THE COMMUNITY WHO HAVE BEEN IDENTIFIED AS
CAMP ARROWHEAD 35143 HOMESTEAD WAY LEWES, DE 19953	51-0065734	501(C)(3)	25,000.	0.			RESTRICTED TO SUPPORT A NEW YOUTH RETREAT AND OUTREACH INITIATIVE.

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CAMP REBOTH 37 BALTIMORE AVE. REBOTH BEACH, DE 19971	51-0331962	501(C)(3)	37,750.	0.			RESTRICTED TO SUPPORT A NEW YOUTH RETREAT AND OUTREACH INITIATIVE, RESTRICTED SUPPORT FOR HEALTH COACHING PROJECT, PROGRAMMING FOR THE FUTURE PROGRAM AND UNRESTRICTED SUPPORT.
CANCER SUPPORT COMMUNITY OF DELAWARE - 4810 LANCASTER PIKE - WILMINGTON, DE 19807	51-0351863	501(C)(3)	35,412.	0.			UNRESTRICTED SUPPORT AND
CANINE PARTNERS FOR LIFE P.O. BOX 170 COCHRANVILLE, PA 19330	23-2580658	501(C)(3)	11,637.	0.			UNRESTRICTED SUPPORT AND GENERAL OPERATIONS.
CARING HEARTS HELPING HANDS, INC. P.O. BOX 415 CAMDEN, DE 19934	81-0573899	501(C)(3)	2,000.	0.			PROVIDE ASSISTANCE AT CHRISTMAS TO LOW INCOME KENT COUNTY FAMILIES TO PROVIDE NEW CLOTHES AND
CARLETON COLLEGE - STUDENT FINANCIAL SERVICE - 1 N COLLEGE ST - NORTHFIELD, MN 55057	41-0694747	501(C)(3)	5,000.	0.			TEENSHARP SUPPORT.
CARLISLE FIRE COMPANY 615 NW FRONT STREET LINCOLN, DE 19960	51-0063613	501(C)(3)	131,970.	0.			UNRESTRICTED SUPPORT AND RESTRICTED SUPPORT FOR PURCHASE OF AMBULANCE.
CARSON SCHOLARS FUND, USA 305 W CHESAPEAKE AVE, STE 310 TOWSON, MD 21204	52-1851346	501(C)(3)	15,000.	0.			RESTRICTED SUPPORT FOR 2021 SCHOLARSHIP AWARDS
CATHOLIC CHARITIES, INC. 2601 W. 4TH STREET WILMINGTON, DE 19805	51-0065685	501(C)(3)	180,109.	0.			BASIC NEEDS - HOMELESS PREVENTION SERVICE PROGRAM, ACCESS TO BEHAVIORAL HEALTH
CATHOLIC DIOCESE OF WILMINGTON P.O. BOX 2030 WILMINGTON, DE 19899	51-0095439	501(C)(3)	16,010.	0.			UNRESTRICTED SUPPORT AND SUPPORT FOR THE ANNUAL CATHOLIC APPEAL.

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CENTRAL BAPTIST COMMUNITY DEVELOPMENT CORPORATION - 839 PINE STREET - WILMINGTON, DE 19801	27-3011150	501(C)(3)	71,456.	0.			MARCH 2021 COMMUNITY NEEDS; GENERAL OPERATING AND ACCELERATING EASTSIDE AFFORDABLE HOUSING
CENTRAL DELAWARE HABITAT FOR HUMANITY - 2311 SOUTH DUPONT HIGHWAY - DOVER, DE 19901	51-0376650	501(C)(3)	20,000.	0.			SUPPORT THE HOME IS KEY, AN AFFORDABLE HOMEOWNERSHIP PROGRAM.
CENTRAL DELAWARE HOUSING COLLABORATIVE - HOUSE OF HOPE WOMEN'S SHELTER - 801 WEST DIVISION ST - DOVER, DE 19904	83-0589199	501(C)(3)	20,000.	0.			IMPLEMENT NEW HORIZONS FINANCIAL ASSISTANCE.
CENTREVILLE LAYTON SCHOOL 6201 KENNETH PIKE CENTREVILLE, DE 19807	51-0232858	501(C)(3)	6,000.	0.			UNRESTRICTED SUPPORT
CERTS, INC. 1501 CASHO MILL ROAD, SUITE 1 NEWARK, DE 19711	01-0592853	501(C)(3)	10,000.	0.			UNRESTRICTED SUPPORT.
CHEER, INC. 546 SOUTH BEDFORD STREET GEORGETOWN, DE 19947	51-0112599	501(C)(3)	14,000.	0.			RESTRICTED TO SUPPORT THE NEEDS FOR SENIORS, RESTRICTED TO SUPPORT FOODS FOR SENIORS AND SUPPORT FOR CONSERVATION, UNRESTRICTED SUPPORT - SAVE THE CHESAPEAKE BAY AND UNRESTRICTED SUPPORT.
CHESAPEAKE BAY FOUNDATION 6 HERNDON AVENUE ANNAPOLIS, MD 21403	52-6065757	501(C)(3)	8,000.	0.			PERMANENT, SAFE, AFFORDABLE HOUSING FOR VICTIMS OF INTIMATE PARTNER VIOLENCE & THEIR BUILDING A CASEY COMMUNITY OF HOPE IN SEAFORD TO ADDRESS SOCIAL DETERMINANTS OF HEALTH,
CHILD, INC. 507 PHILADELPHIA PIKE WILMINGTON, DE 19809	51-0101188	501(C)(3)	15,500.	0.			
CHILDREN & FAMILIES FIRST 809 N. WASHINGTON STREET WILMINGTON, DE 19801	51-0065731	501(C)(3)	289,004.	0.			

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CHILDREN'S BEACH HOUSE 100 W. 10TH ST., SUITE 411 WILMINGTON, DE 19801	51-0070966	501(C)(3)	8,000.	0.			RESTRICTED TO SUPPORT CAPITAL GRANT COLLABORATIVE FUNDING, SUPPORT IN MEMORY OF DICK
CHILDREN'S HOSPITAL OF PHILADELPHIA - 3501 CIVIC CENTER BLVD., CTB - PHILADELPHIA, PA 19104	23-1352166	501(C)(3)	150,000.	0.			THE IMPACT OF SARS-COV-2 LOCKDOWN ON PRETERM BIRTH AND PRENATAL CARE USE.
CHRIST CHURCH CHRISTIANA HUNDRED INC. - P. O. BOX 3510, GREENVILLE - WILMINGTON, DE 19807	51-0073395	501(C)(3)	21,250.	0.			RESTRICTED SUPPORT FOR MLK VOICE 4 YOUTH AND UNRESTRICTED SUPPORT.
CHRIST CHURCH EPISCOPAL CHRISTIANA PRESCHOOL INC. - P.O. BOX 3510 - WILMINGTON, DE 19807	20-8521736	501(C)(3)	9,000.	0.			UNRESTRICTED SUPPORT
CHRIST FOR ALL NATIONS P.O. BOX 590588 ORLANDO, FL 32859	94-2742504	501(C)(3)	12,000.	0.			UNRESTRICTED SUPPORT AND UNRESTRICTED SUPPORT AND RESTRICTED TO SUPPORT THE MIRACLE HARVEST SEED DRIVE.
CHRISTIANA CARE HEALTH SYSTEMS, INC. - OFFICE OF DEVELOPMENT, 13 READ'S WAY - NEW CASTLE, DE 19720	51-0103684	501(C)(3)	42,007.	0.			RESTRICTED TO SUPPORT THE FRIENDS OF HELEN F. GRAHAM CANCER CENTER, RESTRICTED SUPPORT TO THE
CHRISTINA CULTURAL ARTS CENTER 705 MARKET STREET WILMINGTON, DE 19801	51-0064300	501(C)(3)	95,247.	0.			RESTRICTED SUPPORT FOR OUR VOICES PROGRAM - VISION GRANT, OUR VOICE/VISION GRANT
CITY OF WILMINGTON, DEPT. OF PARKS & RECREATION - 500 WILMINGTON AVE - WILMINGTON, DE 19801	51-0176414	501(C)(3)	6,000.	0.			RESTRICTED TO SUPPORT PARKS & REC TO BUILD OPPORTUNITIES THROUGH EDUCATION TO HELP
CLARENCE FRAM CENTER BOYS AND GIRLS CLUB - 669 S. UNION ST. - WILMINGTON, DE 19805	51-0068712	501(C)(3)	20,855.	0.			RESTRICTED SUPPORT FOR SCHOLARSHIPS WHICH ARE AVAILABLE FOR CHILDREN IN BEFORE SCHOOL, AFTER

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CLARENCE FRAIM SENIOR CENTER OF DELAWARE INC - 669 SOUTH UNION STREET - WILMINGTON, DE 19805	51-0290329	501(C)(3)	7,000.	0.			SUPPORT FOR NEW DOORS IN POOL AREA.
CLOTHING OUR KIDS 26582 JOHN J. WILLIAMS HIGHWAY, SUI MILLSBORO, DE 19966	45-4382079	501(C)(3)	10,000.	0.			MARCH 2021 COMMUNITY NEEDS: GENERAL OPERATING.
CODE PURPLE KENT COUNTY 412 N. GOVERNORS AVENUE DOVER, DE 19904	47-4195022	501(C)(3)	50,000.	0.			SUPPORT FOR A FOOD TRUCK TO DELIVER FOOD TO THE HOMELESS IN KENT AND SUSSEX COUNTY, SUPPORT
COMMON CAUSE DELAWARE P.O. BOX 604 REHOBOTH BEACH, DE 19971	31-1705370	501(C)(3)	7,209.	0.			UNRESTRICTED SUPPORT.
COMMUNITIES IN SCHOOLS OF DELAWARE 101 W LOCKERMAN ST, STE 2A DOVER, DE 19904	51-0343981	501(C)(3)	30,000.	0.			PROVIDE INTENSIVE, TRAUMA INFORMED, STRENGTH BASED SERVICES TO SINGLE HOMELESS WOMEN.
COMMUNITY EDUCATION BUILDING 1200 NORTH FRENCH STREET WILMINGTON, DE 19801	45-4797267	501(C)(3)	525,029.	0.			EQUITABLE HEALTH EXPANSION: IMPROVING HEALTH OUTCOMES, 2021 FOCUS GRANT: WAVE
COMMUNITY LEGAL AID SOCIETY, INC. 100 W. 10TH ST., SUITE 801 WILMINGTON, DE 19801	51-6000158	501(C)(3)	165,000.	0.			RESTRICTED TO SUPPORT THE HIRING OF FELLOW (ATTORNEY) TO PROVIDE LEGAL SERVICES CONSISTENT
COMMUNITY RESOURCE CENTER 37510 OYSTER HOUSE ROAD REHOBOTH BEACH, DE 19971	46-2948959	501(C)(3)	28,500.	0.			RESTRICTED TO SUPPORT CODE PURPLE AND UNRESTRICTED SUPPORT.
COMPASSIONATE HEARTS 8848 SEPTEMBER WAY LINCOLN, DE 19960	46-2162584	501(C)(3)	5,000.	0.			KENT: EQUINE THERAPY.

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CONCORD PRESBYTERIAN CHURCH 1800 FAIRFAX BOULEVARD WILMINGTON, DE 19803	51-6001225	501(C)(3)	6,000.	0.			UNRESTRICTED SUPPORT
CONNECTICUT COLLEGE 270 MOHEGAN AVENUE NEW LONDON, CT 06320	06-0646587	501(C)(3)	5,000.	0.			SUPPORT FOR THE ANNUAL FUND.
CONNECTING GENERATIONS 100 W. 10TH STREET, SUITE 1115 WILMINGTON, DE 19801	51-0326869	501(C)(3)	12,504.	0.			SALARY FOR MENTORING ASSISTANTS AND UNRESTRICTED SUPPORT.
CONTACTLIFELINE, INC. P. O. BOX 9525 WILMINGTON, DE 19809	51-0206092	501(C)(3)	10,000.	0.			MARCH 2021 COMMUNITY NEEDS: GENERAL OPERATING.
CORNERSTONE WEST COMMUNITY DEVELOPMENT CORPORATION - 710 N. LINCOLN ST. - WILMINGTON, DE 19805	51-0387484	501(C)(3)	40,000.	0.			COMMUNITY PLAYGROUND DESIGN PROJECT (COOL SPRINGS AND TILTON PARKS) AND DEVELOPMENT WITHOUT
CRESTED BUTTE STATE OF MIND P. O. BOX 2689 CRESTED BUTTE, CO 81224	84-3477504	501(C)(3)	5,000.	0.			RESTRICTED SUPPORT FOR MENTAL HEALTH TREATMENT.
CULTURE RESTORATION PROJECT, INC. PO BOX 1926 WILMINGTON, DE 19899	81-1394877	501(C)(3)	45,898.	0.			POETRY, PROSE, & POWER AND SANKOFA HEALING SPACE.
DANA-FARBER CANCER INSTITUTE P.O. BOX 849168 BOSTON, MA 02284	04-2263040	501(C)(3)	5,000.	0.			SUPPORT FOR GENERAL RESEARCH.
DE DIVISION OF PARKS & RECREATION 89 KINGS HIGHWAY, SW, OFFICE OF FISCAL MANAGEMENT - DOVER, DE 19901	51-6000279	501(C)(3)	1,125,639.	0.			RESTRICTED SUPPORT TO STATE PARKS/RESERVES, TO SUPPORT SEASONAL SALARY AT THOMPSON ISLAND

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DELAWARE ADOLESCENT PROGRAM INC 1148 PULASKI HWY, SUITE 325 BEAR, DE 19701	51-0108498	501(C)(3)	7,500.	0.			UNRESTRICTED SUPPORT.
DELAWARE ALLIANCE AGAINST SEXUAL VIOLENCE IN - 405 FOULK ROAD - WILMINGTON, DE 19803	84-2672184	501(C)(3)	7,500.	0.			UNRESTRICTED SUPPORT.
DELAWARE ALLIANCE FOR NONPROFIT ADVANCEMENT - 100 W 10TH STREET, STE 1012 - WILMINGTON, DE 19801	22-2792474	501(C)(3)	15,000.	0.			UNRESTRICTED TO SUPPORT DANA DEI INITIATIVE - BUILDING EQUITY CULTURES IN DELAWARE NONPROFIT
DELAWARE ART MUSEUM 2301 KENTMERE PARKWAY WILMINGTON, DE 19806	51-0065746	501(C)(3)	866,482.	0.			JOINT CERTIFICATE PROGRAM OF THE DELAWARE ART MUSEUM AND THE DELAWARE COLLEGE OF ART AND BREAST HEALTH EDUCATION AND OUTREACH FOR VULNERABLE COMMUNITIES AND OTHER UNRESTRICTED
DELAWARE BREAST CANCER COALITION 100 W. 10TH STREET, SUITE 209 WILMINGTON, DE 19801	52-2045298	501(C)(3)	120,310.	0.			UNRESTRICTED SUPPORT TO THE OVERALL MISSION.
DELAWARE BUSINESS ROUNDTABLE EDUCATION COMMITTEE - 100 W. 10TH STREET, SUITE 704 - WILMINGTON, DE 19801	56-2364584	501(C)(3)	5,000.	0.			RESTRUCTURED SUPPORT FOR COVID REBUILD EFFORTS VIA THE BUILD OF THE APRENDE MS WEBSITE, TO EXPAND
DELAWARE CAN 1313 N MARKET STREET, STE 140A WILMINGTON, DE 19801	27-3069592	501(C)(3)	81,000.	0.			RESTRUCTURED SUPPORT - ELIASON EDUCATION AND GREENING FUND, NEIGHBORHOOD TREE STEWARD
DELAWARE CENTER FOR HORTICULTURE 1810 NORTH DUPONT STREET WILMINGTON, DE 19806	51-0252857	501(C)(3)	194,951.	0.			COMMUNITY REINTEGRATION SERVICES PROGRAM (CRSP).
DELAWARE CENTER FOR JUSTICE 100 W. 10TH ST., SUITE 905 WILMINGTON, DE 19801	51-0064323	501(C)(3)	15,000.	0.			

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DELAWARE CENTER FOR THE TEMPORARY ARTS INC. - 200 SOUTH MADISON STREET - WILMINGTON, DE 19801	51-0242942	501(C)(3)	5,000.	0.			UNRESTRICTED SUPPORT.
DELAWARE CHILDREN'S MUSEUM 550 JUSTISON STREET WILMINGTON, DE 19801	51-0305812	501(C)(3)	24,500.	0.			SUPPORT FOR SAFETY MATERIALS FOR VISITORS, SOCIAL DISTANCING SIGNAGE, SNEEZE GUARDS
DELAWARE CHILDREN'S THEATRE, LTD. 1014 DELAWARE AVENUE WILMINGTON, DE 19806	51-0122191	501(C)(3)	10,332.	0.			MARCH 2021 COMMUNITY NEEDS: GENERAL OPERATING AND UNRESTRICTED SUPPORT.
DELAWARE COALITION AGAINST DOMESTIC VIOLENCE - 100 W 10TH STREET, STE 903 - WILMINGTON, DE 19801	51-0354794	501(C)(3)	159,950.	0.			DOMESTIC VIOLENCE COMMUNITY HEALTH WORKER COLLABORATIVE.
DELAWARE COLLEGE OF ART & DESIGN 600 NORTH MARKET STREET WILMINGTON, DE 19801	52-2027415	501(C)(3)	7,215.	0.			THE ENROLLMENT SUPPORT FOR THE PROXIMITY PROJECT -- HEALTHCARE, RESTRICTED TO SUPPORT FINANCIAL AID SUPPORT TO EXPAND
DELAWARE COLLEGE SCHOLARS, INC. 4 E 8TH STREET, STE 200 WILMINGTON, DE 19801	82-4608572	501(C)(3)	95,250.	0.			RECRUITMENT OF FIRST GENERATION AND UNDERSERVED DELAWARE
DELAWARE COMMUNITY REINVESTMENT ACTION COUNCIL - 600 S HARRISON ST - WILMINGTON, DE 19805	51-0329119	501(C)(3)	169,000.	0.			RESTRICTED SUPPORT TO INVEST IN STEPPING STONES AND THEIR PARTNERSHIP WITH RECIPROCALITY AND
DELAWARE DIVISION OF ALCOHOL AND TOBACCO ENF - 34 STARLIFTER AVENUE - DOVER, DE 19901	51-6000279	501(C)(3)	70,000.	0.			IMPAIRED DRIVING SIMULATOR.
DELAWARE DIVISION OF THE ARTS 820 N FRENCH STREET, CARVEL STATE O WILMINGTON, DE 19801	51-6000279	501(C)(3)	72,000.	0.			UNRESTRICTED SUPPORT

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DELAWARE FUTURES 1104 N. ADAMS ST. WILMINGTON, DE 19801	51-0378138	501(C)(3)	14,968.	0.			RESTRICTED SUPPORT FOR THE 3RD ANNUAL BALLARD COMMUNITY FUND BENEFIT HONOREE AND UNRESTRICTED
DELAWARE GUIDANCE SERVICES FOR CHILDREN AND YOUTH - 1213 DELAWARE AVENUE - WILMINGTON, DE 19806	51-0071906	501(C)(3)	10,250.	0.			THE ENROLLMENT SUPPORT FOR THE PROXIMITY PROJECT -- HEALTHCARE AND UNRESTRICTED SUPPORT.
DELAWARE HEALTH SCIENCE ALLIANCE 4765 OGLETOWN-STANDTON RD, STE L10 NEWARK, DE 19711	47-3447709	501(C)(3)	12,500.	0.			RESTRICTED FOR SUPPORTING DIMER OBJECTIVES.
DELAWARE HIV CONSORTIUM 100 W. 10TH STREET, SUITE 415 WILMINGTON, DE 19801	51-0348892	501(C)(3)	20,000.	0.			AT HOME TESTING, DELIVERY, AND POSTAGE.
DELAWARE HOSPICE, INC. 16 POLLY DRUMMOND CENTER, 2ND FLOOR NEWARK, DE 19711	51-0258883	501(C)(3)	147,151.	0.			RESTRICTED TO SUPPORT THE SUSSEX COUNTY HOSPICE NEEDS, RESTRICTED SUPPORT FOR KENT/SUSSEX BRANCHES
DELAWARE HUMANE ASSOCIATION 701 A STREET WILMINGTON, DE 19801	51-0082499	501(C)(3)	146,123.	0.			RESTRICTED SUPPORT FOR THE MEDICAL EQUIPMENT AND OTHER UNRESTRICTED SUPPORTS.
DELAWARE MAGIC SOFTBALL PO BOX 7024 NEWARK, DE 19714	56-2430762	501(C)(3)	5,800.	0.			UNRESTRICTED SUPPORT
DELAWARE MUSEUM OF NATURAL HISTORY 4940 KENNETT PIKE, PO BOX 3937 WILMINGTON, DE 19807	51-0083535	501(C)(3)	27,516.	0.			UNRESTRICTED SUPPORT.
DELAWARE NATURE SOCIETY P.O. BOX 700 HOCKESSIN, DE 19707	51-6018321	501(C)(3)	13,880.	0.			RESTRICTED SUPPORT FOR ABBOTT'S MILL FROM DAVE AND ANN BURTON, MILFORD PEOPLE WHO CARE ABOUT

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DELAWARE SHAKESPEARE FESTIVAL, INC. - 4 S. POPLAR STREET - WILMINGTON, DE 19801	36-4535637	501(C)(3)	31,500.	0.			SUPPORT THREE (OF 16-18) 2022 COMMUNITY TOUR (CT) PRESENTATIONS OF "A BILINGUAL TWELFTH NIGHT"
DELAWARE SPCA 455 STANTON-CHRISTIANA ROAD NEWARK, DE 19713	51-0064307	501(C)(3)	8,880.	0.			SUPPORT TO THE EMILY DUPONT SOCIETY AND UNRESTRICTED SUPPORT.
DELAWARE STATE UNIVERSITY FOUNDATION, INC. - 1200 N. DUPONT HIGHWAY - DOVER, DE 19901	20-1372435	501(C)(3)	9,000.	0.			RESTRICTED SUPPORT FOR BIOSCIENCE RESEARCH FELLOWSHIP AND STUDENT COVID RELIEF.
DELAWARE SYMPHONY ASSOCIATION 100 W. 10TH ST, SUITE 1003 WILMINGTON, DE 19801	51-6017449	501(C)(3)	354,630.	0.			UNRESTRICTED SUPPORT.
DELAWARE TECHNICAL COMMUNITY COLLEGE EDUCATION - P.O. BOX 897 - DOVER, DE 19903	51-0246178	501(C)(3)	32,912.	0.			RESTRICTED TO BE USED FOR PROGRAM, STAFF AND/OR STUDENT LEARNING NEEDS IN RECOGNITION OF
DELAWARE THEATRE COMPANY 200 WATER ST WILMINGTON, DE 19801	51-0229918	501(C)(3)	95,732.	0.			RESTRICTED TO SUPPORT DELAWARE THEATRE COMPANY'S OUTREACH PROGRAM ON BEHALF OF
DELAWARE WILD LANDS, INC. PO BOX 505 ODESSA, DE 19730	51-0101678	501(C)(3)	42,000.	0.			UNRESTRICTED SUPPORT WITH PREFERENCE TO SUSSEX COUNTY, RESTRICTED SUPPORT FOR THE NEW
DELAWARE ZOOLOGICAL SOCIETY, BRANDYWINE ZOO - 1001 NORTH PARK DRIVE - WILMINGTON, DE 19802	51-0234751	501(C)(3)	24,600.	0.			PURCHASE VIDEO EQUIPMENT TO CREATE A VIRTUAL ZOO EXPERIENCE, SUPPORT FOR ONLINE TICKETING SOFTWARE
DELMAR PUBLIC LIBRARY 101 N. BI-STATE BOULEVARD DELMAR, DE 19940	51-0103344	501(C)(3)	29,536.	0.			RESTRICTED SUPPORT FOR CHILDREN'S BOOKS AND UNRESTRICTED SUPPORT.

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DELMAR SCHOOL DISTRICT 200 NORTH EIGHTH STREET DELMAR, DE 19940	51-6000279	501(C)(3)	39,647.	0.			RESTRICTED TO SUPPORT THE DSD PROPOSAL.
DELMARVA ACES BASEBALL & SOFTBALL, INC. - 11046 GRAYS CORNER ROAD, BLDGS 1 AND 2 - BERLIN, MD 21811	47-1605254	501(C)(3)	31,036.	0.			UNRESTRICTED SUPPORT.
DELMARVA CLERGY UNITED IN SOCIAL ACTION INC. - 13726 S. OLD STATE ROAD - ELLENDALE, DE 19941	22-5330018	501(C)(3)	13,000.	0.			RESTRICTED TO SUPPORT HOLIDAY GIFTS FOR NEEDY FAMILIES AND MARCH 2021 COMMUNITY NEEDS: GENERAL
DEL-MAR-VA COUNCIL, BOY SCOUTS OF AMERICA - 100 W 10TH STREET, STE 915 - WILMINGTON, DE 19801	51-0065733	501(C)(3)	5,970.	0.			UNRESTRICTED SUPPORT.
DELMARVA SUSTAINABLE ENERGY UTILITY INC - 500 W LOOCKERMAN STREET, STE 400 - DOVER, DE 19904	26-3963904	501(C)(3)	950,000.	0.			RESTRICTED TO SUPPORT ENERGY EFFICIENCY PROJECTS IN THE DELMARVA POWER SERVICE TERRITORY.
DEPARTMENT OF STATE AND HISTORICAL & CULTURAL AFFAIRS - 21 THE GREEN, STE B - DOVER, DE 19901	51-6000279	501(C)(3)	76,875.	0.			RESTRICTED TO SUPPORT RESTORATION AND MAINTENANCE OF THE PROPERTY COOCH'S BRIDGE.
DIVINE PROVIDENCE VILLAGE 686 OLD MARPLE RD. SPRINGFIELD, PA 19064	23-2313873	501(C)(3)	17,000.	0.			UNRESTRICTED SUPPORT.
DONATE DELAWARE 1700 SHIPLEY ROAD WILMINGTON, DE 19803	85-0767039	501(C)(3)	25,000.	0.			DONATE DELAWARE.
DOVER INTERFAITH MISSION FOR HOUSING, INC. - PO BOX 1148 - DOVER, DE 19903	41-2280212	501(C)(3)	50,550.	0.			HOUSING AND HEALTH FOR THE HOMELESS AND COMMUNITY HEALTH WORKER.

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DOWN SYNDROME ASSOCIATION OF DELAWARE - PO BOX 747 - MIDDLETOWN, DE 19709	20-1874295	501(C)(3)	20,000.	0.			CONSTRUCTION FIT OUT OF NEW OFFICE SPACE THAT WILL BE A SOCIAL ENTERPRISE - MEAL
DUFFY'S HOPE INC. 100 W. 10TH ST. SUITE 9 WILMINGTON, DE 19801	06-1652976	501(C)(3)	10,000.	0.			RESTRICTED TO SUPPORT YOUTH AMBASSADORS AT HOME WITH TECHNOLOGY NEEDS, STEM EDUCATIONAL
DUKE UNIVERSITY PO BOX 90759 DURHAM, NC 27708	56-0532129	501(C)(3)	25,000.	0.			RESTRICTED SUPPORT FOR FUNDING FOR DDX3X SYNDROME RESEARCH PROJECT.
EAST SIDE COMMUNITY LEARNING CENTER FOUNDATION - 3000 N CLAYMONT ST - WILMINGTON, DE 19802	20-4215109	501(C)(3)	5,500.	0.			RESTRICTED TO SUPPORT QUALITY EDUCATION TO LOW INCOME STUDENTS IN WILMINGTON AND
EASTER SEALS DE & MD'S EASTERN SHORE, INC. - 61 CORPORATE CIRCLE - NEW CASTLE, DE 19720	51-0066728	501(C)(3)	67,300.	0.			APPLIED BEHAVIOR ANALYSIS THERAPUTIC INTERVENTION, SUPPORT FOR ANNUAL DINNER AND OTHER UNRESTRICTED
EDGEMOOR COMMUNITY CENTER INC BELLEVUE COMMUNITY CENTER, 510 DUNC WILMINGTON, DE 19809	51-0230538	501(C)(3)	15,000.	0.			2021 FOCUS GRANT: BELLEVUE FARMS.
EDUCATION HEALTH AND RESEARCH INTERNATIONAL, INC - 21 WEST CLARKE AVENUE - MILFORD, DE 19963	83-1132893	501(C)(3)	162,502.	0.			WE CARE SERVICES FOR HOME-BOUND SENIORS.
ELEUTHERIAN MILLS-HAGLEY FOUNDATION, INC. - PO BOX 3630 - WILMINGTON, DE 19807	51-0070531	501(C)(3)	27,500.	0.			RESTRICTED SUPPORT TO THE HAGLEY MUSEUM AND LIBRARY, RESTRICTED SUPPORT FOR ORAL HISTORY,
EPILEPSY FOUNDATION OF DELAWARE 240 N. JAMES ST., SUITE 104 WILMINGTON, DE 19804	51-6018401	501(C)(3)	10,000.	0.			MARCH 2021 COMMUNITY NEEDS: GENERAL OPERATING.

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EPWORTH UNITED METHODIST CHURCH 19285 HOLLAND GLADE ROAD REHOBOTH BEACH, DE 19971	51-0200669	501(C)(3)	8,854.	0.			UNRESTRICTED SUPPORT.
EQUAL JUSTICE INITIATIVE 122 COMMERCE ST MONTGOMERY, AL 36104	63-1135091	501(C)(3)	5,000.	0.			RESTRICTED SUPPORT FOR CRIMINAL JUSTICE REFORM.
ESF DREAM CAMP FOUNDATION 750 E. HAVERFORD ROAD BRYN MAWR, PA 19010	23-3045020	501(C)(3)	10,000.	0.			UNRESTRICTED SUPPORT.
EXCEPTIONAL CARE OF CHILDREN, INC. 11 INDEPENDENCE WAY NEWARK, DE 19713	80-0748765	501(C)(3)	125,000.	0.			THE BRIDGE UNIT - A FIRST OF ITS KIND YOUNG ADULT CENTER.
FAITHFUL FRIENDS, INC. 12 GERMAY DRIVE WILMINGTON, DE 19804	51-0410508	501(C)(3)	131,191.	0.			RESTRICTED SUPPORT TO THE CAPITAL CAMPAIGN MATCHING FUND, FREE PET FOOD AND SUPPLY BANK AND OTHER
FALMOUTH ACADEMY 7 HIGHFIELD DRIVE FALMOUTH, MA 02540	04-2620156	501(C)(3)	150,000.	0.			RESTRICTED SUPPORT TO REPLACE BOILER AND UNRESTRICTED SUPPORT.
FALMOUTH CONSERVATION TRUST P. O. BOX 6172 FALMOUTH, ME 04105	01-0372429	501(C)(3)	7,500.	0.			UNRESTRICTED SUPPORT.
FAME, INC. 2005 BAYNARD BOULEVARD WILMINGTON, DE 19802	51-0210266	501(C)(3)	5,000.	0.			UNRESTRICTED SUPPORT IN MEMORY OF CHARLES ROCHESTER.
FAMILY COUNSELING CENTER OF ST PAUL'S - 301 N. VAN BUREN ST - WILMINGTON, DE 19805	27-3361236	501(C)(3)	110,550.	0.			EXPANSION OF CONTINUUM OF CARE, BUILD OUT OF PHYSICAL PROPERTY - PROVIDING CONFIDENTIAL

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FAMILY PROMISE OF NORTHERN NEW CASTLE COUNTY - 2104 ST. JAMES CHURCH ROAD - WILMINGTON, DE 19808	26-2373936	501(C)(3)	80,000.	0.			MENTAL HEALTH & HOMELESSNESS.
FEEDING AMERICA P.O. BOX 96749 WASHINGTON, DC 20090	36-3673599	501(C)(3)	6,000.	0.			SUPPORT TO FEED COVID AFFECTED PEOPLE AND RESTRICTED TO SUPPORT FEEDING THE HUNGRY.
FIND-'M FRIENDS, INC. P. O. BOX 1712 CRYSTAL RIVER, FL 34423	46-5514778	501(C)(3)	150,000.	0.			UNRESTRICTED SUPPORT
FIRST PARISH FEDERATED CHURCH 150 MAIN STREET SOUTH BERWICK, ME 03908	01-6013734	501(C)(3)	64,135.	0.			UNRESTRICTED SUPPORT
FIRST PRESBYTERIAN CHURCH OF NEWARK - 292 W. MAIN STREET - NEWARK, DE 19711	23-6393377	501(C)(3)	7,880.	0.			UNRESTRICTED SUPPORT
FIRST STATE ANIMAL CENTER AND SPCA 32 SHELTER CIRCLE CAMDEN, DE 19934	51-6018851	501(C)(3)	10,949.	0.			RESTRICTED SUPPORT INCREASE OPPORTUNITIES FOR EXERCISE AND SOCIALIZATION FOR SHELTER
FIRST STATE COMMUNITY ACTION AGENCY - 308 N RAILROAD AVE, PO BOX 877 - GEORGETOWN, DE 19947	51-0104704	501(C)(3)	383,642.	0.			RESTRICTED SUPPORT FOR THE SUMMER YOUTH EMPLOYMENT PROFESSIONAL DEVELOPMENT, RESTRICTED
FIRST STATE EDUCATE, INC 605 ADAMS DAM ROAD WILMINGTON, DE 19807	84-2554991	501(C)(3)	25,000.	0.			RESTRICTED FOR COVID SUPPORT.
FIRST STATE SQUASH 501 W 11TH ST WILMINGTON, DE 19801	81-1843120	501(C)(3)	32,750.	0.			RESTRICTED SUPPORT FOR YOUTH EDUCATION, FIRST STATE SQUASH PROGRAM AND OTHER UNRESTRICTED

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FISHERS YOUTH ASSISTANCE, INC 9090 E 131ST STREET FISHERS, IN 46038	46-5319561	501(C)(3)	5,000.	0.			RESTRICTED TO SUPPORT YOUNG PEOPLE AND THEIR FAMILIES, AGES 3 TO 17 WITHIN HAMILTON
FOOD BANK OF DELAWARE, INC. 222 LAKE DRIVE NEWARK, DE 19702	51-0258984	501(C)(3)	264,931.	0.			RESTRICTED TO SUPPORT SUSSEX COUNTY FOOD BANK, RESTRICTED TO SUPPORT FOOD DISTRIBUTION IN
FOR ALL SEASONS, INC. 300 TALBOT STREET EASTON, MD 21601	52-1496434	501(C)(3)	21,800.	0.			RESTRICTED SUPPORT FOR THE ANNUAL FUND RAISER AND UNRESTRICTED SUPPORT.
FORGOTTEN CATS, INC. 4023 KENNETT PIKE, SUITE 422 GREENVILLE, DE 19807	20-0691180	501(C)(3)	7,500.	0.			URGENT HOMELESS CAT PROBLEM.
FORT MILES HISTORICAL ASSOCIATION, INC. - 120 EAST WILD RABBIT RUN - LEWES, DE 19958	20-0142663	501(C)(3)	7,500.	0.			REPLACE DOORS WITH ADA COMPLIANT (FRONT AND BACK DOORS).
FOUNDATION II OF THE AMERICAN COLLEGE OF TRIAL LAWYERS - 1300 DOVE ST. SUITE 150 - NEWPORT BEACH, CA 92660	31-1450222	501(C)(3)	7,500.	0.			RESTRICTED SUPPORT FOR JUSTICE REFORM.
FREIRE CHARTER SCHOOL WILMINGTON INC. - 201 W 14TH STREET - WILMINGTON, DE 19801	46-5680913	501(C)(3)	10,000.	0.			RESTRICTED TO SUPPORT THE SCHOOL'S EMOTIONAL SUPPORT AND RACIAL INJUSTICE PROGRAMS AND
FRESH START SCHOLARSHIP FOUNDATION, INC. - P.O. BOX 7784 - WILMINGTON, DE 19803	51-0378642	501(C)(3)	42,519.	0.			RESTRICTED TO SUPPORT THE CLASS OF 2021-2022 VIA THE 2020 RISING STARS EVENT (DECLINING ALL
FRIENDS OF ANIMALS 777 POST ROAD, STE 205 DARIEN, CT 06820	13-6018549	501(C)(3)	14,626.	0.			SPAY AND NEUTER CERTIFICATE PROGRAM AND UNRESTRICTED SUPPORT.

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FRIENDS OF DELAWARE VETERANS HOME, INC. - 401 FEDERAL STREET - DOVER, DE 19901	20-3369554	501(C)(3)	14,500.	0.			UNRESTRICTED SUPPORT.
FRIENDS OF THE NEWARK FREE LIBRARY, INC. - 750 LIBRARY AVENUE - NEWARK, DE 19711	23-7098836	501(C)(3)	7,880.	0.			UNRESTRICTED SUPPORT
FRIENDS OF WILMINGTON PARKS, INC. PO BOX 435 MONTCHANIN, DE 19710	51-0336991	501(C)(3)	5,200.	0.		BRANDYWINE PARK FITNESS STATIONS.	UNRESTRICTED SUPPORT
FRIENDSHIP HOUSE, INC. P.O. BOX 1517 WILMINGTON, DE 19899	51-0306759	501(C)(3)	111,307.	0.		FEEDING HOMELESS DURING MOVE TO NEW FACILITY, PROJECT HOPE AT THE NCC HOPE CENTER AND OTHER	UNRESTRICTED SUPPORT.
GEORGETOWN HISTORICAL SOCIETY 510 SOUTH BEDFORD STREET GEORGETOWN, DE 19947	51-0255141	501(C)(3)	5,000.	0.			UNRESTRICTED SUPPORT.
GIRLS ON THE RUN DELAWARE INC. 615 W. 18TH ST. WILMINGTON, DE 19802	20-2751642	501(C)(3)	7,500.	0.			UNRESTRICTED SUPPORT.
GLEANERS FOOD BANK OF INDIANA 3737 WALDEWERE AVE. INDIANAPOLIS, IN 46241	35-1483868	501(C)(3)	10,000.	0.			UNRESTRICTED SUPPORT.
GLOBAL CELEBRATION PO BOX 535337 GRAND PRAIRIE, TX 75053	91-1341558	501(C)(3)	13,000.	0.			UNRESTRICTED SUPPORT
GOOD OLE BOY FOUNDATION, INC. 36111 PEAR TREE ROAD MILLSBORO, DE 19966	46-1526864	501(C)(3)	7,500.	0.			SUPPORT ACTIVITIES IN SUSSEX COUNTY.

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GRAND OPERA HOUSE 818 NORTH MARKET STREET WILMINGTON, DE 19801	51-0116569	501(C)(3)	57,080.	0.			RESTRICTED SUPPORT FOR GILLIAM FAMILY FUND DIVERSITY PROGRAMMING, SUPPORT FOR GRAND OPERA
GREAT OAKS CHARTER SCHOOL - WILMINGTON - 1200 N. FRENCH STREET - WILMINGTON, DE 19801	47-4139743	501(C)(3)	90,000.	0.			BRIDGE TO A HEALTHIER GREAT OAKS COMMUNITY: BUILDING RELATIONSHIPS IN DELAWARE GROWS EVERYONE
GREEN BERET PROJECT 140 MAFFITT STREET ELKTON, MD 21921	82-1215032	501(C)(3)	15,000.	0.			2021 FOCUS GRANT: EQUIPPING YOUTH FOR SUCCESS.
GREENWOOD VOLUNTEER FIRE COMPANY 12611 SUSSEX HIGHWAY GREENWOOD, DE 19950	51-0208938	501(C)(3)	250,000.	0.			RESTRICTED SUPPORT FOR THE PURCHASE OF NEW AMBULANCE.
HABITAT FOR HUMANITY OF NEW CASTLE COUNTY - 1920 HUTTON STREET - WILMINGTON, DE 19802	51-0294138	501(C)(3)	186,000.	0.			FUND CONTRACTORS FOR BUILDING OF 12 HOMES, WILMINGTON'S EASTSIDE, RESTRICTED TO SUPPORT THE
HARRINGTON SENIOR CENTER 102 FLEMING STREET HARRINGTON, DE 19952	51-0106409	501(C)(3)	10,000.	0.			PARTITIONS, LARGE TABLES, AND COMPUTER.
HARRY K FOUNDATION 313 SOUTH BOARDWALK REHOBOTH BEACH, DE 19971	46-2934019	501(C)(3)	65,000.	0.			SUPPLEMENTAL MEALS FOR STUDENTS, 2021 FOCUS GRANTS: HALT HUNGER PROGRAM, EXPAND FOOD
HEALTHY FOOD FOR HEALTHY KIDS PO BOX 847 HOCKESSIN, DE 19707	30-0444914	501(C)(3)	43,155.	0.			RESTRICTED SUPPORT - ELIASON EDUCATION AND GREENING FUND AND EDUCATION CULTIVATION
HELP THE VETERANS FOUNDATION 2006 LIMESTONE ROAD, SUITE 7 WILMINGTON, DE 19808	85-1842907	501(C)(3)	6,961.	0.			UNRESTRICTED SUPPORT.

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HENRY FRANCIS DU PONT WINTERTHUR MUSEUM - 5105 KENNETT PIKE - WINTERTHUR, DE 19735	51-0066038	501(C)(3)	13,655.	0.			UNRESTRICTED SUPPORT
HILLCROFT SERVICES, INC. 501 WEST AIR PARK DRIVE MUNCIE, DE 47303	35-1041919	501(C)(3)	9,000.	0.			SUPPORT FOR THE SPONSORSHIP OF THE ANNUAL GOLF TOURNAMENT AND UNRESTRICTED SUPPORT.
LILLEL AT THE UNIVERSITY OF DELAWARE - 47 W. DELAWARE AVENUE - NEWARK, DE 19711	51-0331975	501(C)(3)	5,000.	0.			SUPPORT TO THE KRISTOL CENTER FOR JEWISH LIFE.
HISPANIC AMERICAN ASSOCIATION OF DELAWARE INC - 92 SOUTH GERALD DRIVE, SUITE A - NEWARK, DE 19713	82-2733159	501(C)(3)	17,600.	0.			SUPPORT TO PROVIDE BILINGUAL (SPANISH-SPEAKING) STAFF SALARIES, MEETING PLACES,
HISTORIC CHARLESTON FOUNDATION 40 EAST BAY STREET CHARLESTON, SC 29401	57-6000599	501(C)(3)	25,000.	0.			UNRESTRICTED SUPPORT
HISTORIC LEWES FARMERS MARKET SOCIETY - P. O. BOX 185 - NASSAU, DE 19969	20-4131598	501(C)(3)	7,500.	0.			SUPPORT FOR SIGNAGE AND EQUIPMENT TO REOPEN SAFELY.
HOGAR RUTH PARA MUJERES MALTRATADAS, INC - P. O. BOX 538 - VEGA ALTA, PR 00692	66-0413881	501(C)(3)	5,000.	0.			UNRESTRICTED SUPPORT.
HOPE MEDICAL CLINIC, INC. 1125 FORREST AVENUE, SUITE 202 DOVER, DE 19904	59-3791820	501(C)(3)	20,742.	0.			PROVIDE DENTAL AND MEDICAL SERVICES FOR LOW INCOME KENT COUNTY RESIDENTS AND
HOPPY'S HOPE TO END HUNTINGTON'S DISEASE - 7 MARTIN ROAD - NEWTOWN SQUARE, PA 19073	27-0708797	501(C)(3)	60,000.	0.			UNRESTRICTED SUPPORT.

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**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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HOUSING ALLIANCE DELAWARE, INC. P.O. BOX 1633 DOVER, DE 19903	51-0403362	501(C)(3)	25,000.	0.			GETTING TO ZERO: PREVENTING AND ENDING HOMELESSNESS IN DELAWARE - VISION GRANT.
I CAN DO 26 POINT 2 KIDS 303 WEST LEA BOULEVARD WILMINGTON, DE 19802	83-4041336	501(C)(3)	6,652.	0.			RESTRICTED SUPPORT FOR A VIRTUAL ASSISTANT.
INDIANA REPERTORY THEATRE, INC. 140 W. WASHINGTON ST. INDIANAPOLIS, IN 46204	35-1186290	501(C)(3)	10,000.	0.			RESTRICTED SUPPORT FOR IRT'S STUDENT MATINEES AND EDUCATION PROGRAM DURING THE 2020-2021
INDIANAPOLIS SYMPHONY ORCHESTRA 32 E. WASHINGTON ST., SUITE 600 INDIANAPOLIS, IN 46060	35-0998627	501(C)(3)	10,000.	0.			RESTRICTED TO SUPPORT YOUTH AND FAMILY DEVELOPMENT PROGRAMS.
INGLESIDE HOMES, INC. 1005 N. FRANKLIN STREET WILMINGTON, DE 19806	51-0113243	501(C)(3)	25,000.	0.			MEALS FOR SENIORS.
INNOCENCE DELAWARE, INC. 4601 CONCORD PIKE WILMINGTON, DE 19803	83-0955654	501(C)(3)	5,000.	0.			RESTRICTED TO SUPPORT THE ACCOUNTING SERVICE RELATED EXPENSES.
INTERDENOMINATIONAL MINISTERIAL ALLIANCE OF - 118 SPRINGFIELD WAY - DOVER, DE 19904	52-2018343	501(C)(3)	30,000.	0.			SHORT AND LONG TERM SUPPORT FOR LOW INCOME TO KENT COUNTY RESIDENTS: PREVENT HOMELESSNESS.
INTERNATIONAL LITERACY ASSOCIATION PO BOX 8139 NEWARK, DE 19714	82-4909645	501(C)(3)	101,125.	0.			RESTRICTED SUPPORT - FUND FOR CHILDREN'S LITERACY.
ISLAMIC SOCIETY OF DELAWARE 28 SALEM CHURCH ROAD NEWARK, DE 19713	51-0202776	501(C)(3)	10,000.	0.			RESTRICTED SUPPORT OF 60% TO ISD MOSQUE EXPENSES AND 40% TO ISLAMIC ACADEMY SCHOLARSHIPS.

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ITN SOUTHERN DELAWARE 24855 BROADKILL ROAD MILTON, DE 19968	46-4801700	501(C)(3)	10,000.	0.			MARCH 2021 COMMUNITY NEEDS: GENERAL OPERATING.
JEFFERSON STREET CENTER 1801 JEFFERSON STREET WILMINGTON, DE 19802	51-0304274	501(C)(3)	8,500.	0.			REPLACE DOORS WITH ADA COMPLIANT (FRONT AND BACK DOORS).
JEWISH FAMILY SERVICES OF DELAWARE 99 PASSMORE ROAD WILMINGTON, DE 19803	51-0097026	501(C)(3)	278,250.	0.			RESTRICTED SUPPORT FOR HUMAN SERVICES RELIEF FUND, EMPLOYMENT SUPPORT NEWARK, HIRE PHYSICIAN
JEWISH FEDERATION OF DELAWARE 101 GARDEN OF EDEN ROAD WILMINGTON, DE 19803	51-0064315	501(C)(3)	7,000.	0.			RESTRICTED SUPPORT FOR 2020 ANNUAL CAMPAIGN.
JOHNS HOPKINS SIDNEY KIMMEL COMPREHENSIVE CANCER CENTER - 401 N. BROADWAY - BALTIMORE, MD 21287	52-0595110	501(C)(3)	6,000.	0.			RESTRICTED TO SUPPORT THE SIDNEY KIMMEL COMPREHENSIVE CANCER CENTER
JOHNS HOPKINS UNIVERSITY CENTER FOR AMERICAN INDIAN HEALTH - 415 N. WASHINGTON STREET, 4TH FLOOR - BALTIMORE, MD 21231	52-0595110	501(C)(3)	5,000.	0.			SUPPORT TO THE CENTER FOR NATIVE AMERICAN HEALTH.
JOSHUA M. FREEMAN FOUNDATION 31556 WINTERBERRY PARKWAY SELBYVILLE, DE 19975	20-8592383	501(C)(3)	10,000.	0.			RESTRICTED SUPPORT FOR THE FREEMAN FOUNDATION.
JUNIOR ACHIEVEMENT OF DELAWARE, INC. - 522 SOUTH WALNUT STREET - WILMINGTON, DE 19801	51-0078199	501(C)(3)	12,000.	0.			RESTRICTED SUPPORT FOR THE IMPLEMENTATION OF ONLINE/VIRTUAL CONTENT AND STAND UP SUPPORT
JUNIOR LEAGUE OF WILMINGTON 1801 N. MARKET STREET WILMINGTON, DE 19802	51-6015503	501(C)(3)	17,250.	0.			THE STAND UP. PERIOD. - DISTRIBUTION OF PERIOD SUPPLIES AND SUPPORT FOR ANNUAL FUND.

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JUST SOUP MINISTRY, INC. 18483 COOL SPRING RD. MILTON, DE 19968	59-3820809	501(C)(3)	20,291.	0.			UNRESTRICTED SUPPORT
JUSTIN W JENNINGS FOUNDATION, INC. 29L ATLANTIC AVE, BOX 120 OCEAN VIEW, DE 19970	51-0401803	501(C)(3)	10,000.	0.			UNRESTRICTED SUPPORT
KALMAR NYCKEL FOUNDATION 1124 EAST 7TH STREET WILMINGTON, DE 19801	51-6015181	501(C)(3)	5,400.	0.			SUPPORT FOR A VIRTUAL FIELD TRIP PROGRAM.
KENNETT LIBRARY CAMPAIGN P. O. BOX 750 KENNETT SQUARE, PA 19348	23-1547585	501(C)(3)	100,000.	0.			RESTRICTED SUPPORT FOR THE NEW LIBRARY BUILDING.
KENNETT AREA COMMUNITY SERVICE 136 WEST CEDAR STREET KENNETT SQUARE, PA 19348	23-2215441	501(C)(3)	101,000.	0.			RESTRICTED SUPPORT TO PROVIDE FOOD, HOUSING, AND CRISIS SERVICES AS THE NEEDS SURGE DURING
KENT-SUSSEX INDUSTRIES, INC. 301 N REHOBOTH BLVD MILFORD, DE 19963	51-0097856	501(C)(3)	40,000.	0.			SUPPORT FOR EQUIPMENT AND RENOVATION OF PROGRAM SPACE AND REMODEL 2 OF 4 RESTROOMS: FY21 CAPITAL
KEYSTONE HUMAN SERVICES 4391 STURBRIDGE DRIVE HARRISBURG, PA 17710	25-1847902	501(C)(3)	6,500.	0.			THERAPEUTIC SERVICE DOG.
KIDS COUNT UNIVERSITY OF DELAWARE, 298 K GRAHA NEWARK, DE 19716	51-6000297	501(C)(3)	10,000.	0.			UNRESTRICTED SUPPORT
KIDS R FIRST PO BOX 3242 RESTON, VA 20195	54-1905551	501(C)(3)	7,500.	0.			RESTRICTED TO SUPPORT THE 2020 BACKPACK DRIVE AND SCHOOL SUPPLIES FOR LOCAL CHILDREN IN NEED.

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KIMMEL CENTER FOR THE ARTS 1500 WALNUT STREET, FLOOR 17 PHILADELPHIA, PA 19102	23-2865855	501(C)(3)	100,000.	0.			RESTRICTED SUPPORT FOR THE SHOW STOPPERS PROGRAM.
KIND TO KIDS FOUNDATION 100 W. 10TH ST., SUITE 606 WILMINGTON, DE 19801	80-0641000	501(C)(3)	30,000.	0.			UNRESTRICTED SUPPORT.
KINGSWOOD COMMUNITY CENTER 2300 BOWERS STREET WILMINGTON, DE 19802	51-0064319	501(C)(3)	10,000.	0.			2021 FOCUS GRANT: EARLY LEARNERS MUSIC PROGRAM. SUPPORT TO EXPAND THE LA
LA ESPERANZA INC. 216 N. RACE STREET GEORGETOWN, DE 19947	31-1606956	501(C)(3)	135,246.	0.			COLECTIVA-INSPIRED RESOURCE NAVIGATION AND FAMILY COACHING PROGRAM
LA RED HEALTH CENTER 21444 CARMEAN WAY GEORGETOWN, DE 19948	14-1850828	501(C)(3)	125,500.	0.			MILFORD SITE RELOCATION AND EXPANSION OF SERVICES PROJECT AND RESTRICTED SUPPORT FOR FAMILY
LATIN AMERICAN COMMUNITY CENTER 403 NORTH VAN BUREN STREET WILMINGTON, DE 19805	23-7047048	501(C)(3)	112,059.	0.			NCC YPB: CULINARY COMPONENT TO YOUTH ACHIEVEMENT CENTER (YAC'S) ENRICHMENT
LAUREL PUBLIC LIBRARY 101 E. 4TH ST. LAUREL, DE 19956	23-7397230	501(C)(3)	5,000.	0.			UNRESTRICTED SUPPORT.
LAWYERS COMMITTEE FOR CIVIL RIGHTS UNDER LAW - 1500 K STREET NW, STE 900 - WASHINGTON, DC 20005	52-0799246	501(C)(3)	25,000.	0.			UNRESTRICTED SUPPORT. RESTRICTED TO SUPPORT THE
LEADERSHIP WILKES-BARRE 4 PUBLIC SQUARE WILKES-BARRE, PA 18701	23-2205981	501(C)(3)	14,500.	0.			CORE, EXECUTIVE, MASTERS, JUNIOR AND IMPACT PROGRAMS.

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LEADING YOUTH THROUGH EMPOWERMENT 1313 N MARKET STREET, SUITE 110A WILMINGTON, DE 19801	47-1867733	501(C)(3)	42,500.	0.			2021 FOCUS GRANT: 021 MIDDLE SCHOOL AND HIGH SCHOOL TRANSITION CHANGING ACADEMIC RESTRICTED TO SUPPORT LIGHT THE NIGHT DELAWARE 2, RESTRICTED SUPPORT FOR RESEARCH, RESTRICTED
LEUKEMIA & LYMPHOMA SOCIETY, DE CHAPTER - 1300 N GRANT AVENUE - WILMINGTON, DE 19806	13-5644916	501(C)(3)	25,500.	0.			
LEWES FIRE DEPARTMENT, INC. 347 EAST SAVANNAH ROAD LEWES, DE 19958	23-7216619	501(C)(3)	250,000.	0.			RESTRICTED SUPPORT FOR THE PURCHASE OF AMBULANCE.
LIMEN HOUSE, INC. P.O. BOX 1306 WILMINGTON, DE 19899	23-7029073	501(C)(3)	36,980.	0.			UNRESTRICTED SUPPORT IN MEMORY OF SARAH I. LYNCH, SUPPORT FOR LIMEN HOUSE AND UNRESTRICTED SUPPORT.
LIONS EYE BANK OF DELAWARE VALLEY 401 N. 3RD STREET, SUITE 305 PHILADELPHIA, PA 19123	23-1513699	501(C)(3)	15,000.	0.			GRATIS TISSUE PROGRAM. SUPPORT TO STRATEGICALLY BUILD THE REACH, CAPACITY, AND QUALITY OF ESL TUTORING PROGRAM
LITERACY DELAWARE INC. P.O. BOX 2083 WILMINGTON, DE 19899	51-0410054	501(C)(3)	41,750.	0.			
LITTLE SISTERS OF THE POOR 185 SALEM CHURCH ROAD NEWARK, DE 19713	51-0095986	501(C)(3)	27,307.	0.			UNRESTRICTED SUPPORT. RESTRICTED FOR SUSSEX COUNTY CENTRALIZED FOOD DISTRIBUTION PROGRAM, SUSSEX COUNTY CENTRALIZED
LOVE, INC. OF MID-DELMARVA PO BOX 542 SEAFORD, DE 19973	51-0583444	501(C)(3)	82,500.	0.			
LOYAL ORDER OF MOOSE, MILFORD LODGE #2316 - 20142 BEAVER DAM RD. - MILFORD, DE 19963	51-0303521	501(C)(8)	7,428.	0.			RESTRICTED TO SUPPORT FOR NEEDY POOR IN MILFORD.

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LUTHERAN COMMUNITY SERVICES 2809 BAYNARD BOULEVARD WILMINGTON, DE 19802	51-0102403	501(C)(3)	6,009.	0.			RESTRICTED TO SUPPORT PROGRAMS OF PROVIDING FOOD, CLOTHING OR SHELTER FOR THE NEEDY IN DELAWARE
LUZERNE COUNTY HEAD START 23 BEEKMAN STREET WILKES-BARRE, PA 18702	23-2038753	501(C)(3)	9,000.	0.			RESTRICTED SUPPORT FOR SCHOLARSHIP FOR GRADUATING HIGH SCHOOL SENIOR WHO HAS
LYME DISEASE ASSOCIATION OF DELMARVA, INC. - PO BOX 5360 - SALISBURY, MD 21802	74-3102097	501(C)(3)	22,500.	0.			UNRESTRICTED SUPPORT
MAKE-A WISH FOUNDATION OF DELAWARE 100 W. 10TH ST., SUITE 106 WILMINGTON, DE 19801	22-2755963	501(C)(3)	30,250.	0.			RESTRICTED TO SUPPORT SUSSEX COUNTY, DE REQUESTS, WISH JOURNEY AND UNRESTRICTED SUPPORT.
MARCH OF DIMES 5620 KIRKWOOD HIGHWAY WILMINGTON, DE 19808	13-1846366	501(C)(3)	16,500.	0.			IMPLICIT BIAS TRAINING.
MARINE BIOLOGICAL LABORATORY 7 MBL STREET, 2ND FLOOR WOODS HOLE, MA 02543	04-2104690	501(C)(3)	250,000.	0.			RESTRICTED SUPPORT FOR THE BENEFIT OF THE BIOLOGY DEPARTMENT.
MARYLAND FOOD BANK, INC. 2200 HALETHORPE FARMS ROAD BALTIMORE, MD 21227	52-1135690	501(C)(3)	10,000.	0.			SUPPORT FOR PROVIDING FOOD TO THE NEEDY IN MD DURING PANDEMIC.
MCCA 1111 PENNSYLVANIA AVE NW WASHINGTON, DC 20004	13-3920905	501(C)(3)	15,000.	0.			UNRESTRICTED SUPPORT.
MEALS ON WHEELS DELAWARE 100 WEST 10TH ST., SUITE 207 WILMINGTON, DE 19801	51-0355145	501(C)(3)	18,480.	0.			RESTRICTED TO SUPPORT FOOD DELIVERY TO THE NEEDY IN DELAWARE, SUPPORT FOR ADOPT A

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MEALS ON WHEELS OF REHOBOTH AND LEWES, INC. - 32409 LEWES GEORGETOWN HIGHWAY - LEWES, DE 19958	51-0188109	501(C)(3)	8,750.	0.			RESTRICTED SUPPORT TO PROVIDE MEALS FOR THOSE IN NEED, RESTRICTED SUPPORT FOR THE REHOBOTH
MEDECINS SANS FRONTIERES USA, INC. 40 RECTOR STREET, 16TH FLOOR NEW YORK, NY 10006	13-3433452	501(C)(3)	5,000.	0.			UNRESTRICTED SUPPORT.
MEDIATORS FOUNDATION 2525 ARAPAOE AVE., SUITE E-4, 509 BOULDER, CO 80302	04-3002588	501(C)(3)	5,000.	0.			SUPPORT FOR PHILANTHROPY BRIDGING DIVIDES.
MENTAL HEALTH ASSOCIATION IN DELAWARE INC. - 100 W 10TH STREET, STE 600 - WILMINGTON, DE 19801	51-0069000	501(C)(3)	101,100.	0.			COMMUNITY EDUCATION AND TRAINING, KENT: SUICIDE PREVENTION AND UNRESTRICTED SUPPORT.
MIDDLEBURY COLLEGE 152 MAPLE ST MIDDLEBURY, VT 05753	03-0179298	501(C)(3)	5,000.	0.			TEENSHARP SUPPORT.
MIGHTY WRITERS 1501 CHRISTIAN STREET PHILADELPHIA, PA 19146	01-0920922	501(C)(3)	10,000.	0.			UNRESTRICTED SUPPORT.
MIKROWORKS 1207 4TH STREET, PH1 SANTA MONICA, CA 90401	26-4324338	501(C)(3)	7,500.	0.			RESTRICTED TO SUPPORT TRADE TRAINING AND UNRESTRICTED SUPPORT.
MIKVA CHALLENGE 200 S. MICHIGAN AVENUE, SUITE 1000 CHICAGO, IL 60604	52-2033353	501(C)(3)	40,000.	0.			MIKVA PROJECT, NCC THREE YEAR SUPPORT.
MILFORD LIONS CLUB P. O. BOX 25 MILFORD, DE 19963	51-0365044	501(C)(3)	7,428.	0.			RESTRICTED SUPPORT FOR THE NEEDY POOR IN THE CITY OF MILFORD

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MILFORD NEW FRONTIER CLUB 204 NORTH REHOBOTH BLVD. MILFORD, DE 19964	53-0204696	501(C)(3)	7,428.	0.			RESTRICTED SUPPORT FOR THE NEEDY POOR IN THE CITY OF MILFORD
MILFORD ROTARY CLUB EDUCATIONAL FOUNDATION ATTN: HIRSCH - P. O. BOX 10 - MILFORD, DE 19965	52-6896762	501(C)(3)	7,428.	0.			RESTRICTED SUPPORT FOR THE NEEDY POOR IN THE CITY OF MILFORD
MILFORD SCHOOL DISTRICT 906 LAKEVIEW AVENUE MILFORD, DE 19966	51-6000279	501(C)(3)	5,062.	0.			UNRESTRICTED SUPPORT
MILFORD VETERANS OF FOREIGN WARS 77 VETERANS DRIVE MILFORD, DE 19965	23-7193708	501(C)(3)	7,428.	0.			RESTRICTED SUPPORT FOR THE NEEDY POOR IN THE CITY OF MILFORD
MILTON COMMUNITY FOOD PANTRY P. O. BOX 84 MILTON, DE 19968	47-1340129	501(C)(3)	10,000.	0.			MARCH 2021 COMMUNITY NEEDS: GENERAL OPERATING UNRESTRICTED SUPPORT AND WATERPROOFING THE BASEMENT: FY21 CAPITAL GRANT.
MILTON HISTORICAL SOCIETY PO BOX 112, 210 UNION STREET MILTON, DE 19968	23-7158119	501(C)(3)	27,787.	0.			CERTIFIED NURSING ASSISTANT TRAINING PROGRAM, SUPPORT FOR SOCIAL SERVICE AND
MINISTRY OF CARING 115 E. 14TH STREET WILMINGTON, DE 19801	51-0209843	501(C)(3)	62,969.	0.			TECHNOLOGY TO PROVIDE VIRTUAL TOURS AND UNRESTRICTED SUPPORT.
MISPILLION ART LEAGUE, INC. 5 N. WALNUT ST. MILFORD, DE 19963	77-0637761	501(C)(3)	7,000.	0.			UNRESTRICTED SUPPORT
MOM'S HOUSE, INC. OF DOVER P.O. BOX 1138 DOVER, DE 19903	51-0367119	501(C)(3)	25,000.	0.			UNRESTRICTED SUPPORT

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MOUNT LAUREL TOWNSHIP SCHOOLS 514 MOUNT LAUREL ROAD MOUNT LAUREL, NJ 08054	21-6000240	501(C)(3)	5,000.	0.			RESTRICTED SUPPORT TO PURCHASE A DOCUMENT CAMERA AND MISCELLANEOUS MATH AND SCIENCE SUPPLIES
MUSKIES INC. P.O. BOX 1509 WAUKESHA, WI 53187	41-6056119	501(C)(3)	8,500.	0.			UNRESTRICTED SUPPORT.
NAMI-DE 2400 W. 4TH ST. WILMINGTON, DE 19805	22-2490797	501(C)(3)	22,000.	0.			SUPPORT TO PROVIDE STAFFING FOR THE HISPANIC SERVICES INITIATIVE OFFERED THROUGH DELAWARE.
NANTICOKE RIVER WATERSHED CONSERVANCY - P.O. BOX 418 - SEAFORD, DE 19973	51-0342623	501(C)(3)	5,000.	0.			UNRESTRICTED SUPPORT.
NANTICOKE SENIOR CENTER 1001 W LOCUS STREET, PO BOX 406 SEAFORD, DE 19973	23-7202136	501(C)(3)	75,750.	0.			RESTRICTED SUPPORT FOR BUILDING OR EQUIPMENT USE WITH PREFERENCE AND/OR HVAC IN THE BALLROOM
NANTUCKET COTTAGE HOSPITAL FOUNDATION - 57 PROSPECT STREET - NANTUCKET, MA 02554	04-2103823	501(C)(3)	5,000.	0.			UNRESTRICTED SUPPORT.
NATIONAL 4-H COUNCIL CONTRIBUTIONS P. O. BOX 69364 BALTIMORE, MD 21264	36-2862206	501(C)(3)	10,000.	0.			RESTRICTED SUPPORT FOR NATIONAL 4H COUNCIL YOUTH EDUCATION.
NATIONAL CHRISTIAN CHARITABLE FOUNDATION INC - 11625 RAINWATER DRIVE, SUITE 500 - ALPHARETTA, GA 30009	58-1493949	501(C)(3)	18,636.	0.			SUPPORT TO THE KEEVER FAMILY FUND (DAF# 3274397).
NATIONAL OSTEOPOROSIS FOUNDATION 251 18TH ST. S., SUITE 630 ARLINGTON, VA 22202	36-3350532	501(C)(3)	6,000.	0.			UNRESTRICTED SUPPORT.

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NATIONAL PARK FOUNDATION 1110 VERMONT AVE, NW, SUITE 200 WASHINGTON, DC 20005	52-1086761	501(C)(3)	7,880.	0.			UNRESTRICTED SUPPORT.
NATIONAL WILDLIFE FEDERATION P.O. BOX 1691 MERRIFIELD, VA 22116	53-0204616	501(C)(3)	7,880.	0.			UNRESTRICTED SUPPORT.
NATIVE ROOTS FARM FOUNDATION 295 HANCOCK STREET BROOKLYN, NY 11216	84-4361181	501(C)(3)	50,000.	0.			UNRESTRICTED SUPPORT.
NATIVITY PREPARATORY SCHOOL OF WILMINGTON, INC. - 1515 LINDEN STREET - WILMINGTON, DE 19805	22-3884703	501(C)(3)	33,500.	0.			RESTRICTED SUPPORT FOR STUDENT EDUCATION, NCC YPB: GENERAL OPERATING SUPPORT FOR NATIVITY
NCALL RESEARCH 363 SAULSBURY ROAD DOVER, DE 19904	52-6054476	501(C)(3)	108,200.	0.			NCALL FINANCIAL EDUCATION PROGRAM FOR SINGLE MOTHERS IN NEED ACROSS DELAWARE, FORECLOSURE
NEIGHBORHOOD HOUSE, INC. 1218 B STREET WILMINGTON, DE 19801	51-0065747	501(C)(3)	75,000.	0.			WILMINGTON COMMUNITY LEARNING HUBS.
NEMOURS FUND FOR CHILDREN'S HEALTH SHANDS HOUSE, 1600 ROCKLAND RD WILMINGTON, DE 19803	59-0634433	501(C)(3)	5,000.	0.			RESTRICTED TO SUPPORT RESEARCH IN THE DIVISION OF RHEUMATOLOGY.
NEMOURS/ALFRED I. DUPONT HOSPITAL FOR CHILDREN - SHANDS HOUSE, 1600 ROCKLAND RD - WILMINGTON, DE 19804	59-0634433	501(C)(3)	151,228.	0.			RESTRICTED TO SUPPORT THE 10TH ANNUAL HELP OUR KIDS RADIOthon AND UNRESTRICTED SUPPORT.
NETWORK CONNECT INC. 207 W. HOLLY OAK ROAD WILMINGTON, DE 19809	84-3849362	501(C)(3)	14,000.	0.			UNRESTRICTED SUPPORT.

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NETWORK DELAWARE, INC. 719 N SHIPLEY ST WILMINGTON, DE 19801	61-1813844	501(C)(3)	25,000.	0.			DEVELOPING INCLUSIVE LEADERSHIP THROUGH THE CHANGE AGENT JOURNEY.
NEW CASTLE COUNTY DEPARTMENT OF COMMUNITY SERVICES - 77 READS WAY - NEW CASTLE, DE 19720	51-6000160	501(C)(3)	17,462.	0.			RESTRICTED SUPPORT TO THE DEPT. OF COMMUNITY SERVICES, SPECIAL FUND AND RESTRICTED SUPPORT
NEW CASTLE COUNTY HEAD START 256 CHAPMAN RD, STE 103 NEWARK, DE 19702	51-0191916	501(C)(3)	10,932.	0.			RESTRICTED SUPPORT FOR CHILDREN'S LITERACY
NEW CASTLE COUNTY HOPE CENTER, INC. - 365 AIRPORT ROAD - NEW CASTLE, DE 19720	85-4267722	501(C)(3)	101,392.	0.			UNRESTRICTED SUPPORT.
NEWARK SENIOR CENTER 200 WHITE CHAPEL DRIVE NEWARK, DE 19713	51-0104695	501(C)(3)	24,352.	0.			RESTRICTED SUPPORT FOR MEALS ON WHEELS AND UNRESTRICTED
NEWARK SYMPHONY ORCHESTRA P.O. BOX 7775 NEWARK, DE 19714	51-0232073	501(C)(3)	7,500.	0.			TECHNOLOGY TO PROVIDE VIRTUAL SYMPHONY PROGRAMMING.
NEWARK UNITED METHODIST CHURCH 69 EAST MAIN STREET NEWARK, DE 19711	51-0070175	501(C)(3)	6,027.	0.			UNRESTRICTED SUPPORT.
NORTH TEXAS FOOD BANK 3677 MAPLESHADE LANE PLANO, TX 75075	75-1785357	501(C)(3)	7,500.	0.			RESTRICTED TO SUPPORT CHILD, SENIOR AND DISASTER RELIEF PROGRAMS TO MULTIPLE LOCAL
NUESTRAS RAICES P.O. BOX 25167 WILMINGTON, DE 19899	51-0392205	501(C)(3)	25,000.	0.			2021 FOCUS GRANTS: EMERGING LEADERS DEVELOPMENT PROGRAM (ELDP).

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**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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ONE VILLAGE ALLIANCE PO BOX 363 WILMINGTON, DE 19899	35-2367946	501(C)(3)	5,500.	0.			NCC AND SUSSEX: HIRING YOUTH MENTORS (2 IN NCC & SUSSEX).
OPERADELAWARE 4 SOUTH POPLAR STREET WILMINGTON, DE 19801	51-6018055	501(C)(3)	58,424.	0.		STREAMABLE STAGE AND UNRESTRICTED SUPPORT.	RESTRICTED TO SUPPORT THE OSTERHOUT FREE LIBRARY'S BOOKS & BABIES PROGRAM(\$5,000) AND THE RESTRICTED TO SUPPORT FUNDING FOR THE RESTORATION OF THE SUN PORCH DOORS OF THE MAIN RESTRICTED TO PROVIDE FINANCIAL SUPPORT FOR EIGHTH GRADE STUDENTS TO CONTINUE THEIR CATHOLIC
OSTERHOUT FREE LIBRARY 71 S. FRANKLIN STREET WILKES-BARRE, PA 18701	24-0795971	501(C)(3)	20,000.	0.			RESTRICTED SUPPORT FOR THE 2021 DRIVE-THRU COLLEGE FAIRS.
OWL'S NEST FUND FOR HISTORIC DESIGNATED FACILITIES. - P.O. BOX 3920 - WILMINGTON, DE 19807	45-4445805	501(C)(3)	190,000.	0.			UNRESTRICTED SUPPORT.
PADUA ACADEMY 905 NORTH BROOM STREET WILMINGTON, DE 19806	51-0095439	501(C)(3)	7,000.	0.			UNRESTRICTED SUPPORT.
PARENTS & GUARDIANS COLLEGE PLANNING CONFERENCE - 1201 N. ORANGE ST. SUITE 7192 - WILMINGTON, DE 19801	47-3091679	501(C)(3)	5,000.	0.			UNRESTRICTED SUPPORT.
PATENT QUALITY EDUCATION & TRAINING FOUNDATION - 311 S. WEST STREET - CARY, NC 27511	82-2174233	501(C)(3)	10,000.	0.			UNRESTRICTED SUPPORT.
PATHWAYS TO SUCCESS, INC. 31 THE CIRCLE, SUITES A AND B GEORGETOWN, DE 19947	76-0811283	501(C)(3)	10,500.	0.			UNRESTRICTED SUPPORT
PAWS FOR PEOPLE PO BOX 9955 NEWARK, DE 19714	76-0780197	501(C)(3)	33,499.	0.			MARCH 2021 COMMUNITY NEEDS: GENERAL OPERATING, RESTRICTED SUPPORT FUND FOR CHILDREN'S LITERACY,

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PHILADELPHIA ARMS TOWNHOMES INC. 18527 PENTECOSTAL STREET ELLENDALE, DE 19941	84-1657301	501(C)(3)	79,000.	0.			SUSSEX: MORGAN'S PLACE SHELTER AND FOSTER'S FAITH RESTORATION.
PICKERING CREEK AUDUBON CENTER 11450 AUDUBON LANE EASTON, MD 21601	13-1624102	501(C)(3)	6,000.	0.			UNRESTRICTED SUPPORT.
PILOT SCHOOL, INC. 208 WOODLAWN ROAD WILMINGTON, DE 19803	51-0080692	501(C)(3)	28,000.	0.			UNRESTRICTED SUPPORT FOR TUITION AID FOR NEEDY STUDENTS AND UNRESTRICTED SUPPORT.
PLANNED PARENTHOOD OF SOUTHEASTERN PENNSYLVANIA - 1144 LOCUST STREET - PHILADELPHIA, PA 19107	23-1352509	501(C)(3)	11,000.	0.			UNRESTRICTED SUPPORT
POLYTECH ADULT EDUCATION P.O. BOX 102 WOODSIDE, DE 19980	51-6000279	501(C)(3)	26,893.	0.			SUPPORT FOR STAFFING COSTS FOR THE FAMILY LITERACY PROGRAM. \$500.00 IS DEDICATED FOR SPECIAL
PRESSLEY RIDGE DELAWARE 5500 CORPORATE DRIVE, SUITE 400 PITTSBURGH, PA 15237	25-0965460	501(C)(3)	158,050.	0.			EXPANSION OF CARE FOR FOSTER YOUTH RETURNING HOME.
PRESTON'S MARCH FOR ENERGY, INC 1208 FAUN ROAD WILMINGTON, DE 19803	45-3613509	501(C)(3)	7,500.	0.			ADAPTIVE BIKE.
PRINCETON UNIVERSITY PO BOX 7780-4716 PHILADELPHIA, PA 19182	21-0634501	501(C)(3)	5,000.	0.			UNRESTRICTED SUPPORT.
PROJECT LEADERSHIP 316 W. HOWARD ST. MUNCIE, IN 47305	45-3577728	501(C)(3)	5,000.	0.			UNRESTRICTED TO SUPPORT THE MENTORING AND SERVICE PROGRAMS FOR LOW INCOME STUDENTS IN DELAWARE

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## DELAWARE COMMUNITY FOUNDATION, INC

## Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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PUBLIC ALLIES DELAWARE 100 WEST 10TH STREET, SUITE 812 WILMINGTON, DE 19801	52-1759564	501(C)(3)	40,000.	0.			MENTAL HEALTH SUPPORT, WORK FROM HOME KITS, AND TRAIN FROM HOME KITS AND CHRISTIANACARE ALLY
REACH RIVERSIDE 2300 BOWERS ST WILMINGTON, DE 19802	82-1401986	501(C)(3)	125,500.	0.			RESTRICTED TO SUPPORT THE TEEN WAREHOUSE AND DELAWARE THEATRE COMPANY FILMS, IMPLEMENTATION OF MARKETING, TRAVEL
READ ALOUD DELAWARE 100 WEST 10TH STREET, STE 309 WILMINGTON, DE 19801	51-0280486	501(C)(3)	51,087.	0.			INCENTIVES, AND WEEKLY INCENTIVES, RESTRICTED TO SUPPORT ACTIVITIES IN
READING ASSIST INSTITUTE 100 W. 10TH ST., SUITE 910 WILMINGTON, DE 19801	51-0317415	501(C)(3)	38,932.	0.			RESTRICTED SUPPORT - FUND FOR CHILDREN'S LITERACY, NCC YPB: RECRUIT, TRAIN, AND EMBED NEW READING
READING IS FUNDAMENTAL 750 FIRST STREET, NE, STE 920 WASHINGTON, DC 20002	52-0976257	501(C)(3)	32,116.	0.			RESTRICTED TO SUPPORT SIX READING IS FUNDAMENTAL PROGRAMS IN FOUR NAVIENT COMMUNITIES.
RED CLAY CONSOLIDATED SCHOOL DISTRICT - 1502 SPURCE AVENUE - WILMINGTON, DE 19805	51-6000279	501(C)(3)	20,000.	0.			PATIENT CARE PROGRAM. BALANCE OF FUND
REHOBOTH ART LEAGUE, INC. 12 DODDS LANE REHOBOTH BEACH, DE 19971	51-0097839	501(C)(3)	66,486.	0.			DISTRIBUTED TO DESIGNATED ORGS - RESTRICTED CAPITAL EXPENSE AND UNRESTRICTED
REHOBOTH BEACH HISTORICAL SOCIETY & MUSEUM - 511 REHOBOTH AVENUE - REHOBOTH BEACH, DE 19971	51-0203755	501(C)(3)	21,130.	0.			BALANCE OF FUND DISTRIBUTED TO DESIGNATED ORGS - RESTRICTED CAPITAL EXPENSE, MARCH 2021
RHODES COLLEGE 2000 NORTH PARKWAY MEMPHIS, TN 38112	62-0476301	501(C)(3)	50,000.	0.			RESTRICTED SUPPORT FOR A BIOLOGY FACULTY RESEARCH FUND.

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RODNEY STREET TENNIS & TUTORING ASSOCIATION - 101 GARDEN OF EDEN ROAD, STE 102 - WILMINGTON, DE 19803	01-0652445	501(C)(3)	26,000.	0.			TAKEAWAY KITS FOR SUMMER CAMP AND 2021 SCHOOL YEAR, HEALTH EDUCATION AND SUMMER CAMP AND
RONALD McDONALD HOUSE OF DELAWARE 1901 ROCKLAND ROAD WILMINGTON, DE 19803	51-0295320	501(C)(3)	130,500.	0.			TEMPORARY HIRING OF STAFF TO COVER EXTRA SHIFTS OF RELIEF MANAGERS, PROVIDE ACCESS TO SPECIALIZED
SACRED HEART HOUSING, INC. 115 E. 14TH ST. WILMINGTON, DE 19801	51-0384441	501(C)(3)	500,000.	0.			VILLA MARIA, A COMMUNITY OF AFFORDABLE HOUSING FOR SENIORS.
SALESTANUM SCHOOL 1801 N. BROOM STREET WILMINGTON, DE 19802	51-0066743	501(C)(3)	7,709.	0.			RESTRICTED TO PROVIDE FINANCIAL SUPPORT FOR EIGHTH GRADE STUDENTS TO CONTINUE THEIR CATHOLIC
SALVATION ARMY 400 N ORANGE ST, PO BOX 308 WILMINGTON, DE 19899	13-5562351	501(C)(3)	91,019.	0.			RESTRICTED TO SUPPORT RED KETTLE PROGRAM IN NEW CASTLE COUNTY, RESTRICTED SUPPORT - ELIASON
SEAFORD DISTRICT LIBRARY 600 N. MARKET STREET SEAFORD, DE 19973	51-0101879	501(C)(3)	137,045.	0.			RESTRICTED SUPPORT TO PRINT MEDIA, RESTRICTED TO SUPPORT CHILDREN'S BOOKS, LEARNING MATERIALS
SEAFORD HISTORICAL SOCIETY, INC. 203 HIGH STREET SEAFORD, DE 19973	51-0200225	501(C)(3)	6,500.	0.			UNRESTRICTED SUPPORT.
SECOND HELPINGS 1121 SOUTHEASTERN AVENUE INDIANAPOLIS, IN 46202	35-1484281	501(C)(3)	10,000.	0.			RESTRICTED TO SUPPORT CULINARY JOB TRAINING PROGRAM.
SERVIAM GIRLS ACADEMY, INC. 14 HALCYON DRIVE NEW CASTLE, DE 19720	26-0792594	501(C)(3)	46,655.	0.			RESTRICTED SUPPORT FOR THE PURCHASE OF 15 DJEMBE DRUMS, SUPPORT TO PREPARE FOR A SAFE REOPENING,

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SEWELL C BIGGS TRUST 12-29-89 P. O. BOX 711, 406 FEDERAL STREET DOVER, DE 19901	51-6171556	501(C)(3)	9,380.	0.			TECHNOLOGY, SUPPLIES, AND MATERIALS TO PROVIDE A VIRTUAL EXPERIENCE, RESTRICTED SUPPORT FOR
SMYRNA-CLAYTON POP WARNER 199 CHRISTIANA RIVER DRIVE CLAYTON, DE 19938	51-0322246	501(C)(3)	8,706.	0.			UNRESTRICTED SUPPORT.
SOJOURNERS PLACE 2901 NORTHEAST BOULEVARD WILMINGTON, DE 19802	51-0324770	501(C)(3)	66,500.	0.			LAPTOPS AND TRAVEL SUPPORT FOR INTERVIEWS, SOJOURNERS' PLACE TRANSITIONAL HOUSING
SOUTHERN DELAWARE THERAPEUTIC HORSEBACK RIDING - P.O. BOX 219 - NASSAU, DE 19969	52-2047294	501(C)(3)	10,075.	0.			RESTRICTED SUPPORT FOR THE PURCHASE OF SUPPLIES/LAPTOP AND THERAPY HORSES.
SOUTHERN UNIVERSITY IN NEW ORLEANS FOUNDATION - 6801 PRESS DRIVE - NEW ORLEANS, LA 70126	72-0799587	501(C)(3)	5,000.	0.			RESTRICTED TO SUPPORT SCHOLARSHIPS FOR DESERVING STUDENTS AT THE UNIVERSITY.
SOUTHERN SUSSEX ROTARY CLUB P.O. BOX 92 SELBYVILLE, DE 19975	81-1591715	501(C)(3)	12,030.	0.			UNRESTRICTED SUPPORT
SPUR IMPACT ASSOCIATION P. O. BOX 25208 WILMINGTON, DE 19899	82-3990289	501(C)(3)	5,000.	0.			SUPPORT FOR DOMORE24: MATCH FUND.
ST. ELIZABETH HIGH SCHOOL 1500 CEDAR STREET WILMINGTON, DE 19805	53-0196617	501(C)(3)	9,500.	0.			RESTRICTED TO PROVIDE FINANCIAL SUPPORT FOR EIGHTH GRADE STUDENTS TO CONTINUE THEIR CATHOLIC
ST. FRANCIS HEALTHCARE PO BOX 2500, 7TH AND CLAYTON STS. WILMINGTON, DE 19805	51-0064326	501(C)(3)	320,000.	0.			NEW AMBULANCES, SUPPORT FOR NEW AMBULANCES AND EXPANDING MOBILE COMMUNITY HEALTHCARE.

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ST. JOHN'S UNITED METHODIST CHURCH 300 N PINE STREET SEAFORD, DE 19973	23-7259492	501(C)(3)	16,000.	0.			UNRESTRICTED SUPPORT.
ST. JOSEPH'S ON THE BRANDYWINE 10 OLD CHURCH ROAD WILMINGTON, DE 19807	51-0071907	501(C)(3)	20,000.	0.			UNRESTRICTED SUPPORT.
ST. MICHAEL'S SCHOOL & NURSERY, INC. - 700 NORTH WALNUT STREET - WILMINGTON, DE 19801	51-0066741	501(C)(3)	15,000.	0.			UNRESTRICTED SUPPORT.
ST. PATRICK'S CENTER, INC. 107 EAST 14TH STREET WILMINGTON, DE 19801	51-0120169	501(C)(3)	34,250.	0.			RENOVATIONS. RESTRICTED SUPPORT TO THE DELAWARE SKILLS CENTER FOR THREE FULL SCHOLARSHIPS (\$3,310.00
STATE OF DELAWARE PO BOX 778 DOVER, DE 19903	51-6000297	501(C)(3)	9,930.	0.			FINANCIAL INDEPENDENCE PROGRAM AND UNRESTRICTED SUPPORT.
STEHM, INC. PO BOX 2617 WILMINGTON, DE 19805	51-0309114	501(C)(3)	8,100.	0.			UNRESTRICTED SUPPORT.
STEPS FOR HOPE, INC. 100 PARK AVENUE SEAFORD, DE 19973	83-3433366	501(C)(3)	5,000.	0.			UNRESTRICTED SUPPORT.
STRONG MATURE MINDS, INC. 513 FLORENCE FIELDS LANE NEW CASTLE, DE 19720	81-4297587	501(C)(3)	6,327.	0.			RESTRICTED SUPPORT TO UNDERWRITE THE CURRENT TELECOMM PROJECT.
STROUD WATER RESEARCH CENTER 970 SPENCER ROAD AVONDALE, PA 19311	52-2081073	501(C)(3)	12,500.	0.			

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SUMMER LEARNING COLLABORATIVE 1313 N MARKET STREET, STE 1150 NW WILMINGTON, DE 19801	47-5494358	501(C)(3)	16,000.	0.			SUMMER CAMP TRAINING RESTRICTED TO SUPPORT THE COST OF UNIFORMS FOR STUDENTS ATTENDING A LOCAL SCHOOL AND THE BACK RESTRICTED SUPPORT FOR THE DELAWARE LATINO COMMUNITY GRIEF SUPPORT PILOT PROJECT, 2021 FOCUS
SUNDAY BREAKFAST MISSION 110 N. POPLAR STREET WILMINGTON, DE 19801	51-0073080	501(C)(3)	46,187.	0.			KENT/SUSSEX: FUNDING PART-TIME CASE WORKER AND CHILDREN AND TEEN PROJECT.
SUPPORTING KIDDS INC. P.O. BOX 1004 HOCKESSIN, DE 19707	61-1961292	501(C)(3)	83,637.	0.			MARCH 2021 COMMUNITY NEEDS: GENERAL OPERATING AND UNRESTRICTED SUPPORT. SUPPORT FOR TECHNOLOGY FOR VARIOUS PURPOSES, INCLUDING A WEBSITE REDESIGN TO INTEGRATE
SURVIVORS OF ABUSE IN RECOVERY (SOAR) - 405 FOULK ROAD - WILMINGTON, DE 19803	51-0345109	501(C)(3)	55,000.	0.			FAMILY & STUDENT SERVICES PROGRAM. UNRESTRICTED SUPPORT - RECOMMENDED BY GEORDIE HAYWARD AND UNRESTRICTED SUPPORT AND RESTRICTED
SUSSEX COMMUNITY CRISIS HOUSING SERVICES, INC. - 204 E NORTH STREET - GEORGETOWN, DE 19947	51-0257434	501(C)(3)	14,000.	0.			RESTRICTED TO SUPPORT DELAWARE DIGITAL INCLUSION INITIATIVE IN PARTNERSHIP WITH TECH
SUSSEX COUNTY HABITAT FOR HUMANITY P.O. BOX 759 GEORGETOWN, DE 19948	51-0334057	501(C)(3)	300,864.	0.			
SUSSEX MONTESSORI SCHOOL, INC. P.O. BOX 1686 SEAFORD, DE 19973	82-2404164	501(C)(3)	17,500.	0.			
TATNALL SCHOOL 1501 BARLEY MILL ROAD WILMINGTON, DE 19807	51-0071443	501(C)(3)	9,600.	0.			
TEACH FOR AMERICA - DELAWARE 1200 N. FRENCH STREET, SUITE 726 WILMINGTON, DE 19801	13-3541913	501(C)(3)	5,000.	0.			

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TECH IMPACT - DELAWARE POST OFFICE BOX 825375 PHILADELPHIA, PA 19182	74-3062511	501(C)(3)	100,000.	0.			TO SUPPORT CONSULTING WORK TO PREPARE A PLAN TO ADDRESS DIGITAL INCLUSION IN DELAWARE
TEENSHARP, INC. 1200 N. FRENCH ST. WILMINGTON, DE 19801	27-2246880	501(C)(3)	120,000.	0.			RESTRICTED TO SUPPORT THE 2020 ONLINE SIX-WEEK SUMMER PROGRAM FOR DELAWARE STUDENTS,
TELAMON CORPORATION 600 CORPORATION DRIVE, SUITE 105 PENDLETON, IN 46064	56-1022483	501(C)(3)	5,000.	0.			RESTRICTED SUPPORT FOR THE LOCAL HEAD START SCHOOL READINESS PROGRAM.
THE CHALLENGE PROGRAM 1124 EAST 7TH STREET WILMINGTON, DE 19801	51-03886369	501(C)(3)	26,000.	0.			RESTRICTED FOR COVID SUPPORT FOR AN ADDITIONAL SHOP SPACE, CREW TOOLS, BENCHES, ETC. TO REDUCE VIRTUAL HEALTH
THE CHOIR SCHOOL OF DELAWARE 2013 NORTH MARKET STREET WILMINGTON, DE 19802	20-5486245	501(C)(3)	123,319.	0.			PROGRAMMING, RESTRICTED SUPPORT FOR ONLINE SOFTWARE AND EDUCATION
THE DDX3X FOUNDATION 1000 N. WEST STREET, SUITE 900 WILMINGTON, DE 19801	81-1159359	501(C)(3)	96,832.	0.			UNRESTRICTED SUPPORT. NCC YPB: GENERAL
THE DELAWARE CONTEMPORARY 200 SOUTH MADISON STREET WILMINGTON, DE 19801	51-0242942	501(C)(3)	13,000.	0.			OPERATING SUPPORT OF BUILDING A CREATIVE FUTURE AFTERSCHOOL
THE EDUCATION RESOURCE INC. 102 GARDEN OF EDEN ROAD WILMINGTON, DE 19803	30-0488164	501(C)(3)	22,665.	0.			UNRESTRICTED SUPPORT.
THE HILL SCHOOL 860 BEECH STREET POTTSTOWN, PA 19464	23-1352647	501(C)(3)	5,000.	0.			RESTRICTED SUPPORT TO THE QUADRIVIUM.

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THE J. WOOD PLATT CADDIE SCHOLARSHIP TRUST - 4825 KENNETT PIKE - WILMINGTON, DE 19807	23-6296989	501(C)(3)	10,000.	0.			RESTRICTED SUPPORT FOR PLATT CADDIE SCHOLARSHIP.
THE JOURNEY INC. 721 E. CHESTNUT HILL ROAD NEWARK, DE 19713	27-0928920	501(C)(3)	5,000.	0.			UNRESTRICTED SUPPORT.
THE JULIAN CENTER 2011 NORTH MERIDIAN STREET INDIANAPOLIS, IN 46202	35-1346514	501(C)(3)	5,000.	0.			UNRESTRICTED SUPPORT TO THE OVERALL MISSION.
THE MUSIC SCHOOL OF DELAWARE 4101 WASHINGTON STREET EXT WILMINGTON, DE 19802	51-0066934	501(C)(3)	272,774.	0.			RESTRICTED SUPPORT FOR THE MILFORD LOCATION FROM DAVE AND ANN BURTON AND UNRESTRICTED SUPPORT.
THE NANTICOKE INDIAN ASSOCIATION ROUTE 13, BOX 107A MILLSBORO, DE 19966	51-0261316	501(C)(3)	10,000.	0.			MARCH 2021 COMMUNITY NEEDS: GENERAL OPERATING.
THE NATURE CONSERVANCY PENNSYLVANIA/DELAWARE - 2101 NORTH FRONT STREET, BUILDING #1, SUITE 200 - HARRISBURG, PA 17110	53-0242652	501(C)(3)	100,000.	0.			RESTRICTED SUPPORT TO HELP WITH PURCHASE OF LAND FOR THE KITPATINNY RIDGE PRESERVATION
THE PRECISION INSTITUTE TWO RIGHTER PARKWAY, SUITE 215 WILMINGTON, DE 19803	83-0620564	501(C)(3)	12,500.	0.			DRIVING SIMULATOR EQUIPMENT FOR NEURODIVERSE POPULATION AND MARCH 2021 COMMUNITY
THE REMANED PROJECT, INC. 300 MARTIN LUTHER KING JR. BOULEVAR WILMINGTON, DE 19801	83-4253014	501(C)(3)	5,000.	0.			SUPPORT FOR CURRICULUM DEVELOPMENT.
THE RIVERSIDE SCHOOL 30 LILY POND ROAD LYNDONVILLE, VT 05851	03-0282244	501(C)(3)	5,000.	0.			UNRESTRICTED SUPPORT.

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THE TEEN WAREHOUSE 400 N. ORANGE STREET WILMINGTON, DE 19899	82-3855379	501(C)(3)	12,500.	0.			NCC YPB: COVER 40% OF COSTS TO PROVIDE LEVEL UP PROGRAMMING IN SUMMER 2021 FOR UP TO 20
THE WAY HOME, INC. PO BOX 1103 GEORGETOWN, DE 19947	13-4264074	501(C)(3)	15,000.	0.			WHOLE - WOMEN HAVING OPPORTUNITIES 2 LEVERAGE EM
THEODORE ROOSEVELT CONSERVATION PARTNERSHIP, - 529 14TH STREET, SUITE 500 - WASHINGTON, DC 20045	04-3706385	501(C)(3)	105,000.	0.			UNRESTRICTED SUPPORT FOR THE MENHADEN CONSERVATION CAMPAIGN, RESTRICTED SUPPORT TO AID TRCP'S
TIDALHEALTH FOUNDATION INC 100 E. CARROLL ST. SALISBURY, DE 21801	52-1851935	501(C)(3)	300,000.	0.			WAGNER WELLNESS PROGRAM AND UNRESTRICTED SUPPORT, RESTRICTED SUPPORT FOR NANTICOKE MEMORIAL
TOMARO'S CHANGE 3301 GREEN STREET, SUITE 235 CLAYMONT, DE 19703	27-1037171	501(C)(3)	19,500.	0.			YES PROGRAM.
TOWER HILL SCHOOL 2813 WEST 17TH STREET WILMINGTON, DE 19806	51-0065745	501(C)(3)	73,347.	0.			UNRESTRICTED SUPPORT.
TOWN OF LAUREL 201 MECHANIC STREET LAUREL, DE 19956	51-0382475	501(C)(3)	20,000.	0.			RESTRICTED SUPPORT FOR THE CAPITAL CAMPAIGN FOR LAUREL (DEL.) POLICE DEPARTMENT.
TRI-STATE BIRD RESCUE & RESEARCH, INC. - 170 POSSUM HOLLOW ROAD - NEWARK, DE 19711	51-0265807	501(C)(3)	24,092.	0.			RESTRICTED SUPPORT FOR NEW WATER HEATER AND UNRESTRICTED SUPPORT.
TRUSTEES OF BOSTON UNIVERSITY 1 SILBER WAY, 8TH FLOOR BOSTON, MA 02215	04-2103547	501(C)(3)	5,000.	0.			RESTRICTED SUPPORT FOR THE BENEFIT OF RADIO STATION WBUR.

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II).

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UBUNTU BLACK FAMILY WELLNESS COLLECTIVE - 2611 GOVERNOR PRINTZ BLVD - WILMINGTON, DE 19802	84-4234815	501(C)(3)	15,000.	0.			CENTERING BLACK MOTHERS FOR BIRTH EQUITY PROJECT; EMPOWERING BLACK MOTHERS, EMPOWERING BLACK DOULAS.
UNITED WAY OF DELAWARE 625 NORTH ORANGE STREET WILMINGTON, DE 19801	51-0073399	501(C)(3)	167,100.	0.			\$TAND BY ME, SUPPORT FOR DELAWARE RACIAL JUSTICE COLLABORATIVE FUND, \$TAND BY ME NEXGEN, RESTRICTED
UNITED WAY OF DELAWARE COUNTY INDIA, INC - 106 WEST STATE STREET - KENNETT SQUARE, PA 19348	35-0996148	501(C)(3)	5,000.	0.			RESTRICTED SUPPORT FOR THE EARLY CHILDHOOD EDUCATION
UNITED WAY OF SOUTHERN CHESTER COUNTY - 106 WEST STATE STREET - KENNETT SQUARE, PA 19348	23-1260899	501(C)(3)	18,100.	0.			UNRESTRICTED SUPPORT
UNITED WAY OF WYOMING VALLEY 100 N. PENNSYLVANIA AVE., 2ND FLOOR WILKES BARRE, PA 18701	24-0831490	501(C)(3)	22,000.	0.			RESTRICTED TO ALLOCATE \$16000 TO AGENCIES AS DET
UNIVERSITY OF DELAWARE 104 HULLIHEN HALL, 162 THE GREEN NEWARK, DE 19716	51-6000297	501(C)(3)	851,471.	0.			TIMELINE TUESDAYS: DATA SNAFSHOT DEBUT WEBINAR SERIES, SUPPORT TO MAINTAIN AND IMPROVE
UNIVERSITY OF EVANSVILLE 1800 LINCOLN AVENUE EVANSVILLE, IN 47722	35-0868074	501(C)(3)	250,000.	0.			RESTRICTED SUPPORT FOR THE BENEFIT OF THE BIOLOGY DEPARTMENT.
UNIVERSITY OF NOTRE DAME CONTROLLERS OFFICE 724, GRACE HALL NOTRE DAME, IN 46556	35-0868188	501(C)(3)	5,000.	0.			UNRESTRICTED SUPPORT.
UNIVERSITY OF PENNSYLVANIA 3451 WALNUT STREET, FRANKLIN BUILDING, ROOM 10 - PHILADELPHIA, PA 19104	23-1352685	501(C)(3)	25,000.	0.			RESTRICTED TO SUPPORT 404889 - CONTRIBUTION TO E.D. & E.M. RUSHWORTH MEMORIAL SCHOLARSHIP

Schedule I (Form 990)



**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UPPER WHITE RIVER WATERSHED ALLIANCE INC - 1052 WOODLAWN AVENUE - INDIANAPOLIS, IN 46203	35-2076148	501(C)(3)	5,000.	0.			SUPPORT TO THE CLEAR CHOICES CLEAN WATER (CLEAR CHOICES) PUBLIC ENGAGEMENT PROGRAM.
UPSTREAM ALLIANCE 1867 LINDAMOR DRIVE ANNAPOLIS, MD 21401	47-3035594	501(C)(3)	6,000.	0.			RESTRICTED TO SUPPORT ENVIRONMENTAL EDUCATION AND IS BEING MADE ON BEHALF OF STEPHEN K.
URBAN BIKE PROJECT PO BOX 729 WILMINGTON, DE 19899	20-5837287	501(C)(3)	33,400.	0.			WILMINGTON OPEN STREETS AND 2021 FOCUS GRANT: URBAN BIKE EXPLORERS.
VANDERBILT UNIVERSITY PMB 407727, 2301 VANDERBILT PLACE NASHVILLE, TN 37240	62-0476822	501(C)(3)	30,000.	0.			TO SUPPORT THE KEITH MUMFORD MEMORIAL TENNIS SCHOLARSHIP AND TO SUPPORT THE DEEG SEZNA
VILLAGE PLEDGE, INC. 3332 COACHMAN ROAD WILMINGTON, DE 19803	84-2780315	501(C)(3)	80,000.	0.			UNRESTRICTED SUPPORT. SUPPORT FOR 100 EYE EXAMS, RESTRICTED
VISION TO LEARN 100 W. 10TH ST., SUITE 106 WILMINGTON, DE 19801	45-3457853	501(C)(3)	45,500.	0.			SUPPORT FOR THE GIFT OF EYEGLASSES TO CHILDREN
VOICE OF JUDAH ISRAEL PO BOX 8886 FORT WAYNE, IN 46898	46-0888643	501(C)(3)	13,500.	0.			UNRESTRICTED SUPPORT. RESTRICTED SUPPORT TO THE LEWIS A. CHEEK LAW
WAKE FOREST UNIVERSITY 1834 WAKE FOREST ROAD WINSTON SALEM, NC 27109	56-0532138	501(C)(3)	50,000.	0.			SCHOLARSHIP (LSS187), RESTRICTED SUPPORT FOR RESTRICTED SUPPORT FOR
WASHINGTON COLLEGE 300 WASHINGTON AVENUE CHESTERTOWN, MD 21620	52-0591691	501(C)(3)	30,000.	0.			RESTRICTED SUPPORT FOR THE WORK OF THE CHAIR OF THE RELIGION, POLITICS & CULTURE (DR. PRUD' HOMME)

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WEST END NEIGHBORHOOD HOUSE INC. 710 N. LINCOLN STREET WILMINGTON, DE 19805	51-0064301	501(C)(3)	189,370.	0.			RESTRICTED TO SUPPORT CAPITAL CAMPAIGN CONTRIBUTION, SUPPORT FOR AN OUTDOOR CLASSROOM,
WEST SIDE NEW BEGINNINGS 19801 NORWOOD STREET REHOBOTH BEACH, DE 19971	51-0350410	501(C)(3)	5,000.	0.			UNRESTRICTED SUPPORT.
WEST VIRGINIA UNIVERSITY FOUNDATION, INC. - P.O. BOX 1650 - MORGANTOWN, WV 26507	55-6017181	501(C)(3)	10,000.	0.			RESTRICTED TO SUPPORT FOULKE MEADOW RIVER LANDS SCHOLARSHIP.
WESTMINSTER PRESBYTERIAN CHURCH 1502 WEST 13TH STREET WILMINGTON, DE 19806	51-0066745	501(C)(3)	6,300.	0.			UNRESTRICTED SUPPORT \$2,000.00, CAPITAL CAMPAIGN \$3,000.00 AND BALANCE TO BE ALLOCATED
WESTSIDE FAMILY HEALTHCARE, INC. 300 WATER STREET, SUITE 200 WILMINGTON, DE 19801	22-2488654	501(C)(3)	172,307.	0.			WESTSIDE FAMILY HEALTHCARE'S FEEDING FAMILIES PROGRAM.
WHEELER MISSION 205 EAST NEW YORK ST. INDIANAPOLIS, IN 46204	35-0888771	501(C)(3)	5,000.	0.			RESTRICTED SUPPORT FOR THE 2020 THANKSGIVING CAMPAIGN.
WILLIAMS COLLEGE 100 SPRING ST, SUITE 201 WILLIAMSTOWN, MA 01267	04-2104847	501(C)(3)	5,000.	0.			TEENSHARP SUPPORT.
WILMINGTON ALLIANCE 100 W. 10TH STREET, SUITE 206 WILMINGTON, DE 19801	51-0347680	501(C)(3)	15,000.	0.			KITCHEN INCUBATOR TO PROVIDE AFFORDABLE, HIGH-QUALITY COMMERCIAL KITCHEN FOR ENTREPRENEURS
WILMINGTON CHILDREN'S CHORUS, INC. 800 N. FRENCH STREET, 9TH FLOOR WILMINGTON, DE 19801	84-4741937	501(C)(3)	27,892.	0.			UNRESTRICTED SUPPORT (GIFTS RECEIVED AFTER FUND CLOSURE), MARCH 2021 COMMUNITY NEEDS: GENERAL

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WILMINGTON FRIENDS SCHOOL 101 SCHOOL ROAD WILMINGTON, DE 19803	51-0064310	501(C)(3)	10,900.	0.			UNRESTRICTED SUPPORT IN MEMORY OF BEN WILKINSON, UNRESTRICTED SUPPORT TO ALUMNI DEVELOPMENT OFFICE
WILMINGTON HEAD START 100 W. 10TH ST., SUITE 1016 WILMINGTON, DE 19801	51-0276298	501(C)(3)	10,932.	0.			RESTRICTED SUPPORT - FUND FOR CHILDREN'S LITERACY.
WILMINGTON LIBRARY P.O. BOX 2303 WILMINGTON, DE 19899	51-0064340	501(C)(3)	120,257.	0.			RESTRICTED SUPPORT - FUND FOR CHILDREN'S LITERACY.
WILMINGTON SENIOR CENTER, INC. 1901 MARKET STREET WILMINGTON, DE 19802	51-0078398	501(C)(3)	20,000.	0.			UNRESTRICTED SUPPORT.
WILMINGTON UNIVERSITY 320 DUPONT HIGHWAY NEW CASTLE, DE 19720	51-0107088	501(C)(3)	7,500.	0.			STUDENT COVID-RELIEF FUND
WOMEN AND CHILDREN TRANSFORMATION MINISTRY INTERNATIONAL, INC - 1028 LAFFERTY LANE - DOVER, DE 19901	27-0656519	501(C)(3)	20,000.	0.			TODAY'S OVER COMERS (T.O.C.).
WOMEN OF VALUE INC. 42 MER WAY DOVER, DE 19901	83-1106762	501(C)(3)	10,000.	0.			WOMEN OF VALUE EDUCATION & MENTORING.
WOODLAWN LIBRARY 2020 W. 9TH STREET WILMINGTON, DE 19805	51-6000160	501(C)(3)	6,583.	0.			UNRESTRICTED SUPPORT
WYOMING COUNTY COMMUNITY ACTION, INC. - 6470 ROUTE 20A, SUITE 1 - PERRY, NY 14530	16-1488538	501(C)(3)	7,000.	0.			RESTRICTED TO SUPPORT THE COMMUNITY ACTION ANGELS PROGRAM.

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YEAR UP, INC. 45 MILK STREET, 2ND FLOOR BOSTON, MA 02109	04-3534407	501(C)(3)	51,000.	0.			SUPPORTING STUDENTS THROUGH HEALTH AND WELLNESS SERVICES AND UNRESTRICTED SUPPORT.
YMCA OF DELAWARE 100 W. 10TH STREET, SUITE 1100 WILMINGTON, DE 19801	51-0065748	501(C)(3)	205,750.	0.			RESTRICTED SUPPORT FOR THE ANNUAL CAMPAIGN, SUPPORT TO IMPROVE INDOOR SAFETY AND AIR QUALITY
YOUTH MENTORING INITIATIVE PO BOX 743 FISHERS, IN 46038	26-2543447	501(C)(3)	10,000.	0.			RESTRICTED SUPPORT FOR MENTOR PROGRAMS AT INTERMEDIATE THROUGH HIGH SCHOOL.
YWCA DELAWARE 100 W. 10TH STREET, SUITE 515 WILMINGTON, DE 19801	51-0064344	501(C)(3)	77,010.	0.			RESTRICTED TO SUPPORT RACIAL AND SOCIAL JUSTICE PROGRAMMING, COVID PROGRAMS SUPPORT,
ZOE MINISTRIES PO BOX 26 GREENWOOD, DE 19950	46-0940115	501(C)(3)	7,500.	0.			SUPPORT TO PROVIDE SAFETY, WHOLENES, HEALING AND ADVOCACY IN DELAWARE FOR THOSE

Schedule I (Form 990)

**Part III**

**Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SCHOLARSHIPS	189	449,222.	0.		

**Part IV Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

SCHOLAR SUPPORT SERVICES

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: 1 IN 7B FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO SUPPORT SUNDAY

BREAKFAST MISSION THROUGH THE SUPPLY OF FOOD & HYGIENE PACKETS TO HELP

LOCAL COMMUNITY DURING COVID-19 AND SUPPORT THE DAY-TO-DAY EXPENSES OF

PURCHASING MATERIALS FOR THE ORGANIZATION'S FOOD AND HYGIENE PACKETS THAT

**Part IV** Supplemental Information

ARE BEING SUPPLIED TO THE SUNDAY BREAKFAST MISSION DURING THE COVID-19 CRISIS, AND TO HELP THE ORGANIZATION.

NAME OF ORGANIZATION OR GOVERNMENT:

21ST CENTURY FUND FOR DELAWARE'S CHILDREN

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT FOR INDIVIDUAL GRANTS TO CHILDREN AND ORGANIZATIONS, SUPPORT FOR PROVIDING GRANTS FOR CHILDREN AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT:

AFRO-AMERICAN HISTORICAL SOCIETY OF DELAWARE

(H) PURPOSE OF GRANT OR ASSISTANCE: 2021 FOCUS GRANT: EASTSIDE PRIDE - WE MATTER AND RESTRICTED SUPPORT FOR SCHOLARSHIPS FOR UNDER-SERVED YOUTH WHO HAVE LOST A PARENT TO VIOLENCE.

NAME OF ORGANIZATION OR GOVERNMENT: AMERICAN CANCER SOCIETY INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT "CVC OFF THE COURT, HPV CANCER FREE CAMPAIGN, SUPPORT TO PROMOTE THE GOALS OF THE SOCIETY AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: AMERICAN LEGION POST 8 INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT FOR AMBULANCE SERVICES AS STIPULATED IN THE PROPOSAL (GRANT AGREEMENT).

NAME OF ORGANIZATION OR GOVERNMENT: ART FOR LIFE DELAWARE

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO SUPPORT CHILDREN'S BOOK TO BE SOLD TO SUPPORT AFL AND RESTRICTED SUPPORT FOR SUMMER WRITING PROGRAM.

**Part IV** Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: AUTISM DELAWARE

(H) PURPOSE OF GRANT OR ASSISTANCE: AUTISM CARE TEAM (ACT) PROGRAM  
EXPANSION AND RESTRICTED TO SUPPORT AUTISM PROGRAMS WITHIN DELAWARE.

NAME OF ORGANIZATION OR GOVERNMENT:

BERNARD AND RUTH SIEGEL JEWISH COMMUNITY CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO SUPPORT CAPITAL  
CAMPAIGN FOR THE PAUL AND GLORIA FINE EARLY CHILDHOOD CENTER AT JCC.

NAME OF ORGANIZATION OR GOVERNMENT: BLACK GIRLS CODE

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT WEST COAST  
EXPANSION; TO BE ALLOCATED \$4,000 FOR CODING BOOT CAMPS, \$2,000  
HACKATHONS, \$4,000 COVID-19 RESPONSE AND \$5,000 SCHOLARSHIP.

NAME OF ORGANIZATION OR GOVERNMENT:

BOYS AND GIRLS CLUBS OF DELAWARE, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT FOR CHARLES F  
GUMMEY JR YOUTH FUND, RESTRICTED SUPPORT FOR DAGSBORO CLUB, RESTRICTED  
SUPPORT FOR COVID-19 EMERGENCY STAFFING INITIATIVE PILOT, RESTRICTED  
SUPPORT FOR THE MILFORD CENTER FROM DAVE AND ANN BURTON, UNRESTRICTED  
SUPPORT TO THE WESTERN SUSSEX (SEAFORD) DIVISION, SUPPORT FOR ESSENTIAL  
BEFORE AND AFTER SCHOOL SERVICES AIMED AT MEETING CHILDREN'S BASIC NEEDS,  
RESTRICTED TO SUPPORT THE BOOK NOOK EDUCATOR-DIRECTED LITERACY PROGRAM  
AND OFFSET ADDITIONAL COSTS DUE TO COVID-19, RESTRICTED SUPPORT - ELIASON  
EDUCATION AND GREENING FUND, RESTRICTED SUPPORT FOR REHOBOTH BEACH  
LOCATION, GIRLS ON THE RUN AT THE BOYS & GIRLS CLUBS, SUPPORT FOR SENDING  
A NEEDY CHILD TO THE GOLF CAMP AND UNRESTRICTED SUPPORT.

**Part IV** Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: CAB CALLOWAY SCHOOL FUND

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO SUPPORT PROGRAMS, STUDENTS AND THE COMMUNITY WHO HAVE BEEN IDENTIFIED AS NEEDING SUPPORT FOR ARTS AND/OR ACADEMIC TRAINING AND RESTRICTED SUPPORT FOR ARTS EDUCATION SCHOLARSHIPS.

NAME OF ORGANIZATION OR GOVERNMENT: CAMP REHOBOTH

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO SUPPORT A NEW YOUTH RETREAT AND OUTREACH INITIATIVE, RESTRICTED SUPPORT FOR THE GSA (GENDER SEXUALITY ALLIANCE) LEADERSHIP SUNNIT, RESTRICTED SUPPORT TO THE VIRTUAL CIRCLE TIME FOR LGBTQ+ YOUTH AND NON-LGBTQ YOUTH, RESTRICTED SUPPORT FOR THE YOUTH UP - SOCIAL MEDIA PODCAST CAMPAIGN MINI GRANT AND 2021 FOCUS GRANT: YOUTH UP! BUILDING ON CAMP REHOBOTH'S SUCCESS.

NAME OF ORGANIZATION OR GOVERNMENT: CARING HEARTS HELPING HANDS, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: PROVIDE ASSISTANCE AT CHRISTMAS TO LOW INCOME KENT COUNTY FAMILIES TO PROVIDE NEW CLOTHES AND TOYS AND MARCH 2021 COMMUNITY NEEDS: GENERAL OPERATING.

NAME OF ORGANIZATION OR GOVERNMENT: CATHOLIC CHARITIES, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: BASIC NEEDS - HOMELESS PREVENTION SERVICE PROGRAM, ACCESS TO BEHAVIORAL HEALTH SERVICES FOR LOW INCOME FAMILIES, PANTRY EXPANSION AND IMPROVEMENT PROJECT AT THE THRIFT CENTER FOOD PANTRY IN RIVERSIDE (NORTHEAST WILMINGTON), SUPPORTIVE CASE MANAGEMENT PILOT PROJECT AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT:



**Part IV** Supplemental Information

CENTRAL BAPTIST COMMUNITY DEVELOPMENT CORPORATION

(H) PURPOSE OF GRANT OR ASSISTANCE: MARCH 2021 COMMUNITY NEEDS; GENERAL OPERATING AND ACCELERATING EASTSIDE AFFORDABLE HOUSING DEVELOPMENT.

NAME OF ORGANIZATION OR GOVERNMENT: CHEER, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO SUPPORT THE NEEDS FOR SENIORS, RESTRICTED TO SUPPORT FOODS FOR SENIORS AND RESTRICTED SUPPORT TO PROVIDE MEALS FOR THOSE IN NEED.

NAME OF ORGANIZATION OR GOVERNMENT: CHILD, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: PERMANENT, SAFE, AFFORDABLE HOUSING FOR VICTIMS OF INTIMATE PARTNER VIOLENCE & THEIR CHILDREN: A SUPPLEMENT TO HUD FUNDING AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: CHILDREN & FAMILIES FIRST

(H) PURPOSE OF GRANT OR ASSISTANCE: BUILDING A CASEY COMMUNITY OF HOPE IN SEAFORD TO ADDRESS SOCIAL DETERMINANTS OF HEALTH, EXPANSION OF CLIENT TECHNOLOGY RESOURCE INITIATIVE, TRAUMA MATTERS DELAWARE, SUSSEX: FOOD INSECURITY, RESTRICTED TO SUPPORT KIDDS PROGRAMMING 2020 2Q, 3Q AND 4Q PER PSA AND FA AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: CHILDREN'S BEACH HOUSE

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO SUPPORT CAPITAL GRANT COLLABORATIVE FUNDING, SUPPORT IN MEMORY OF DICK DOBBS FROM SHERMAN, ELAINE AND REID TOWNSEND AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: CHRISTIANA CARE HEALTH SYSTEMS, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO SUPPORT THE FRIENDS OF

**Part IV** Supplemental Information

HELEN F. GRAHAM CANCER CENTER, RESTRICTED SUPPORT TO THE CARDIOLOGY DEPARTMENT, RESTRICTED SUPPORT FOR LAMAR EKBLADH MEDICAL STUDENT TEACHING AWARD, RESTRICTED SUPPORT TO THE GENE EDITING INSTITUTE TO ENSURE EFFECTIVE DESIGN AND EQUITABLE IMPLEMENTATION OF SEEDS FOR STEM TO LATINX HIGH SCHOOL STUDENTS AND THEIR STEM TEACHERS IN DELAWARE'S UNDERSERVED COMMUNITIES AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: CHRISTINA CULTURAL ARTS CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT FOR OUR VOICES PROGRAM - VISION GRANT, OUR VOICE/VISION GRANT PLANNING GRANT, TECHNOLOGY TO PROVIDE VIRTUAL LEARNING AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT:

CITY OF WILMINGTON, DEPT. OF PARKS & RECREATION

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO SUPPORT PARKS & REC TO BUILD OPPORTUNITIES THROUGH EDUCATION TO HELP CHILDREN FROM LOW INCOME BACKGROUNDS IN THE CITY ACHIEVE THEIR POTENTIAL.

NAME OF ORGANIZATION OR GOVERNMENT:

CLARENCE FRAIM CENTER BOYS AND GIRLS CLUB

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT FOR SCHOLARSHIPS WHICH ARE AVAILABLE FOR CHILDREN IN BEFORE SCHOOL, AFTER SCHOOL AND SUMMER SCHOOL.

NAME OF ORGANIZATION OR GOVERNMENT: CODE PURPLE KENT COUNTY

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT FOR A FOOD TRUCK TO DELIVER FOOD TO THE HOMELESS IN KENT AND SUSSEX COUNTY, SUPPORT FOR HOMELESS SHELTERS IN KENT COUNTY AND MARCH 2021 COMMUNITY NEEDS: GENERAL

Part IV Supplemental Information

OPERATING.

NAME OF ORGANIZATION OR GOVERNMENT: COMMUNITY EDUCATION BUILDING

(H) PURPOSE OF GRANT OR ASSISTANCE: EQUITABLE HEALTH EXPANSION: IMPROVING HEALTH OUTCOMES, 2021 FOCUS GRANT: WAVE LEARNING SYSTEM AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: COMMUNITY LEGAL AID SOCIETY, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO SUPPORT THE HIRING OF FELLOW (ATTORNEY) TO PROVIDE LEGAL SERVICES CONSISTENT WITH THE CLASI MISSION AND COST & EFFECTIVENESS STUDY FOR LEGAL COUNSEL IN EVICTION CASES, AND RIGHT TO COUNSEL IMPLEMENTATION PLAN.

NAME OF ORGANIZATION OR GOVERNMENT:

CORNERSTONE WEST COMMUNITY DEVELOPMENT CORPORATION

(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNITY PLAYGROUND DESIGN PROJECT (COOL SPRINGS AND TILTON PARKS) AND DEVELOPMENT WITHOUT DISPLACEMENT/IMPLEMENTATION GRANT.

NAME OF ORGANIZATION OR GOVERNMENT: DE DIVISION OF PARKS & RECREATION

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT TO STATE PARKS/RESERVES, TO SUPPORT SEASONAL SALARY AT THOMPSON ISLAND PRESERVE, RESEARCH, EDUCATION, SAFETY, RESTORATION, AND OTHER UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT:

DELAWARE ALLIANCE FOR NONPROFIT ADVANCEMENT

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO SUPPORT DANA DEI INITIATIVE - BUILDING EQUITY CULTURES IN DELAWARE NONPROFIT BOARD AND

**Part IV** Supplemental Information

TEAMS.

NAME OF ORGANIZATION OR GOVERNMENT: DELAWARE ART MUSEUM

(H) PURPOSE OF GRANT OR ASSISTANCE: JOINT CERTIFICATE PROGRAM OF THE DELAWARE ART MUSEUM AND THE DELAWARE COLLEGE OF ART AND DESIGN, UPDATING BATHROOMS TO ADA AND SECURITY UPGRADES, FAMILY DAY AND OTHER UNRESTRICTED SUPPORTS.

NAME OF ORGANIZATION OR GOVERNMENT: DELAWARE BREAST CANCER COALITION

(H) PURPOSE OF GRANT OR ASSISTANCE: BREAST HEALTH EDUCATION AND OUTREACH FOR VULNERABLE COMMUNITIES AND OTHER UNRESTRICTED SUPPORTS.

NAME OF ORGANIZATION OR GOVERNMENT: DELAWARE CAN

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT FOR COVID REBUILD EFFORTS VIA THE BUILD OF THE APRENDE MS WEBSITE, TO EXPAND UPON ITS MIESCUELADE CAMPAIGN TO THE LATINO COMMUNITY WITH A NEW INITIATIVE, "APRENDE MS", TO ENSURE THAT SPANISH-SPEAKING FAMILIES ARE BENEFITED IN EDUCATION, SUPPORT TO CONTINUE THE JUNTOS DELAWARE, A LATINO ADVOCACY FELLOWSHIP TRAINING PROGRAM AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: DELAWARE CENTER FOR HORTICULTURE

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT - ELIASON EDUCATION AND GREENING FUND, NEIGHBORHOOD TREE STEWARD PROGRAM AND OTHER UNRESTRICTED SUPPORTS.

NAME OF ORGANIZATION OR GOVERNMENT: DELAWARE CHILDREN'S MUSEUM

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT FOR SAFETY MATERIALS FOR VISITORS, SOCIAL DISTANCING SIGNAGE, SNEEZE GUARDS AND OTHER EQUIPMENT TO

**Part IV** Supplemental Information

ENSURE A SAFE REOPENING AND RESTRICTED TO SUPPORT BREAKING BARRIERS PROGRAMS.

NAME OF ORGANIZATION OR GOVERNMENT: DELAWARE COLLEGE OF ART & DESIGN

(H) PURPOSE OF GRANT OR ASSISTANCE: THE ENROLLMENT SUPPORT FOR THE PROXIMITY PROJECT -- HEALTHCARE, RESTRICTED TO SUPPORT FINANCIAL AID AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: DELAWARE COLLEGE SCHOLARS, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT TO EXPAND RECRUITMENT OF FIRST GENERATION AND UNDERSERVED DELAWARE PUBLIC SCHOOL LATINX HIGH SCHOOL STUDENTS FROM KENT OR SUSSEX COUNTY TO IT'S "7 YEAR" PROGRAM (SOPHOMORE HIGH SCHOOL SUMMER THROUGH COLLEGE GRADUATION), SUPPORT IN MEMORY OF PAUL H. HARRELL JR, SUPPORT THE DELAWARE COLLEGE SCHOLARS, FIRST GENERATION COLLEGE ACCESS AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT:

DELAWARE COMMUNITY REINVESTMENT ACTION COUNC

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT TO INVEST IN STEPPING STONES AND THEIR PARTNERSHIP WITH RECIPROCITY AND OTHER UNRESTRICTED SUPPORTS.

NAME OF ORGANIZATION OR GOVERNMENT: DELAWARE FUTURES

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT FOR THE 3RD ANNUAL BALLARD COMMUNITY FUND BENEFIT HONOREE AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: DELAWARE HOSPICE, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO SUPPORT THE SUSSEX

**Part IV** Supplemental Information

COUNTY HOSPICE NEEDS, RESTRICTED SUPPORT FOR KENT/SUSSEX BRANCHES (SPLIT), RESTRICTED SUPPORT FOR MILFORD LOCATION AND OTHER UNRESTRICTED SUPPORTS.

NAME OF ORGANIZATION OR GOVERNMENT: DELAWARE NATURE SOCIETY

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT FOR ABBOTT'S MILL FROM DAVE AND ANN BURTON, MILFORD PEOPLE WHO CARE ABOUT THEIR WORK IN MILFORD AND OTHER UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: DELAWARE SHAKESPEARE FESTIVAL, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT THREE (OF 16-18) 2022 COMMUNITY TOUR (CT) PRESENTATIONS OF "A BILINGUAL TWELFTH NIGHT" AT VENUES SERVING PREDOMINANTLY LATINX AUDIENCES, THRIVING LATINOS: BUILDING LATINO AUDIENCES: 2021 DELAWARE SHAKESPEARE AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT:

DELAWARE TECHNICAL COMMUNITY COLLEGE EDUCATION

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO BE USED FOR PROGRAM, STAFF AND/OR STUDENT LEARNING NEEDS IN RECOGNITION OF CONTRIBUTIONS MADE (AND REPORTED) FOR EXCEPTIONAL ESL PROGRAM, STAFF AND STUDENT TRANSITIONS DURING THE PANDEMIC, RESTRICTED FOR SCHOLARSHIPS FOR STUDENTS WITH FINANCIAL NEED, ENROLLED OR WILL ENROLL IN CREDIT-BASED TRANSPORTATION PROGRAM OR NON-CREDIT TECHNICAL TRAINING PROGRAMS, AT ANY DELTECH CAMPUS. SCHOLARSHIP RECOGNITION: F&J DELAWARE TRADES SCHOLARSHIP, RESTRICTED SUPPORT FOR TERRY SCHOLARSHIPS, RESTRICTED SUPPORT BIOSCIENCE RESEARCH FELOWSHIPS, WORKFORCE DEVELOPMENT CERTIFIED NURSING ASSISTANT SCHOLARSHIPS AND UNRESTRICTED SUPPORT.

**Part IV** Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: DELAWARE THEATRE COMPANY

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO SUPPORT DELAWARE THEATRE COMPANY'S OUTREACH PROGRAM ON BEHALF OF SALLY GORE AND MAGGIE COONS, SUPPORT TO THE MATCHING GRANT, TECHNOLOGY TO PROVIDE OUTDOOR THEATRE AND OTHER UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: DELAWARE WILD LANDS, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: UNRESTRICTED SUPPORT WITH PREFERENCE TO SUSSEX COUNTY, RESTRICTED SUPPORT FOR THE NEW OFFICE PROJECT AND OTHER UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT:

DELAWARE ZOOLOGICAL SOCIETY, BRANDYWINE ZOO

(H) PURPOSE OF GRANT OR ASSISTANCE: PURCHASE VIDEO EQUIPMENT TO CREATE A VIRTUAL ZOO EXPERIENCE, SUPPORT FOR ONLINE TICKETING SOFTWARE AND MARCH 2021 COMMUNITY NEEDS: GENERAL OPERATING.

NAME OF ORGANIZATION OR GOVERNMENT:

DELMARVA CLERGY UNITED IN SOCIAL ACTION INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO SUPPORT HOLIDAY GIFTS FOR NEEDY FAMILIES AND MARCH 2021 COMMUNITY NEEDS: GENERAL OPERATING.

NAME OF ORGANIZATION OR GOVERNMENT: DOWN SYNDROME ASSOCIATION OF DELAWARE

(H) PURPOSE OF GRANT OR ASSISTANCE: CONSTRUCTION FIT OUT OF NEW OFFICE SPACE THAT WILL BE A SOCIAL ENTERPRISE - MEAL PREPARATION COMPANY - HIRING SIX ADULTS WITH DOWNS.

NAME OF ORGANIZATION OR GOVERNMENT: DUFFY'S HOPE INC.

**Part IV** Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO SUPPORT YOUTH AMBASSADORS AT HOME WITH TECHNOLOGY NEEDS , STEM EDUCATIONAL MATERIALS & SUPPLIES AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: EAST SIDE COMMUNITY LEARNING CENTER FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO SUPPORT QUALITY EDUCATION TO LOW INCOME STUDENTS IN WILMINGTON AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: EASTER SEALS DE & MD'S EASTERN SHORE, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: APPLIED BEHAVIOR ANALYSIS THERAPUTIC INTERVENTION, SUPPORT FOR ANNUAL DINNER AND OTHER UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: ELEUTHERIAN MILLS-HAGLEY FOUNDATION, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT TO THE HAGLEY MUSEUM AND LIBRARY, RESTRICTED SUPPORT FOR ORAL HISTORY, SUPPORT FOR HAGLEY MUSEUM AND LIBRARY, SUPPORT FOR ELEUTHERIAN MILLS RESIDENCE COMMITTEE AND OTHER UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: FAITHFUL FRIENDS, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT TO THE CAPITAL CAMPAIGN MATCHING FUND, FREE PET FOOD AND SUPPLY BANK AND OTHER UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: FAMILY COUNSELING CENTER OF ST PAUL'S

(H) PURPOSE OF GRANT OR ASSISTANCE: EXPANSION OF CONTINUUM OF CARE,



**Part IV** Supplemental Information

BUILD OUT OF PHYSICAL PROPERTY - PROVIDING CONFIDENTIAL AND SAFE SPACE FOR COUNSELING AND CASE MANAGEMENT CLIENTS, EXPANSION OF CONTINUUM OF CARE AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: FIRST STATE ANIMAL CENTER AND SPCA

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT INCREASE OPPORTUNITIES FOR EXERCISE AND SOCIALIZATION FOR SHELTER DOGS THROUGH A DOG PLAY YARD PROJECT AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: FIRST STATE COMMUNITY ACTION AGENCY

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT FOR THE SUMMER YOUTH EMPLOYMENT PROFESSIONAL DEVELOPMENT, RESTRICTED SUPPORT FOR THE SUMMER YOUTH EMPLOYMENT PROFESSIONAL DEVELOPMENT, RESTRICTED SUPPORT FOR THE COMMUNITY HEALTH DAY (MAY 9, 2020 / 10 AM - 2 PM), MEET IMMEDIATE FAMILY NEEDS OF LOW INCOME KENT COUNTY RESIDENTS, SUPPORT FOR HOME IS HEALTH PROGRAM, SUPPORT FOR SUSSEX COUNTY RELIEF PROGRAM AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: FIRST STATE SQUASH

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT FOR YOUTH EDUCATION, FIRST STATE SQUASH PROGRAM AND OTHER UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: FISHERS YOUTH ASSISTANCE, INC

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO SUPPORT YOUNG PEOPLE AND THEIR FAMILIES, AGES 3 TO 17 WITHIN HAMILTON SOUTHEASTERN SCHOOL DISTRICT.

NAME OF ORGANIZATION OR GOVERNMENT: FOOD BANK OF DELAWARE, INC.

**Part IV** Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO SUPPORT SUSSEX COUNTY FOOD BANK, RESTRICTED TO SUPPORT FOOD DISTRIBUTION IN SUSSEX COUNTY, WORK FORCE DEVELOPMENT PROGRAM EXPANSION, RESTRICTED SUPPORT TO PROVIDE FOOD FOR THE NEEDY CHILDREN AND ADULTS, SUPPORT OF BARCLAYS TACKLING HUNGER CAMPAIGN - HOLIDAY 2020, RESTRICTED TO SUPPORT FOOD FOR NEED IN DELAWARE DURING THE PANDEMIC, RESTRICTED SUPPORT FOR JOB TRAINING IN LOGIC PROGRAM, SUPPORT FOR ANTI-HUNGER EFFORTS, RESTRICTED SUPPORT FOR THE CULINARY PROGRAM IN MILFORD AND OTHER UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: FREIRE CHARTER SCHOOL WILMINGTON INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO SUPPORT THE SCHOOL'S EMOTIONAL SUPPORT AND RACIAL INJUSTICE PROGRAMS AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT:

FRESH START SCHOLARSHIP FOUNDATION, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO SUPPORT THE CLASS OF 2021-2022 VIA THE 2020 RISING STARS EVENT (DECLINING ALL TANGIBLE BENEFITS), YPB NCC: GENERAL OPERATING SUPPORT FOR 2021-2022 FOR PROGRAM TO CLOSE THE WAGE GAP, RESTRICTED SUPPORT - ELIASON EDUCATION AND GREENING FUND, RESTRICTED SUPPORT FOR THE SCHOLARSHIP PROGRAM, PARTIAL FUNDING FOR THE CLASS OF 2021-2022 AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: FRIENDSHIP HOUSE, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: FEEDING HOMELESS DURING MOVE TO NEW FACILITY, PROJECT HOPE AT THE NCC HOPE CENTER AND OTHER UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: GRAND OPERA HOUSE

**Part IV** Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT FOR GILLIAM FAMILY FUND DIVERSITY PROGRAMMING, SUPPORT FOR GRAND OPERA HOUSE SESQUICENTENNIAL, WINTER IN WILMINGTON LIGHT SHOW, RESTRICTED SUPPORT FOR THE ENDOWMENT CAMPAIGN AND OTHER UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT:

HABITAT FOR HUMANITY OF NEW CASTLE COUNTY

(H) PURPOSE OF GRANT OR ASSISTANCE: FUND CONTRACTORS FOR BUILDING OF 12 HOMES, WILMINGTON'S EASTSIDE, RESTRICTED TO SUPPORT THE STATEWIDE HEALTHY HOME REPAIR INITIATIVE, LIGHTS-ON WILMINGTON STRONG: HFNCC & HELP INITIATIVE, RESIDENTIAL LEADERSHIP DEVELOPMENT PROJECT, A BRUSH WITH KINDNESS - HEALTHY HOMES NEW CASTLE COUNTY AND OTHER UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: HARRY K FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENTAL MEALS FOR STUDENTS, 2021 FOCUS GRANTS: HALT HUNGER PROGRAM, EXPAND FOOD PANTRY BACKPACK PROGRAM AND RESTRICTED SUPPORT FOR THE GEORGETOWN FOOD PANTRY.

NAME OF ORGANIZATION OR GOVERNMENT: HEALTHY FOOD FOR HEALTHY KIDS

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT - ELIASON EDUCATION AND GREENING FUND AND EDUCATION CULTIVATION SCHOOL VEGETABLE GARDEN PROGRAM.

NAME OF ORGANIZATION OR GOVERNMENT:

HISPANIC AMERICAN ASSOCIATION OF DELAWARE INC

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT TO PROVIDE BILINGUAL (SPANISH-SPEAKING) STAFF SALARIES, MEETING PLACES, EQUIPMENT AND

**Part IV** Supplemental Information

ADVERTISING FOR THREE SERIES OF "AMIGAS ACTIVAS Y SALUDABLES".

NAME OF ORGANIZATION OR GOVERNMENT: HOPE MEDICAL CLINIC, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: PROVIDE DENTAL AND MEDICAL SERVICES FOR LOW INCOME KENT COUNTY RESIDENTS AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: INDIANA REPERTORY THEATRE, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT FOR IRT'S STUDENT MATINEES AND EDUCATION PROGRAM DURING THE 2020-2021 SEASON.

NAME OF ORGANIZATION OR GOVERNMENT: JEWISH FAMILY SERVICES OF DELAWARE

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT FOR HUMAN SERVICES RELIEF FUND, EMPLOYMENT SUPPORT NEWARK, HIRE PHYSICIAN SPECIALIZING IN GERIATRIC MEDICINE AND DEMENTIA CARE, SUPPORT FOR THE PROVISION OF SOCIAL SERVICES, MATERNAL MENTAL HEALTH PROGRAM, RESTRICTED SUPPORT FOR 2020 ANNUAL CAMPAIGN AND OTHER UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: JUNIOR ACHIEVEMENT OF DELAWARE, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT FOR THE IMPLEMENTATION OF ONLINE/VIRTUAL CONTENT AND STAND UP SUPPORT NEEDED FOR JA BIZ TOWN ADVENTURE AND JA INSPIRE VIRTUAL AND RESTRICTED SUPPORT FOR KENT COUNTY PROGRAMMING.

NAME OF ORGANIZATION OR GOVERNMENT: KENNETT AREA COMMUNITY SERVICE

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT TO PROVIDE FOOD, HOUSING, AND CRISIS SERVICES AS THE NEEDS SURGE DURING THE COVID-19 HEALTH CRISIS, AND OTHER UNRESTRICTED SUPPORT

**Part IV** Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: KENT-SUSSEX INDUSTRIES, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT FOR EQUIPMENT AND RENOVATION OF PROGRAM SPACE AND REMODEL 2 OF 4 RESTROOMS: FY21 CAPITAL GRANT.

NAME OF ORGANIZATION OR GOVERNMENT: LA ESPERANZA INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT TO EXPAND THE LA COLECTIVA-INSPIRED RESOURCE NAVIGATION AND FAMILY COACHING PROGRAM IN SOUTHER DELAWARE TO SUPPORT CURRENT STAFFING, LA ESPERANZA COMPREHENSIVE SUPPORT SERVICES, CONEXIONES, RESOURCE NAVIGATION AND FAMILY COACHING, CAPACITY BUILDING GRANT FOR ORGANIZATIONAL ASSESSMENT AND SUPPORT FOR PROGRAMS.

NAME OF ORGANIZATION OR GOVERNMENT: LA RED HEALTH CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: MILFORD SITE RELOCATION AND EXPANSION OF SERVICES PROJECT AND RESTRICTED SUPPORT FOR FAMILY PRACTICE VISITS.

NAME OF ORGANIZATION OR GOVERNMENT: LATIN AMERICAN COMMUNITY CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: NCC YPB: CULINARY COMPONENT TO YOUTH ACHIEVEMENT CENTER (YAC'S) ENRICHMENT ACTIVITIES, RESTRICTED SUPPORT FOR THE CAPITAL CAMPAIGN, LACC PLAYGROUND, CONEXIONES, HEALTHY FAMILIES AND ARTADDICTION.

NAME OF ORGANIZATION OR GOVERNMENT: LEADING YOUTH THROUGH EMPOWERMENT

(H) PURPOSE OF GRANT OR ASSISTANCE: 2021 FOCUS GRANT: 021 MIDDLE SCHOOL AND HIGH SCHOOL TRANSITION CHANGING ACADEMIC TRAJECTORY, CURRICULUM AND MARKETING FOR FALL VIRTUAL PROGRAMMING, NCC YPB: FUNDS TO PAY FOR 25 BACKGROUND CHECKS AND MARCH 2021 COMMUNITY NEEDS: GENERAL OPERATING.

**Part IV** Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT:

LEUKEMIA & LYMPHOMA SOCIETY, DE CHAPTER

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO SUPPORT LIGHT THE NIGHT DELAWARE 2, RESTRICTED SUPPORT FOR RESEARCH, RESTRICTED SUPPORT FOR LLS'S ANNUAL LIGHT THE NIGHT FUNDRAISER AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: LITERACY DELAWARE INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT TO STRATEGICALLY BUILD THE REACH, CAPACITY, AND QUALITY OF ESL TUTORING PROGRAM THROUGH TUTOR RECRUITMENT, TRAINING AND SUPPORT VIA IN-PERSON AND VIRTUAL ESL PROGRAMS.

\$500.00 IS DEDICATED FOR SPECIAL PROGRAM BY THE SUSSEX COUNTY

COORDINATOR, RESTRICTED SUPPORT FOR SUSSEX COUNTY, THRIVING LATINOS:

MOVING BEYOND, MARCH 2021 COMMUNITY NEEDS: GENERAL OPERATING AND

UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: LOVE, INC. OF MID-DELMARVA

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED FOR SUSSEX COUNTY

CENTRALIZED FOOD DISTRIBUTION PROGRAM, SUSSEX COUNTY CENTRALIZED FOOD

DISTRIBUTION PLAN AND RESTRICTED SUPPORT TO ASSIST THE HOMELESS OF SUSSEX

COUNTY.

NAME OF ORGANIZATION OR GOVERNMENT: LUTHERAN COMMUNITY SERVICES

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO SUPPORT PROGRAMS OF

PROVIDING FOOD, CLOTHING OR SHELTER FOR THE NEEDY IN DELAWARE AND

RESTRICTED TO SUPPORT DR. DAVID MALEH'S FOOD DRIVE.

NAME OF ORGANIZATION OR GOVERNMENT: LUZERNE COUNTY HEAD START

**Part IV** Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT FOR SCHOLARSHIP FOR GRADUATING HIGH SCHOOL SENIOR WHO HAS PARTICIPATED IN THE HEAD START PROGRAMS AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: MEALS ON WHEELS DELAWARE

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO SUPPORT FOOD DELIVERY TO THE NEEDY IN DELAWARE, SUPPORT FOR ADOPT A SENIOR AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT:

MEALS ON WHEELS OF REHOBOTH AND LEWES, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT TO PROVIDE MEALS FOR THOSE IN NEED, RESTRICTED SUPPORT FOR THE REHOBOTH BRANCH AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: MINISTRY OF CARING

(H) PURPOSE OF GRANT OR ASSISTANCE: CERTIFIED NURSING ASSISTANT TRAINING PROGRAM, SUPPORT FOR SOCIAL SERVICE AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: MOUNT LAUREL TOWNSHIP SCHOOLS

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT TO PURCHASE A DOCUMENT CAMERA AND MISCELLANEOUS MATH AND SCIENCE SUPPLIES TO SUPPORT VIRTUAL TEACHING.

NAME OF ORGANIZATION OR GOVERNMENT: NANTICOKE SENIOR CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT FOR BUILDING OR EQUIPMENT USE WITH PREFERENCE AND/OR HVAC IN THE BALLROOM AND/OR IN KITCHEN AND RESTRICTED SUPPORT TO PROVIDE MEALS FOR THOSE IN NEED.

**Part IV** Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT:

NATIVITY PREPARATORY SCHOOL OF WILMINGTON, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT FOR STUDENT EDUCATION, NCC YPB: GENERAL OPERATING SUPPORT FOR NATIVITY PREP, RESTRICTED SUPPORT FOR FR CURRAN SCHOLARSHIP FUND AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: NCALL RESEARCH

(H) PURPOSE OF GRANT OR ASSISTANCE: NCALL FINANCIAL EDUCATION PROGRAM FOR SINGLE MOTHERS IN NEED ACROSS DELAWARE, FORECLOSURE PREVENTION PROGRAM AND MAKING DOVER BETTER.

NAME OF ORGANIZATION OR GOVERNMENT:

NEW CASTLE COUNTY DEPARTMENT OF COMMUNITY SERVICES

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT TO THE DEPT. OF COMMUNITY SERVICES, SPECIAL FUND AND RESTRICTED SUPPORT FOR NCC LIBRARIES.

NAME OF ORGANIZATION OR GOVERNMENT: NEWARK SENIOR CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT FOR MEALS ON WHEELS PROGRAM, RESTRICTED FOR MEALS ON WHEELS AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: NORTH TEXAS FOOD BANK

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO SUPPORT CHILD, SENIOR AND DISASTER RELIEF PROGRAMS TO MULTIPLE LOCAL COMMUNITIES IN THE DALLAS/FORT WORTH AREA.



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NAME OF ORGANIZATION OR GOVERNMENT: OSTERHOUT FREE LIBRARY

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO SUPPORT THE OSTERHOUT FREE LIBRARY'S BOOKS & BABIES PROGRAM(\$5,000) AND THE EARLY LITERACY PROGRAM(\$5,000) AND SUPPORT TO PROVIDE MATERIALS AND SERVICES TO ALL RESIDENTS OF LUZERNE COUNTY ENABLING THEM TO OBTAIN FREE INFORMATION.

NAME OF ORGANIZATION OR GOVERNMENT:

OWL'S NEST FUND FOR HISTORIC DESIGNATED FACILITIES.

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO SUPPORT FUNDING FOR THE RESTORATION OF THE SUN PORCH DOORS OF THE MAIN CLUBHOUSE AND RESTRICTED SUPPORT FOR RENOVATING EXTERIOR WALLS, WINDOWS AND DOORS OF THE CARRIAGE HOUSE BUILDING AT THE GREENVILLE COUNTRY CLUB.

NAME OF ORGANIZATION OR GOVERNMENT: PADUA ACADEMY

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO PROVIDE FINANCIAL SUPPORT FOR EIGHTH GRADE STUDENTS TO CONTINUE THEIR CATHOLIC EDUCATION.

NAME OF ORGANIZATION OR GOVERNMENT: PAWS FOR PEOPLE

(H) PURPOSE OF GRANT OR ASSISTANCE: MARCH 2021 COMMUNITY NEEDS: GENERAL OPERATING, RESTRICTED SUPPORT FUND FOR CHILDREN'S LITERACY, SUPPORT IN MEMORY OF WYLIE AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: POLYTECH ADULT EDUCATION

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT FOR STAFFING COSTS FOR THE FAMILY LITERACY PROGRAM. \$500.00 IS DEDICATED FOR SPECIAL PROGRAM BY THE FAMILY LITERACY COORDINATOR AND SUPPORT FOR ANNUAL FUND.

NAME OF ORGANIZATION OR GOVERNMENT: PROJECT LEADERSHIP

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO SUPPORT THE MENTORING AND SERVICE PROGRAMS FOR LOW INCOME STUDENTS IN DELAWARE COUNTY.

NAME OF ORGANIZATION OR GOVERNMENT: PUBLIC ALLIES DELAWARE

(H) PURPOSE OF GRANT OR ASSISTANCE: MENTAL HEALTH SUPPORT, WORK FROM HOME KITS, AND TRAIN FROM HOME KITS AND CHRISTIANACARE ALLY PROGRAM.

NAME OF ORGANIZATION OR GOVERNMENT: REACH RIVERSIDE

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO SUPPORT THE TEEN WAREHOUSE AND DELAWARE THEATRE COMPANY FILMS, IMPLEMENTATION OF POVERTY TO PROSPERITY: BUILD GENERATIONAL HEALTHY AND WEALTH IN RIVERSIDE, RESTRICTED TO SUPPORT PATHWAYS TO PROSPERITY PROGRAM, THE KCC EARLY LEARNERS MUSIC PROGRAM AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: READ ALOUD DELAWARE

(H) PURPOSE OF GRANT OR ASSISTANCE: MARKETING, TRAVEL INCENTIVES, AND WEEKLY INCENTIVES, RESTRICTED TO SUPPORT ACTIVITIES IN GEORGETOWN AND MILLSBORO, RESTRICTED SUPPORT - FUND FOR CHILDREN'S LITERACY, RESTRICTED SUPPORT FOR SUSSEX COUNTY, RESTRICTED SUPPORT FOR SUSSEX COUNTY, MARCH 2021 COMMUNITY NEEDS: GENERAL OPERATING, SUPPORT TO DEVELOP A SUCCESSFUL "LENA START" PROGRAM THAT IS ATTRACTIVE, APPROPRIATE AND ACCESSIBLE TO LATINX FAMILIES (WITH INFANTS TO 3 YEARS OLD) IN DELAWARE AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: READING ASSIST INSTITUTE

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT - FUND FOR CHILDREN'S LITERACY, NCC YPB: RECRUIT, TRAIN, AND EMBED NEW READING ASSIST FELLOWS, SUPPORT FOR THE PREPARATION AND OVERSIGHT OF THREE

**Part IV** Supplemental Information

BILINGUAL FULL-TIME FELLOWS TO EXPAND THE READING ASSIST INTERVENTION PROGRAM TO LAS AMERICAS ACADEMY ASPIRA ACADEMY AND THE NEW SUSSEX MONTESSORI SCHOOL IN SEAFORD DURING THE 2021-2022 SCHOOL YEAR AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: REHOBOTH ART LEAGUE, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: BALANCE OF FUND DISTRIBUTED TO DESIGNATED ORGS - RESTRICTED CAPITAL EXPENSE AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT:

REHOBOTH BEACH HISTORICAL SOCIETY & MUSEUM

(H) PURPOSE OF GRANT OR ASSISTANCE: BALANCE OF FUND DISTRIBUTED TO DESIGNATED ORGS - RESTRICTED CAPITAL EXPENSE, MARCH 2021 COMMUNITY NEEDS: GENERAL OPERATING AND HVAC SYSTEM UPDATE.

NAME OF ORGANIZATION OR GOVERNMENT:

RODNEY STREET TENNIS & TUTORING ASSOCIATION

(H) PURPOSE OF GRANT OR ASSISTANCE: TAKEAWAY KITS FOR SUMMER CAMP AND 2021 SCHOOL YEAR, HEALTH EDUCATION AND SUMMER CAMP AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: RONALD MCDONALD HOUSE OF DELAWARE

(H) PURPOSE OF GRANT OR ASSISTANCE: TEMPORARY HIRING OF STAFF TO COVER EXTRA SHIFTS OF RELIEF MANAGERS, PROVIDE ACCESS TO SPECIALIZED PEDIATRIC MEDICAL CARE FOR SERIOUSLY ILL CHILDREN, FLOORING UPDATE. VAN CONVERSION, NEW GMS, KITCHEN RENOVATION, HOUSING & SUPPORT SERVICES FOR DELAWARE MOTHERS WITH INFANTS IN AREA NEO-NATAL INTENSIVE CARE UNITS AND UNRESTRICTED SUPPORT.

**Part IV** Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: SALESIANUM SCHOOL

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO PROVIDE FINANCIAL SUPPORT FOR EIGHTH GRADE STUDENTS TO CONTINUE THEIR CATHOLIC EDUCATION AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: SALVATION ARMY

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO SUPPORT RED KETTLE PROGRAM IN NEW CASTLE COUNTY, RESTRICTED SUPPORT - ELIASON EDUCATION AND GREENING FUND, IMPROVE SECURITY AT ITS DELAWARE FACILITY, FY21 CAPITAL GRANT, RESTRICTED TO SUPPORT THANKSGIVING FUNDRAISING CAMPAIGN, RESTRICTED TO SUPPORT THE LOCAL ANGEL TREE PROGRAM AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: SEAFORD DISTRICT LIBRARY

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT TO PRINT MEDIA, RESTRICTED TO SUPPORT CHILDREN'S BOOKS, LEARNING MATERIALS AND ACTIVITIES, TELEHEALTH IN DELAWARE LIBRARIES: THE FUTURE OF HEALTHCARE, RESTRICTED SUPPORT FOR THE PURCHASE OF LAPTOP CHARGING STATIONS TO SUPPORT "TECH AND SOCIAL SERVICE" INITIATIVE, RESTRICTED SUPPORT FOR THE SUMMER READING PROGRAM AND LIBRARIES OF THE FUTURE: REMOTE SOCIAL SERVICE AND LPN INITIATIVE FOR THE DELAWARE PUBLIC LIBRARIES.

NAME OF ORGANIZATION OR GOVERNMENT: SERVIAM GIRLS ACADEMY, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT FOR THE PURCHASE OF 15 DJEMBE DRUMS, SUPPORT TO PREPARE FOR A SAFE REOPENING, INCLUDING HEALTH AND SAFETY TRAINING FOR TEACHERS AND ADMINISTRATION, SOCIAL EQUITY INITIATIVE, EXPANSIVE CLASSROOM PROJECT AND RESTRICTED SUPPORT FOR

**Part IV** Supplemental Information

STUDENT EDUCATION.

NAME OF ORGANIZATION OR GOVERNMENT: SEWELL C BIGGS TRUST 12-29-89

(H) PURPOSE OF GRANT OR ASSISTANCE: TECHNOLOGY, SUPPLIES, AND MATERIALS TO PROVIDE A VIRTUAL EXPERIENCE, RESTRICTED SUPPORT FOR MUSEUM ACQUISITIONS AND BALANCE OF FUND DISTRIBUTED TO DESIGNATED ORGS - RESTRICTED CAPITAL EXPENSE.

NAME OF ORGANIZATION OR GOVERNMENT: SOJOURNERS PLACE

(H) PURPOSE OF GRANT OR ASSISTANCE: LAPTOPS AND TRAVEL SUPPORT FOR INTERVIEWS, SOJOURNERS' PLACE TRANSITIONAL HOUSING PROGRAM AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: ST. ELIZABETH HIGH SCHOOL

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO PROVIDE FINANCIAL SUPPORT FOR EIGHTH GRADE STUDENTS TO CONTINUE THEIR CATHOLIC EDUCATION AND RESTRICTED TO SUPPORT LOWER SCHOOL MUSICAL.

NAME OF ORGANIZATION OR GOVERNMENT: STATE OF DELAWARE

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT TO THE DELAWARE SKILLS CENTER FOR THREE FULL SCHOLARSHIPS (\$3,310.00 EACH) FOR STUDENTS IN THE HVAC PROGRAM.

NAME OF ORGANIZATION OR GOVERNMENT: SUNDAY BREAKFAST MISSION

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO SUPPORT THE COST OF UNIFORMS FOR STUDENTS ATTENDING A LOCAL SCHOOL AND THE BACK TO SCHOOL BACKPACK RALLY AND UNRESTRICTED SUPPORT.

**Part IV** Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: SUPPORTING KIDDS INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT FOR THE DELAWARE LATINO COMMUNITY GRIEF SUPPORT PILOT PROJECT, 2021 FOCUS GRANT: HEALING PATHWAYS AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: SUSSEX COUNTY HABITAT FOR HUMANITY

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT FOR TECHNOLOGY FOR VARIOUS PURPOSES, INCLUDING A WEBSITE REDESIGN TO INTEGRATE ONLINE RESTORE SALES, HOME STABILIZATION INITIATIVE, PURCHASE EQUIPMENT: DUMP TRAILER, SCAFFOLDING, A TOOL TRAILER, AND ALUMINUM BRAKE TO IMPROVE CAPACITY AND INCREASE EFFICIENCY, FAMILY EMPOWERMENT PROGRAM AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: TATNALL SCHOOL

(H) PURPOSE OF GRANT OR ASSISTANCE: UNRESTRICTED SUPPORT - RECOMMENDED BY GEORDIE HAYWARD AND UNRESTRICTED SUPPORT AND RESTRICTED FOR INSTRUMENT PURCHASES.

NAME OF ORGANIZATION OR GOVERNMENT: TEACH FOR AMERICA - DELAWARE

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO SUPPORT DELAWARE DIGITAL INCLUSION INITIATIVE IN PARTNERSHIP WITH TECH IMPACT, SOCIAL CONTRACT AND RODEL, RESTRICTED SUPPORT FOR DIGITAL DIVIDE - VISION GRANT AND TECH IMPACT; DIGITAL INCLUSION PARTNERSHIP - PHASE 2.

NAME OF ORGANIZATION OR GOVERNMENT: TEENSHARP, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO SUPPORT THE 2020 ONLINE SIX-WEEK SUMMER PROGRAM FOR DELAWARE STUDENTS, FUNDING INSTRUCTORS FOR MATH AND ENGLISH VIRTUAL LEARNING, THRIVING LATINOS: PARENT AMBASSADORS FOR COLLEGE EDUCATION, SUPPORT FOR THE STRIVER PROGRAM FOR

**Part IV** Supplemental Information

LATINO STUDENTS WHICH AIMS TO INCLUDE 35% LATINX STUDENTS OUT OF 120 HIGH-ACHIEVING AND LOW-INCOME HIGH SCHOOL STUDENTS EXPECTED TO ENROLL IN NEW CASTLE COUNTY IN 2021-2022 AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: THE CHALLENGE PROGRAM

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED FOR COVID SUPPORT FOR AN ADDITIONAL SHOP SPACE, CREW TOOLS, BENCHES, ETC. TO REDUCE THE RISK OF SPREADING VIRUS AMONG TRAINEES DURING THE TIME OF WINTER, RESTRICTED TO SUPPORT YOUTH CRAFT TRAINING AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: THE CHOIR SCHOOL OF DELAWARE

(H) PURPOSE OF GRANT OR ASSISTANCE: VIRTUAL HEALTH PROGRAMMING, RESTRICTED SUPPORT FOR ONLINE SOFTWARE AND EDUCATION TOOLS TO SUPPORT "VIRTUAL CHOIRS" DURING COVID, RESTRICTED SUPPORT FOR DIGITAL FUNDRAISING MATCH, REACH FOR THE STARS CAMP, SUPPORT TO EXPAND THE AFTERSCHOOL PROGRAM OF REAR-ROUND ACADEMIC SUPPORT AND SUPERIOR MUSIC EDUCATION TO WILMINGTON'S LATINX CHILDREN AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: THE DELAWARE CONTEMPORARY

(H) PURPOSE OF GRANT OR ASSISTANCE: NCC YPB: GENERAL OPERATING SUPPORT OF BUILDING A CREATIVE FUTURE AFTERSCHOOL PROGRAM, SUPPORT THE ENROLLMENT OF LATINX HIGH SCHOOL STUDENTS IN BUILDING A CREATIVE FUTURE: CREATIVES 2 INITIATIVE, BY PROVIDING FIVE SCHOLARSHIPS, PLATFORM GALLERY AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT:

THE NATURE CONSERVANCY PENNSYLVANIA/DELAWARE

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT TO HELP WITH

**Part IV** Supplemental Information

PURCHASE OF LAND FOR THE KITTATINNY RIDGE PRESERVATION PROJECT.

NAME OF ORGANIZATION OR GOVERNMENT: THE PRECISION INSTITUTE

(H) PURPOSE OF GRANT OR ASSISTANCE: DRIVING SIMULATOR EQUIPMENT FOR NEURODIVERSE POPULATION AND MARCH 2021 COMMUNITY NEEDS: GENERAL OPERATING.

NAME OF ORGANIZATION OR GOVERNMENT: THE TEEN WAREHOUSE

(H) PURPOSE OF GRANT OR ASSISTANCE: NCC YPB: COVER 40% OF COSTS TO PROVIDE LEVEL UP PROGRAMMING IN SUMMER 2021 FOR UP TO 20 STUDENTS AND 2021 FOCUS GRANT: TEENS IN MOTION.

NAME OF ORGANIZATION OR GOVERNMENT:

THEODORE ROOSEVELT CONSERVATION PARTNERSHIP,

(H) PURPOSE OF GRANT OR ASSISTANCE: UNRESTRICTED SUPPORT FOR THE MENHADEN CONSERVATION CAMPAIGN, RESTRICTED SUPPORT TO AID TRCP'S SCIENCE INITIATIVE TO INVESTIGATE THE IMPACT OF FISHING ON US MENHADEN POPULATION AND UNRESTRICTED SUPPORT IN HONOR OF BILL MICHAELCECK.

NAME OF ORGANIZATION OR GOVERNMENT: TIDALHEALTH FOUNDATION INC

(H) PURPOSE OF GRANT OR ASSISTANCE: WAGNER WELLNESS PROGRAM AND UNRESTRICTED SUPPORT, RESTRICTED SUPPORT FOR NANTICOKE MEMORIAL HOSPITAL AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: UNITED WAY OF DELAWARE

(H) PURPOSE OF GRANT OR ASSISTANCE: \$TAND BY ME, SUPPORT FOR DELAWARE RACIAL JUSTICE COLLABORATIVE FUND, \$TAND BY ME NEXGEN, RESTRICTED SUPPORT FOR THE TOCQUEVILLE SOCIETY AND UNRESTRICTED SUPPORT.



**Part IV** Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: UNIVERSITY OF DELAWARE

(H) PURPOSE OF GRANT OR ASSISTANCE: TIMELINE TUESDAYS: DATA SNAPSHOT

DEBUT WEBINAR SERIES, SUPPORT TO MAINTAIN AND IMPROVE GOODSTAY GARDENS,

RESTRICTED FOR THE SUPPORT OF DR. MATT OLIVERS PROGRAMS AND STUDENTS AT

CEOE COLLEGE OF MARINE SCIENCE AND POLICY, RESTRICTED TO SUPPORT SCHOOL

OF EDUCATION/SPEC.ED, RESTRICTED FOR THE SCHOLARSHIP PROGRAM TO SUPPORT A

NEEDY/WORTHY INDIVIDUAL FROM DELAWARE, IN MEMORY OF REMO ROMAGNOLI,

VETERANS & COLLEGE ATHLETES TOGETHER (VCAT), RESTRICTED SUPPORT FOR

WHITNEY ATHLETIC PERFORMANCE CENTER, RESTRICTED TO SUPPORT THE COLLEGE OF

AGRICULTURE AND NATURAL RESOURCES, RESTRICTED SUPPORT FOR THE BENEFIT OF

THE UNIVERSITY OF DE BOTANIC GARDEN, RESTRICTED SUPPORT TO THE BENEFIT

OF OSHER WILMINGTON CAMPUS, RESTRICTED SUPPORT TO REP THEATRE, RESTRICTED

SUPPORT TO REBUILD THE BLUE HOUSE OF CHABAD AT UD, SUPPORT IN MEMORY OF

CARYL PROUD HORTY, RESTRICTED SUPPORT FOR UD ATHLETICS, RESTRICTED SUPPORT

- ELIASON EDUCATION AND GREENING FUND, RESTRICTED SUPPORT FOR THE HEALTHY

COMMUNITIES DELAWARE, RESTRI

NAME OF ORGANIZATION OR GOVERNMENT: UNIVERSITY OF PENNSYLVANIA

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO SUPPORT 404889 -

CONTRIBUTION TO E.D. & E.M. RUSHWORTH MEMORIAL SCHOLARSHIP FUND.

NAME OF ORGANIZATION OR GOVERNMENT: UPSTREAM ALLIANCE

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO SUPPORT ENVIRONMENTAL

EDUCATION AND IS BEING MADE ON BEHALF OF STEPHEN K. COONS, 10 WINDWHISPER

LANE, ANNAPOLIS, MD 21403.

NAME OF ORGANIZATION OR GOVERNMENT: VANDERBILT UNIVERSITY

**Part IV** Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT THE KEITH MUMFORD  
MEMORIAL TENNIS SCHOLARSHIP AND TO SUPPORT THE DEEG SEZNA SCHOLARSHIP

NAME OF ORGANIZATION OR GOVERNMENT: VISION TO LEARN

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT FOR 100 EYE EXAMS,  
RESTRICTED SUPPORT FOR THE GIFT OF EYEGLASSES TO CHILDREN WHO IN NEED,  
RESTRICTED SUPPORT TO PROVIDE EYE EXAMS AND PAIRS OF GLASSES FREE OF  
CHARGES TO STUDENTS IN DELAWARE AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: WAKE FOREST UNIVERSITY

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT TO THE LEWIS A.  
CHEEK LAW SCHOLARSHIP (LSS187), RESTRICTED SUPPORT FOR THE BLSA  
SCHOLARSHIP FUND AND SUPPORT FOR THE LAW FUND AT WAKE FOREST.

NAME OF ORGANIZATION OR GOVERNMENT: WASHINGTON COLLEGE

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT FOR THE WORK OF  
THE CHAIR OF THE RELIGION, POLITICS & CULTURE (DR. PRUD'HOMME) FROM DAVE  
AND ANN BURTON AND RESTRICTED TO SUPPORT THE WORK AND RESEARCH OF DR.  
JOSEPH PRUD'HOMME.

NAME OF ORGANIZATION OR GOVERNMENT: WEST END NEIGHBORHOOD HOUSE INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO SUPPORT CAPITAL  
CAMPAIGN CONTRIBUTION, SUPPORT FOR AN OUTDOOR CLASSROOM, DISPOSABLE MASKS  
AND A TEMORATURE SCREENING SYSTEM, BRIGHT SPOT FARMS EMPLOYMENT &  
LEADERSHIP TRAINING PROGRAM, RESTRICTED SUPPORT - ELIASON EDUCATION AND  
GREENING FUND, RESTRICTED SUPPORT TO THE WEST END NEIGHBORHOOD HOUSE'S  
CAPITAL AND MAINTENANCE PROJECTS, RESTRICTED SUPPORT TO EXPAND WEST END  
HOUSING, RUN COMMUNITY PROGRAMS, PROVIDE JOB TRAINING, CHILDCARE AND

**Part IV** Supplemental Information

OTHER SERVICES AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: WESTMINSTER PRESBYTERIAN CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: UNRESTRICTED SUPPORT \$2,000.00, CAPITAL CAMPAIGN \$3,000.00 AND BALANCE TO BE ALLOCATED FOR CHRISTMAS EVE OFFERING, CHRISTMAS BOX PROJECT, CHRISTMAS POINTSETTIAS AND ECHO GIFTS AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: WILMINGTON ALLIANCE

(H) PURPOSE OF GRANT OR ASSISTANCE: KITCHEN INCUBATOR TO PROVIDE AFFORDABLE, HIGH-QUALITY COMMERCIAL KITCHEN FOR ENTREPRENEURS TO MAKE FOOD IN ACCORDANCE WITH STATE REGULATIONS. FOOD TRUCKS OWNERS, BAKERS, AND CATERERS.

NAME OF ORGANIZATION OR GOVERNMENT: WILMINGTON CHILDREN'S CHORUS, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: UNRESTRICTED SUPPORT (GIFTS RECEIVED AFTER FUND CLOSURE), MARCH 2021 COMMUNITY NEEDS: GENERAL OPERATING, SINGING THROUGH SUMMER AND OTHER UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: WILMINGTON FRIENDS SCHOOL

(H) PURPOSE OF GRANT OR ASSISTANCE: UNRESTRICTED SUPPORT IN MEMORY OF BEN WILKINSON, UNRESTRICTED SUPPORT TO ALUMNI DEVELOPMENT OFFICE AND OTHER UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: YMCA OF DELAWARE

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT FOR THE ANNUAL CAMPAIGN, SUPPORT TO IMPROVE INDOOR SAFETY AND AIR QUALITY THROUGH VENTILATION AND FILTRATION, EXPAND FOOD SERVICE FOR CHILDREN AND FAMILIES

**Part IV** Supplemental Information

IN NEED (KENT COUNTY), LIVESTRONG AT THE YMCA, SUPPORT FOR EDUCATION OR FAMILY SUPPORT ACTIVITIES RELATED TO COVID-19, RESTRICTED SUPPORT FOR THE SWIM PROGRAM WATER SAFETY WEEK(SUSSEX BRANCH), SUSSEX FAMILY YMCA TEEN WORKFORCE DEVELOPMENT PROGRAM AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: YWCA DELAWARE

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED TO SUPPORT RACIAL AND SOCIAL JUSTICE PROGRAMMING, COVID PROGRAMS SUPPORT, RESTRICTED TO SUPPORT RACIAL AND SOCIAL JUSTICE PROGRAMMING, KENT: SEXUAL ASSAULT RESPONSE CENTER, CARE TEAM COORDINATOR & WELLNESS COACH, RESTRICTED SUPPORT FOR HOUSING COUNSELING PROGRAM AND UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: ZOE MINISTRIES

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT TO PROVIDE SAFETY, WHOLENESS, HEALING AND ADVOCACY IN DELAWARE FOR THOSE IMPACTED OR POTENTIALLY IMPACTED BY SEX TRAFFICKING.

**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees  
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.  
 ▶ Attach to Form 990.  
 ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2020**

Open to Public Inspection

Name of the organization

**DELAWARE COMMUNITY FOUNDATION, INC**

Employer identification number

**22-2804785**

**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |  |  |
|--|--|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use   |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence   |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees     |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

**b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain .....

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? .....

**3** Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- |  |   |
|--|---|
| <input type="checkbox"/> Compensation committee              | <input type="checkbox"/> Written employment contract                                |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study                               |
| <input type="checkbox"/> Form 990 of other organizations     | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment? .....
- b** Participate in or receive payment from a supplemental nonqualified retirement plan? .....
- c** Participate in or receive payment from an equity-based compensation arrangement? .....
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**

**5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? .....
- b** Any related organization? .....
- If "Yes" on line 5a or 5b, describe in Part III.

**6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? .....
- b** Any related organization? .....
- If "Yes" on line 6a or 6b, describe in Part III.

**7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III .....

**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III .....

**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .....

	Yes	No
<b>1b</b>		
<b>2</b>		
<b>4a</b>		X
<b>4b</b>	X	
<b>4c</b>		X
<b>5a</b>		X
<b>5b</b>		X
<b>6a</b>		X
<b>6b</b>		X
<b>7</b>		X
<b>8</b>		X
<b>9</b>		

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

Schedule J (Form 990) 2020

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

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

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

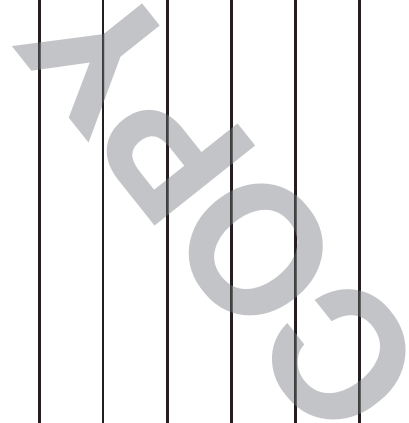
(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) JOHN STUART COMSTOCK-GAY PRESIDENT & CEO	(i)	290,293.	0.	20,000.	46,220.	356,513.	0.
	(ii)	0.	0.	0.	0.	0.	0.
	(i)						
	(ii)						
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	(i)						
	(ii)						
	(i)						
	(ii)						

**Part III** Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

**PART I, LINE 4B:**

JOHN STUART COMSTOCK-GAY \$20,000.



**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2020**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization **DELAWARE COMMUNITY FOUNDATION, INC** Employer identification number **22-2804785**

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	462,342	28,366,438.	FAIR MARKET VALUE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ( IN KIND GIFTS )	X	72	23,944.	FAIR MARKET VALUE
26 Other ( )				
27 Other ( )				
28 Other ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		



**Part II**

**Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Lined area for supplemental information with a large diagonal 'COPY' watermark.

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2020**

Open to Public  
Inspection

Name of the organization

DELAWARE COMMUNITY FOUNDATION, INC

Employer identification number

22-2804785

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

PHILANTHROPY THROUGH KNOWLEDGE AND RELATIONSHIPS, NOW AND IN THE  
FUTURE. WE ENVISION A DELAWARE WHERE GENEROSITY EXPANDS OPPORTUNITY FOR  
ALL AND ENHANCES THE COMMON GOOD. AS A FACILITATOR, INFORMATION  
RESOURCE AND MANAGER OF CHARITABLE FUNDS, THE DELAWARE COMMUNITY  
FOUNDATION HELPS COMMUNITIES AND PHILANTHROPISTS FOCUS CHARITABLE  
RESOURCES FOR THE GREATEST COMMUNITY BENEFIT STATEWIDE.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

AS A FACILITATOR, INFORMATION RESOURCE AND MANAGER OF CHARITABLE FUNDS,  
THE DELAWARE COMMUNITY FOUNDATION HELPS COMMUNITIES AND PHILANTHROPISTS  
FOCUS CHARITABLE RESOURCES FOR THE GREATEST COMMUNITY BENEFIT  
STATEWIDE.

FORM 990, PART VI, SECTION A, LINE 6:

MEMBERS SHALL CONSIST OF NOT LESS THAN 21 AND NOT MORE THAN 48 INDIVIDUALS  
WITH KNOWLEDGE ABOUT THE CORPORATION AND THE PHILANTHROPIC NEEDS OF THE  
PEOPLE OF DELAWARE, AS SHALL BE DETERMINED BY BOARD ACTION FROM  
TIME TO TIME, AS FOLLOWS:

NOT LESS THAN SIX (6) OR MORE THAN TWELVE (12) INDIVIDUALS, EACH OF WHOM IS  
A DISTRIBUTION ADVISOR OR OTHER REPRESENTATIVE OF A DONOR ADVISED OR  
ENDOWMENT FUND HELD BY THE CORPORATION, SHALL BE ELECTED BY THE BOARD TO  
INDIVIDUAL TERMS OF THREE (3) YEARS EACH FOR NO MORE THAN TWO CONSECUTIVE  
TERMS; PROVIDED, THAT THE TERMS SHALL BE STAGGERED SO THAT APPROXIMATELY  
ONE-THIRD OF THE INDIVIDUALS WITHIN THIS CATEGORY SHALL BE ELECTED OR

Name of the organization

DELAWARE COMMUNITY FOUNDATION, INC

Employer identification number

22-2804785

REELECTED BY THE BOARD EACH YEAR; AND

NOT LESS THAN SIX (6) OR MORE THAN TWELVE (12) INDIVIDUALS, EACH OF WHOM ARE FORMER MEMBERS OF THE CORPORATION'S BOARD OF DIRECTORS, SHALL BE ELECTED BY THE BOARD TO INDIVIDUAL TERMS OF THREE (3) YEARS EACH FOR NO MORE THAN TWO CONSECUTIVE TERMS; PROVIDED, THAT THE TERMS SHALL BE STAGGERED SO THAT APPROXIMATELY ONE-THIRD OF THE INDIVIDUALS WITHIN THIS CATEGORY SHALL BE ELECTED OR REELECTED BY THE BOARD EACH YEAR; AND EACH CURRENT MEMBER OF THE CORPORATION'S BOARD OF DIRECTORS ("DIRECTOR") SHALL AUTOMATICALLY SERVE AS A MEMBER DURING HIS OR HER TERM(S) ON THE BOARD.

FORM 990, PART VI, SECTION A, LINE 7A:

THE NOMINATING COMMITTEE OF THE FOUNDATION SENDS BOARD OF DIRECTOR RECOMMENDATIONS TO THE BOARD. THE BOARD NOMINATES THOSE INDIVIDUALS AND SUBMITS THEM TO THE MEMBERS FOR A VOTE TO A SEAT ON THE BOARD.

FORM 990, PART VI, SECTION B, LINE 11B:

MANAGEMENT AND THE AUDIT COMMITTEE REVIEW THE FORM 990 AND RELATED SCHEDULES PRIOR TO FILING. ONCE THE FORM 990 IS REVIEWED, THE AUDIT COMMITTEE REPORTS TO THE BOARD OF DIRECTORS ABOUT THE RETURN.

FORM 990, PART VI, SECTION B, LINE 12C:

IT IS THE RESPONSIBILITY OF THE EMPLOYEE TO ANNUALLY UPDATE HIS OR HER CONFLICT OF INTEREST STATEMENT AND TO BRING TO THE ATTENTION OF THE PRESIDENT ANY POTENTIAL CONFLICT OF INTEREST, OR APPEARANCE OF CONFLICT OF INTEREST, HE OR SHE MAY HAVE IN FOUNDATION MATTERS ANNUALLY. AN EMPLOYEE COMPLETES A CERTIFICATE OF COMPLIANCE STATEMENT, SIGNS IT AND RETURNS IT TO THE CHIEF FINANCIAL OFFICER FOR FILING IN THE EMPLOYEE'S PERSONNEL RECORD.

Name of the organization DELAWARE COMMUNITY FOUNDATION, INC	Employer identification number 22-2804785
--	--

FORM 990, PART VI, SECTION B, LINE 15:

COMPENSATION IS REVIEWED ANNUALLY BY THE CHIEF FINANCIAL OFFICER AND THE CHIEF EXECUTIVE OFFICER.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AVAILABLE THROUGH THEIR WEBSITE.

COPY

**SCHEDULE R  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Related Organizations and Unrelated Partnerships**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.  
▶ Attach to Form 990.

Name of the organization

DELAWARE COMMUNITY FOUNDATION, INC

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2020**

Open to Public  
Inspection

Employer identification number  
22-2804785

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

**Part II Identification of Related Tax-Exempt Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?				
						Yes	No			
RODEL CHARITABLE FOUNDATION - 91-1944585 PO BOX 1636 WILMINGTON, DE 19899	INVESTED IN EFFORTS GEARED TOWARD IMPROVING STUDENT ACHIEVEMENT IN DELAWARE	DELAWARE	501(C)(3)	12A N/A						X

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule R (Form 990) 2020



**Part V Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
<b>a</b> Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity .....		X
<b>b</b> Gift, grant, or capital contribution to related organization(s) .....		X
<b>c</b> Gift, grant, or capital contribution from related organization(s) .....		X
<b>d</b> Loans or loan guarantees to or for related organization(s) .....		X
<b>e</b> Loans or loan guarantees by related organization(s) .....		X
<b>f</b> Dividends from related organization(s) .....		X
<b>g</b> Sale of assets to related organization(s) .....		X
<b>h</b> Purchase of assets from related organization(s) .....		X
<b>i</b> Exchange of assets with related organization(s) .....		X
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) .....		X
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) .....		X
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) .....	X	
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) .....		X
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .....	X	
<b>o</b> Sharing of paid employees with related organization(s) .....	X	
<b>p</b> Reimbursement paid to related organization(s) for expenses .....		X
<b>q</b> Reimbursement paid by related organization(s) for expenses .....		X
<b>r</b> Other transfer of cash or property to related organization(s) .....		X
<b>s</b> Other transfer of cash or property from related organization(s) .....		X

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
<b>(1)</b>	RODEL CHARITABLE FOUNDATION - DE	L	74,899	ADMIN FEES PAID
<b>(2)</b>				
<b>(3)</b>				
<b>(4)</b>				
<b>(5)</b>				
<b>(6)</b>				

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners sec. 501(c)(3) orgs.?		(f) Share of total income	(g) Share of end-of-year assets	(h) Dispropor- tionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	





UNRELATED BUSINESS INCOME

**CARRYOVER DATA TO 2021**

Name DELAWARE COMMUNITY FOUNDATION, INC	Employer Identification Number 22-2804785
--	--

Based on the information provided with this return, the following are possible carryover amounts to next year.

FEDERAL PRE-2018 NET OPERATING LOSS 27,284.

COPY

Form **8879-EO**

# IRS e-file Signature Authorization for an Exempt Organization

OMB No. 1545-0047

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

# 2020

Department of the Treasury  
Internal Revenue Service

▶ **Do not send to the IRS. Keep for your records.**  
▶ **Go to [www.irs.gov/Form8879EO](http://www.irs.gov/Form8879EO) for the latest information.**

Name of exempt organization or person subject to tax

Taxpayer identification number

**DELAWARE COMMUNITY FOUNDATION, INC**

**22-2804785**

Name and title of officer or person subject to tax

**JOYCE DARLING**

**VP-FINANCE & ADMINISTRATION**

### Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a, 2a, 3a, 4a, 5a, 6a, or 7a** below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b, 5b, 6b, or 7b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

<b>1a</b> Form 990 check here ▶ <input type="checkbox"/>	<b>b</b> Total revenue, if any (Form 990, Part VIII, column (A), line 12) .....	<b>1b</b> _____
<b>2a</b> Form 990-EZ check here ▶ <input type="checkbox"/>	<b>b</b> Total revenue, if any (Form 990-EZ, line 9) .....	<b>2b</b> _____
<b>3a</b> Form 1120-POL check here ▶ <input type="checkbox"/>	<b>b</b> Total tax (Form 1120-POL, line 22) .....	<b>3b</b> _____
<b>4a</b> Form 990-PF check here ▶ <input type="checkbox"/>	<b>b</b> Tax based on investment income (Form 990-PF, Part VI, line 5) .....	<b>4b</b> _____
<b>5a</b> Form 8868 check here ▶ <input type="checkbox"/>	<b>b</b> Balance due (Form 8868, line 3c) .....	<b>5b</b> _____
<b>6a</b> Form 990-T check here ▶ <input checked="" type="checkbox"/>	<b>b</b> Total tax (Form 990-T, Part III, line 4) .....	<b>6b</b> _____ <b>0.</b>
<b>7a</b> Form 4720 check here ▶ <input type="checkbox"/>	<b>b</b> Total tax (Form 4720, Part III, line 1) .....	<b>7b</b> _____

### Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that  I am an officer of the above organization or  I am a person subject to tax with respect to (name of organization) \_\_\_\_\_ (EIN) \_\_\_\_\_ and that I have examined a copy

of the 2020 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

**PIN: check one box only**

I authorize GUNNIP & COMPANY LLP to enter my PIN 12345  
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the tax year 2020 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the organization, I will enter my PIN as my signature on the tax year 2020 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax ▶ \_\_\_\_\_

Date ▶ \_\_\_\_\_

### Part III Certification and Authentication

**ERO's EFIN/PIN.** Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

**51070312345**

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2020 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ \_\_\_\_\_

Date ▶ \_\_\_\_\_

**ERO Must Retain This Form - See Instructions**  
**Do Not Submit This Form to the IRS Unless Requested To Do So**

LHA For Paperwork Reduction Act Notice, see instructions.

Form **8879-EO** (2020)

**Exempt Organization Business Income Tax Return**  
(and proxy tax under section 6033(e))

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

**2020**

▶ Go to [www.irs.gov/Form990T](http://www.irs.gov/Form990T) for instructions and the latest information.  
▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury  
Internal Revenue Service

<p><b>A</b> <input type="checkbox"/> Check box if address changed.</p> <p><b>B</b> Exempt under section  <input checked="" type="checkbox"/> 501(c)(3) )  <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e)  <input type="checkbox"/> 408A <input type="checkbox"/> 530(a)  <input type="checkbox"/> 529(a) <input type="checkbox"/> 529S</p>	<p>Print or Type</p>	<p>Name of organization ( <input type="checkbox"/> Check box if name changed and see instructions.)  <b>DELAWARE COMMUNITY FOUNDATION, INC</b></p> <p>Number, street, and room or suite no. If a P.O. box, see instructions.  <b>P.O. BOX 1636</b></p> <p>City or town, state or province, country, and ZIP or foreign postal code  <b>WILMINGTON, DE 19899</b></p> <p><b>C</b> Book value of all assets at end of year ..... ▶ <b>375,445,649.</b></p>	<p><b>D</b> Employer identification number <b>22-2804785</b></p> <p><b>E</b> Group exemption number (see instructions)</p> <p><b>F</b> <input type="checkbox"/> Check box if an amended return.</p>
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**G** Check organization type ▶  501(c) corporation  501(c) trust  401(a) trust  Other trust  Applicable reinsurance entity

**H** Check if filing only to ▶  Claim credit from Form 8941  Claim a refund shown on Form 2439

**I** Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation ..... ▶

**J** Enter the number of attached Schedules A (Form 990-T) ..... ▶ **1**

**K** During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶  Yes  No  
If "Yes," enter the name and identifying number of the parent corporation. ▶

**L** The books are in care of ▶ **JOYCE DARLING** Telephone number ▶ **302-504-5251**

**Part I Total Unrelated Business Taxable Income**

1 Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions) .....	1	0.
2 Reserved .....	2	
3 Add lines 1 and 2 .....	3	
4 Charitable contributions (see instructions for limitation rules) .....	4	0.
5 Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3 .....	5	
6 Deduction for net operating loss. See instructions .....	6	0.
7 Total of unrelated business taxable income before specific deduction and section 199A deduction. Subtract line 6 from line 5 .....	7	
8 Specific deduction (generally \$1,000, but see instructions for exceptions) .....	8	1,000.
9 <b>Trusts.</b> Section 199A deduction. See instructions .....	9	
10 <b>Total deductions.</b> Add lines 8 and 9 .....	10	1,000.
11 <b>Unrelated business taxable income.</b> Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero .....	11	0.

**Part II Tax Computation**

1 <b>Organizations taxable as corporations.</b> Multiply Part I, line 11 by 21% (0.21) .....	1	0.
2 <b>Trusts taxable at trust rates.</b> See instructions for tax computation. Income tax on the amount on Part I, line 11 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041) .....	2	
3 <b>Proxy tax.</b> See instructions .....	3	
4 Other tax amounts. See instructions .....	4	
5 Alternative minimum tax (trusts only) .....	5	
6 <b>Tax on noncompliant facility income.</b> See instructions .....	6	
7 <b>Total.</b> Add lines 3 through 6 to line 1 or 2, whichever applies .....	7	0.

LHA For Paperwork Reduction Act Notice, see instructions.

<b>Part III Tax and Payments</b>			
1a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) .....	<b>1a</b>		
b Other credits (see instructions) .....	<b>1b</b>		
c General business credit. Attach Form 3800 (see instructions) .....	<b>1c</b>		
d Credit for prior year minimum tax (attach Form 8801 or 8827) .....	<b>1d</b>		
e <b>Total credits.</b> Add lines 1a through 1d .....		<b>1e</b>	
2 Subtract line 1e from Part II, line 7 .....		<b>2</b>	0.
3 Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach statement) .....		<b>3</b>	
4 <b>Total tax.</b> Add lines 2 and 3 (see instructions). <input type="checkbox"/> Check if includes tax previously deferred under section 1294. Enter tax amount here .....		<b>4</b>	0.
5 2020 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 4 .....		<b>5</b>	0.
6a Payments: A 2019 overpayment credited to 2020 .....	<b>6a</b>		
b 2020 estimated tax payments. Check if section 643(g) election applies .....	<b>6b</b>		
c Tax deposited with Form 8868 .....	<b>6c</b>		
d Foreign organizations: Tax paid or withheld at source (see instructions) .....	<b>6d</b>		
e Backup withholding (see instructions) .....	<b>6e</b>		
f Credit for small employer health insurance premiums (attach Form 8941) .....	<b>6f</b>		
g Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 .....	<b>6g</b>		
<input type="checkbox"/> Form 4136 .....			
7 <b>Total payments.</b> Add lines 6a through 6g .....		<b>7</b>	
8 Estimated tax penalty (see instructions). Check if Form 2220 is attached .....		<b>8</b>	
9 <b>Tax due.</b> If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed .....		<b>9</b>	
10 <b>Overpayment.</b> If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid .....		<b>10</b>	
11 Enter the amount of line 10 you want: <b>Credited to 2021 estimated tax</b> .....		<b>11</b>	

<b>Part IV Statements Regarding Certain Activities and Other Information</b> (see instructions)			
1 At any time during the 2020 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here .....		<b>Yes</b>	<b>No</b>
		<input type="checkbox"/>	<input checked="" type="checkbox"/>
2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? .....		<input type="checkbox"/>	<input checked="" type="checkbox"/>
If "Yes," see instructions for other forms the organization may have to file.			
3 Enter the amount of tax-exempt interest received or accrued during the tax year .....	\$ .....	<input type="checkbox"/>	<input type="checkbox"/>
4a Did the organization change its method of accounting? (see instructions) .....		<input type="checkbox"/>	<input checked="" type="checkbox"/>
b If 4a is "Yes," has the organization described the change on Form 990, 990-EZ, 990-PF, or Form 1128? If "No," explain in Part V .....		<input type="checkbox"/>	<input type="checkbox"/>

**Part V Supplemental Information**

Provide the explanation required by Part IV, line 4b. Also, provide any other additional information. See instructions.

<b>Sign Here</b>	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 _____ Date _____	Title <b>VP-FINANCE &amp; ADMINISTRATION</b>	May the IRS discuss this return with the preparer shown below (see instructions)? <input checked="" type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>	
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>KATHERINE L. SILICATO</b>	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed PTIN <b>P00543107</b>
	Firm's name <b>GUNNIP &amp; COMPANY LLP</b> 2751 CENTERVILLE RD., STE. 300 Firm's address <b>WILMINGTON, DE 19808</b>	Firm's EIN <b>51-0076769</b>	Phone no. <b>302-225-5000</b>	

**SCHEDULE A  
(Form 990-T)**

Department of the Treasury  
Internal Revenue Service

**Unrelated Business Taxable Income  
From an Unrelated Trade or Business**

▶ Go to [www.irs.gov/Form990T](http://www.irs.gov/Form990T) for instructions and the latest information.  
▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

ENTITY 1

OMB No. 1545-0047

**2020**

Open to Public Inspection for  
501(c)(3) Organizations Only

<b>A</b> Name of the organization <b>DELAWARE COMMUNITY FOUNDATION, INC</b>	<b>B</b> Employer identification number <b>22-2804785</b>
<b>C</b> Unrelated business activity code (see instructions) ▶ <b>900000</b>	<b>D</b> Sequence: <b>1</b> of <b>1</b>

**E** Describe the unrelated trade or business ▶ **INVESTMENTS**

<b>Part I</b> Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
<b>1 a</b> Gross receipts or sales				
<b>b</b> Less returns and allowances	<b>c</b> Balance ▶	<b>1c</b>		
<b>2</b> Cost of goods sold (Part III, line 8)		<b>2</b>		
<b>3</b> Gross profit. Subtract line 2 from line 1c		<b>3</b>		
<b>4 a</b> Capital gain net income (attach Sch D (Form 1041 or Form 1120)) (see instructions)		<b>4a</b>		
<b>b</b> Net gain (loss) (Form 4797) (attach Form 4797) (see instructions)		<b>4b</b>		
<b>c</b> Capital loss deduction for trusts		<b>4c</b>		
<b>5</b> Income (loss) from a partnership or an S corporation (attach statement)		<b>5</b>		
<b>6</b> Rent income (Part IV)		<b>6</b>		
<b>7</b> Unrelated debt-financed income (Part V)		<b>7</b>		
<b>8</b> Interest, annuities, royalties, and rents from a controlled organization (Part VI)		<b>8</b>		
<b>9</b> Investment income of section 501(c)(7), (9), or (17) organizations (Part VII)		<b>9</b>		
<b>10</b> Exploited exempt activity income (Part VIII)		<b>10</b>		
<b>11</b> Advertising income (Part IX)		<b>11</b>		
<b>12</b> Other income (see instructions; attach statement)		<b>12</b>		
<b>13 Total.</b> Combine lines 3 through 12		<b>13</b> 0.		

**Part II Deductions Not Taken Elsewhere** (See instructions for limitations on deductions) Deductions must be directly connected with the unrelated business income

<b>1</b> Compensation of officers, directors, and trustees (Part X)				<b>1</b>
<b>2</b> Salaries and wages				<b>2</b>
<b>3</b> Repairs and maintenance				<b>3</b>
<b>4</b> Bad debts				<b>4</b>
<b>5</b> Interest (attach statement) (see instructions)				<b>5</b>
<b>6</b> Taxes and licenses				<b>6</b>
<b>7</b> Depreciation (attach Form 4562) (see instructions)		<b>7</b>		
<b>8</b> Less depreciation claimed in Part III and elsewhere on return		<b>8a</b>		<b>8b</b>
<b>9</b> Depletion				<b>9</b>
<b>10</b> Contributions to deferred compensation plans				<b>10</b>
<b>11</b> Employee benefit programs				<b>11</b>
<b>12</b> Excess exempt expenses (Part VIII)				<b>12</b>
<b>13</b> Excess readership costs (Part IX)				<b>13</b>
<b>14</b> Other deductions (attach statement)				<b>14</b>
<b>15 Total deductions.</b> Add lines 1 through 14				<b>15</b> 0.
<b>16</b> Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)				<b>16</b> 0.
<b>17</b> Deduction for net operating loss (see instructions)				<b>17</b> 0.
<b>18 Unrelated business taxable income.</b> Subtract line 17 from line 16				<b>18</b>

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2020

Part III Cost of Goods Sold Enter method of inventory valuation

Table with 8 rows for Cost of Goods Sold. Rows include: 1 Inventory at beginning of year, 2 Purchases, 3 Cost of labor, 4 Additional section 263A costs, 5 Other costs, 6 Total, 7 Inventory at end of year, 8 Cost of goods sold. Includes a Yes/No checkbox for section 263A rules.

Part IV Rent Income (From Real Property and Personal Property Leased with Real Property)

Table for Rent Income. Row 1: Description of property with checkboxes A, B, C, D. Rows 2-4: Rent received or accrued from personal/real property and total rents. Row 3: Total rents received or accrued. Row 4: Deductions directly connected with the income. Row 5: Total deductions. Includes a large 'COPY' watermark.

Part V Unrelated Debt-Financed Income (see instructions)

Table for Unrelated Debt-Financed Income. Row 1: Description of debt-financed property with checkboxes A, B, C, D. Rows 2-8: Gross income from debt-financed property, deductions, average acquisition debt, and total gross income. Rows 9-11: Allocable deductions and total dividends-received deductions.

**Part VI Interest, Annuities, Royalties, and Rents from Controlled Organizations** (see instructions)

		Exempt Controlled Organizations			
1. Name of controlled organization	2. Employer identification number	3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					
Nonexempt Controlled Organizations					
7. Taxable Income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10	
(1)					
(2)					
(3)					
(4)					
			Add columns 5 and 10. Enter here and on Part I, line 8, column (A)	Add columns 6 and 11. Enter here and on Part I, line 8, column (B)	
<b>Totals</b>			0.	0.	

**Part VII Investment Income of a Section 501(c)(7), (9), or (17) Organization** (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add cols 3 and 4)
(1)				
(2)				
(3)				
(4)				
		Add amounts in column 2. Enter here and on Part I, line 9, column (A)		Add amounts in column 5. Enter here and on Part I, line 9, column (B)
<b>Totals</b>		0.		0.

**Part VIII Exploited Exempt Activity Income, Other Than Advertising Income** (see instructions)

1	Description of exploited activity: _____	
2	Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A) .....	2
3	Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B) .....	3
4	Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7 .....	4
5	Gross income from activity that is not unrelated business income .....	5
6	Expenses attributable to income entered on line 5 .....	6
7	Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line 4. Enter here and on Part II, line 12 .....	7



Part IX Advertising Income

1 Name(s) of periodical(s). Check box if reporting two or more periodicals on a consolidated basis.

- A B C D checkboxes

Enter amounts for each periodical listed above in the corresponding column.

Table with 4 columns (A, B, C, D) for Gross advertising income. Total 0.

Table with 4 columns (A, B, C, D) for Direct advertising costs by periodical. Total 0.

4 Advertising gain (loss). Subtract line 3 from line 2. For any column in line 4 showing a gain, complete lines 5 through 8. For any column in line 4 showing a loss or zero, do not complete lines 5 through 7, and enter zero on line 8

- 5 Readership costs
6 Circulation income
7 Excess readership costs. If line 6 is less than line 5, subtract line 6 from line 5. If line 5 is less than line 6, enter zero
8 Excess readership costs allowed as a deduction. For each column showing a gain on line 4, enter the lesser of line 4 or line 7

Table with 4 columns (A, B, C, D) for lines 4-8.

a Add line 8, columns A through D. Enter the greater of the line 8a, columns total or zero here and on Part II, line 13. Total 0.

Part X Compensation of Officers, Directors, and Trustees (see instructions)

Table with 4 columns: 1. Name, 2. Title, 3. Percentage of time devoted to business, 4. Compensation attributable to unrelated business. Rows (1) through (4).

Total. Enter here and on Part II, line 1. Total 0.

Part XI Supplemental Information (see instructions)

Blank lines for supplemental information.