

EXTENDED TO MAY 15, 2025

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2023

Open to Public Inspection

Form 990

Department of the Treasury
Internal Revenue Service

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

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

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

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

B Check if applicable:

Address change
Name change
Initial return
Final return/terminated
Amended return
Application pending

C Name of organization

DELAWARE COMMUNITY FOUNDATION, INC

Doing business as

Number and street (or P.O. box if mail is not delivered to street address)

P.O. BOX 1636

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

WILMINGTON, DE 19899

F Name and address of principal officer: JOHN STUART COMSTOCK-GAY
SAME AS C ABOVE

D Employer identification number

22-2804785

E Telephone number

302-571-8004

G Gross receipts \$

79,761,966.

H(a) Is this a group return

for subordinates? Yes ☒ No

H(b) Are all subordinates included? Yes No

If "No," attach a list. See instructions

H(c) Group exemption number

I Tax-exempt status: ☒ 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: WWW.DELCF.ORG

K Form of organization: ☒ Corporation Trust Association Other

L Year of formation: 1986

M State of legal domicile: DE

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: OUR MISSION IS TO STRENGTHEN DELAWARE BY MAXIMIZING COMMUNITY-BASED PHILANTHROPY.
	2	Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.
	3	Number of voting members of the governing body (Part VI, line 1a) 22
	4	Number of independent voting members of the governing body (Part VI, line 1b) 22
	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a) 40
	6	Total number of volunteers (estimate if necessary) 85
	7a	Total unrelated business revenue from Part VIII, column (C), line 12 0.
7b	Net unrelated business taxable income from Form 990-T, Part I, line 11 0.	
Revenue	8	Contributions and grants (Part VIII, line 1h) 21,637,173.
	9	Program service revenue (Part VIII, line 2g) 498,954.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d) 14,901,527.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 432,762.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 37,470,416.
	Expenses	13
14		Benefits paid to or for members (Part IX, column (A), line 4) 0.
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 2,471,627.
16a		Professional fundraising fees (Part IX, column (A), line 11e) 0.
b		Total fundraising expenses (Part IX, column (D), line 25) 1,655,556.
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 4,146,618.
18		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 36,088,293.
19		Revenue less expenses. Subtract line 18 from line 12 1,382,123.
Net Assets or Fund Balances	20	Total assets (Part X, line 16) 347,152,846.
	21	Total liabilities (Part X, line 26) 44,641,333.
	22	Net assets or fund balances. Subtract line 21 from line 20 302,511,513.

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.

Sign Here	Signature of officer		Date		
	JOYCE DARLING, VP-FINANCE & ADMINISTRATION				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed	PTIN
	KATHERINE L. SILICATO, CP				P00543107
Firm's name	GUNNIP & COMPANY LLP		Firm's EIN		51-0076769
	Firm's address		2751 CENTERVILLE RD., STE. 300		WILMINGTON, DE 19808
		Phone no.		302-225-5000	

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

☒ Yes No

LHA For Paperwork Reduction Act Notice, see the separate instructions.

332001 12-21-23

Form 990 (2023)

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Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☐**1** Briefly describe the organization's mission:

OUR MISSION IS TO STRENGTHEN DELAWARE BY MAXIMIZING COMMUNITY-BASED PHILANTHROPY.

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 ☒ 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 ☒ 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 \$ 49,156,888. including grants of \$ 44,890,393.) (Revenue \$ 1,684,605.)

IN THE FISCAL YEAR ENDED JUNE 30, 2024, THE DELAWARE COMMUNITY FOUNDATION INVESTED IN BUILDING OPPORTUNITY THROUGHOUT THE STATE BY AWARDED OVER \$52.7 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 \$679,942 IN SCHOLARSHIPS TO 191 STUDENTS, \$369 THOUSAND IN DIRECT GRANTS TO DOZENS OF DELAWARE NONPROFIT ORGANIZATIONS STATEWIDE THROUGH OUR COMMUNITY IMPACT GRANTS PROGRAM, AND \$758,850 IN DIRECT GRANTS STATEWIDE THROUGH HEALTHY COMMUNITIES DELAWARE'S HEALTHY EQUITY GRANTS PROGRAM AND COMMUNITY PARTNER GRANTS.

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 49,156,888.

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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>	1 X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	2 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>	3	X
4 Section 501(c)(3) organizations. 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>	4 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 Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5	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>	6 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>	7	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>	8	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>	9	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>	10 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>	11a 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>	11b 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>	11c	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>	11d	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>	11e 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>	11f	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>	12a	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>	12b X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	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>	14b	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>	15	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>	16	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. See instructions</i>	17 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>	18	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>	19	X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a	X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
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>	21 X	

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Part IV Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a 52	
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b 0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c X	

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

		Yes	No
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 40		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>	3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		X
d If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		X
9 Sponsoring organizations maintaining donor advised funds.			
a Did the sponsoring organization make any taxable distributions under section 4966?	9a		X
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		X
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12	10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders	11a		
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b		
c Enter the amount of reserves on hand	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b		
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? <i>If "Yes," see the instructions and file Form 4720, Schedule N.</i>	15		X
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? <i>If "Yes," complete Form 4720, Schedule O.</i>	16		X
17 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? <i>If "Yes," complete Form 6069.</i>	17		

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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**

	1a	1b	22	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year			22		
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.					
b Enter the number of voting members included on line 1a, above, who are independent			22		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?			2		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?			3		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			4		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?			5		X
6 Did the organization have members or stockholders?			6	X	
7a 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?			7a	X	
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?			7b		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:					
a The governing body?			8a	X	
b Each committee with authority to act on behalf of the governing body?			8b	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		X

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

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

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 ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

☐ Check this box if neither the organization 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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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				311,791.	0.	67,745.
(2) SARAH HENCH EXECUTIVE VP STRATEGIC ENGAGEMENT	35.00				X			158,750.	0.	29,084.
(3) JOYCE DARLING VP FINANCE AND ADMINISTRATION	35.00				X			142,144.	0.	38,797.
(4) ASHLEY R. ALTSCHULER, ESQ. BOARD MEMBER	2.00	X						0.	0.	0.
(5) WILLIAM C. DUGDALE IMMEDIATE PAST CHAIRPERSON	2.00	X		X				0.	0.	0.
(6) DREW N. FENNEL CHAIRPERSON	2.00	X		X				0.	0.	0.
(7) KELLY E. FIRMENT BOARD MEMBER	2.00	X						0.	0.	0.
(8) LOSSIE FREEMAN BOARD MEMBER	2.00	X						0.	0.	0.
(9) CHANTA HOWARD-WILKINSON VICE CHAIRPERSON	2.00	X		X				0.	0.	0.
(10) PETER S. KENNEDY TREASURER	2.00	X		X				0.	0.	0.
(11) HON. TAMIKA MONTGOMERY-REEVES BOARD MEMBER	2.00	X						0.	0.	0.
(12) LOUISA PHILLIPS BOARD MEMBER	2.00	X						0.	0.	0.
(13) VITA PICKRUM, ED. D, CFRE BOARD MEMBER	2.00	X						0.	0.	0.
(14) HON. GREGORY M. SLEET (RET.) BOARD MEMBER	2.00	X						0.	0.	0.
(15) CINDY L. SZABO, ESQ. CORP. SECRETARY	2.00	X		X				0.	0.	0.
(16) MICHELLE A. TAYLOR BOARD MEMBER	2.00	X						0.	0.	0.
(17) MARIA LOPEZ WAITE BOARD MEMBER	2.00	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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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) KIM WILLSON BOARD MEMBER	2.00	X						0.	0.	0.
(19) PAM CORNFORTH BOARD MEMBER	2.00	X						0.	0.	0.
(20) DAN CRUCE, JR BOARD MEMBER	2.00	X						0.	0.	0.
(21) FRANCES GAUTHIER BOARD MEMBER	2.00	X						0.	0.	0.
(22) MARIA CALAGIONE BOARD MEMBER	2.00	X						0.	0.	0.
(23) LYNN EVANS BOARD MEMBER	2.00	X						0.	0.	0.
(24) CHRISSI RAWAK BOARD MEMBER	2.00	X						0.	0.	0.
(25) FRANCES GAUTHIER, ESQ BOARD MEMBER	2.00	X						0.	0.	0.
1b Subtotal								612,685.	0.	135,626.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								612,685.	0.	135,626.

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

3

- 3** Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*
- 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? *If "Yes," complete Schedule J for such individual*
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*

	Yes	No
3		X
4	X	
5		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	1,044,118.
COMMUNITY COUNSELLING SERVICES LLC, 527 MADISON AVENUE 5TH FLOOR, NEW YORK, NY	PROFESSIONAL SERVICES	363,502.
EDUCATION FIRST CONSULTING PO BOX 22871, SEATTLE, WA 98122	PROGRAM SERVICES	270,281.
CHRISTINE A CANNON INC 131 WYETH WAY, HOCKESSIN, DE 19707	PROGRAM SERVICES	180,000.
VOLUME SERVICES INC. 815 JUSTISON STREET, WILMINGTON, DE 19801	PROGRAM SERVICES	164,837.

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

5

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Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	6,492,211.				
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	8,480,948.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 602,647.				
	h Total. Add lines 1a-1f						
Program Service Revenue	2 a PROGRAM INCOME	Business Code 900099		779,440.	779,440.		
	b ADMINISTRATIVE FEE INCOME	561000		424,744.	424,744.		
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			1,204,184.			
	Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			7,364,238.		
4 Income from investment of tax-exempt bond proceeds							
5 Royalties							
6 a Gross rents		6a	(i) Real (ii) Personal				
b Less: rental expenses ...		6b					
c Rental income or (loss)		6c					
d Net rental income or (loss)							
7 a Gross amount from sales of assets other than inventory		7a	(i) Securities (ii) Other				
b Less: cost or other basis and sales expenses		7b	55,739,964.				
c Gain or (loss)		7c	47,568,996.				
d Net gain or (loss)			8,170,968.				
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18		8a					
b Less: direct expenses		8b					
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19		9a					
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a EVENT INCOME	Business Code 900099		352,170.	352,170.		
	b OTHER INCOME	900099		78,839.	78,839.		
	c LOAN INTEREST INCOME	900099		49,412.	49,412.		
	d All other revenue						
	e Total. Add lines 11a-11d			480,421.			
	12 Total revenue. See instructions			32,192,970.	1,684,605.	0.	15535206.

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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 ...	44,210,451.	44,210,451.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	679,942.	679,942.		
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	476,534.	162,500.	157,017.	157,017.
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	1,614,870.	465,538.	618,837.	530,495.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	116,109.	34,867.	43,073.	38,169.
9 Other employee benefits	519,269.	155,934.	192,635.	170,700.
10 Payroll taxes	150,522.	45,201.	55,840.	49,481.
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	1,288,840.		1,288,840.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	2,397,751.	1,918,593.	73,229.	405,929.
12 Advertising and promotion	243,215.	43,112.	124,849.	75,254.
13 Office expenses	155,700.	48,411.	84,885.	22,404.
14 Information technology	186,225.	749.	178,204.	7,272.
15 Royalties				
16 Occupancy	142,506.	15,697.	116,745.	10,064.
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	472,218.	375,810.	35,893.	60,515.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	31,896.		31,896.	
23 Insurance	38,831.	3,591.	34,751.	489.
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 SUBRECIPIENT AWARDS	905,324.	905,324.		
b OTHER	219,669.	91,312.	590.	127,767.
c GIFT ANNUITY DISTRIBUTI	-144.	-144.		
d _____				
e All other expenses _____				
25 Total functional expenses. Add lines 1 through 24e	53,849,728.	49,156,888.	3,037,284.	1,655,556.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

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Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments	18,980,003.	2	9,723,226.
	3 Pledges and grants receivable, net	286,211.	3	1,865,897.
	4 Accounts receivable, net	5,136.	4	5,136.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net	1,221,134.	7	1,398,290.
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,443,065.		
	b Less: accumulated depreciation	10b 438,764.		
		86,611.	10c	1,004,301.
	11 Investments - publicly traded securities	289,229,184.	11	291,289,174.
	12 Investments - other securities. See Part IV, line 11	37,231,795.	12	40,745,213.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
15 Other assets. See Part IV, line 11	112,772.	15	115,932.	
16 Total assets. Add lines 1 through 15 (must equal line 33)	347,152,846.	16	346,147,169.	
Liabilities	17 Accounts payable and accrued expenses	287,635.	17	277,004.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 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		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	44,353,698.	25	45,548,705.
	26 Total liabilities. Add lines 17 through 25	44,641,333.	26	45,825,709.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	302,495,218.	27	298,473,586.
	28 Net assets with donor restrictions	16,295.	28	1,847,874.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	302,511,513.	32	300,321,460.
	33 Total liabilities and net assets/fund balances	347,152,846.	33	346,147,169.

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Part XI Reconciliation of Net AssetsCheck 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	32,192,970.
2	Total expenses (must equal Part IX, column (A), line 25)	2	53,849,728.
3	Revenue less expenses. Subtract line 2 from line 1	3	-21,656,758.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	302,511,513.
5	Net unrealized gains (losses) on investments	5	19,466,705.
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	300,321,460.

Part XII Financial Statements and ReportingCheck 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 on 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	2a	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	2b	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.	2c	X
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? _____	3a	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 _____	3b	X

Form 990 (2023)

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

Open to Public Inspection

22-2804785

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).)

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 on 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).

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		
Total						

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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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	22862448.	41112270.	23415854.	15750493.	8480948.	111622013
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	22862448.	41112270.	23415854.	15750493.	8480948.	111622013
5 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)						36329901.
6 Public support. Subtract line 5 from line 4.						75292112.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4	22862448.	41112270.	23415854.	15750493.	8480948.	111622013
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	4629129.	4208040.	6620855.	7184531.	7364238.	30006793.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						141628806
12 Gross receipts from related activities, etc. (see instructions)					12	
13 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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f))	14	53.16	%
15 Public support percentage from 2022 Schedule A, Part II, line 14	15	51.60	%
16a 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input checked="" type="checkbox"/>
b 33 1/3% support test - 2022. 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 stop here. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2023. 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 stop here. 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 10% -facts-and-circumstances test - 2022. 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 stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
18 Private foundation. 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"/>

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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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
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						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (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

15 Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2022 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2022 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2023. 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 - 2022. 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 ☐

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Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 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>		
2 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>		
3a 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 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>		
c 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>		
4a 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 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>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <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>		
5a 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 Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
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>		

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Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

	Yes	No
1 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? 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.		
1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 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)? 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).		
1		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the 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?		
1		
2 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? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
2		
3 By reason of the relationship described on 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? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		
3		

Section E. Type III Functionally Integrated Supporting Organizations

	Yes	No
1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
2 Activities Test. Answer lines 2a and 2b below.		
a 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? 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.		
2a		
b Did the activities described on 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? 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.		
2b		
3 Parent of Supported Organizations. Answer lines 3a and 3b below.		
a 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? If "Yes" or "No" provide details in Part VI .		
3a		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		
3b		

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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.

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

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
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	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount 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	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			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	Distributable Amount. 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).		

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

Section D - Distributions		Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	1	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4 Amounts paid to acquire exempt-use assets	4	
5 Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5	
6 Other distributions (<i>describe in Part VI</i>). See instructions.	6	
7 Total annual distributions. Add lines 1 through 6.	7	
8 Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8	
9 Distributable amount for 2023 from Section C, line 6	9	
10 Line 8 amount divided by line 9 amount	10	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1 Distributable amount for 2023 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2023 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2023			
a From 2018			
b From 2019			
c From 2020			
d From 2021			
e From 2022			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2023 distributable amount			
i Carryover from 2018 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2023 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2023 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2024. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2019			
b Excess from 2020			
c Excess from 2021			
d Excess from 2022			
e Excess from 2023			

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.)

Schedule A**Identification of Excess Contributions
Included on Part II, Line 5****** Do Not File ********* Not Open to Public Inspection *****

Contributor's Name	Total Contributions	Excess Contributions
MT CUBA	5,000,000.	2,167,424.
PAUL H. BOERGER	25,086,135.	22,253,559.
BCBS/HIGHMARK	10,219,607.	7,387,031.
EXELON CORPORATION	4,000,000.	1,167,424.
STATE OF DELAWARE	4,019,615.	1,187,039.
VERINO PETTINARO REVOCABLE TRUST	5,000,000.	2,167,424.
Total Excess Contributions to Schedule A, Part II, Line 5		36,329,901.

SCHEDULE C
(Form 990)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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 for instructions and the latest information.

COPY
OMB No. 1545-0047

2023

**Open to Public
Inspection**

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

DELAWARE COMMUNITY FOUNDATION, INC

Employer identification number

22-2804785

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-.

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

Schedule C (Form 990) 2023

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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.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)			
b Total lobbying expenditures to influence a legislative body (direct lobbying)			
c Total lobbying expenditures (add lines 1a and 1b)			
d Other exempt purpose expenditures			
e Total exempt purpose expenditures (add lines 1c and 1d)			
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.			
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.		
g Grassroots nontaxable amount (enter 25% of line 1f)			
h Subtract line 1g from line 1a. If zero or less, enter -0-			
i Subtract line 1f from line 1c. If zero or less, enter -0-			
j 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?			

☐ Yes ☐ 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.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990) 2023

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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)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
1 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:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X	
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?	X		7,500.
j Total. Add lines 1c through 1i			7,500.
2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d 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
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 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."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 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 expenditures next year?	4	
5 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.



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.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	218	803
2 Aggregate value of contributions to (during year)	3,303,391.	5,177,533.
3 Aggregate value of grants from (during year)	27,942,185.	15,031,252.
4 Aggregate value at end of year	118,615,036.	181,706,424.
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

Part II

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (for example, recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included on line 2a	2c
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year

4 Number of states where property subject to conservation easement is located

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.

(i) Revenue included on Form 990, Part VIII, line 1 \$

(ii) Assets included in Form 990, Part X \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 \$

b Assets included in Form 990, Part X \$

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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

d ☐ Loan or exchange program

b ☐ Scholarly research

e ☐ Other _____

c ☐ Preservation for future generations

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 in 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	1,645,980.	1,492,455.	1,749,877.	1,505,670.	1,639,673.
b Contributions	1,736,667.	216,735.			
c Net investment earnings, gains, and losses	228,002.	138,793.	-186,934.	314,605.	64,801.
d Grants or scholarships					
e Other expenditures for facilities and programs	506,134.	202,003.	70,488.	70,398.	198,804.
f Administrative expenses					
g End of year balance	3,104,515.	1,645,980.	1,492,455.	1,749,877.	1,505,670.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment 40.5000 %

b Permanent endowment 58.7000 %

c Term endowment .8000 %

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:

(i) Unrelated organizations? _____

(ii) Related organizations? _____

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? _____

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		261,000.		261,000.
b Buildings		688,585.	771.	687,814.
c Leasehold improvements				
d Equipment		493,480.	437,993.	55,487.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				1,004,301.

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	26,182,074.	END-OF-YEAR MARKET VALUE
(C) ENERGY DEBT LP	684,104.	END-OF-YEAR MARKET VALUE
(D) REIT - CORE PROPERTY	7,401,264.	END-OF-YEAR MARKET VALUE
(E) GLOBAL PRIVATE ASSETS, LP	6,477,771.	END-OF-YEAR MARKET VALUE
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))	40,745,213.	

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)		
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))		

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)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	

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	257,526.
(3) NON PROFIT ENDOWMENTS	45,291,179.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	45,548,705.

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 ☐

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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.

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

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.

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

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 FUNDS ESTABLISHED TO HELP SUPPORT THE FOUNDATION'S FUTURE
 INITIATIVES AND OPERATIONS.

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

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OMF No. 15/5-0047

2023

Open to Public Inspection

Name of the organization

DELAWARE COMMUNITY FOUNDATION, INC

Employer identification number

22-2804785

Part I

Fundraising Activities.

Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a ☐ Mail solicitations
b ☐ Internet and email solicitations
c ☐ Phone solicitations
d ☒ In-person solicitations
e ☐ Solicitation of non-government grants
f ☐ Solicitation of government grants
g ☐ Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☒ Yes☐ No

- b** If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
COMMUNITY COUNSELLING SERVICES LLC - 527 MADISON	CAMPAIGN STRATEGY AND DATABASE CONSULTING		X	0.	363,502.	0.
Total					363,502.	

- 3** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		(event type)	(event type)	(total number)	
Revenue	1 Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d)				
	11 Net income summary. Subtract line 10 from line 3, column (d)				

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
1 Gross revenue				
Direct Expenses	2 Cash prizes			
	3 Noncash prizes			
	4 Rent/facility costs			
	5 Other direct expenses			
6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7 Direct expense summary. Add lines 2 through 5 in column (d)				
8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: _____

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- 11** Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No
- 12** Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13** Indicate the percentage of gaming activity conducted in:
- | | | |
|--------------------------------------|------------|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name _____

Address _____

- 15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization \$ _____ and the amount of gaming revenue retained by the third party \$ _____

c If "Yes," enter name and address of the third party:

Name _____

Address _____

- 16** Gaming manager information:

Name _____

Gaming manager compensation \$ _____

Description of services provided _____

☐ Director/officer
☐ Employee
☐ Independent contractor

- 17** Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Part IV	Supplemental Information <i>(continued)</i>
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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 for the latest information.

OMB No. 1545-0047

2023

**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.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
DELAWARE COLLEGE SCHOLARS INC PO BOX 392, WILMINGTON, DE 19899	82-4608572	501 (C) (3)	5,300.	0.			UNRESTRICTED SUPPORT
THE AMERICAN UNIVERSITY OF ROME 1860 19TH ST NW # 409, WASHINGTON, DC 20009	23-7110060	501 (C) (3)	5,500.	0.			UNRESTRICTED SUPPORT; STUDENT FIELD TRIP FUND
WILLIAMS COLLEGE 880 MAIN STREET, WILLIAMSTOWN, MA 01267	04-2104847	501 (C) (3)	5,500.	0.			UNRESTRICTED SUPPORT, SCHOLARSHIPS
SHEPHERDS OFFICE INC ATTN: JIM MARTIN, 408 N. BEDFORD STR GEORGETOWN, DE 19947	83-4193754	501 (C) (3)	5,500.	0.			UNRESTRICTED SUPPORT
GIRL SCOUTS OF THE CHESAPEAKE BAY COUNCIL INC - 225 OLD BALTIMORE PIKE, - NEWARK, DE 19702	51-0064337	501 (C) (3)	5,500.	0.			COMMUNITY INITIATIVES PROGRAM FOR LOW-INCOME GIRLS; UNRESTRICTED SUPPORT
INDEPENDENCE SCHOOL INC 1300 PAPER MILL ROAD, NEWARK, DE 19711	51-0225189	501 (C) (3)	5,500.	0.			SUPPORT FOR THE PURCHASE OF MUSIC STAND CART, PODIUM AND GUITAR AND DRUM SET; SCHOLARSHIPS

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **367**

3 Enter total number of other organizations listed in the line 1 table **2**

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

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) 2023

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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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PLANNED PARENTHOOD OF DELAWARE, INC. - 625 N SHIPLEY STREET, - WILMINGTON, DE 19801	51-0066725	501 (C) (3)	5,659.	0.			UNRESTRICTED SUPPORT
CANCER SUPPORT COMMUNITY DELAWARE INC - 4810 LANCASTER PIKE, - WILMINGTON, DE 19807	51-0351863	501 (C) (3)	5,725.	0.			UNRESTRICTED SUPPORT
LUZERNE COUNTY HEAD START INC 23 BEEKMAN STREET, WILKES-BARRE, PA 18702	23-2038753	501 (C) (3)	6,000.	0.			UNRESTRICTED SUPPORT, SCHOLARSHIPS
KENNETT LIBRARY P. O. BOX 730 KENNETT SQUARE, PA 19348	23-1547585	501 (C) (3)	6,000.	0.			UNRESTRICTED SUPPORT; SUPPORT FOR BUILDING FUND
SAMARITAN'S PURSE ATTN: AYL A JESEL, PO BOX 3000 BOONE, NC 28607	58-1437002	501 (C) (3)	6,000.	0.			UNRESTRICTED SUPPORT
CONCORD PRESBYTERIAN CHURCH 1800 FAIRFAX BOULEVARD, WILMINGTON, DE 19803	51-6001225	501 (C) (3)	6,000.	0.			UNRESTRICTED SUPPORT
BOSTON COLLEGE 140 COMMONWEALTH AVENUE, LYONS HALL CHESTNUT HILL, MA 02467	04-2103545	501 (C) (3)	6,000.	0.			SCHOLARSHIPS
NEWARK UNITED METHODIST CHURCH 69 EAST MAIN STREET, NEWARK, DE 19711	51-0070175	501 (C) (3)	6,230.	0.			UNRESTRICTED SUPPORT
LITTLE SCHOOL AT KID'S COTTAGE, INC. - 105 MONT BLANC BLVD - DOVER, DE 19904	11-1111111	CORPORATION	6,500.	0.			SCHOLARSHIPS

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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PRIMEROS PASOS INC P.O. BOX 1636, 20648 SAVANNAH ROAD GEORGETOWN, DE 19947	51-0375288	501 (C) (3)	6,500.	0.			UNRESTRICTED SUPPORT
COKER UNIVERSITY OUTSIDE SCHOLARSHIP OFFICE, 300 E COLLEGE AVENUE - HARTSVILLE, SC 29550	57-0324916	501 (C) (3)	6,500.	0.			SCHOLARSHIPS
MEMORIAL HOSPITAL FOUNDATION, INC. PO BOX 1846, EASTON, MD 21601	52-1282080	501 (C) (3)	6,500.	0.			CAPITAL CAMPAIGN; RESTRICTED SUPPORT FOR THE CAPITAL CAMPAIGN
FIRST UNITARIAN CHURCH 730 HALSTEAD RD., WILMINGTON, DE 19803	51-6000113	501 (C) (3)	6,705.	0.			UNRESTRICTED SUPPORT
NATIVITY PREPARATORY SCHOOL OF WILMINGTON, INC. - 1515 LINDEN STREET, - WILMINGTON, DE 19805	22-3884703	501 (C) (3)	7,000.	0.			UNRESTRICTED SUPPORT; FATHER CURRAN SCHOLARSHIP FUND, INNOVATION/STEAM WEDNESDAYS
HEIDELBERG UNIVERSITY OFFICE OF FINANCIAL AID, 310 E MARKE TIFFIN, OH 44883	34-4482819	501 (C) (3)	7,000.	0.			SCHOLARSHIPS
COLLEGE OF WILLIAM & MARY OUTSIDE SCHOLARSHIPS OFFICE, P.O. BOX 8795 - WILLIAMSBURG, VA 23187-8795	54-6001718	501 (C) (3)	7,000.	0.			SCHOLARSHIPS
STRONG MATURE MINDS, INC. 513 FLORENCE FIELDS LANE, NEW CASTLE, DE 19720	81-4297587	501 (C) (3)	7,000.	0.			UNRESTRICTED SUPPORT
ST. ELIZABETH HIGH SCHOOL 1500 CEDAR STREET, WILMINGTON, DE 19805	53-0196617	501 (C) (3)	7,150.	0.			RESTRICTED SUPPORT FOR TUITION ASSISTANCE FOR CATHOLIC ELEMENTARY SCHOOLS; SUPPORT TO COVER

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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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST JOHNS R C CHURCH 82 POSSUM PARK ROAD, NEWARK, DE 19711	51-0078733	501 (C) (3)	7,150.	0.			RESTRICTED SUPPORT FOR TUITION ASSISTANCE FOR CATHOLIC ELEMENTARY SCHOOLS; SUPPORT FOR THE
MILLVILLE VOLUNTEER FIRE COMPANY INC - 35554 ATLANTIC AVENUE, - MILLVILLE, DE 19967	51-0206209	501 (C) (3)	7,215.	0.			CAPITAL CAMPAIGN
FIRST STATE ANIMAL CENTER AND SPCA INC - 32 SHELTER CIRCLE, - CAMDEN, DE 19934	51-6018851	501 (C) (3)	7,336.	0.			PURCHASE OF NEW GUILLLOTINE DOG DOORS FOR KENNELS; UNRESTRICTED SUPPORT
NATIONAL ASSOCIATION OF BLACK JOURNALISTS - 1100 KNIGHT HALL SUITE 3100, - COLLEGE PARK, MD 20742	52-1266959	501 (C) (3)	7,500.	0.			MONETA SLEET MEMORIAL SCHOLARSHIP; REFUND MONETA SLEET SCHOLARSHIP
ST. JOHNS EPISCOPAL CHURCH 1419 PINE STREET, BOULDER, CO 80302	84-0515197	501 (C) (3)	7,500.	0.			UNRESTRICTED SUPPORT
ST. JOHN'S UNITED METHODIST CHURCH 300 NORTH PINE STREET, SEAFORD, DE 19973	51-0096694	501 (C) (3)	7,500.	0.			UNRESTRICTED SUPPORT
CRESTED BUTTE STATE OF MIND P. O. BOX 2689, CRESTED BUTTE, CO 81224	84-3477504	501 (C) (3)	7,500.	0.			UNRESTRICTED SUPPORT
LONGWOOD GARDENS, INC. ATTN: ACCOUNTING DEPARTMENT, PO BOX KENNETT SQUARE, PA 19348	51-0110625	501 (C) (3)	7,500.	0.			LONGWOOD INNOVATOR; UNRESTRICTED SUPPORT
BRANDYWINE VALLEY SPCA 290 CHURCHMANS ROAD, NEW CASTLE, DE 19720	23-1381030	501 (C) (3)	7,500.	0.			TRAP, NEUTER/SPAY, VACCINATE, AND RELEASE FOR DELAWARE CATS

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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAPE HENLOPEN EDUCATIONAL FOUNDATION - 1270 KINGS HIGHWAY, - LEWES, DE 19958	51-0403370	501 (C) (3)	7,500.	0.			UNRESTRICTED SUPPORT
INDIANA REPERTORY THEATRE, INC. ATTN: ERIC OLSON - INSTITUTIONAL GIVING MANAGER, 140 W. WASHINGTON STREET - I	35-1186290	501 (C) (3)	7,500.	0.			TO SUPPORT THE STUDENT MATINEE PROGRAM
FORGOTTEN CATS, INC. 4023 KENNETT PIKE, SUITE 422, GREENVILLE, DE 19807	20-0691180	501 (C) (3)	7,500.	0.			ADOPTION PREPARATION FOR SUSSEX COUNTY CATS
NORTH TEXAS FOOD BANK 3677 MAPLESHADE LANE, PLANO, TX 75075	75-1785357	501 (C) (3)	7,500.	0.			TO SUPPORT CHILD, SENIOR AND DISASTER RELIEF PROGRAMS IN THE DALLAS/FORT WORTH AREA
CODE 2 COLLEGE ATTN: MATT STEPHENSON - CEO, 19112 LEIGH LANE - PFLUGERVILLE, TX 78660	81-2361556	501 (C) (3)	7,500.	0.			UNRESTRICTED SUPPORT
NEWBERRY COLLEGE 2100 COLLEGE STREET, NEWBERRY, SC 29108	57-0314404	501 (C) (3)	7,500.	0.			SCHOLARSHIPS
GLEANERS FOOD BANK OF INDIANA, INC. - ATTN: BRAD CARLSON, CORPORATE AND COMMUNICATIONS RELATIONS OFFICER, 3737 WALD -	35-1483868	501 (C) (3)	7,600.	0.			TO SUPPORT THE MISSION THE ORGANIZATION OFFERS TO HOOSIER FAMILIES.
CHRIST THE TEACHER CATHOLIC SCHOOL 2451 FRAZER ROAD, NEWARK, DE 19702	27-0008617	501 (C) (3)	7,750.	0.			RESTRICTED SUPPORT FOR TUITION ASSISTANCE FOR CATHOLIC ELEMENTARY SCHOOLS; SUPPORT FOR THE
THE TATNALL SCHOOL 1501 BARLEY MILL ROAD, WILMINGTON, DE 19807	51-0071443	501 (C) (3)	7,800.	0.			SUPPORT FOR THE PURCHASE OF STRINGED INSTRUMENTS FOR MIDDLE AND UPPER SCHOOLS; UNRESTRICTED

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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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MILFORD VETERANS OF FOREIGN WARS ASSOCIATION - 177 VETERANS CIR., - MILFORD, DE 19963	51-0063145	501 (C) (3)	7,873.	0.			RESTRICTED SUPPORT FOR NEEDY POOR IN MILFORD
KENT-SUSSEX INDUSTRIES, INC. 301 N REHOBOTH BLVD, MILFORD, DE 19963-1305	51-0097856	501 (C) (3)	7,873.	0.			RESTRICTED SUPPORT FOR NEEDY POOR IN MILFORD
MILFORD ROTARY CLUB EDUCATIONAL FOUNDATION - ATTN: HIRSCH FUNDS,P. O. BOX 10 - MILFORD, DE 19963	52-6896762	501 (C) (3)	7,873.	0.			RESTRICTED SUPPORT FOR NEEDY POOR IN MILFORD
MILFORD LODGE NO 2316 LOYAL ORDER OF MOOSE - 20142 BEAVER DAM RD., - MILFORD, DE 19963	51-0303521	501 (C) (3)	7,873.	0.			RESTRICTED SUPPORT FOR NEEDY POOR IN MILFORD
MILFORD LIONS CLUB SERVICE FOUNDATION INC - P. O. BOX 25, - MILFORD, DE 19963	51-0365044	501 (C) (3)	7,873.	0.			RESTRICTED SUPPORT FOR NEEDY POOR IN MILFORD
BOARD OF INCORPORATORS OF THE AFRICAN METHODIST EPISCOPAL CHURCH - 204 NORTH REHOBOTH BLVD., - MILFORD, DE 19963	53-0204696	501 (C) (3)	7,873.	0.			RESTRICTED SUPPORT FOR NEEDY POOR IN MILFORD
CHRIST CHURCH CHRISTIANA HUNDRED 505 E. BUCK ROAD,P. O. BOX 3510 WILMINGTON, DE 19807	51-0073395	501 (C) (3)	8,000.	0.			UNRESTRICTED SUPPORT
ELEUTHERIAN MILLS-HAGLEY FOUNDATION INC - PO BOX 3630, - WILMINGTON, DE 19807	51-0070531	501 (C) (3)	8,015.	0.			UNRESTRICTED SUPPORT
REACH RIVERSIDE DEVELOPMENT CORPORATION - 2300 BOWERS ST, - WILMINGTON, DE 19802	82-1401986	501 (C) (3)	8,250.	0.			UNRESTRICTED SUPPORT

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CORNELL UNIVERSITY P.O. BOX 752 ITHACA, NY 14851	15-0532082	501 (C) (3)	8,250.	0.			SCHOLARSHIPS
GIRLS ON THE RUN DELAWARE INC. 615 W. 18TH ST., WILMINGTON, DE 19802	20-2751642	501 (C) (3)	8,500.	0.			UNRESTRICTED SUPPORT
WIDENER UNIVERSITY 4601 CONCORD PIKE, WILMINGTON, DE 19803-0474	23-1386178	501 (C) (3)	9,000.	0.			SCHOLARSHIPS
CARSON SCHOLARS FUND, INC. 305 W. CHESAPEAKE AVENUE, SUITE 310 TOWSON, MD 21204	52-1851346	501 (C) (3)	9,000.	0.			SCHOLARSHIPS
GREENWOOD MENNONITE SCHOOL 12802 MENNONITE SCHOOL ROAD, GREENWOOD, DE 19950	51-0401543	501 (C) (3)	9,010.	0.			OVEN FUND; UNRESTRICTED SUPPORT
EDGEMOOR COMMUNITY CENTER INC BELLEVUE COMMUNITY CENTER, 510 DUNCA WILMINGTON, DE 19809	51-0230538	501 (C) (3)	9,200.	0.			EMPOWERING EDGEMOOR; FY24 CAPITAL GRANT FUNDING UPGRADE AND RENOVATE 5 CLASSROOMS
AMERICAN CANCER SOCIETY INC. 375 EAST 100 SOUTH, SALT LAKE CITY, UT 84111	13-1788491	501 (C) (3)	9,342.	0.			UNRESTRICTED SUPPORT
WILMINGTON FRIENDS SCHOOL INC 101 SCHOOL ROAD, WILMINGTON, DE 19803	51-0064310	501 (C) (3)	9,400.	0.			UNRESTRICTED SUPPORT
SERVAM GIRLS ACADEMY, INC. 900 NORTH WASHINGTON STREET, WILMINGTON, DE 19801	26-0792594	501 (C) (3)	9,500.	0.			SCHOLARSHIPS; SERVAM'S INSPIRING MINDS CAMPAIGN; SUPPORT FOR COSTS ASSOCIATED WITH (2)

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UNITED WAY OF DELAWARE, INC. 625 NORTH ORANGE STREET, WILMINGTON, DE 19801	51-0073399	501 (C) (3)	9,500.	0.			COLLEGE AND CAREER READINESS: LATINO UNIDOS STUDENT SUMMIT; SPONSORSHIP FOR THE 3RD
ACTS LEGACY FOUNDATION, INC. 420 DELAWARE DRIVE, FORT WASHINGTON, PA 19034	91-2161987	501 (C) (3)	9,557.	0.			RESTRICTED SUPPORT FOR PENINSULA UNITED METHODIST CHURCH; RESTRICTED TO COKESBURY
TEEN WAREHOUSE, INC. 1121 THATCHER STREET, WILMINGTON, DE 19802	82-3855379	501 (C) (3)	9,600.	0.			UNRESTRICTED SUPPORT
SURVIVORS OF ABUSE IN RECOVERY, INC. - 405 FOULK ROAD, - WILMINGTON, DE 19803	51-0345109	501 (C) (3)	9,750.	0.			MENTAL HEALTH SERVICES FOR SURVIVORS OF SEXUAL ABUSE; SPECIALIZED TRAUMA TRAINING IN KENT COUNTY;
SECOND HELPINGS ATTN: ALISON SCHUMACHER - DONOR ENGAGEMENT DIRECTOR, 1121 SOUTHEASTERN AVENUE	35-1484281	501 (C) (3)	10,000.	0.			TO SUPPORT THE CULINARY JOB TRAINING PROGRAM WITH A CLASS AT THE TONIC BALL.
FOUNDING FISH NETWORK INC 78 1ST AVE FL 2, ATLANTIC HIGHLANDS, NJ 07716	86-2609392	501 (C) (3)	10,000.	0.			UNRESTRICTED SUPPORT
THEODORE ROOSEVELT CONSERVATION PARTNERSHIP, INC. - 529 14TH STREET, SUITE 500, - WASHINGTON, DC 20045	04-3706385	501 (C) (3)	10,000.	0.			FORAGE FISH BUDGET WITH FFN
EAST SIDE COMMUNITY LEARNING CENTER FOUNDATION - 3000 N CLAYMONT ST, - WILMINGTON, DE 19802-2807	20-4215109	501 (C) (3)	10,000.	0.			UNRESTRICTED SUPPORT
CARMEL YOUTH ASSISTANCE INC ATTN: MELISSA YARGER - EARLY INTERVENTION ADVOCATE, 515 E. MAIN STREET, SUITE	81-0717306	501 (C) (3)	10,000.	0.			FUNDING TO OFFSET THE COST OF TRANSPORTATION NEEDS FOR TUTORING AT-RISK STUDENTS; TO

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MONMOUTH UNIVERSITY INC OFFICE OF THE BURSAR, 400 CEDAR AVENUE - WEST LONG BRANCH, NJ 07764	21-0634584	501 (C) (3)	10,000.	0.			SCHOLARSHIPS
ESF DREAM CAMP FOUNDATION 750 E. HAVERFORD ROAD, BRYN MAWR, PA 19010	23-3045020	501 (C) (3)	10,000.	0.			UNRESTRICTED SUPPORT
LORD BALTIMORE LIONS CHARITIES INC. - P. O. BOX 525, - OCEAN VIEW, DE 19970	51-0366329	501 (C) (3)	10,000.	0.			UNRESTRICTED SUPPORT
THE ISLAMIC SOCIETY OF DELAWARE 28 SALEM CHURCH ROAD, NEWARK, DE 19713	51-0202776	501 (C) (3)	10,000.	0.			RESTRICTED SUPPORT FOR ISD MOSQUE EXPENSES AND ISLAMIC ACADEMY SCHOLARSHIPS
DELAWARE ALLIANCE FOR NONPROFIT ADVANCEMENT - 100 WEST 10TH ST., SUITE 1012, - WILMINGTON, DE 19801	22-2792474	501 (C) (3)	10,000.	0.			SUPPORT FOR LEADERSHIP TRAINING PROGRAM; SUPPORT FOR PARTICIPATION OF 10 CANDIDATES FROM DELAWARE
INWARD BOUND MINDFULNESS EDUCATION INC. - 878 WASHINGTON STREET, UNIT 1119 - ATTLEBORO, MA 02703	27-3029390	501 (C) (3)	10,000.	0.			SUMMER BOUND CAMPAIGN
WILMINGTON DELAWARE AREA ROTARY CLUBS COMMUNITY FUND - 1104 PHILADELPHIA PIKE, - WILMINGTON, DE 19809	27-0070014	501 (C) (3)	10,000.	0.			FY24 CAPITAL GRANT FUNDING_NINJA WARRIOR PARK
RED CLAY EDUCATION FOUNDATION 3 SCARLETT COURT, HOCKESSIN, DE 19707	20-3453422	501 (C) (3)	10,000.	0.			ESL PROGRAM FOR PARENTS OF DICKINSON STUDENTS IN NEW CASTLE COUNTY
MAINE HISTORICAL SOCIETY 489 CONGRESS STREET, SUITE 2 PORTLAND, ME 04102-3643	01-0211530	501 (C) (3)	10,000.	0.			MAINE MUSIC EXHIBITION AND EDUCATIONAL INITIATIVE

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FAMILY COUNSELING CENTER OF ST. PAULS INC - 301 N. VAN BUREN ST, - WILMINGTON, DE 19805	27-3361236	501 (C) (3)	10,000.	0.			ADDRESSING THE GAP IN BILINGUAL, TRAUMA-INFORMED BEHAVIORAL HEALTHCARE IN
DOVE POINTE INC PO BOX 1610, SALISBURY, MD 21802	52-0884222	501 (C) (3)	10,000.	0.			UNRESTRICTED SUPPORT
FREEDOM CENTER FOR INDEPENDENT LIVING - 400 NORTH BROAD STREET, - MIDDLETOWN, DE 19709	51-0413247	501 (C) (3)	10,000.	0.			FY24 CAPITAL GRANT FUNDING OFFICE RENOVATION FOR ACCESSIBILITY
ST. JUDE CHILDRENS RESEARCH HOSPITAL - 501 ST. JUDE PLACE, - MEMPHIS, TN 38105	62-0646012	501 (C) (3)	10,250.	0.			SUPPORT FOR 2023 ST. JUDE MEMPHIS MARATHON WEEKEND; UNRESTRICTED SUPPORT
SEWELL C. BIGGS TRUST 12-29-89 ATTN: SANDRA JAMES, 406 FEDERAL STREET, P. O. BOX 711 - DOVER, DE 19901	51-6171556	501 (C) (3)	10,250.	0.			SPANISH LANGUAGE ART EDUCATION PROGRAM (KENT COUNTY); UNRESTRICTED SUPPORT
DELAWARE COLLEGE OF ART AND DESIGN ATTN: JEAN DAHLGREN, PRESIDENT, 600 NORTH MARKET STREET - WILMINGTON, DE 1980	52-2027415	501 (C) (3)	10,370.	0.			SCHOLARSHIPS; SUPPORT FOR FINANCIAL AID FOR STUDENTS; UNRESTRICTED SUPPORT
SOJOURNERS PLACE, INC. 2901 NORTHEAST BOULEVARD, WILMINGTON, DE 19802	51-0324770	501 (C) (3)	10,500.	0.			UNRESTRICTED SUPPORT
BIG BROTHERS BIG SISTERS OF DELAWARE INC. - 1001 S BRADFORD ST, - DOVER, DE 19904	51-6018399	501 (C) (3)	10,520.	0.			FY24 CAPITAL GRANT FUNDING FENCING FOR YOUTH ENRICHMENT CENTER; UNRESTRICTED SUPPORT
SHOES THAT FIT 1420 N. CLAREMONT BOULEVARD, SUITE 2 CLAREMONT, CA 91711	95-4425565	501 (C) (3)	10,750.	0.			FALL 2023 BACK TO SCHOOL PROGRAM; RESTRICTED TO SUPPORT DELAWARE

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UNITED WAY OF SOUTHERN CHESTER COUNTY - 106 WEST STATE STREET, - KENNETT SQUARE, PA 19348	23-1260899	501 (C) (3)	11,000.	0.			UNRESTRICTED SUPPORT; GRANT ALLOCATIONS
LEWES PUBLIC LIBRARY, INC. 111 ADAMS AVENUE, LEWES, DE 19958	51-0350650	501 (C) (3)	11,000.	0.			LPL PAVILION STAGE; UNRESTRICTED SUPPORT
GLOBAL CELEBRATION PO BOX 535337, GRAND PRAIRIE, TX 75053	91-1341558	501 (C) (3)	11,000.	0.			UNRESTRICTED SUPPORT
HERO LABRADORS HERO LABRADORS 495 PRIVATE ROAD 401 DECATUR, TX 76234	81-4705687	501 (C) (3)	11,000.	0.			UNRESTRICTED SUPPORT
THE ROTARY FOUNDATION OF ROTARY INTERNATIONAL - 14280 COLLECTIONS CENTER DRIVE, - CHICAGO, IL 60693	36-3245072	501 (C) (3)	11,015.	0.			ENDOWMENT; RESTRICTED SUPPORT TO POLIO PLUS (GEORGETOWN MILLSBORO); RESTRICTED TO SUPPORT
COMMUNITY LEGAL AID SOCIETY, INC 100 W. 10TH ST., SUITE 801, WILMINGTON, DE 19801	51-6000158	501 (C) (3)	11,250.	0.			ARSHT FELLOWSHIP; RESTRICTED TO SUPPORT COMBINED CAMPAIGN FOR JUSTICE; UNRESTRICTED
JOSHUA M. FREEMAN FOUNDATION 31255 AMERICANA PARKWAY, SELBYVILLE, DE 19975	20-8592383	501 (C) (3)	11,500.	0.			UNRESTRICTED SUPPORT
WILMINGTON HEAD START INC 100 W. 10TH ST., SUITE 1016, WILMINGTON, DE 19801	51-0276298	501 (C) (3)	11,738.	0.			SUPPORT FOR HOME LIBRARIES, CLASSROOM MATERIALS
NEW CASTLE COUNTY HEAD START INC 256 CHAPMAN RD., SUITE 103 NEWARK, DE 19702-5417	51-0191916	501 (C) (3)	11,738.	0.			SUPPORT FOR MUSIC AND LITERATURE IN CLASSROOMS

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COMMUNITY COLLABORATION OF DELAWARE, INC. - 621 DELAWARE STREET, - NEW CASTLE, DE 19720-5073	84-3528579	501 (C) (3)	12,000.	0.			CAPITAL CAMPAIGN; FY24 CAPITAL GRANT FUNDING-PAINTING AND NEW FLOORING IN SMALLWOOD
KIM AND EVANS FAMILY FOUNDATION INC - 123 VILLAGE DRIVE, - SEAFORD, DE 19973	82-3857830	501 (C) (3)	12,000.	0.			PRESCRIPTION DRUG FUND AND MOBILE MAMMOGRAM PROGRAMS; UNRESTRICTED SUPPORT
GREEN BERET PROJECT 494 FAWN HAVEN WALK, DOVER, DE 19901	82-1215032	501 (C) (3)	12,000.	0.			COLOR YOUR WORLD ART CHALLENGE; EQUIPPING YOUTH FOR SUCCESS; KEEP IT MOVING INITIATIVE
PHOENIX FAMILY RESOURCES 8 TAMAR COURT, BEAR, DE 19701	92-1116377	501 (C) (3)	12,000.	0.			UNRESTRICTED SUPPORT
CAB CALLOWAY SCHOOL FUND PO BOX 4642, WILMINGTON, DE 19807	20-0581573	501 (C) (3)	12,118.	0.			SCHOLARSHIPS
READING ASSIST INSTITUTE ATTN: JUDITH GRAHAM KANE, 100 W. 10TH ST., SUITE 910 - WILMINGTON, DE 19801	51-0317415	501 (C) (3)	12,238.	0.			SUPPORT FOR TUTORING PROGRAMS; UNRESTRICTED SUPPORT
MID-ATLANTIC ENVIRONMENTAL LAW CENTER INC - 4601 CONCORD PIKE, - WILMINGTON, DE 19803	51-0394016	501 (C) (3)	12,437.	0.			SUPPORT FOR THE STUDY, RESEARCH, EDUCATION, COUNSELING, AND LITIGATION, IN
PLANNED PARENTHOOD SOUTHEASTERN PENNSYLVANIA - 1144 LOCUST STREET, - PHILADELPHIA, PA 19107	23-1352509	501 (C) (3)	12,500.	0.			UNRESTRICTED SUPPORT
CANINE PARTNERS FOR LIFE P.O. BOX 170, COCHRANVILLE, PA 19330-0170	23-2580658	501 (C) (3)	13,254.	0.			UNRESTRICTED SUPPORT, TEAM TRAINING FOR FUTURE PARTNERSHIPS

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ROBY LEIPSIC UNITED METHODIST CHURCH - 245 MAIN STREET, - LEIPSIC, DE 19901	51-0411733	501 (C) (3)	13,459.	0.			SUPPORT ROBY UNITED METHODIST CHURCH'S (LEIPSIC) HOME REPAIR PROGRAM
DELAWARE BOTANIC GARDENS, INC. P.O. BOX 1390, OCEAN VIEW, DE 19970	32-0371538	501 (C) (3)	13,500.	0.			BACKLESS BENCH PLACED IN THE WEST WOODLAND PATHWAYS; CHALLENGE MATCH; TO SUPPORT THE
SOUTHERN DELAWARE THERAPEUTIC AND RECREATIONAL HORSEBACK RIDING, INC. - P.O. BOX 219, - NASSAU, DE 19969	52-2047294	501 (C) (3)	13,500.	0.			ADAPTIVE EQUIPMENT PURCHASES AND PROGRAM ENHANCEMENT; EQUIPMENTORS FOUNDATIONAL TRAINING
DELAWARE NATURE SOCIETY, INC. P.O. BOX 700, HOCKESSIN, DE 19707-0700	51-6018321	501 (C) (3)	14,240.	0.			SUPPORT TO THE DUPONT ENVIRONMENTAL EDUCATION CENTER; UNRESTRICTED SUPPORT
PENNSYLVANIA STATE UNIVERSITY 777 W. HARRISBURG PIKE, W110 MIDDLETOWN, PA 17057	24-6000376	501 (C) (3)	14,500.	0.			ANSARY STUDENT EMERGENCY ASSISTANCE FUND, SCHOLARSHIPS
SECOND CHANCES FARM, LLC 3030 BOWERS STREET, WILMINGTON, DE 19802	84-2979636	501 (C) (3)	14,740.	0.			UNRESTRICTED SUPPORT
FRIENDS OF ANIMALS 777 POST ROAD, SUITE 205 DARIEN, CT 06820	13-6018549	501 (C) (3)	14,985.	0.			UNRESTRICTED SUPPORT; SPAY & NEUTER PROGRAM: ANIMAL WELFARE & AWARENESS IN DELAWARE
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 FUND
EXCEPTIONAL CARE FOR CHILDREN 11 INDEPENDENCE WAY, NEWARK, DE 19713	80-0748765	501 (C) (3)	15,000.	0.			MOBILITY PROGRAM

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MIND & LIFE INSTITUTE 977 SEMINOLE TRL PMB 363, CHARLOTTESVILLE, VA 22901	77-0284767	501 (C) (3)	15,000.	0.			UNRESTRICTED SUPPORT
VOICE OF JUDAH ISRAEL INC PO BOX 8886, FORT WAYNE, IN 46898-8886	46-0888643	501 (C) (3)	15,000.	0.			UNRESTRICTED SUPPORT
LET ME RUN INC ATTN: JULIANE KILCOYNE, PO BOX 12091 CHARLOTTE, NC 28220	26-4656224	501 (C) (3)	15,000.	0.			RESTRICTED TO PROGRAMMING IN SUSSEX COUNTY, DELAWARE
KIDS R FIRST ATTN: CHRISTINE BRADLEY, CEO, PO BOX RESTON, VA 20195	54-1905551	501 (C) (3)	15,000.	0.			SCHOOL SUPPLIES FOR CHILDREN IN NEED (RECEIVING FREE OR REDUCED PRICED MEALS) IN
RONALD MCDONALD HOUSE OF DELAWARE 1901 ROCKLAND ROAD, WILMINGTON, DE 19803-3627	51-0295320	501 (C) (3)	15,500.	0.			HOUSING/SUPPORT SERVICES FOR LOW TO MODERATE INCOME FAMILIES IN KENT COUNTY; UNRESTRICTED
EMBRY-RIDDLE AERONAUTICAL UNIVERSITY - BURSARS OFFICE, ONE AEROSPACE BLVD. - DAYTONA BEACH, FL 32114	59-0936101	501 (C) (3)	16,000.	0.			SCHOLARSHIPS
WHYY INC 150 NORTH SIXTH STREET, PHILADELPHIA, PA 19106	23-1438083	501 (C) (3)	16,295.	0.			UNRESTRICTED SUPPORT
MARINE EDUCATION RESEARCH AND REHABILITATION INSTITUTE INC - 801 PILOTTOWN ROAD, - LEWES, DE 19958	51-0403012	501 (C) (3)	16,500.	0.			UNRESTRICTED SUPPORT
COMMUNITY RESOURCE CENTER INC 37510 OYSTER HOUSE ROAD, REHOBOTH BEACH, DE 19971	46-2948959	501 (C) (3)	16,500.	0.			FY24 CAPITAL GRANT FUNDING RENOVATIONS TO FOOD PANTRY; UNRESTRICTED SUPPORT

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THE ARC OF DELAWARE 2 S. AUGUSTINE STREET, SUITE B WILMINGTON, DE 19804	51-0072149	501 (C) (3)	17,000.	0.			FY24 CAPITAL GRANT FUNDING GROUP HOME RENOVATIONS; UNRESTRICTED SUPPORT
UNITED WAY OF WYOMING VALLEY 100 N. PENNSYLVANIA AVE., 2ND FLOOR WILKES-BARRE, PA 18701	24-0831490	501 (C) (3)	17,000.	0.			JUMP START AT LUZERNE COUNTY HEAD START
TETHER FOUNDATION 112 E QUAIL TRAIL, LEWES, DE 19958	84-3603778	501 (C) (3)	17,500.	0.			CAMP ABILITIES 2024; FY24 CAPITAL GRANT FUNDING EQUIPMENT STORAGE
CORNERSTONE COMMUNITY CENTER 55 CHURCH STREET, BRIDGEVILLE, DE 19933	86-3066808	501 (C) (3)	17,500.	0.			TOWN COMPREHENSIVE PLAN UNRESTRICTED SUPPORT, TENNIS ENRICHMENTCOMMUNITY OUTREACH, TEEN WORKFORCE
RODNEY STREET TENNIS ASSOCIATION 101 GARDEN OF EDEN ROAD, SUITE 102 WILMINGTON, DE 19803	01-0652445	501 (C) (3)	17,500.	0.			
MEALS ON WHEELS OF REHOBOTH AND LEWES, INC. - 32409 LEWES GEORGETOWN HIGHWAY, - LEWES, DE 19958	51-0188109	501 (C) (3)	17,875.	0.			FOR MEALS IN LEWES; UNRESTRICTED SUPPORT
ST. MICHAELS SCHOOL AND NURSERY, INC. - 700 NORTH WALNUT STREET, - WILMINGTON, DE 19801	51-0066741	501 (C) (3)	18,000.	0.			CAPITAL CAMPAIGN; FOR THE CAPITOL CAMPAIGN IN HONOR OF BILL DUGDALE FOR THE CREATION OF AN INFANT
CLARENCE FRAIM SENIOR CENTER OF DELAWARE INC. - 669 SOUTH UNION STREET, - WILMINGTON, DE 19805	51-0290329	501 (C) (3)	18,682.	0.			RESTRICTED SUPPORT TO PARKING LOT MAINTENANCE; SUPPORT FOR POOL MAINTENANCE
WAKE FOREST UNIVERSITY ATTN: WAKE FOREST LAW SCHOOL FBO, 1834 WAKE FOREST ROAD - WINSTON-SALEM, NC 2	56-0532138	501 (C) (3)	18,928.	0.			SUPPORT FOR WAKE FOREST SCHOOL OF LAW

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PATHWAYS TO SUCCESS, INC. 4 EAST LAUREL STREET, SUITE 200, BOX GEORGETOWN, DE 19947	76-0811283	501 (C) (3)	19,000.	0.			UNRESTRICTED SUPPORT
FOR ALL SEASONS INC 300 TALBOT STREET, EASTON, MD 21601	52-1496434	501 (C) (3)	19,000.	0.			UNRESTRICTED SUPPORT
ST EDMONDS HOME FOR CHILDREN 320 SOUTH ROBERTS ROAD, ROSEMONT, PA 19010	23-1365399	501 (C) (3)	19,000.	0.			SUPPORT FOR THE ESTABLISHMENT OF COMMUNITY HOUSING FOR CHILDREN AGING OUT
WILMINGTON SENIOR CENTER INC 1901 MARKET STREET, WILMINGTON, DE 19802	51-0078398	501 (C) (3)	19,203.	0.			FY24 CAPITAL GRANT FUNDING-COMMERCIAL KITCHEN RENOVATION; SOCIAL SUPPORT TO PROMOTE
CARLISLE FIRE COMPANY 615 NW FRONT STREET, MILFORD, DE 19963	51-0063613	501 (C) (3)	19,922.	0.			UNRESTRICTED SUPPORT
THE HILL SCHOOL 860 BEECH STREET POTTSTOWN, PA 19464	23-1352647	501 (C) (3)	20,000.	0.			UNRESTRICTED SUPPORT
AUTISM DELAWARE INC 924 OLD HARMONY ROAD, SUITE 201, NEWARK, DE 19713	20-2110190	501 (C) (3)	20,000.	0.			UNRESTRICTED SUPPORT; EXPANSION OF CHALLENGER LEAGUES
50CAN INC P.O. BOX 3594, WILMINGTON, DE 19807	27-3069592	501 (C) (3)	20,000.	0.			SUPPORT FOR DELAWARECAN
SUSSEX COUNTY VOCATIONAL TECHNICAL SCHOOL DISTRICT - 17099 COUNTY SEAT HWY, - GEORGETOWN, DE 19947	51-0341061	501 (C) (3)	20,000.	0.			NEW ESL PROGRAM SITE IN GEORGETOWN

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

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WILMINGTON HOPE COMMISSION 38 VANDEVER AVENUE, WILMINGTON, DE 19802	26-2280375	501 (C) (3)	20,000.	0.			FY24 CAPITAL GRANT FUNDING LAND ACQUISITION FOR SKILLS CENTER
MOUNT DESERT ISLAND HOSPITAL OFFICE OF ADVANCEMENT, PO BOX 8 BAR HARBOR, ME 04609	01-0211797	501 (C) (3)	20,000.	0.			UNRESTRICTED SUPPORT
EPWORTH CHRISTIAN SCHOOL ATTN: REP. TIM DUKES, 14511 SYCAMORE LAUREL, DE 19956	51-0246162	501 (C) (3)	20,000.	0.			UNRESTRICTED SUPPORT
IMPERIAL DYNASTY ARTS PROGRAM INC 1008 S BROOM ST, WILMINGTON, DE 19805-4566	46-2955925	501 (C) (3)	20,000.	0.			FY24 CAPITAL GRANT FUNDING DRUM EQUIPMENT
SUSTAINABLE ENERGY UTILITY INC 500 W. LOOCKERMAN STREET, SUITE 400 DOVER, DE 19904	26-3963904	501 (C) (3)	20,000.	0.			SUPPORT FOR ROOF REPLACEMENT/REPAIR GRANT PROGRAM
ARTS CONSORTIUM OF DELAWARE INC 818 N MARKET ST; FLOOR 2R, WILMINGTON, DE 19801	51-0351748	501 (C) (3)	20,170.	0.			UNRESTRICTED SUPPORT
THE BENEDICTINE SISTERS OF DELAWARE - ST. GERTRUDE MONASTERY, 25 GENDER ROAD - NEWARK, DE 19713	52-0591588	501 (C) (3)	20,336.	0.			UNRESTRICTED SUPPORT.
FIRST TEE - DELAWARE ATTN: BOB NORRIS, 800 NORTH DUPONT R WILMINGTON, DE 19807	83-4186070	501 (C) (3)	21,000.	0.			UNRESTRICTED SUPPORT
ARIZONA COMMUNITY FOUNDATION 2201 E. CAMELBACK ROAD, SUITE 405B - PHOENIX, AZ 85016	86-0348306	501 (C) (3)	21,109.	0.			OBRZUT-LUNG DAF

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WORLD CENTRAL KITCHEN, INC. 200 MASSACHUSETTS AVE NW, 7TH FLOOR WASHINGTON, DC 20001	27-3521132	501 (C) (3)	21,500.	0.			UNRESTRICTED SUPPORT
LEGAL SERVICES CORPORATION OF DELAWARE - 100 W. 10TH STREET, SUITE 203, - WILMINGTON, DE 19801-1641	51-0372955	501 (C) (3)	22,500.	0.			UNRESTRICTED SUPPORT
MESSIANIC JEWISH ALLIANCE OF AMERICA - 388 REED RD STE 1, - BROOMALL, PA 19008	36-2469997	501 (C) (3)	22,500.	0.			UNRESTRICTED SUPPORT; SUPPORT FOR THE JOSEPH PROJECT
LITERACY DELAWARE, INC. P.O. BOX 2083, WILMINGTON, DE 19899-2083	51-0410054	501 (C) (3)	23,500.	0.			BILINGUAL LEARNER STATEWIDE OUTREACH COORDINATION; UNRESTRICTED SUPPORT
NUESTRAS RAICES P.O. BOX 25167, WILMINGTON, DE 19899	51-0392205	501 (C) (3)	25,000.	0.			YEAR 3 EQUITY PARTNER (BIPOC GRANT PARTNER)
GOOD OLE BOY FOUNDATION INC. 36111 PEAR TREE ROAD, MILLSBORO, DE 19966	46-1526864	501 (C) (3)	25,000.	0.			UNRESTRICTED SUPPORT
VETERANS WATCHMAKER INITIATIVE INC P. O. BOX 329, WHEATLAND LITTLE CREEK, DE 19961	45-2654601	501 (C) (3)	25,000.	0.			UNRESTRICTED SUPPORT
SUSSEX LAND FOUNDATION INC. P. O. BOX 372, LEWES, DE 19958	04-3611220	501 (C) (3)	25,000.	0.			UNRESTRICTED SUPPORT
KING FOUNDATION OF SUSSEX 307 JAMES STREET, GEORGETOWN, DE 19947	92-1060418	501 (C) (3)	25,000.	0.			UNRESTRICTED SUPPORT

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CAMP SUNSHINE AT SEBAGO LAKE, INC. 35 ACADIA ROAD, CASCO, ME 04015	22-2582877	501 (C) (3)	25,000.	0.			CAMP SUNSHINE FAMILY PROGRAM
NEW GARDEN TOWNSHIP 299 STARR ROAD, LANDENBERG, PA 19350	23-6000439	501 (C) (3)	25,000.	0.			FUTURE AVIATORS PROGRAM N57 UPCOMING AIR SHOW AND DRONE SHOW
NETWORK DELAWARE INC 719 N SHIPLEY ST, WILMINGTON, DE 19801-1711	61-1813844	501 (C) (3)	25,000.	0.			BIPOC LEADERS AND COMMUNITIES RENEWED GRANT
SENIOR STEWARDS ACTING FOR THE ENVIRONMENT - 32 PENN RD APT 419, - HANOVER, NH 03755	87-1229514	501 (C) (3)	25,000.	0.			UNRESTRICTED SUPPORT
HEALTHY FOODS FOR HEALTHY KIDS ATTN: LYDIA SARSON, EXECUTIVE DIRECTOR, PO BOX 847 - HOCKESSIN, DE 19707	30-0444914	501 (C) (3)	25,313.	0.			ADOPT A GARDEN PROGRAM FOR WEST PARK PLACE SCHOOL; SUPPORT EXPANDED PARTNERSHIPS AND OUTREACH
DELAWARE BREAST CANCER COALITION 100 W. 10TH STREET, SUITE 209, WILMINGTON, DE 19801	52-2045298	501 (C) (3)	25,417.	0.			KENT COUNTY BREAST CANCER ASSISTANCE FUND; UNRESTRICTED SUPPORT
JUSST SOOUP MINISTRY, INC. 18483 COOL SPRING RD., MILTON, DE 19968	59-3820809	501 (C) (3)	26,804.	0.			UNRESTRICTED SUPPORT
CHEER, INC. 546 SOUTH BEDFORD STREET, GEORGETOWN, DE 19947-1852	51-0112599	501 (C) (3)	27,000.	0.			SAND HILL ADULT DAY PROGRAM; SUPPORT FOR THE ROXANA LOCATION; UNRESTRICTED SUPPORT
LUTHERAN CHURCH OF OUR SAVIOR 20275 BAY VISTA ROAD, REHOBOTH BEACH, DE 19971-1482	25-6114180	501 (C) (3)	27,000.	0.			THE COMMUNITY ENGLISH AS A SECOND LANGUAGE (ESL) PROGRAM IN SUSSEX COUNTY; UNRESTRICTED SUPPORT

COPY

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I CAN DO 26 POINT 2 KIDS 303 WEST LEA BOULEVARD, WILMINGTON, DE 19802	83-4041336	501 (C) (3)	28,000.	0.			UNRESTRICTED SUPPORT
CHESTER COUNTY COMMUNITY FOUNDATION, INC. - 28 W. MARKET ST., LINCOLN BLDG, - WEST CHESTER, PA 19382	23-2773822	501 (C) (3)	30,000.	0.			ADLER ENDOWMENT; KAPA ENDOWMENT; UNITED WAY SECC ENDOWMENT; SOCIAL JUSTICE FUND
HARDROCK CLUB 501 E SAINT JOSEPH ST, RAPID CITY, SD 57701	45-3134357	501 (C) (3)	30,000.	0.			SOUTH DAKOTA MINES HARDROCKER FOOTBALL NUTRITION AND RECOVERY PLAN
DELAWARE PROSPERITY PARTNERSHIP 1007 N ORANGE STREET,SUITE 731 WILMINGTON, DE 19801	82-2881997	501 (C) (3)	30,000.	0.			HIGHMARK HEALTHCARE RECRUITMENT LANDING WEBPAGE AND STARTUP 302
VANDERBILT UNIVERSITY GIFT AND DONOR SERVICES,PMB 407727, 2301 VANDERBILT PLACE - NASHVILLE, TN 37	62-0476822	501 (C) (3)	30,000.	0.			KEITH W. MUMFORD TENNIS SCHOLARSHIP; RESTRICTED TO SUPPORT THE DEEG SEZNA SCHOLARSHIP
VISION TO LEARN 100 W. 10TH ST., SUITE 106, WILMINGTON, DE 19801	45-3457853	501 (C) (3)	30,000.	0.			FREE EYE EXAMINATIONS AND GLASSES FOR UNDERSERVED CHILDREN IN DELAWARE
READING IS FUNDAMENTAL, INC. AKA RIF - ATTN: MARY CORNELIUS SENIOR MANAGER, STRATEGIC PARTNERSHIPS,750 FIRST STREE -	52-0976257	501 (C) (3)	30,139.	0.			TO SUPPORT FIVE READING IS FUNDAMENTAL PROGRAMS IN FOUR NAVIENT COMMUNITIES.
LITTLE SISTERS OF THE POOR ATTN: SUSAN STRAWBRIDGE,185 SALEM C NEWARK, DE 19713	38-1557141	501 (C) (3)	30,279.	0.			UNRESTRICTED SUPPORT
FRESH START SCHOLARSHIP FOUNDATION, INC. - ATTN: SANDY SCHEIBE, GRANT CHAIR,2409 MARILYN DRIVE - WILMINGTON, DE 19810	51-0378642	501 (C) (3)	30,368.	0.			SCHOLARSHIPS; SUPPORT FOR SCHOLARS IN OUR CLASS OF 2024-2025 WHICH WILL BE SELECTED IN JUNE;

COPY

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DELAWARE TECHNICAL & COMMUNITY COLLEGE EDUCATIONAL FOUNDATION 866 - P.O. BOX 897, - DOVER, DE 19903-0897	51-0246178	501 (C) (3)	30,837.	0.			ENTREPRENEURSHIP PROGRAM SCHOLARSHIPS; RESTRICTED TO SUPPORT BIOSCIENCE RESEARCH FELLOWSHIPS;
URSULINE ACADEMY OF WILMINGTON DELAWARE INC - 1106 PENNSYLVANIA AVENUE, - WILMINGTON, DE 19806	51-0167117	501 (C) (3)	31,000.	0.			SUPPORT FOR THE SCHOLARSHIP FUND; SUPPORT IN HONOR OF 130TH ANNIVERSARY; UNRESTRICTED
DELAWARE WILD LANDS PO BOX 505, ODESSA, DE 19730	51-0101678	501 (C) (3)	32,000.	0.			UNRESTRICTED SUPPORT
CHRIST FOR ALL NATIONS P.O. BOX 590588, ORLANDO, FL 32859-0588	94-2742504	501 (C) (3)	32,000.	0.			UNRESTRICTED SUPPORT
SUSSEX COUNTY HABITAT FOR HUMANITY P.O. BOX 759, GEORGETOWN, DE 19947	51-0334057	501 (C) (3)	32,500.	0.			UNRESTRICTED SUPPORT
CHILDREN & FAMILIES FIRST 555 JUSTISON STREET, WILMINGTON, DE 19801	51-0065731	501 (C) (3)	32,616.	0.			SEAFORD COMMUNITY OF HOPE CHANDLER HEIGHTS PROJECT ASSESSMENT & PLANNING; UNRESTRICTED SUPPORT
OPERA DELAWARE INC 4 SOUTH POPLAR STREET, WILMINGTON, DE 19801	51-6018055	501 (C) (3)	32,739.	0.			RESTRICTED FOR CAPITAL RELATED EXPENSES; RESTRICTED TO COSTS TO RENT AND OPERATE
PRESBYTERIAN CHURCH USA 292 W. MAIN STREET, NEWARK, DE 19711	23-6393377	501 (C) (3)	33,395.	0.			UNRESTRICTED SUPPORT
FRIENDS OF THE NEWARK FREE LIBRARY 750 LIBRARY AVENUE, NEWARK, DE 19711	23-7098836	501 (C) (3)	33,395.	0.			UNRESTRICTED SUPPORT

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NATIONAL PARK FOUNDATION 1110 VERMONT AVE, NW, SUITE 200, WASHINGTON, DC 20005	52-1086761	501 (C) (3)	33,395.	0.			UNRESTRICTED SUPPORT
AMERICAN SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS DBA ASPCA - 424 EAST 92ND STREET, - NEW YORK, NY 10128	13-1623829	501 (C) (3)	33,396.	0.			UNRESTRICTED SUPPORT
NATIONAL WILDLIFE FEDERATION PO BOX 1583, MERRIFIELD, VA 22116	53-0204616	501 (C) (3)	33,396.	0.			UNRESTRICTED SUPPORT
MEALS-ON-WHEELS DELAWARE, INC. 100 WEST 10TH ST., SUITE 207, WILMINGTON, DE 19801	51-0355145	501 (C) (3)	33,396.	0.			UNRESTRICTED SUPPORT
JEFFERSON STREET CENTER INC 1801 JEFFERSON STREET, WILMINGTON, DE 19802	51-0304274	501 (C) (3)	33,750.	0.			2023 OPERATIONAL FUNDING AND ROAD SAFETY
PET-ASSISTED VISITATION VOLUNTEER SERVICES, INC. - PO BOX 9955, - NEWARK, DE 19714	76-0780197	501 (C) (3)	33,804.	0.			RESTRICTED SUPPORT FOR WYLIE'S WISHES FUND; SOCIAL AND EMOTIONAL SUPPORT FOR
NEIGHBORHOOD HOUSE, INC. 1218 B STREET, WILMINGTON, DE 19801-5898	51-0065747	501 (C) (3)	33,875.	0.			PROGRAMMING FOR AT-RISK AFRICAN-AMERICAN YOUTH IN SOUTHBRIDGE; PROGRAMMING IN SOUTHBRIDGE; PROVIDING
BEAU BIDEN FOUNDATION FOR THE PROTECTION OF CHILDREN - PO BOX 7819, - WILMINGTON, DE 19803	47-4507397	501 (C) (3)	33,876.	0.			SUPPORT FOR PROGRAM DEVELOPMENT; UNRESTRICTED SUPPORT
DELMARVA ACES BASEBALL AND SOFTBALL INC - 11046 GRAYS CORNER ROAD,BUILDINGS 1&2 - BERLIN, MD 21811	47-1605254	501 (C) (3)	34,542.	0.			UNRESTRICTED SUPPORT

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KIND TO KIDS FOUNDATION 100 W. 10TH ST., SUITE 606, WILMINGTON, DE 19801	80-0641000	501 (C) (3)	34,634.	0.			UNRESTRICTED SUPPORT
NEW CALVARY BAPTIST CHURCH 610 S. HEALD ST., WILMINGTON, DE 19801	02-0537737	501 (C) (3)	35,000.	0.			UNRESTRICTED SUPPORT
MILFORD HOUSING DEVELOPMENT CORPORATION - 977 E. MASTEN CIRCLE, - MILFORD, DE 19963	51-0218904	501 (C) (3)	35,000.	0.			MHDC HOME REPAIR PROGRAM
BRINGING HOPE HOME INC 641 SWEDES FORD ROAD, MALVERN, PA 19355	26-1222985	501 (C) (3)	35,000.	0.			THE LIGHT OF HOPE FAMILY PROGRAM
DOWN SYNDROME ASSOCIATION OF DELAWARE - PO BOX 747, - MIDDLETOWN, DE 19709	20-1874295	501 (C) (3)	35,000.	0.			FOR THE PLAYGROUND AT THE NEW MILTON LOCATION; BILINGUAL PROGRAMS AND OUTREACH COORDINATION;
TEENSHARP, INC. 1200 N. FRENCH ST., WILMINGTON, DE 19801	27-2246880	501 (C) (3)	35,000.	0.			UNRESTRICTED SUPPORT
THE CHOIR SCHOOL OF DELAWARE INC. 2013 NORTH MARKET STREET, WILMINGTON, DE 19802	20-5486245	501 (C) (3)	36,160.	0.			UNRESTRICTED SUPPORT; LATINX OUTREACH INITIATIVE AND PROGRAMMING. BILINGUAL
REHOBOTH ART LEAGUE, INC 12 DODDS LANE, REHOBOTH BEACH, DE 19971	51-0097839	501 (C) (3)	36,645.	0.			ARTS OUTREACH PROGRAM AT LA CASITA AFTER-SCHOOL AND SUMMER CAMP PROGRAM AND OTHER GEORGETOWN;
CHALLENGE PROGRAM 1124 EAST 7TH STREET, WILMINGTON, DE 19801	51-0386369	501 (C) (3)	36,750.	0.			FY24 CAPITAL GRANT FUNDING-ROOFING AND DOWNSPOUT REPAIRS FOR CONSTRUCTION TRAINING

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HARRY K FOUNDATION 313 S BORADWALK, REHOBOTH BEACH, DE 19971-2933	46-2934019	501 (C) (3)	37,000.	0.			ADDRESSING CHILDHOOD HUNGER IN KENT COUNTY; FOOD SECURITY FOR SUSSEX COUNTY MOST VULNERABLE
THE MUSIC SCHOOL OF DELAWARE INC 4101 WASHINGTON STREET EXT., WILMINGTON, DE 19802	51-0066934	501 (C) (3)	38,595.	0.			FOR THE MILFORD LOCATION; RESTRICTED FOR CAPITAL RELATED EXPENSES; RESTRICTED TO COSTS TO
CITY OF WILMINGTON 800 FRENCH STREET, WILMINGTON, DE 19801	51-0176414	501 (C) (3)	38,900.	0.			ONE HEART HEALTH INITIATIVE, WILMINGTON EARLY CARE & EDUCATION COUNCIL
CONGREGATION BETH YESHUA 28 S NEW MIDDLETOWN RD, MEDIA, PA 19063	23-2137377	501 (C) (3)	39,000.	0.			UNRESTRICTED SUPPORT
DELMAR PUBLIC LIBRARY 101 N. BI-STATE BOULEVARD, DELMAR, DE 19940	51-0103344	501 (C) (3)	39,606.	0.			UNRESTRICTED SUPPORT
HENRY FRANCIS DU PONT WINTERTHUR MUSEUM, INC. - 5105 KENNETT PIKE, - WINTERTHUR, DE 19735	51-0066038	501 (C) (3)	39,895.	0.			UNRESTRICTED SUPPORT
UNIVERSITY OF SOUTH FLORIDA FOUNDATION - 4202 E. FOWLER AVENUE, ALC100, - TAMPA, FL 33620	59-0879015	501 (C) (3)	40,000.	0.			HDSA CENTER OF EXCELLENCE
DELAWARE FUTURES, INC. 1104 N. ADAMS ST., WILMINGTON, DE 19801	51-0378138	501 (C) (3)	40,128.	0.			ART FOR TEENS IN KENT COUNTY; CRISIS FUND; DELAWARE FUTURES; SUCCESS ONE STUDENT AT A TIME;
FRIENDSHIP HOUSE, INC. P.O. BOX 1517, WILMINGTON, DE 19899	51-0306759	501 (C) (3)	42,029.	0.			SCHOOL UNIFORM PROJECT; SUPPORT FOR ANNUAL PARTY; UNRESTRICTED SUPPORT

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TRI-STATE BIRD RESCUE & RESEARCH, INC. - 170 POSSUM HOLLOW ROAD, - NEWARK, DE 19711-3910	51-0265807	501 (C) (3)	44,500.	0.			CAMPBELL CENTER WATER SYSTEM; NEW SERVERS; UNRESTRICTED SUPPORT
READ ALOUD DELAWARE ATTN: JAMES SPADOLA, 100 WEST 10TH STREET, SUITE 309 - WILMINGTON, DE 19801	51-0280486	501 (C) (3)	45,657.	0.			BILINGUAL OUTREACH COORDINATOR AND LENA COURSE EXPANSION; SUPPORT FOR VOLUNTEER READING
CATHOLIC CHARITIES, INC. 2601 W. 4TH STREET, WILMINGTON, DE 19805	51-0065685	501 (C) (3)	46,000.	0.			ACCESS TO BEHAVIOR HEALTH SERVICES FOR LOW INCOME FAMILIES; FOR WORK IN DOVER; UNRESTRICTED
CORNERSTONE WEST COMMUNITY DEVELOPMENT CORPORATION - 710 N. LINCOLN ST., - WILMINGTON, DE 19805	51-0387484	501 (C) (3)	47,250.	0.			2023 WEST SIDE GROWS HEALTHY NEIGHBORHOODS + WEST SIDE PLAN UPDATE
ART FOR LIFE-DELAWARE 303 WEST LEA BOULEVARD, WILMINGTON, DE 19802	45-4655559	501 (C) (3)	48,000.	0.			YEAR LONG ART PROGRAM SUMMER INCARCERATED ART PROGRAM
DELAWARE REGIONAL DREAM CENTER INC 235 POLLY DRUMMOND HILL RD, NEWARK, DE 19711	85-2159840	501 (C) (3)	48,250.	0.			RESTORING COMMUNITY HOPE OUTREACH PROGRAM; SUPPORT TO ASSIST WITH SCHOOL SUPPLY DISTRIBUTION
DELAWARE THEATRE COMPANY 200 WATER ST, WILMINGTON, DE 19801-5030	51-0229918	501 (C) (3)	49,651.	0.			RESTRICTED FOR CAPITAL RELATED EXPENSES; RESTRICTED TO COSTS TO RENT AND OPERATE
BUCKTAIL MEDICAL CENTER 1001 PINE ST, RENOVO, PA 17764	24-0701920	501 (C) (3)	50,000.	0.			UNRESTRICTED SUPPORT
NATIVE ROOTS FARM FOUNDATION 1834 N LINCOLN STREET, WILMINGTON, DE 19806	84-4361181	501 (C) (3)	50,000.	0.			UNRESTRICTED SUPPORT

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LORI'S HANDS INC 100 DISCOVERY BLVD., 4TH FLOOR NEWARK, DE 19713	45-3984559	501 (C) (3)	50,000.	0.			ADDRESSING THE INSTRUMENTAL AND SOCIAL NEEDS OF COMMUNITY MEMBERS WITH CHRONIC
THE BROTHERS BRUNCH 720 EAST 6TH STREET, NEWARK, DE 19711	83-1576964	501 (C) (3)	50,000.	0.			SUPPORT FOR THE REMANNED PROJECT.
UNITE FOR HER 127 EAST CHESTNUT STREET, WEST CHESTER, PA 19380	26-4444438	501 (C) (3)	50,000.	0.			PROJECT LIFT
FAMILY PROMISE OF NORTHERN NEW CASTLE COUNTY - 2104 ST. JAMES CHURCH ROAD, - WILMINGTON, DE 19808	26-2373936	501 (C) (3)	50,000.	0.			HOSPITALITY CENTER EXPANSION
LATIN AMERICAN COMMUNITY CENTER 403 NORTH VAN BUREN STREET, WILMINGTON, DE 19805	23-7047048	501 (C) (3)	51,521.	0.			LATIN AMERICAN COMMUNITY CENTER CONEXIONES PROGRAM; HIGH SCHOOL CREDIT RECOVERY; ART
AMERICAN HEART ASSOCIATION, INC. 131 CONTINENTAL DR., SUITE 407, NEWARK, DE 19713	13-5613797	501 (C) (3)	51,898.	0.			UNRESTRICTED SUPPORT; DELAWARE HYPERTENSION NETWORK
CHILDRENS BEACH HOUSE INC ATTN: RICHARD GARRETT, 1800 BAY AVEN LEWES, DE 19958	51-0070966	501 (C) (3)	53,250.	0.			UNRESTRICTED SUPPORT; YOUTH DEVELOPMENT PROGRAM; YOUTH DEVELOPMENT PROGRAM (YDP)
FAITHFUL FRIENDS, INC. 165 AIRPORT ROAD, NEW CASTLE, DE 19720	51-0410508	501 (C) (3)	54,552.	0.			SAFETY NET SERVICES; UNRESTRICTED SUPPORT
CATHOLIC DIOCESE OF WILMINGTON P.O. BOX 2030, WILMINGTON, DE 19899	51-0095439	501 (C) (3)	54,808.	0.			UNRESTRICTED SUPPORT; SPRING MUSICAL AT PADUA ACADEMY; TUITION ASSISTANCE AT ST. ANN

COPY

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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW CASTLE COUNTY ATTN: JANE RATTENI, DEPARTMENT OF COMMUNITY SERVICES, 77 READS WAY - NEW CAST	51-6000160	GOVERNMENT	54,902.	0.			RESTRICTED SUPPORT TO THE DEPT. OF COMMUNITY SERVICES SPECIAL FUND; UNRESTRICTED SUPPORT FOR
LA PLAZA DELAWARE INC 325 SAMANTHA DRIVE, LEWES, DE 19958	88-1497777	501 (C) (3)	55,000.	0.			LATINO SMALL BUSINESS DEVELOPMENT PROGRAMS
HOPPYS HOPE TO END HUNTINGTONS DISEASE - 7 MARTIN ROAD, - NEWTOWN SQUARE, PA 19073	27-0708797	501 (C) (3)	55,000.	0.			UNRESTRICTED SUPPORT
DELAWARE PHARMACISTS EDUCATIONAL CENTER INC - 27 N MAIN STREET, - SMYRNA, DE 19977	46-0499270	501 (C) (3)	56,963.	0.			MEDICATION THERAPY MANAGEMENT FOR THE UNDERSERVED POPULATION IN DELAWARE
CHRISTINA CULTURAL ARTS CENTER INC 705 MARKET STREET, WILMINGTON, DE 19801	51-0064300	501 (C) (3)	57,050.	0.			RESTRICTED TO COSTS TO RENT AND OPERATE FACILITIES; UNRESTRICTED SUPPORT
BAYHEALTH FOUNDATION 640 S STATE ST, DOVER, DE 19901	22-2559843	501 (C) (3)	57,397.	0.			PASTORAL CARE, UNRESTRICTED SUPPORT, SUPPORT FOR THE HOSPITAL IN MILFORD
CENTER FOR THE INLAND BAYS INC. 39375 INLET ROAD, REHOBOTH BEACH, DE 19971	51-0365565	501 (C) (3)	57,529.	0.			CUPOLA PARK COMMUNITY CLEANUP; THOMPSON ISLAND PROJECT; STUDENT ESTUARY EXPLORATION AT JAMES FARM
SEAN LOCKE 24 FOUNDATION 100 DEAN DRIVE, NEWARK, DE 19711	83-3231148	501 (C) (3)	58,072.	0.			SEAN'S HOUSE CLINICAL SUPPORT; UNRESTRICTED SUPPORT
SIDNEY KIMMEL MEDICAL COLLEGE AT THOMAS JEFFERSON UNIVERSITY - 1015 WALNUT ST, CURTIS BLDG, STE 115 - PHILADELPHIA, PA 19107	23-1352651	501 (C) (3)	60,000.	0.			SCHOLARSHIPS

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DELAWARE ADOLESCENT PROGRAM, INC. (DAPI) - 1148 PULASKI HWY, SUITE 325, - BEAR, DE 19701	51-0108498	501 (C) (3)	60,400.	0.			FY24 CAPITAL GRANT FUNDING RENOVATIONS TO DAYCARE AND INCREASED WI-FI; MATERNAL HEALTH
HABITAT FOR HUMANITY OF NEW CASTLE COUNTY - 1920 HUTTON STREET, - WILMINGTON, DE 19802	51-0294138	501 (C) (3)	64,500.	0.			IN SUPPORT OF OPERATING EXPENSES AT THE HPF NCC MIDDLETOWN RESTORE; ROCK THE BLOCK NORTHEAST -
MEET ME AT THE WELL FOUNDATION 1601 MILLTOWN ROAD, SUITE 8 WILMINGTON, DE 19808	47-1968538	501 (C) (3)	65,000.	0.			ENGAGE TO HEAL PROGRAM
DO CARE DOULA FOUNDATION INC 95 W CONSTITUTION DRIVE, SMYRNA, DE 19977	86-2936026	501 (C) (3)	65,000.	0.			COMMUNITY OUTREACH IN KENT COUNTY; SUPPORT TO RECRUIT, TRAIN, AND SUPPORT 10 BILINGUAL
FIRST PARISH FEDERATED CHURCH 150 MAIN STREET SOUTH BERWICK, ME 03908-1509	01-6013734	501 (C) (3)	67,364.	0.			SUPPORT FOR CAPITAL REPAIRS AND IMPROV TO CHURCH AND PARSONAGE, SUPPORT FOR NEEDY OF
PILOT SCHOOL INC 208 WOODLAWN ROAD, WILMINGTON, DE 19803	51-0080692	501 (C) (3)	72,339.	0.			TUITION AID FOR STUDENTS
COMMUNITY EDUCATION BUILDING 1200 NORTH FRENCH STREET, WILMINGTON, DE 19801	45-4797267	501 (C) (3)	73,400.	0.			CEB BEHAVIORAL HEALTH SPECIALIST AND BENEFITS NAVIGATOR FOR FAMILIES OF STUDENTS; UNRESTRICTED
NEW CASTLE PREVENTION COALITION 19 LAMBSON LANE, NEW CASTLE, DE 19801	47-4237084	501 (C) (3)	74,450.	0.			BUILDING CAPACITY TO IMPLEMENT THE RT. 9 MASTER PLAN
THE ROSA HEALTH CENTER, INC. 10 NORTH FRONT STREET, GEORGETOWN, DE 19947	46-5736043	501 (C) (3)	75,000.	0.			MAKE IT REAL FOR ROSA; UNRESTRICTED SUPPORT

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FIRST STATE COMMUNITY ACTION AGENCY INC - 308 N. RAILROAD AVENUE, P.O. BOX 877 - GEORGETOWN, DE 19947	51-0104704	501 (C) (3)	75,000.	0.			FY24 CAPITAL GRANT FUNDING LA CASITA BUILDING RENOVATIONS; HOMELESSNESS PREVENTION &
FIRST STATE SQUASH 501 W 11TH ST, WILMINGTON, DE 19801-6406	81-1843120	501 (C) (3)	75,000.	0.			FIRST STATE SQUASH ATHLETIC PROGRAM; FIRST STATE SQUASH STRATEGIC GROWTH; UNRESTRICTED
DELAWARE MILITARY ACADEMY INC 112 MIDDLEBORO ROAD, WILMINGTON, DE 19804	51-0413420	501 (C) (3)	75,421.	0.			UNRESTRICTED SUPPORT
THE MINISTRY OF CARING INC 115 E. 14TH STREET, WILMINGTON, DE 19801	51-0209843	501 (C) (3)	77,610.	0.			DENTAL FUND; HOUSE OF JOSEPH II SUPPORT; UNRESTRICTED SUPPORT
EASTER SEALS DELAWARE & MARYLANDS EASTERN SHORE INC - ATTN: BETH M. ALTEMUS, 61 CORPORATE CIRCLE - NEW CASTLE, DE 19720-2405	51-0066728	501 (C) (3)	78,000.	0.			ARTFULNESS; CAMP FAIRLEE POOL; CAPITAL CAMPAIGN; FY24 CAPITAL GRANT FUNDING RENOVATE 2
DELAWARE SPECIAL OLYMPICS INC 619 SOUTH COLLEGE AVENUE, NEWARK, DE 19716-1901	23-7162877	501 (C) (3)	79,076.	0.			UNRESTRICTED SUPPORT
SUNDAY BREAKFAST MISSION 110 N. POPLAR STREET, WILMINGTON, DE 19801	51-0073080	501 (C) (3)	79,175.	0.			BACKPACK RALLY; UNRESTRICTED SUPPORT
NEWARK SENIOR CENTER 200 WHITE CHAPEL DRIVE, NEWARK, DE 19713	51-0104695	501 (C) (3)	80,392.	0.			NSC PATIO EXPANSION; RESTRICTED TO MEALS ON WHEELS PROGRAM; SUPPORT FOR MEALS ON WHEELS OR
LUTHERAN COMMUNITY SERVICES, INC. 2809 BAYNARD BOULEVARD, WILMINGTON, DE 19802	51-0102403	501 (C) (3)	80,556.	0.			DELAWARE FOOD FARMACY; RESTRICTED TO SUPPORT PROGRAMS OF PROVIDING FOOD, CLOTHING OR SHELTER

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CENTRAL DELAWARE HABITAT FOR HUMANITY - 2311 SOUTH DUPONT HIGHWAY, - DOVER, DE 19901	51-0376650	501 (C) (3)	81,500.	0.			CENTRAL DOVER HOUSING; COMMUNITY COLLABORATION; FY24 CAPITAL GRANT FUNDING CONSTRUCTION
CHRISTIANA CARE HEALTH SERVICES INC - CHRISTIANA CARE OFFICE OF PHILANTHROPY, 4000 NEXUS DRIVE, SUITE W3-300 - WILMINGTON, DE	51-0103684	501 (C) (3)	81,641.	0.			HEALTH LITERACY COUNCIL OF DELAWARE; MRI-GUIDED FOCUSED ULTRASOUND; RESTRICTED SUPPORT TO THE
ROOFS FROM THE HEART INC. 101 S. MARY STREET, NEWPORT, DE 19804	85-1064356	501 (C) (3)	81,669.	0.			UNRESTRICTED SUPPORT
LEADING YOUTH THROUGH EMPOWERMENT 1313 N MARKET STREET, SUITE 110 A WILMINGTON, DE 19801	47-1867733	501 (C) (3)	82,750.	0.			HEALTH SCIENCES CAREER EXPLORATION PROGRAM; LYTE SCHOLARS: EMPOWERING LATINO FUTURES
TRINITY COMMUNITY CEMETERY PERPETUAL CARE - 16467 ADAMS ROAD, - LAUREL, DE 19956	36-4679105	501 (C) (13)	87,613.	0.			UNRESTRICTED SUPPORT
WILMINGTON ALLIANCE 100 W. 10TH STREET, SUITE 206 WILMINGTON, DE 19801	51-0347680	501 (C) (3)	95,000.	0.			BUILDING COMMUNITY AND CIVIC MUSCLE IN WEST CENTER CITY; EMPLOYMENT PIPELINE FOR MARGINALIZED
SOUTHBRIDGE COMMUNITY DEVELOPMENT CORPORATION - 601 NEW CASTLE AVENUE, - WILMINGTON, DE 19801	51-0419197	501 (C) (3)	100,000.	0.			SOUTHBRIDGE NEIGHBORHOOD ACTION PLAN IMPLEMENTATION PLAN
REACH OUT AND READ, INC. 89 SOUTH STREET, SUITE 201, BOSTON, MA 02111	04-3481253	501 (C) (3)	100,000.	0.			RX FOR EARLY LITERACY IN DELAWARE
PHILADELPHIA COLLEGE OF OSTEOPATHIC MEDICINE - 4190 CITY AVE - PHILADELPHIA, PA 19131	23-1355135	501 (C) (3)	100,000.	0.			SCHOLARSHIPS

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EDUCATION HEALTH AND RESEARCH INTERNATIONAL, INC. - 21 WEST CLARKE AVENUE, - MILFORD, DE 19963	83-1132893	501 (C) (3)	100,000.	0.			WECARE PLUS CHRONIC DISEASE SELF-MANAGEMENT EDUCATION
HARBOR BANK OF MARYLAND COMMUNITY DEVELOPMENT CORPORATION - 25 W FAYETTE ST, - BALTIMORE, MD 21201	26-0006476	501 (C) (3)	100,000.	0.			UNRESTRICTED SUPPORT
BE READY COMMUNITY DEVELOPMENT CORPORATION - 1411 WEST 4TH STREET, - WILMINGTON, DE 19805	51-0381849	501 (C) (3)	100,198.	0.			VERY WELL: HEALING OUR COMMUNITY AND OURSELVES
KENNETT AREA COMMUNITY SERVICE 136 WEST CEDAR STREET, KENNETT SQUARE, PA 19348	23-2215441	501 (C) (3)	100,250.	0.			UNRESTRICTED SUPPORT, CAPITAL CAMPAIGN
DELAWARE STATE UNIVERSITY FOUNDATION, INC. - 1200 N. DUPONT HIGHWAY, 1200 N. DUPONT HIGHWAY, 2ND FLOOR ADMIN BLDG - DOVER, DE	20-1372435	501 (C) (3)	101,542.	0.			DSU TRAUMA INITIATIVE: BURNOUT PREVENTION; RESTRICTED TO SUPPORT DSU DOWNTOWN, FORMERLY WESLEY
GREATER LEWES FOUNDATION PO BOX 110, LEWES, DE 19958	51-0400365	501 (C) (3)	103,900.	0.			RESTRICTED SUPPORT FOR THE OPEN SPACE CAMPAIGN; RESTRICTED TO THE CAPE COMMUNITY FUND AT THE
LIMEN HOUSE, INC. ATTN: SALLY LOESSNER, P.O. BOX 1306 WILMINGTON, DE 19899	23-7029073	501 (C) (3)	107,145.	0.			UNRESTRICTED SUPPORT, RECOVERY COMMUNITY CENTER
INTERNATIONAL LITERACY ASSOCIATION PO BOX 7168, NEWARK, DE 19714	46-3994293	501 (C) (3)	108,579.	0.			SCHOOL PARTNERSHIPS TO PROVIDE ACCESS TO LITERACY LEARNING LIBRARY CONTINUE PROFESSIONAL
JEWISH FAMILY SERVICES OF DELAWARE 99 PASSMORE ROAD, WILMINGTON, DE 19803	51-0097026	501 (C) (3)	109,558.	0.			UNRESTRICTED SUPPORT; YOUTH ANXIETY PROGRAM; YOUTH SERVICES PROGRAM

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THE SALVATION ARMY PO BOX 308, WILMINGTON, DE 19899	13-5562351	501 (C) (3)	111,081.	0.			UNRESTRICTED SUPPORT, SUPPORT FOR THE PLAYGROUND GARDENING AREA
DELAWARE CENTER FOR HORTICULTURE INC - 1810 NORTH DUPONT STREET, - WILMINGTON, DE 19806-3308	51-0252857	501 (C) (3)	112,929.	0.			PROGRAMMATIC SUPPORT, EDUCATIONAL AND PROMOTIONAL RESOURCES; ROOFED IN RESILIENCE
NEIGHBORGOOD PARTNERS, INC. 363 SAULSBURY ROAD, DOVER, DE 19904	52-6054476	501 (C) (3)	117,813.	0.			2023 CENTRAL DELAWARE THRIVES IV; 2023 RESTORING CENTRAL DOVER; LAUNCHER PROGRAM
TOWER HILL SCHOOL 2813 WEST 17TH STREET, WILMINGTON, DE 19806	51-0065745	501 (C) (3)	118,937.	0.			SUPPORT FOR FINANCIAL AID/SCHOLARSHIPS FOR STUDENTS; UNRESTRICTED SUPPORT
LA RED HEALTH CENTER INC 21444 CARMEAN WAY, GEORGETOWN, DE 19947	14-1850828	501 (C) (3)	121,000.	0.			PURCHASE OF DIABETIC RETINOPATHY MACHINE; RURAL RE-ENTRY PROGRAM
MAKE-A-WISH FOUNDATION OF PHILADELPHIA, DELAWARE & SUSQUEHANNA VALLEY - 100 W. 10TH ST., SUITE 106, - WILMINGTON, DE	22-2755963	501 (C) (3)	124,300.	0.			UNRESTRICTED SUPPORT; RESTRICTED TO SOUTHERN DELAWARE, WISHES IN SUSSEX AND KENT COUNTIES
SUSSEX MONTESSORI SCHOOL INC 24960 DAIRY LANE, SEAFORD, DE 19973	82-2404164	501 (C) (3)	125,000.	0.			CAPITAL CAMPAIGN
NORTHEASTERN VERMONT REGIONAL HOSPITAL INC. - 1315 HOSPITAL DRIVE, - ST JOHNSBURY, VT 05819	03-6013761	501 (C) (3)	125,000.	0.			NEW CHEMISTRY ANALYZER FOR LAB TO IMPROVE RESULTS CAPABILITIES AND SYSTEM RELIABILITY.
BRANDYWINE RED CLAY ALLIANCE 1760 UNIONVILLE-WAWASET ROAD, WEST CHESTER, PA 19382	51-0058593	501 (C) (3)	126,500.	0.			ENDOWMENT SUPPORT; UNRESTRICTED SUPPORT

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WILMINGTON INSTITUTE FREE LIBRARY P.O. BOX 2303, WILMINGTON, DE 19899	51-0064340	501 (C) (3)	129,121.	0.			SUPPLY BOOKS TO PARTNERS, BUILD MORE PARTNERSHIPS
COLLABORATE NORTHEAST PO BOX 1901, WILMINGTON, DE 19801	88-1628992	501 (C) (3)	130,000.	0.			UNRESTRICTED SUPPORT
DELAWARE SYMPHONY ASSOCIATION 100 W. 10TH ST, SUITE 1003, WILMINGTON, DE 19801	51-6017449	501 (C) (3)	140,392.	0.			RESTRICTED TO COSTS TO RENT AND OPERATE FACILITIES; UNRESTRICTED SUPPORT
WEST END NEIGHBORHOOD HOUSE INC. 710 N. LINCOLN STREET, WILMINGTON, DE 19805	51-0064301	501 (C) (3)	141,515.	0.			ABOVE XPECTATIONS PROGRAM; BEFORE AND AFTER SCHOOL ACTIVITIES, EMPLOYMENT TRAINING,
LA ESPERANZA INC 216 N. RACE STREET, GEORGETOWN, DE 19947	31-1606956	501 (C) (3)	152,300.	0.			UNRESTRICTED SUPPORT; PLACE-BASED OPCIONES/RESOURCE NAVIGATION AND FAMILY
FRIENDS OF FUSION FOUNDATION 669 SOUTHWOOD ROAD, HOCKESSIN, DE 19707	35-2674831	501 (C) (3)	154,210.	0.			SUPPORT OF UNDERPRIVILEGED CHILDREN WITH DISABILITIES
THE SPRINGBOARD COLLABORATIVE, INC. - 112 S FRENCH STREET, - WILMINGTON, DE 19801	85-3335151	501 (C) (3)	155,000.	0.			GEORGETOWN PALLET SHELTER VILLAGE PROJECT; SPRINGBOARD PALLET VILLAGE; UNRESTRICTED
DELAWARE HOSPICE, INC. 555 E. LOOCKERMAN STREET, SUITE 200 DOVER, DE 19901	51-0258883	501 (C) (3)	169,734.	0.			FOR THE MILFORD LOCATION; RESTRICTED TO DOVER LOCATION; RESTRICTED TO SUPPORT THE MILFORD,
CENDEL FOUNDATION 101 WEST LOOCKERMAN ST., SUITE 2C DOVER, DE 19904	26-3590221	501 (C) (3)	171,883.	0.			PROVIDE SCHOLARSHIP FOR AT-RISK OR FINANCIALLY-NEEDY PRE-SCHOOL CHILDREN AT

Schedule I (Form 990)

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LOCAL JOURNALISM INITIATIVE 1425 WOODLAWN AVENUE, WILMINGTON, DE 19806	87-2914947	501 (C) (3)	175,033.	0.			UNRESTRICTED SUPPORT
HUMANE ANIMAL PARTNERS INC 701 A STREET, WILMINGTON, DE 19801	88-2921386	501 (C) (3)	194,570.	0.			HAP'S FOOD PANTRY; UNRESTRICTED SUPPORT
FIND-M FRIENDS P. O. BOX 1712, CRYSTAL RIVER, FL 34423	46-5514778	501 (C) (3)	200,000.	0.			UNRESTRICTED SUPPORT
ENDLESS POSSIBILITIES IN THE COMMUNITY INC - 351 GEORGE WILLIAMS WAY, - NEWARK, DE 19702	47-0985852	501 (C) (3)	200,000.	0.			EPIC'S STRATEGIC AND SUSTAINABLE EXPANSION PLAN
KENDAL-CROSSLANDS COMMUNITIES PO BOX 100, KENNETT SQUARE, PA 19348	23-1906212	501 (C) (3)	200,000.	0.			FOR SOLAR PANELS ON THE NEW HEALTHCARE CENTER
FOOD BANK OF DELAWARE, INC. 222 LAKE DRIVE, NEWARK, DE 19702	51-0258984	501 (C) (3)	227,709.	0.			BUILDING HOPE IN MILFORD: THE FOOD BANK OF DE'S CAPITAL CAMPAIGN; LATINO AND HISPANIC COMMUNITY
DELAWARE ART MUSEUM 2301 KENTMERE PARKWAY, WILMINGTON, DE 19806	51-0065746	501 (C) (3)	231,169.	0.			DIVERSE EXHIBITION FUND; MARIPOSA ARTS HEALING THROUGH THE ARTS; RESTRICTED FOR CAPITAL
BOYS AND GIRLS CLUBS OF DELAWARE 669 SOUTH UNION ST., WILMINGTON, DE 19805	51-0068712	501 (C) (3)	243,223.	0.			A CLOSET FOR KIDS, TEENS & FAMILIES; FOR THE MILFORD LOCATION; FRAIM CHILDRENS GARDEN,
GRAND OPERA HOUSE 818 NORTH MARKET STREET, WILMINGTON, DE 19801	51-0116569	501 (C) (3)	247,904.	0.			RESTRICTED FOR CAPITAL RELATED EXPENSES; RESTRICTED TO COSTS TO RENT AND OPERATE

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ROXANA VOLUNTEER FIRE COMPANY STATION 90 - 35943 ZION CHURCH RD, - FRANKFORD, DE 19945	51-0206106	501 (C) (3)	250,000.	0.			FOR THE PURCHASE OF A NEW AMBULANCE
LAUREL FIRE DEPARTMENT INC 205 W. 10TH ST., LAUREL, DE 19956	51-0229597	501 (C) (3)	255,000.	0.			SUPPORT FOR PURCHASE OF AMBULANCE; UNRESTRICTED SUPPORT
JEWISH FEDERATION OF DELAWARE 101 GARDEN OF EDEN ROAD, WILMINGTON, DE 19803	51-0064315	501 (C) (3)	264,135.	0.			RESTRICTED SUPPORT FOR SCHOLARSHIPS/FINANCIAL AID FOR CHILDREN OF FALLEN FIRST RESPONDERS;
THE PROXIMITY PROJECT 324 MINGO WAY, TOWNSEND, DE 19734	86-2004868	501 (C) (3)	272,358.	0.			FISCAL SPONSORSHIP, TRANSFER OF FUNDS; UNRESTRICTED SUPPORT; UNRESTRICTED SUPPORT.
YWCA DELAWARE, INC. 100 W. 10TH STREET, SUITE 515, WILMINGTON, DE 19801	51-0064344	501 (C) (3)	278,947.	0.			ENDOWMENT SUPPORT; MLK BREAKFAST, MEALS FOR ACTION FORUM PANELIST; RESTRICTED TO SUPPORT OF
NEMOURS FOUNDATION SHANDS HOUSE, 1600 ROCKLAND ROAD WILMINGTON, DE 19803	59-0634433	501 (C) (3)	361,774.	0.			JOINT SDOH ASTHMA SOLUTION; PEDIATRIC CONTINUING EDUCATION; RESTRICTED SUPPORT FOR
YMCA OF DELAWARE 100 W 10TH ST STE 1100, WILMINGTON, DE 19801	51-0065748	501 (C) (3)	387,000.	0.			PEDALING FOR PARKINSONS; REDUCING HEALTH EQUITIES IN DE (2 YEAR PROGRAM); SUPPORT FOR SUSSEX FAMILY
STEPHEN SILLER TUNNEL TO TOWERS FOUNDATION - 2361 HYLAN BOULEVARD, - STATEN ISLAND, NY 10306	02-0554654	501 (C) (3)	404,846.	0.			UNRESTRICTED SUPPORT
RHODES COLLEGE 2000 NORTH PARKWAY, MEMPHIS, TN 38112	62-0476301	501 (C) (3)	418,000.	0.			BIOLOGY FACULTY RESEARCH FUND; CUBESAT PROJECT FINISH; SES SCHOLARSHIP

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TIDALHEALTH FOUNDATION INC 100 E. CARROLL ST., SALISBURY, MD 21801	52-1851935	501 (C) (3)	500,000.	0.			GRADUATE MEDICAL EDUCATION-DAVINCI SURGEON CONSOLE
ST. FRANCIS HEALTHCARE P.O. BOX 2500, 7TH & CLAYTON STS. WILMINGTON, DE 19805-0500	51-0064326	501 (C) (3)	500,000.	0.			HEALTHY VILLAGE PROJECT
DELAWARE STATE UNIVERSITY 1200 N DUPONT HWY, DOVER, DE 19901	51-0305893	501 (C) (3)	535,594.	0.			RESTRICTED SUPPORT FOR CLAUDE E. PHILLIPS HERBARIUM; RESTRICTED TO SUPPORT BIOSCIENCE
BEEBE MEDICAL FOUNDATION 902 SAVANNAH ROAD, ATTN: JUSTEN ALBR LEWES, DE 19958	51-0319455	501 (C) (3)	554,080.	0.			SUPPORT MOBILE VAN; 1916 GIVING SOCIETY; BEEBE GOES PURPLE; FAMILY MEDICINE RESIDENCY
STATE OF DELAWARE 89 KINGS HIGHWAY, S.W. DOVER, DE 19901	51-6000279	GOVERNMENT	568,696.	0.			RESTRICTED SUPPORT TO CHHS SENIOR AWARDS; CAPITAL COMMUNITY CENTER; UNRESTRICTED SUPPORT OF
DELAWARE ACADEMY OF VOCAL ARTS P. O. BOX 769, WILMINGTON, DE 19899	93-1339458	501 (C) (3)	660,986.	0.			DAVA FISCALLY SPONSORED PROJECT; FISCAL SPONSORSHIP; FISCAL SPONSORSHIP, TRANSFER OF
UNIVERSITY OF DELAWARE 210 S COLLEGE AVE NEWARK, DE 19716	51-6000297	501 (C) (3)	1,368,649.	0.			4-H STEM EDUCATION; ATHLETIC FUND; EDWARD J BENNETT LACROSSE SCHOLARSHIP FUND; ELIASON
WASHINGTON COLLEGE OFFICE OF COLLEGE ADVANCEMENT, 300 WASHINGTON AVENUE - CHESTERTOWN, MD 21620-	52-0591691	501 (C) (3)	1,515,000.	0.			CAPITAL ACQUISITION OF TWO(2) PARCEL PROPERTY LOCATED AT 141 ROUND TOP CREEK LAND CHESTERTOWN,
NEW YORK BLOOD CENTER INC 310 E 67TH STREET, NEW YORK, NY 10065	13-1949477	501 (C) (3)	4,535,926.	0.			FIT-OUT FOR BBD BIOTECH PLANS AT BLOOD BANK OF DELMARVA NEWARK LOCATION

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	191	679,942.	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:

ORGANIZATIONS PROVIDE GRANT REPORTS WHERE REQUIRED OR REQUESTED.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: ST. ELIZABETH HIGH SCHOOL

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT FOR TUITION

ASSISTANCE FOR CATHOLIC ELEMENTARY SCHOOLS; SUPPORT TO COVER COSTS

ASSOCIATED WITH ELEMENTARY AND HIGH SCHOOL THEATER PRODUCTIONS

COPY

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: ST JOHNS R C CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT FOR TUITION

ASSISTANCE FOR CATHOLIC ELEMENTARY SCHOOLS; SUPPORT FOR THE DRAMA PROGRAM
AT HOLY ANGELS SCHOOL

NAME OF ORGANIZATION OR GOVERNMENT: CHRIST THE TEACHER CATHOLIC SCHOOL

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT FOR TUITION

ASSISTANCE FOR CATHOLIC ELEMENTARY SCHOOLS; SUPPORT FOR THE DANCING
CLASSROOMS PROGRAM

NAME OF ORGANIZATION OR GOVERNMENT: THE TATNALL SCHOOL

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT FOR THE PURCHASE OF STRINGED

INSTRUMENTS FOR MIDDLE AND UPPER SCHOOLS; UNRESTRICTED SUPPORT

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

(H) PURPOSE OF GRANT OR ASSISTANCE: SCHOLARSHIPS; SERVIAM'S INSPIRING

MINDS CAMPAIGN; SUPPORT FOR COSTS ASSOCIATED WITH (2) THEATRE
PERFORMANCES; UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: UNITED WAY OF DELAWARE, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: COLLEGE AND CAREER READINESS: LATINO

UNIDOS STUDENT SUMMIT; SPONSORSHIP FOR THE 3RD ANNUAL PITCH OR DITCH
EVENT; UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: ACTS LEGACY FOUNDATION, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT FOR PENINSULA

UNITED METHODIST CHURCH; RESTRICTED TO COKESBURY VILLAGE; UNRESTRICTED
FUND OF COKESBURY VILLAGE; UNRESTRICTED SUPPORT

COPY

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: SURVIVORS OF ABUSE IN RECOVERY, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: MENTAL HEALTH SERVICES FOR SURVIVORS OF SEXUAL ABUSE; SPECIALIZED TRAUMA TRAINING IN KENT COUNTY; SURVIVORS OF ABUSE IN RECOVERY; UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: CARMEL YOUTH ASSISTANCE INC

(H) PURPOSE OF GRANT OR ASSISTANCE: FUNDING TO OFFSET THE COST OF TRANSPORTATION NEEDS FOR TUTORING AT-RISK STUDENTS; TO SUPPORT TUTORING AND MENTORING FOR AT-RISK STUDENTS

NAME OF ORGANIZATION OR GOVERNMENT:

DELAWARE ALLIANCE FOR NONPROFIT ADVANCEMENT

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT FOR LEADERSHIP TRAINING PROGRAM; SUPPORT FOR PARTICIPATION OF 10 CANDIDATES FROM DELAWARE HISPANIC COMMUNITY

NAME OF ORGANIZATION OR GOVERNMENT:

FAMILY COUNSELING CENTER OF ST. PAULS INC

(H) PURPOSE OF GRANT OR ASSISTANCE: ADDRESSING THE GAP IN BILINGUAL, TRAUMA-INFORMED BEHAVIORAL HEALTHCARE IN DE

NAME OF ORGANIZATION OR GOVERNMENT:

THE ROTARY FOUNDATION OF ROTARY INTERNATIONAL

(H) PURPOSE OF GRANT OR ASSISTANCE: ENDOWMENT; RESTRICTED SUPPORT TO POLIO PLUS (GEORGETOWN MILLSBORO); RESTRICTED TO SUPPORT POLIO PLUS

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

COPY

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: ARSHT FELLOWSHIP; RESTRICTED TO
SUPPORT COMBINED CAMPAIGN FOR JUSTICE; UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT:

COMMUNITY COLLABORATION OF DELAWARE, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: CAPITAL CAMPAIGN; FY24 CAPITAL GRANT
FUNDING-PAINTING AND NEW FLOORING IN SMALLWOOD HOUSE

NAME OF ORGANIZATION OR GOVERNMENT:

MID-ATLANTIC ENVIRONMENTAL LAW CENTER INC

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT FOR THE STUDY, RESEARCH,
EDUCATION, COUNSELING, AND LITIGATION, IN FURTHERANCE OF ENVIRONMENTAL
PROTECTION AND PRESERVATION IN THE DELAWARE RIVER WATERSHED

NAME OF ORGANIZATION OR GOVERNMENT: DELAWARE BOTANIC GARDENS, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: BACKLESS BENCH PLACED IN THE WEST
WOODLAND PATHWAYS; CHALLENGE MATCH; TO SUPPORT THE EAGLE CAM IN THE
GARDENS; UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT:

SOUTHERN DELAWARE THERAPEUTIC AND RECREATIONAL HORSEBACK RIDING, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: ADAPTIVE EQUIPMENT PURCHASES AND
PROGRAM ENHANCEMENT; EQUIPMENTORS FOUNDATIONAL TRAINING PROJECT;
UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: KIDS R FIRST

(H) PURPOSE OF GRANT OR ASSISTANCE: SCHOOL SUPPLIES FOR CHILDREN IN NEED
(RECEIVING FREE OR REDUCED PRICED MEALS) IN FAIRFAX AND LOUDOUN; TO

COPY

Part IV Supplemental Information

PURCHASE SCHOOL SUPPLIES FOR CHILDREN IN FAIRFAX AND LOUDOUN COUNTY

PUBLIC SCHOOLS

NAME OF ORGANIZATION OR GOVERNMENT: RONALD MCDONALD HOUSE OF DELAWARE

(H) PURPOSE OF GRANT OR ASSISTANCE: HOUSING/SUPPORT SERVICES FOR LOW TO
MODERATE INCOME FAMILIES IN KENT COUNTY; UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: RODNEY STREET TENNIS ASSOCIATION

(H) PURPOSE OF GRANT OR ASSISTANCE: UNRESTRICTED SUPPORT, TENNIS
ENRICHMENTCOMMUNITY OUTREACH, TEEN WORKFORCE DEV

NAME OF ORGANIZATION OR GOVERNMENT: ST. MICHAELS SCHOOL AND NURSERY, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: CAPITAL CAMPAIGN; FOR THE CAPITOL
CAMPAIGN IN HONOR OF BILL DUGDALE FOR THE CREATION OF AN INFANT ROOM;
UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: WILMINGTON SENIOR CENTER INC

(H) PURPOSE OF GRANT OR ASSISTANCE: FY24 CAPITAL GRANT
FUNDING-COMMERCIAL KITCHEN RENOVATION; SOCIAL SUPPORT TO PROMOTE THE
WELL-BEING OF OLDER PERSONS

NAME OF ORGANIZATION OR GOVERNMENT:

FRESH START SCHOLARSHIP FOUNDATION, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: SCHOLARSHIPS; SUPPORT FOR SCHOLARS
IN OUR CLASS OF 2024-2025 WHICH WILL BE SELECTED IN JUNE; UNRESTRICTED
SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT:

COPY

Part IV Supplemental Information

DELAWARE TECHNICAL & COMMUNITY COLLEGE EDUCATIONAL FOUNDATION 866

(H) PURPOSE OF GRANT OR ASSISTANCE: ENTREPRENEURSHIP PROGRAM

SCHOLARSHIPS; RESTRICTED TO SUPPORT BIOSCIENCE RESEARCH FELLOWSHIPS;

RESTRICTED TO SUPPORT COLLEGE'S CERTIFIED DIALYSIS TECHNICIAN PROGRAM,

INCLUDING PROGRAM EXPENSES; UNRESTRICTED SUPPORT; SCHOLARSHIPS

NAME OF ORGANIZATION OR GOVERNMENT:

URSULINE ACADEMY OF WILMINGTON DELAWARE INC

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT FOR THE SCHOLARSHIP FUND;

SUPPORT IN HONOR OF 130TH ANNIVERSARY; UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: OPERA DELAWARE INC

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED FOR CAPITAL RELATED

EXPENSES; RESTRICTED TO COSTS TO RENT AND OPERATE FACILITIES;

UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT:

PET-ASSISTED VISITATION VOLUNTEER SERVICES, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT FOR WYLIE'S

WISHES FUND; SOCIAL AND EMOTIONAL SUPPORT FOR NEURODEGENERATIVE DISEASE

PATIENTS; SUPPORT FOR READING TEAMS; UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: NEIGHBORHOOD HOUSE, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: PROGRAMMING FOR AT-RISK

AFRICAN-AMERICAN YOUTH IN SOUTHBRIDGE; PROGRAMMING IN SOUTHBRIDGE;

PROVIDING TRANSFORMATIONAL PROGRAMMING TO VULNERABLE YOUTH IN SOUTHBRIDGE

WILMINGTON; UNRESTRICTED SUPPORT

COPY

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: DOWN SYNDROME ASSOCIATION OF DELAWARE

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR THE PLAYGROUND AT THE NEW MILTON
LOCATION; BILINGUAL PROGRAMS AND OUTREACH COORDINATION; SUPPORT FOR
SUSSEX FACILITY

NAME OF ORGANIZATION OR GOVERNMENT: THE CHOIR SCHOOL OF DELAWARE INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: UNRESTRICTED SUPPORT; LATINX
OUTREACH INITIATIVE AND PROGRAMMING. BILINGUAL FAMILY SERVICES
COORDINATOR ROLE

NAME OF ORGANIZATION OR GOVERNMENT: REHOBOTH ART LEAGUE, INC

(H) PURPOSE OF GRANT OR ASSISTANCE: ARTS OUTREACH PROGRAM AT LA CASITA
AFTER-SCHOOL AND SUMMER CAMP PROGRAM AND OTHER GEORGETOWN; RESTRICTED FOR
CAPITAL RELATED EXPENSES; RESTRICTED TO COSTS TO RENT AND OPERATE
FACILITIES; UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: CHALLENGE PROGRAM

(H) PURPOSE OF GRANT OR ASSISTANCE: FY24 CAPITAL GRANT FUNDING-ROOFING
AND DOWNSPOUT REPAIRS FOR CONSTRUCTION TRAINING CENTER; PILOT MENTAL
HEALTH COUNSELING PROGRAM FOR VULNERABLE YOUNG ADULTS; UNRESTRICTED
SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: HARRY K FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: ADDRESSING CHILDHOOD HUNGER IN KENT
COUNTY; FOOD SECURITY FOR SUSSEX COUNTY MOST VULNERABLE CHILDREN; SUPPORT
FOR THE BACK PACK PROGRAM; UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: THE MUSIC SCHOOL OF DELAWARE INC

COPY

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR THE MILFORD LOCATION; RESTRICTED FOR CAPITAL RELATED EXPENSES; RESTRICTED TO COSTS TO RENT AND OPERATE FACILITIES; UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: DELAWARE FUTURES, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: ART FOR TEENS IN KENT COUNTY; CRISIS FUND; DELAWARE FUTURES; SUCCESS ONE STUDENT AT A TIME; UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: READ ALOUD DELAWARE

(H) PURPOSE OF GRANT OR ASSISTANCE: BILINGUAL OUTREACH COORDINATOR AND LENA COURSE EXPANSION; SUPPORT FOR VOLUNTEER READING PROGRAM, LENA START COSTS; UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: CATHOLIC CHARITIES, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: ACCESS TO BEHAVIOR HEALTH SERVICES FOR LOW INCOME FAMILIES; FOR WORK IN DOVER; UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: DELAWARE THEATRE COMPANY

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED FOR CAPITAL RELATED EXPENSES; RESTRICTED TO COSTS TO RENT AND OPERATE FACILITIES; TOTALLY AWESOME PLAYERS; UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: LORI'S HANDS INC

(H) PURPOSE OF GRANT OR ASSISTANCE: ADDRESSING THE INSTRUMENTAL AND SOCIAL NEEDS OF COMMUNITY MEMBERS WITH CHRONIC ILLNESS

NAME OF ORGANIZATION OR GOVERNMENT: LATIN AMERICAN COMMUNITY CENTER

COPY

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: LATIN AMERICAN COMMUNITY CENTER
CONEXIONES PROGRAM; HIGH SCHOOL CREDIT RECOVERY; ART ADDICTION 2024

NAME OF ORGANIZATION OR GOVERNMENT: CHILDRENS BEACH HOUSE INC

(H) PURPOSE OF GRANT OR ASSISTANCE: UNRESTRICTED SUPPORT; YOUTH
DEVELOPMENT PROGRAM; YOUTH DEVELOPMENT PROGRAM (YDP) (MILFORD, KENT
COUNTY)

NAME OF ORGANIZATION OR GOVERNMENT: CATHOLIC DIOCESE OF WILMINGTON

(H) PURPOSE OF GRANT OR ASSISTANCE: UNRESTRICTED SUPPORT; SPRING MUSICAL
AT PADUA ACADEMY; TUITION ASSISTANCE AT ST. ANN SCHOOL AND ST. ANTHONY OF
PADUA; SUPPORT OF PERCUSSION AT ST. ANN SCHOOL; PURCHASE OF UKELELES AT
ST. ANTHONY OF PADUA; SPRING MUSICAL AT ST. MARK'S HIGH SCHOOL

NAME OF ORGANIZATION OR GOVERNMENT: NEW CASTLE COUNTY

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT TO THE DEPT. OF
COMMUNITY SERVICES SPECIAL FUND; UNRESTRICTED SUPPORT FOR THE FRIENDS OF
THE WOODLAWN LIBRARY

NAME OF ORGANIZATION OR GOVERNMENT: CENTER FOR THE INLAND BAYS INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: CUPOLA PARK COMMUNITY CLEANUP;
THOMPSON ISLAND PROJECT; STUDENT ESTUARY EXPLORATION AT JAMES FARM
PRESERVE

NAME OF ORGANIZATION OR GOVERNMENT:

DELAWARE ADOLESCENT PROGRAM, INC. (DAPI)

(H) PURPOSE OF GRANT OR ASSISTANCE: FY24 CAPITAL GRANT

FUNDING RENOVATIONS TO DAYCARE AND INCREASED WI-FI; MATERNAL HEALTH

COPY

Part IV Supplemental Information

PROGRAM; UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT:

HABITAT FOR HUMANITY OF NEW CASTLE COUNTY

(H) PURPOSE OF GRANT OR ASSISTANCE: IN SUPPORT OF OPERATING EXPENSES AT
THE HFH NCC MIDDLETOWN RESTORE; ROCK THE BLOCK NORTHEAST - RESIDENT
LEADERSHIP TRAINING & ACTION PLAN; UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: DO CARE DOULA FOUNDATION INC

(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNITY OUTREACH IN KENT COUNTY;
SUPPORT TO RECRUIT, TRAIN, AND SUPPORT 10 BILINGUAL DOULAS OVER THE NEXT
YEAR

NAME OF ORGANIZATION OR GOVERNMENT: FIRST PARISH FEDERATED CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT FOR CAPITAL REPAIRS AND
IMPROV TO CHURCH AND PARSONAGE, SUPPORT FOR NEEDY OF SOUTH BERWICK, ME

NAME OF ORGANIZATION OR GOVERNMENT: COMMUNITY EDUCATION BUILDING

(H) PURPOSE OF GRANT OR ASSISTANCE: CEB BEHAVIORAL HEALTH SPECIALIST AND
BENEFITS NAVIGATOR FOR FAMILIES OF STUDENTS; UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT:

FIRST STATE COMMUNITY ACTION AGENCY INC

(H) PURPOSE OF GRANT OR ASSISTANCE: FY24 CAPITAL GRANT FUNDING LA CASITA
BUILDING RENOVATIONS; HOMELESSNESS PREVENTION & DIVERSION; OPIOID
OUTREACH AND NAVIGATION; UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: FIRST STATE SQUASH

COPY

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: FIRST STATE SQUASH ATHLETIC PROGRAM;
FIRST STATE SQUASH STRATEGIC GROWTH; UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT:

EASTER SEALS DELAWARE & MARYLANDS EASTERN SHORE INC

(H) PURPOSE OF GRANT OR ASSISTANCE: ARTFULNESS; CAMP FAIRLEE POOL;
CAPITAL CAMPAIGN; FY24 CAPITAL GRANT FUNDING RENOVATE 2 BATHROOMS WITH
TOUCHLESS TECHNOLOGY; MEMORY CARE AND ADULT DAY HEALTH SERVICES;
UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: NEWARK SENIOR CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: NSC PATIO EXPANSION; RESTRICTED TO
MEALS ON WHEELS PROGRAM; SUPPORT FOR MEALS ON WHEELS OR OTHER PROGRAMS TO
ENSURE FOLKS HAVE SUFFICIENT FOOD.; UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: LUTHERAN COMMUNITY SERVICES, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: DELAWARE FOOD FARMACY; RESTRICTED TO
SUPPORT PROGRAMS OF PROVIDING FOOD, CLOTHING OR SHELTER FOR THE NEEDY IN
DELAWARE; UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: CENTRAL DELAWARE HABITAT FOR HUMANITY

(H) PURPOSE OF GRANT OR ASSISTANCE: CENTRAL DOVER HOUSING; COMMUNITY
COLLABORATION; FY24 CAPITAL GRANT FUNDING CONSTRUCTION EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT: CHRISTIANA CARE HEALTH SERVICES INC

(H) PURPOSE OF GRANT OR ASSISTANCE: HEALTH LITERACY COUNCIL OF DELAWARE;
MRI-GUIDED FOCUSED ULTRASOUND; RESTRICTED SUPPORT TO THE CARDIOLOGY
DEPARTMENT; RESTRICTED SUPPORT TO THE HELEN F. GRAHAM CANCER CENTER

COPY

Part IV Supplemental Information

SPECIAL NEEDS FUND; SUPPORT FOR THE WOMENS HEALTH CENTER; UNRESTRICTED
SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: LEADING YOUTH THROUGH EMPOWERMENT

(H) PURPOSE OF GRANT OR ASSISTANCE: HEALTH SCIENCES CAREER EXPLORATION
PROGRAM; LYTE SCHOLARS: EMPOWERING LATINO FUTURES (STATEWIDE); SCHOLARS
PROGRAM; UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: WILMINGTON ALLIANCE

(H) PURPOSE OF GRANT OR ASSISTANCE: BUILDING COMMUNITY AND CIVIC MUSCLE
IN WEST CENTER CITY; EMPLOYMENT PIPELINE FOR MARGINALIZED AND JUSTICE
INVOLVED WILMINGTON RESIDENTS

NAME OF ORGANIZATION OR GOVERNMENT:

DELAWARE STATE UNIVERSITY FOUNDATION, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: DSU TRAUMA INITIATIVE: BURNOUT
PREVENTION; RESTRICTED TO SUPPORT DSU DOWNTOWN, FORMERLY WESLEY COLLEGE

NAME OF ORGANIZATION OR GOVERNMENT: GREATER LEWES FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT FOR THE OPEN
SPACE CAMPAIGN; RESTRICTED TO THE CAPE COMMUNITY FUND AT THE GLF; SUPPORT
FOR LEWES IN BLOOM; UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: INTERNATIONAL LITERACY ASSOCIATION

(H) PURPOSE OF GRANT OR ASSISTANCE: SCHOOL PARTNERSHIPS TO PROVIDE
ACCESS TO LITERACY LEARNING LIBRARY CONTINUE PROFESSIONAL DEVELOPMENT

NAME OF ORGANIZATION OR GOVERNMENT: DELAWARE CENTER FOR HORTICULTURE INC

COPY

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: PROGRAMMATIC SUPPORT, EDUCATIONAL AND PROMOTIONAL RESOURCES; ROOFED IN RESILIENCE CAMPAIGN; UNRESTRICTED SUPPORT

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

(H) PURPOSE OF GRANT OR ASSISTANCE: ABOVE XPECTATIONS PROGRAM; BEFORE AND AFTER SCHOOL ACTIVITIES, EMPLOYMENT TRAINING, PARTNERSHIPS,; BRIGHT SPOT FARMS EMPLOYMENT & LEADERSHIP TRAINING PROGRAM; FY24 CAPITAL GRANT FUNDING_RENOVATIONS TO FUTURE FOSTER HOME IN KENT COUNTY; LAUNCHER ENTREPRENEURSHIP PROGRAM; RESTRICTED SUPPORT TO THE WEST END NEIGHBORHOOD HOUSE'S CAPITAL AND MAINTENANCE PROJECTS; UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: LA ESPERANZA INC

(H) PURPOSE OF GRANT OR ASSISTANCE: UNRESTRICTED SUPPORT;PLACE-BASED OPCIONES/RESOURCE NAVIGATION AND FAMILY COACHING PROGRAM 2.0;LA COLECTIVA DE DELAWARE (SUPPORT SALARY OF LCD COORDINATOR AND PARTIAL PROGRAM COSTS);SUPPORTING THRIVING CONDITIONS FOR THE LATINO AND IMMIGRANT COMMUNITIES OF SOUTHERN DELAWARE;IMMIGRATION AND CITIZENSHIP SUPPORT SERVICES FOR SUSSEX COUNTY IMMIGRANTS

NAME OF ORGANIZATION OR GOVERNMENT: THE SPRINGBOARD COLLABORATIVE, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: GEORGETOWN PALLET SHELTER VILLAGE PROJECT; SPRINGBOARD PALLET VILLAGE; UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: DELAWARE HOSPICE, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR THE MILFORD LOCATION; RESTRICTED TO DOVER LOCATION; RESTRICTED TO SUPPORT THE MILFORD, DELAWARE LOCATION; SUPPORT FOR SUSSEX COUNTY DE; SUPPORT FOR THE MILFORD LOCATION; TO

COPY

Part IV Supplemental Information

SUPPORT DELAWARE HOSPICE NEW HOPE PROGRAM AND THE CHILDRENS GRIEF AND
LOSS DAY CAMPS THIS SUMMER; UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: CENDEL FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: PROVIDE SCHOLARSHIP FOR AT-RISK OR
FINANCIALLY-NEEDY PRE-SCHOOL CHILDREN AT KIDS COTTAGE, LLC

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

(H) PURPOSE OF GRANT OR ASSISTANCE: BUILDING HOPE IN MILFORD: THE FOOD
BANK OF DE'S CAPITAL CAMPAIGN; LATINO AND HISPANIC COMMUNITY OUTREACH
COORDINATION; RESTRICTED TO SUPPORT FOOD DISTRIBUTION IN SUSSEX COUNTY,
DE; SUPPORT FOR THE MILFORD LOCATION; UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: DELAWARE ART MUSEUM

(H) PURPOSE OF GRANT OR ASSISTANCE: DIVERSE EXHIBITION FUND; MARIPOSA
ARTS HEALING THROUGH THE ARTS; RESTRICTED FOR CAPITAL RELATED EXPENSES;
RESTRICTED TO COSTS TO RENT AND OPERATE FACILITIES; UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: BOYS AND GIRLS CLUBS OF DELAWARE

(H) PURPOSE OF GRANT OR ASSISTANCE: A CLOSET FOR KIDS, TEENS & FAMILIES;
FOR THE MILFORD LOCATION; FRAIM CHILDRENS GARDEN, PROGRAMMATIC WORK,
COLLABORATIONS, TRAINING PROGRAMS; RESTRICTED TO SUPPORT WESTERN SUSSEX
BOYS & GIRLS CLUB IN SEAFORD, DE; SUPPORT FOR THE DAGSBORO LOCATION;
SUPPORT TO FUND SUMMER POSITION IN MUSIC STUDIO PROGRAM; SUSSEX COUNTY
CLUBS; TO SUPPORT YOUTH OF THE YEAR PROGRAM; UNRESTRICTED SUPPORT;
SCHOLARSHIPS

NAME OF ORGANIZATION OR GOVERNMENT: GRAND OPERA HOUSE

COPY

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED FOR CAPITAL RELATED
EXPENSES; RESTRICTED TO COSTS TO RENT AND OPERATE FACILITIES;
UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: JEWISH FEDERATION OF DELAWARE

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT FOR
SCHOLARSHIPS/FINANCIAL AID FOR CHILDREN OF FALLEN FIRST RESPONDERS;
DIGNITY GROWS

NAME OF ORGANIZATION OR GOVERNMENT: YWCA DELAWARE, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: ENDOWMENT SUPPORT; MLK BREAKFAST,
MEALS FOR ACTION FORUM PANELIST; RESTRICTED TO SUPPORT OF ITS HOME-LIFE
MANAGEMENT CENTER; SEXUAL ASSAULT RESPONSE PROGRAM - SUSSEX COUNTY;
SURVIVORS' EMERGENCY NEEDS FUND; UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: NEMOURS FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: JOINT SDOH ASTHMA SOLUTION;
PEDIATRIC CONTINUING EDUCATION; RESTRICTED SUPPORT FOR RESEARCH INTO OR
TREATMENT RELATED TO MALROTATION AT THE WILMINGTON DE SITE; RESTRICTED
SUPPORT FOR THE ALFRED I. DU PONT HOSPITAL FOR CHILDREN; SUPPORT OF
PALLIATIVE CARE AT NEMOURS CHILDRENS HOSPITAL DELAWARE; UNRESTRICTED
SUPPORT; RESTRICTED SUPPORT FOR CANCER RESEARCH AND PATIENT CARE; SUPPORT
FOR CHILDREN WITH SPECIAL NEEDS; SUPPORT TO FUND SURGICAL PROCEDURES FOR
UNDERPRIVILEGED CHILDREN WITH DISABILITIES

NAME OF ORGANIZATION OR GOVERNMENT: YMCA OF DELAWARE

(H) PURPOSE OF GRANT OR ASSISTANCE: PEDALING FOR PARKINSONS; REDUCING
HEALTH EQUITIES IN DE (2 YEAR PROGRAM); SUPPORT FOR SUSSEX FAMILY YMCA

COPY

Part IV Supplemental Information

CAMPAIGN; TO SUPPORT FINANCIAL ASSISTANCE FOR SUMMER CAMP PROGRAMS AT THE
SUSSEX FAMILY Y; TO SUPPORT THE 2024/2025 BLACK ACHIEVERS COLLEGE TOUR.;
TO SUPPORT THE WALNUT ST. YMCA 2024 BLACK ACHIEVER COLLEGE TOUR;
UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: DELAWARE STATE UNIVERSITY

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT FOR CLAUDE E.
PHILLIPS HERBARIUM; RESTRICTED TO SUPPORT BIOSCIENCE RESEARCH
FELLOWSHIPS; SCHOLARSHIPS; SUPPORT FOR ALZHEIMER'S RESEARCH AT THE
DELAWARE CENTER FOR NEUROSCIENCE RESEARCH; UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: BEEBE MEDICAL FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT MOBILE VAN; 1916 GIVING
SOCIETY; BEEBE GOES PURPLE; FAMILY MEDICINE RESIDENCY CONTINUITY CLINIC
(2 YEAR PROGRAM); FIRE & ICE - SCHC; RESTRICTED FOR SOUTH COASTAL CANCER
CENTER; RESTRICTED SUPPORT FOR THE PALLIATIVE CARE PROGRAM AT BEEBE;
UNRESTRICTED SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: STATE OF DELAWARE

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT TO CHHS SENIOR
AWARDS; CAPITAL COMMUNITY CENTER; UNRESTRICTED SUPPORT OF DELAWARE
DIVISION OF THE ARTS, UNRESTRICTED SUPPORT FOR THE DELAWARE DIVISION OF
THE VISUALLY IMPAIRED, SUPPLIES AND FACILITY UPGRADES FOR THE DELAWARE
SCHOOL FOR THE DEAF; SUPPORT FOR MISC PROJECTS WITH THE DELAWARE STATE
PARKS, SUPPORT TO THE DELMAR SCHOOL DISTRICT, SUPPORT FOR RESTORATION AND
MAINTENANCE AT COOCH'S BRIDGE; CHIMNEY REPAIR AT 17 TWADDELL MILL ROAD
RESIDENCE AT FLINT WOODS.; DELAWARE STATE PARK SCHOOL - EMPLOYEE
TRAINING; STONE WALL REPAIRS AT BELLEVUE STATE PARK; UNRESTRICTED SUPPORT

COPY**Part IV** Supplemental Information

FOR JOHN G. LEACH SCHOOL; SUPPORT FOR THE ATHLETIC AND EDUCATION AT LAKE FOREST SCHOOL DISTRICT; SPORTSMANSHIP GRANT FOR BOYS TENNIS TEAM AT MIDDLETOWN HIGH SCHOOL; UNRESTRICTED SUPPORT TO MILFORD SCHOOL DISTRICT; ESL/FAMILY LITERACY IN KENT COUNTY; FACILITY UPGRADES AT RICHARDSON PARK ELEMENTARY SCHOOL; SCHOLARSHIPS; MAINTENANCE AT EDEN HILL PROPERTY; SPORTSMANSHIP AWARD FOR GIRLS TENNIS TEAM AT W

NAME OF ORGANIZATION OR GOVERNMENT: DELAWARE ACADEMY OF VOCAL ARTS

(H) PURPOSE OF GRANT OR ASSISTANCE: DAVA FISCALLY SPONSORED PROJECT; FISCAL SPONSORSHIP; FISCAL SPONSORSHIP, TRANSFER OF FUNDS; SUMMER INSTITUTE FOR VOCAL ARTS APPRENTICES; TRANSFER OF FUNDS FISCAL SPONSORSHIP; UNRESTRICTED SUPPORT; UNRESTRICTED SUPPORT.

NAME OF ORGANIZATION OR GOVERNMENT: UNIVERSITY OF DELAWARE

(H) PURPOSE OF GRANT OR ASSISTANCE: 4-H STEM EDUCATION; ATHLETIC FUND; EDWARD J BENNETT LACROSSE SCHOLARSHIP FUND; ELIASON EDUCATION AND GREENING FUND FOR EARLY LEARNING CENTER - OUTSIDE LIBRARY; FOOTBALL EXCELLENCE FUND; HEALTH FOR ALL (2 YEAR PROGRAM); RESTRICTED FOR THE SCHOLARSHIP PROGRAM TO SUPPORT A NEEDY/WORTHY INDIVIDUAL FROM DELAWARE; RESTRICTED SUPPORT FOR THE COLLEGE SCHOOL; RESTRICTED SUPPORT FOR THE KENT/SUSSEX OLLI PROGRAM; RESTRICTED TO SUPPORT BIOSCIENCE RESEARCH FELLOWSHIPS; RESTRICTED TO SUPPORT SCHOOL OF EDUCATION/SPEC.ED; RESTRICTED TO THE STUDY ABROAD OFFICE; RESTRICTED TO THE UD CREAMERY; SCHOLARSHIPS; SUPPORT FOR THE UD CHORALE PROGRAM TRAVEL; SUPPORT OF THE PROGRAMS IN PROFESSOR MATT OLIVER'S GROUP; SUPPORT TO THE DELAWARE CENTER FOR COGNITIVE AGING RESEARCH FOR ALZHEIMER'S RESEARCH; SUPPORT TO THE PAUL JONES COLLECTION; UD SUPPORT FOR THE CHRISTIANA ROTARY CLUB SCHOLARSHIP; UNRESTRICTED SUPPORT

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: WASHINGTON COLLEGE

(H) PURPOSE OF GRANT OR ASSISTANCE: CAPITAL ACQUISITION OF TWO(2) PARCEL
PROPERTY LOCATED AT 141 ROUND TOP CREEK LAND CHESTERTOWN, MD; TO SUPPORT
THE CININNATUS SCHOLARSHIP

NAME OF ORGANIZATION OR GOVERNMENT:

TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA

(H) PURPOSE OF GRANT OR ASSISTANCE: RESTRICTED SUPPORT FOR WXPB; SUPPORT
FOR ALZHEIMER'S RESEARCH AT THE PENN INSTITUTE ON AGING; SCHOLARSHIPS

NAME OF ORGANIZATION OR GOVERNMENT:

THE CONSERVATION FUND A NONPROFIT CORPORATION

(H) PURPOSE OF GRANT OR ASSISTANCE: GRANOUE ESTATE PROJECT TO CONSERVE
THE OPEN SPACE AND THE VITAL HABITATS SUPPORTED ON THE PROPERTY

**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 for instructions and the latest information.

COPY
OMB No. 1545-0047

2023

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

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

9

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

Schedule J (Form 990) 2023

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.

[illegible]

COPIK

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 \$15,000

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**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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 for instructions and the latest information.

COPY
OMB No. 1545-0047

2023

Open to Public
Inspection

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	7,090	602,647.	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 (.....)				
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

0

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 3 years from the date of the initial contribution, and which isn't required to be used for
exempt purposes for the entire holding period?

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?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash
contributions?

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.

	Yes	No
30a		X
31	X	
32a		X
33		

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

Schedule M (Form 990) 2023

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.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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



Name of the organization

DELAWARE COMMUNITY FOUNDATION, INC

Employer identification number

22-2804785

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
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

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

Schedule O (Form 990) 2023

Name of the organization

DELAWARE COMMUNITY FOUNDATION, INC

Employer identification number

22-2804785

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, THE AUDIT COMMITTEE APPROVES AND MANAGEMENT THEN PROVIDES TO THE BOARD FOR THEIR REVIEW AND COMMENTS PRIOR TO FILING.

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 CERTIFICATE OF COMPLIANCE STATEMENT, SIGNS IT AND RETURNS IT TO THE CHIEF FINANCIAL OFFICER FOR FILING IN THE EMPLOYEE'S PERSONNEL RECORD. ALL BOARD MEMBERS COMPLETE A CERTIFICATE OF COMPLAINE STATEMENT YEARLY AND SUBMIT TO THE EXECUTIVE ASSISTANT.

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

COMPENSATION IS REVIEWED ANNUALLY FOR THE CHIEF EXECUTIVE OFFICER BY THE EXECUTIVE COMMITTEE.

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

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AVAILABLE THROUGH THEIR WEBSITE.

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.

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

DELAWARE COMMUNITY FOUNDATION, INC

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) 2023

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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.

	Yes	No
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?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	X
b Gift, grant, or capital contribution to related organization(s)	1b	X
c Gift, grant, or capital contribution from related organization(s)	1c	X
d Loans or loan guarantees to or for related organization(s)	1d	X
e Loans or loan guarantees by related organization(s)	1e	X
f Dividends from related organization(s)	1f	X
g Sale of assets to related organization(s)	1g	X
h Purchase of assets from related organization(s)	1h	X
i Exchange of assets with related organization(s)	1i	X
j Lease of facilities, equipment, or other assets to related organization(s)	1j	X
k Lease of facilities, equipment, or other assets from related organization(s)	1k	X
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	X
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X
o Sharing of paid employees with related organization(s)	1o	X
p Reimbursement paid to related organization(s) for expenses	1p	X
q Reimbursement paid by related organization(s) for expenses	1q	X
r Other transfer of cash or property to related organization(s)	1r	X
s Other transfer of cash or property from related organization(s)	1s	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
(1) RODEL CHARITABLE FOUNDATION - DE	L	101,043.	ADMIN FEES PAID
(2)			
(3)			
(4)			
(5)			
(6)			

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.

[illegible]

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Provide additional information for responses to questions on Schedule R. See instructions.

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

<u>FEDERAL PRE-2018 NET OPERATING LOSS</u>	<u>27,284.</u>
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[illegible]

FEIN: 22-2804785

Type and Entity: PRE-2018 NOL FED

DETAIL CARRYOVER SCHEDULE

Section 382 Annual Limitation

Section 382 Carryover

[illegible]

COPY

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

OMB No. 1545-0047

2023For calendar year 2023 or other tax year beginning **JUL 1, 2023**, and ending **JUN 30, 2024**Go to **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 OnlyDepartment of the Treasury
Internal Revenue Service

A <input type="checkbox"/> Check box if address changed.	Print or Type	Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.)	D Employer identification number
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"/> 529A		DELAWARE COMMUNITY FOUNDATION, INC	22-2804785
		Number, street, and room or suite no. If a P.O. box, see instructions. P.O. BOX 1636	E Group exemption number (see instructions)
		City or town, state or province, country, and ZIP or foreign postal code WILMINGTON, DE 19899	F <input type="checkbox"/> Check box if an amended return.
		C Book value of all assets at end of year 346,147,169.	
G Check organization type <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust <input type="checkbox"/> State college/university <input type="checkbox"/> 6417(d)(1)(A) Applicable entity			

H Check if filing only to claim <input type="checkbox"/> Credit from Form 8941 <input type="checkbox"/> Refund shown on Form 2439 <input type="checkbox"/> Elective payment amount from Form 3800
I Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation <input type="checkbox"/>
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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 Trusts. Section 199A deduction. See instructions	9	
10 Total deductions. Add lines 8 and 9	10	1,000.
11 Unrelated business taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero	11	0.

Part II Tax Computation

1 Organizations taxable as corporations. Multiply Part I, line 11 by 21% (0.21)	1	0.
2 Trusts taxable at trust rates. 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 Proxy tax. See instructions	3	
4 Other tax amounts. See instructions	4	
5 Alternative minimum tax	5	
6 Tax on noncompliant facility income. See instructions	6	
7 Total. Add lines 3 through 6 to line 1 or 2, whichever applies	7	0.

Part III Tax and Payments

1a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	1a		
b Other credits (see instructions)	1b		
c General business credit. Attach Form 3800 (see instructions)	1c		
d Credit for prior-year minimum tax (attach Form 8801 or 8827)	1d		
e Total credits. Add lines 1a through 1d	1e		
2 Subtract line 1e from Part II, line 7	2	0.	
3a Amount due from Form 4255	3a		
b Amount due from Form 8611	3b		
c Amount due from Form 8697	3c		
d Amount due from Form 8866	3d		
e Other amounts due (see instructions)	3e		
f Total amounts due. Add lines 3a through 3e	3f	0.	
4 Total tax. Add lines 2 and 3f (see instructions). <input type="checkbox"/> Check if includes tax previously deferred under section 1294. Enter tax amount here	4	0.	
5 Current net 965 tax liability paid from Form 965-A, Part II, column (k)	5	0.	

Part III Tax and Payments (continued)

6 a	Payments: Preceding year's overpayment credited to the current year	6a	
b	Current year's estimated tax payments. Check if section 643(g) election applies <input type="checkbox"/>	6b	
c	Tax deposited with Form 8868	6c	
d	Foreign organizations: Tax paid or withheld at source (see instructions)	6d	
e	Backup withholding (see instructions)	6e	
f	Credit for small employer health insurance premiums (attach Form 8941)	6f	
g	Elective payment election amount from Form 3800	6g	
h	Payment from Form 2439	6h	
i	Credit from Form 4136	6i	
j	Other (see instructions)	6j	
7	Total payments. Add lines 6a through 6j	7	
8	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	8	
9	Tax due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed	9	
10	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid	10	
11	Enter the amount of line 10 you want: Credited to 2024 estimated tax Refunded	11	

Part IV Statements Regarding Certain Activities and Other Information (see instructions)

1	At any time during the 2023 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	Yes	No
			X
2	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?		X
	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 \$		
4	Enter available pre-2018 NOL carryovers here \$ <u>27,284.</u> Do not include any post-2017 NOL carryover shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Part I, line 6.		
5	Post-2017 NOL carryovers. Enter the Business Activity Code and available post-2017 NOL carryovers. Don't reduce the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions.		
	Business Activity Code	Available post-2017 NOL carryover	
		\$	
		\$	
		\$	
		\$	
6 a	Reserved for future use		
b	Reserved for future use		

Part V Supplemental Information

Provide any additional information. See instructions.

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.			
	Signature of officer	Date	Title	
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed
	KATHERINE L. SILICATO, CPA			PTIN
	Firm's name	Firm's EIN		
	GUNNIP & COMPANY LLP	51-0076769		
	Firm's address	Phone no.		
	2751 CENTERVILLE RD., STE. 300 WILMINGTON, DE 19808	302-225-5000		

May the IRS discuss this return with the preparer shown below (see instructions)?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
---	---	-----------------------------

COPY

FORM 990-T

PRE-2018 NET OPERATING LOSS DEDUCTION

STATEMENT 1

TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/12	7,815.	0.	7,815.	7,815.
06/30/13	8,372.	0.	8,372.	8,372.
06/30/14	2,029.	0.	2,029.	2,029.
06/30/15	7,946.	0.	7,946.	7,946.
06/30/16	1,122.	0.	1,122.	1,122.
NOL CARRYOVER AVAILABLE THIS YEAR			27,284.	27,284.

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 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).

COPY 1
OMB No. 1545-0047

2023

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

A Name of the organization DELAWARE COMMUNITY FOUNDATION, INC	B Employer identification number 22-2804785
C Unrelated business activity code (see instructions) 900001	D Sequence: 1 of 1

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

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

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

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

For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2023

Part III Cost of Goods Sold

Enter method of inventory valuation

1	Inventory at beginning of year	1	
2	Purchases	2	
3	Cost of labor	3	
4	Additional section 263A costs (attach statement)	4	
5	Other costs (attach statement)	5	
6	Total. Add lines 1 through 5	6	
7	Inventory at end of year	7	
8	Cost of goods sold. Subtract line 7 from line 6. Enter here and in Part I, line 2	8	
9	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

1	Description of property (property street address, city, state, ZIP code). Check if a dual-use. See instructions.				
A	<input type="checkbox"/>				
B	<input type="checkbox"/>				
C	<input type="checkbox"/>				
D	<input type="checkbox"/>				
2	Rent received or accrued	A	B	C	D
a	From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)				
b	From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)				
c	Total rents received or accrued by property. Add lines 2a and 2b, columns A through D				
3	Total rents received or accrued. Add line 2c, columns A through D. Enter here and on Part I, line 6, column (A)	0.			
4	Deductions directly connected with the income in lines 2a and 2b (attach statement)				
5	Total deductions. Add line 4, columns A through D. Enter here and on Part I, line 6, column (B)	0.			

Part V Unrelated Debt-Financed Income (see instructions)

1	Description of debt-financed property (street address, city, state, ZIP code). Check if a dual-use. See instructions.				
A	<input type="checkbox"/>				
B	<input type="checkbox"/>				
C	<input type="checkbox"/>				
D	<input type="checkbox"/>				
2	Gross income from or allocable to debt-financed property	A	B	C	D
3	Deductions directly connected with or allocable to debt-financed property				
a	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
c	Total deductions (add lines 3a and 3b, columns A through D)				
4	Amount of average acquisition debt on or allocable to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-financed property (attach statement)				
6	Divide line 4 by line 5	%	%	%	%
7	Gross income reportable. Multiply line 2 by line 6				
8	Total gross income (add line 7, columns A through D). Enter here and on Part I, line 7, column (A)	0.			
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, columns A through D. Enter here and on Part I, line 7, column (B)	0.			
11	Total dividends-received deductions included in line 10	0.			

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

1. Name of controlled organization		2. Employer identification number	Exempt Controlled Organizations			6. Deductions directly connected with income in column 5
			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	
(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).	
Totals				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).
	0.			0.
Totals				

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	

Schedule A (Form 990-T) 2023

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 ☐

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

2 Gross advertising income

Add columns A through D. Enter here and on Part I, line 11, column (A) 0.

a

3 Direct advertising costs by periodical

a Add columns A through D. Enter here and on Part I, line 11, column (B) 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 -0- 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 -0-

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

a Add line 8, columns A through D. Enter the greater of the line 8a columns total or -0- here and on

Part II, line 13 0.

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

1. Name	2. Title	3. Percentage of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	

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

Part XI Supplemental Information (see instructions)

Alternative Minimum Tax-Corporations

Attach to your tax return.
Go to www.irs.gov/Form4626 for instructions and the latest information.

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OMB No. 1545-0023

2023

Name DELAWARE COMMUNITY FOUNDATION, INC	Employer identification number 22-2804785
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- A** Is the corporation filing this form a member of a controlled group treated as a single employer under sections 59(k)(1)(D) and 52? ☐ Yes ☒ No
If "Yes," the corporation must complete Part V listing the names, EINs, and separate company financial statement income or loss for each member of the controlled group treated as a single employer taken into account in the determination of "applicable corporation" under section 59(k)(1)(D).
- B** Is the corporation filing this form a member of a foreign-parented multinational group (FPMG) within the meaning of section 59(k)(2)(B)? ☐ Yes ☒ No
If "Yes," the corporation must complete Part V listing the names, EINs, and separate company financial statement income or loss for each member of the FPMG under section 59(k)(2)(B).

Part I Applicable Corporation Determination (Report all amounts in U.S. dollars.)

If you have already determined in current or prior years you are an applicable corporation, skip Part I and continue to Part II.

	(a) First Preceding Year Ended	(b) Second Preceding Year Ended	(c) Third Preceding Year Ended
1 Net income or loss per applicable financial statement(s) (AFS) (see inst):			
a Consolidated net income or loss per the AFS of the corporation	1a		
b Include AFS net income or loss of other includible entities (add net income and subtract net loss)	1b		
c Exclude AFS net income or loss of excludible entities (add net loss and subtract net income)	1c		
d Adjustment for certain consolidating entries (see instructions)	1d		
e Specified additional net income or loss item B. Reserved for future use	1e		
f AFS net income or loss of all entities in the test group before adjustments. Combine lines 1a through 1d	1f		
2 Adjustments:			
a Financial statements covering different tax years	2a		
b Corporations that are not included on the taxpayer's consolidated return (see instructions)	2b		
c Pro-rata share of net income from controlled foreign corporations for which the corporation is a U.S. shareholder. If zero or less, enter -0- (see instructions for special rules if completing this form for an FPMG)	2c		
d Amounts that are not effectively connected to a U.S. trade or business (see instructions for special rules if completing this form for an FPMG)	2d		
e Certain taxes (see instructions)	2e		
f Patronage dividends and per-unit retain allocations (cooperatives only)	2f		
g Alaska native corporations	2g		
h Certain credits (see instructions)	2h		
i Mortgage servicing income	2i		
j Tax-exempt entities (organizations subject to tax under section 511)	2j		
k Depreciation	2k		
l Qualified wireless spectrum	2l		
m Covered transactions	2m		
n Adjustments related to bankruptcy and insolvency	2n		
o Certain insurance company adjustments	2o		
p Adjustment P - Reserved for future use	2p		
q Adjustment Q - Reserved for future use	2q		
r Adjustment R - Reserved for future use	2r		
s Adjustment S - Reserved for future use	2s		
z Other (see instructions)	2z		
3 Specified adjustment. Reserved for future use	3		
4 Total adjustments. Combine lines 2a through 2z	4		
5 AFSI. Combine lines 1f and 4	5		
6 AFSI of first, second, and third preceding tax years. Combine columns (a), (b), and (c) of line 5		6	
7 3-year average annual AFSI (see instructions)		7	

Part I **Applicable Corporation Determination** (Report all amounts in U.S. dollars.) (continued)

8 Is line 7 more than \$1 billion?

☐**Yes.** Continue to line 9.☐**No.** STOP here and attach to your tax return.

9 Is the corporation a member of an FPMG within the meaning of section 59(k)(2)(B)?

☐**Yes.** Continue to line 10.☐**No.** Continue to Part II.

10 AFSI for purposes of the \$100 million test before adjustments:

a AFSI from line 5

b Aggregation differences (see instructions)

c Total AFSI for purposes of the \$100 million test before adjustments.

Combine lines 10a and 10b

11 Adjustments:

a Income not effectively connected to a U.S. trade or business

b Pro-rata share of CFC net income described in section 56A(c)(3)
(attach worksheet) (see instructions)

c Reserved for future use - Other adjustments 1

d Reserved for future use - Other adjustments 2

12 Total adjustments. Combine lines 11a and 11b

13 Total AFSI for purposes of the \$100 million test. Combine lines
10c and 12

14 AFSI of first, second, and third preceding tax years. Combine columns (a), (b), and (c) of line 13

15 3-year average annual AFSI for purposes of the \$100 million test

16 Is line 15 \$100 million or more?

☐**Yes.** Continue to Part II.☐**No.** STOP here. Attach to your tax return.

	(a) First Preceding Year Ended	(b) Second Preceding Year Ended	(c) Third Preceding Year Ended
10a			
10b			
10c			
11a			
11b			
11c			
11d			
12			
13			
14			
15			

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Part II Corporate Alternative Minimum Tax

1 Net income or loss per applicable financial statement(s) (AFS) (see instructions):	
a Consolidated net income or loss per the AFS of the corporation	1a -1,000.
b Include AFS net income or loss of other includible entities (add net income and subtract net loss)	1b
c Exclude AFS net income or loss of excludible entities (add net loss and subtract net income)	1c
d Adjustment for certain consolidating entries (see instructions)	1d
e Specified additional net income or loss item D. Reserved for future use	1e
f AFS net income or loss before adjustments. Combine lines 1a through 1d	1f -1,000.
2 Adjustments:	
a Financial statements covering different tax years	2a
b Reserved for future use - Adjustment 2b	2b
c Corporations that are not included on the taxpayers - consolidated return (see instructions)	2c
d The corporation's distributive share of adjusted financial statement income of partnerships	2d
e Pro-rata share of net income from controlled foreign corporations for which the corporation is a U.S. shareholder. If zero or less, enter -0-. (See instructions)	2e
f Amounts that are not effectively connected to a U.S. trade or business	2f
g Certain taxes. Enter the amount from Part III, line 7	2g
h Patronage dividends and per-unit retain allocations (cooperatives only)	2h
i Alaska native corporations	2i
j Certain credits (see instructions)	2j
k Mortgage servicing income	2k
l Covered benefit plans described in section 56A(c)(11)(B)	2l
m Tax-exempt entities (organizations subject to tax under section 511)	2m
n Depreciation	2n
o Qualified wireless spectrum	2o
p Covered transactions	2p
q Adjustments related to bankruptcy and insolvency	2q
r Certain insurance company adjustments	2r
s AFSI adjustment S - Reserved for future use	2s
t AFSI adjustment T - Reserved for future use	2t
u AFSI adjustment U - Reserved for future use	2u
z Other (see instructions)	2z
3 Total adjustments. Combine lines 2a through 2z	3
4 AFSI before financial statement net operating loss carryover. Combine lines 1f and 3	4 -1,000.
5 Financial statement net operating loss (FSNOL) (see instructions)	5
6 AFSI. Subtract line 5 from line 4. If zero or less, enter -0-	6
7 Multiply line 6 by 15% (0.15)	7
8 Corporate alternative minimum tax foreign tax credit (CAMT FTC). Enter amount from Part IV, Section I, line 6 (see inst)	8
9 Tentative minimum tax. Subtract line 8 from line 7. If zero or less, enter -0-	9
10 Regular tax liability (see instructions)	10
11 Base erosion minimum tax (see instructions)	11
12 Combine lines 10 and 11	12
13 Alternative minimum tax. Subtract line 12 from line 9. If zero or less, enter -0-. Enter here and on Form 1120, Schedule J, line 3, or the appropriate line of the corporation's income tax return	13

Part III Adjustment for Certain Taxes Under Section 56A(c)(5)

1 Current income tax provision - Foreign	1
2 Current income tax provision - Federal	2
3 Deferred income tax provision - Foreign	3
4 Deferred income tax provision - Federal	4
5 Income taxes included in equity method investment income	5
6a Adjustment A - Reserved for future use	6a
b Adjustment B - Reserved for future use	6b
c Adjustment C - Reserved for future use	6c
d Adjustment D - Reserved for future use	6d
e Adjustment E - Reserved for future use	6e
f Adjustment F - Reserved for future use	6f
g Adjustment G - Reserved for future use	6g
h Adjustment H - Reserved for future use	6h
z Income taxes in other places	6z
7 Total. Combine lines 1 through 6z. Enter here and on Part II, line 2g	7

Part IV Alternative Minimum Tax - Corporations Foreign Tax Credit**Section I - AMT Foreign Tax Credit**

1	Domestic corporation AMT foreign income taxes:			
a	Total foreign taxes paid or accrued as reported on Form 1118, Schedule B, Part I, column 2(j)	1a		
b	Adjustment	1b		
c	Adjustment	1c		
d	Adjustment	1d		
e	Adjustment	1e		
f	Adjustment	1f		
g	Adjustment	1g		
2	Total domestic corporation AMT foreign income taxes. Combine lines 1a through 1g		2	
3	Allowable controlled foreign corporation (CFC) AMT foreign income taxes:			
a	Pro-rata share of CFC AMT foreign income taxes from Part IV, Section II, line 11, column (n)	3a		
b	Carryover of excess foreign taxes (from Part IV, Section III, line 4, column (vii))	3b		
c	Total CFC AMT foreign income taxes. Add lines 3a and 3b		3c	
d	Percentage specified in section 55(b)(2)(A)(i)	3d	15%	
e	Pro-rata share of CFC net income described in section 56A(c)(3) (attach worksheet) (see instructions)	3e		
f	CFC AMT foreign tax credit limitation (multiply line 3d by line 3e)		3f	
g	Allowable CFC AMT foreign income taxes (lesser of line 3c or line 3f)		3g	
4	CAMT FTC Line 4 - Reserved for future use		4	
5	CAMT FTC Line 5 - Reserved for future use		5	
6	Total AMT foreign income taxes. Combine lines 2 and 3g. Enter this amount on Part II, line 8		6	

Form **4626** (2023)