

Return of Organization Exempt From Income Tax

2018

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.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2018 calendar year, or tax year beginning <u>7/1/2018</u> , and ending <u>6/30/2019</u>																
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2">C Name of organization <u>Berks County Community Foundation, Inc.</u></td> <td>D Employer identification number <u>23-2769892</u></td> </tr> <tr> <td colspan="2">Doing business as</td> <td>E Telephone number <u>(610) 685-2223</u></td> </tr> <tr> <td colspan="2">Number and street (or P.O. box if mail is not delivered to street address) Room/suite <u>237 Court Street</u></td> <td></td> </tr> <tr> <td>City or town <u>Reading</u></td> <td>State <u>PA</u></td> <td>ZIP code <u>19601</u></td> </tr> <tr> <td>Foreign country name</td> <td>Foreign province/state/county</td> <td>Foreign postal code</td> </tr> </table>	C Name of organization <u>Berks County Community Foundation, Inc.</u>		D Employer identification number <u>23-2769892</u>	Doing business as		E Telephone number <u>(610) 685-2223</u>	Number and street (or P.O. box if mail is not delivered to street address) Room/suite <u>237 Court Street</u>			City or town <u>Reading</u>	State <u>PA</u>	ZIP code <u>19601</u>	Foreign country name	Foreign province/state/county	Foreign postal code
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City or town <u>Reading</u>	State <u>PA</u>	ZIP code <u>19601</u>														
Foreign country name	Foreign province/state/county	Foreign postal code														
F Name and address of principal officer: <u>Kevin K. Murphy 237 Court Street, Reading, PA 19601</u>		G Gross receipts \$ <u>45,741,315</u> H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)														
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶														
J Website: ▶ <u>www.bccf.org</u>																
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: <u>1994</u> M State of legal domicile: <u>PA</u>														

Part I Summary				
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>To promote philanthropy and improve the quality of life for the residents of Berks County, Pennsylvania.</u>			
	2 Check this box <input type="checkbox"/> 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)	3		13
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4		12
	5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5		12
	6 Total number of volunteers (estimate if necessary)	6		205
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a		0
b Net unrelated business taxable income from Form 990-T, line 38	7b		3,715	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year	
	9 Program service revenue (Part VIII, line 2g)	3,638,590	15,382,748	
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0	0	
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,691,771	5,242,140	
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	7,370,630	20,688,496	
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	4,896,729	5,278,763	
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0	
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	967,269	990,764	
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0	
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ <u>333,088</u>			
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	1,174,646	1,043,432	
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	7,038,644	7,312,959		
19 Revenue less expenses. Subtract line 18 from line 12	331,986	13,375,537		
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year	
	21 Total liabilities (Part X, line 26)	77,628,475	91,477,198	
	22 Net assets or fund balances. Subtract line 21 from line 20	5,073,266	6,351,896	
		72,555,209	85,125,302	

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	<u>Kevin K. Murphy</u> Type or print name and title		Date	
	Signature of officer	President		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed PTIN
	Firm's name ▶	Firm's EIN ▶		
	Firm's address ▶	Phone no.		

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: To promote philanthropy and improve the quality of life for residents of Berks County

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

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 \$ 6,299,197 including grants of \$ 5,278,673) (Revenue \$ 37,498) Berks County Community Foundation helps people find the best way to make charitable gifts to support the community. The Community Foundation manages over 300 different funds, each established with a specific purpose determined by the original donor. Some donors have decided it is best to leave the use of the funds to the discretion of the Community Foundation Board. In this way, the Community Foundation can remain flexible and responsive to community needs.

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

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

4d Other program services. (Describe in Schedule O.) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)

4e Total program service expenses 6,299,197

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

		Yes	No
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>	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>	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>		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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>		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>		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II.</i>		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III.</i>		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		X
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV.</i>		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i>	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>		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>		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>		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>	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>	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		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>		
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>		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>		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.		
	1a 40		
b	Enter the number of Forms W-2G included in 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?	X	
	1c		

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

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

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI. [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a (13), 1b (12), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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

Table with 3 columns: Question, Yes, No. Rows include: 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

Table with 2 columns: Question, Answer. Rows include: 17 (PA), 18 (Own website, Another's website, Upon request, Other), 19, 20 (The Organization, 237 Court Street, Reading, PA 19601, (610) 685-2223).

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

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

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

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

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

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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 dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(1) Kevin K. Murphy ----- President	37.50 ----- 0.00	X		X			208,293	0	16,231
(2) P. Sue Perrotty ----- Board Chair	1.00 ----- 0.00	X		X					
(3) Latisha Bernard Schuenemann ----- Asst Treasurer	1.00 ----- 0.00	X		X					
(4) James S. Boscov ----- Director	1.00 ----- 0.00	X							
(5) Eric Burkey ----- Director	1.00 ----- 0.00	X							
(6) P. Michael Ehlerman ----- Director	1.00 ----- 0.00	X							
(7) Steve Fritz ----- Director	1.00 ----- 0.00	X							
(8) Michael Mixell, Esq. ----- Director	1.00 ----- 0.00	X							
(9) Lyn Camella-Rich ----- Director	1.00 ----- 0.00	X							
(10) Elaine McDevitt ----- Director	1.00 ----- 0.00	X							
(11) Marilu Rodriguez-Bauer, Esq. ----- Director	1.00 ----- 0.00	X							
(12) Ramona Turpin ----- Director	1.00 ----- 0.00	X							
(13) Al Weber ----- Director	1.00 ----- 0.00	X							
(14) Frances A. Aitken ----- Treasurer & Senior VP Finance & Oper	37.50 ----- 0.00			X			142,337	0	10,236

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 dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) Jay R. Wagner Secretary	1.00 0.00			X						
(16)										
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
1b Sub-total							350,630	0	26,467	
c Total from continuation sheets to Part VII, Section A							0	0	0	
d Total (add lines 1b and 1c)							350,630	0	26,467	

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 **2**

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
		0
		0
		0
		0
		0

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 **0**

Part VIII Statement of Revenue

Check 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	1a	Federated campaigns	1a	0				
	b	Membership dues	1b	0				
	c	Fundraising events	1c	0				
	d	Related organizations	1d	0				
	e	Government grants (contributions)	1e	55,000				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	15,327,748				
	g	Noncash contributions included in lines 1a-1f:		\$ 185,958				
	h	Total. Add lines 1a-1f		15,382,748				
	Program Service Revenue				Business Code			
2a		-----		0				
b		-----		0				
c		-----		0				
d		-----		0				
e		-----		0				
f		All other program service revenue		0				
g	Total. Add lines 2a-2f		0					
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		1,654,091			1,654,091	
	4	Income from investment of tax-exempt bond proceeds		0				
	5	Royalties		0				
	6a			(i) Real	(ii) Personal			
				33,123				
		b	Less: rental expenses					
		c	Rental income or (loss)		33,123	0		
	d	Net rental income or (loss)		33,123	33,123			
	7a			(i) Securities	(ii) Other			
				28,555,123	0			
		b	Less: cost or other basis and sales expenses		24,967,074	0		
		c	Gain or (loss)		3,588,049	0		
	d	Net gain or (loss)		3,588,049			3,588,049	
	8a	Gross income from fundraising events (not including \$ 213,412 of contributions reported on line 1c). See Part IV, line 18		a	111,855			
		b	Less: direct expenses		b	85,745		
		c	Net income or (loss) from fundraising events			26,110		26,110
	9a	Gross income from gaming activities. See Part IV, line 19		a	0			
b		Less: direct expenses		b	0			
c		Net income or (loss) from gaming activities			0			
10a	Gross sales of inventory, less returns and allowances		a	0				
	b	Less: cost of goods sold		b	0			
	c	Net income or (loss) from sales of inventory			0			
Miscellaneous Revenue			Business Code					
11a	Other income		900099	4,375	4,375			
	b	-----		0				
	c	-----		0				
	d	All other revenue		0				
	e	Total. Add lines 11a-11d			4,375			
12	Total revenue. See instructions			20,688,496	37,498	0	5,268,250	

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 domestic governments. See Part IV, line 21	4,279,822	4,279,822		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	998,941	998,941		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	431,944	155,354	155,597	120,993
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	475,053	298,291	138,189	38,573
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	10,646	6,685	3,097	864
9	Other employee benefits	38,477	24,160	11,193	3,124
10	Payroll taxes	34,644	21,753	10,078	2,813
11	Fees for services (non-employees):				
a	Management	0			
b	Legal	28,904	6,771	22,133	
c	Accounting	23,982	345	23,637	
d	Lobbying	0			
e	Professional fundraising services. See Part IV, line 17	0			
f	Investment management fees	136,556		136,556	
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	114,551	100,537	14,014	
12	Advertising and promotion	57,896	30,590	2,588	24,718
13	Office expenses	16,975	12,482	2,950	1,543
14	Information technology	114,065	55,516	40,356	18,193
15	Royalties	0			
16	Occupancy	104,871	63,133	22,386	19,352
17	Travel	12,401	11,542	564	295
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	54,014	37,149	11,075	5,790
20	Interest	74,244	44,546	14,849	14,849
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	179,322	97,619	53,649	28,054
23	Insurance	41,589	12,581	7,228	21,780
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a	Dues & Subscriptions	21,513	10,993	6,908	3,612
b	Bank fees	5,241	3,181	2,060	
c	Special events	54,173	25,638		28,535
d	Postage	3,135	1,568	1,567	
e	All other expenses	0			
25	Total functional expenses. Add lines 1 through 24e	7,312,959	6,299,197	680,674	333,088
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)				

Part X Balance Sheet

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

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash—non-interest-bearing	56,235	1	3,703
	2 Savings and temporary cash investments	2,634,008	2	3,530,927
	3 Pledges and grants receivable, net	19,820	3	33,870
	4 Accounts receivable, net	2,861	4	21,084
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	5	0
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0	6	0
	7 Notes and loans receivable, net	822,823	7	884,876
	8 Inventories for sale or use	0	8	0
	9 Prepaid expenses and deferred charges	0	9	0
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 6,699,676		
	b Less: accumulated depreciation	10b 1,822,608	5,025,259	10c 4,877,068
	11 Investments—publicly traded securities	58,201,531	11	64,085,436
	12 Investments—other securities. See Part IV, line 11	10,011,925	12	17,167,116
	13 Investments—program-related. See Part IV, line 11	0	13	0
	14 Intangible assets	0	14	0
	15 Other assets. See Part IV, line 11	854,013	15	873,118
16 Total assets. Add lines 1 through 15 (must equal line 34)	77,628,475	16	91,477,198	
Liabilities	17 Accounts payable and accrued expenses	148,530	17	128,676
	18 Grants payable	2,517,798	18	3,447,304
	19 Deferred revenue	0	19	0
	20 Tax-exempt bond liabilities	0	20	0
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	0
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0	22	0
	23 Secured mortgages and notes payable to unrelated third parties	1,540,253	23	1,903,763
	24 Unsecured notes and loans payable to unrelated third parties	0	24	0
	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	866,685	25	872,153
	26 Total liabilities. Add lines 17 through 25	5,073,266	26	6,351,896
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	71,701,196	27	84,252,184
	28 Temporarily restricted net assets	854,013	28	873,118
	29 Permanently restricted net assets	0	29	0
	Organizations that do not follow SFAS 117 (ASC958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds	0	30	0
	31 Paid-in or capital surplus, or land, building, or equipment fund	0	31	0
	32 Retained earnings, endowment, accumulated income, or other funds	0	32	0
33 Total net assets or fund balances	72,555,209	33	85,125,302	
34 Total liabilities and net assets/fund balances	77,628,475	34	91,477,198	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	20,688,496
2	Total expenses (must equal Part IX, column (A), line 25)	2	7,312,959
3	Revenue less expenses. Subtract line 2 from line 1	3	13,375,537
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	72,555,209
5	Net unrealized gains (losses) on investments	5	-797,520
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 in Schedule O)	9	-7,924
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	85,125,302

Part XII Financial Statements and Reporting

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

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

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2018

Open to Public Inspection

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

▶ **Attach to Form 990 or Form 990-EZ.**

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

Department of the Treasury
Internal Revenue Service

Name of the organization Berks County Community Foundation, Inc.	Employer identification number 23-2769892
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Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

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

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total					0	0

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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2,827,122	2,805,834	6,217,927	3,638,590	1,882,748	17,372,221
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 Total. Add lines 1 through 3	2,827,122	2,805,834	6,217,927	3,638,590	1,882,748	17,372,221
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)						6,452,463
6 Public support. Subtract line 5 from line 4						10,919,758

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4	2,827,122	2,805,834	6,217,927	3,638,590	1,882,748	17,372,221
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	1,278,390	1,157,069	1,116,130	1,407,359	1,654,091	6,613,039
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0
11 Total support. Add lines 7 through 10						23,985,260
12 Gross receipts from related activities, etc. (see instructions)					12	199,253
13 First five 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 2018 (line 6, column (f) divided by line 11, column (f))	14	45.53%
15 Public support percentage from 2017 Schedule A, Part II, line 14	15	52.90%
16a 33 1/3% support test—2018. 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—2017. 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—2018. 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—2017. 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"/>		

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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						0
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						0
3 Gross receipts from activities that are not an unrelated trade or business under section 513						0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5 The value of services or facilities furnished by a governmental unit to the organization without charge						0
6 Total. Add lines 1 through 5	0	0	0	0	0	0
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0
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						0
c Add lines 7a and 7b	0	0	0	0	0	0
8 Public support (Subtract line 7c from line 6.)						0

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6	0	0	0	0	0	0
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						0
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
c Add lines 10a and 10b	0	0	0	0	0	0
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0
13 Total support. (Add lines 9, 10c, 11, and 12.)	0	0	0	0	0	0

14 First five 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 2018 (line 8, column (f), divided by line 13, column (f))	15	0.00%
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	0.00%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f))	17	0.00%
18 Investment income percentage from 2017 Schedule A, Part III, line 17	18	0.00%

19a 33 1/3% support tests—2018. 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—2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of 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 (b) and (c) 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 12a or 12b in Part I, answer (b) and (c) 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 (b) and (c) 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 or 990-EZ).</i>		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
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 in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
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 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>		

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 in (b) and (c) below, the governing body of a supported organization?		
11a			
b	A family member of a person described in (a) above?		
11b			
c	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		
11c			

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
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? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		
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)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
2			
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
3			

Section E. Type III Functionally Integrated Supporting Organizations

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 government entity (see instructions).		
2	Activities Test. Answer (a) and (b) 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? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
2a			
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
2b			
3	Parent of Supported Organizations. Answer (a) and (b) 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? <i>Provide details in Part VI.</i>		
3a			
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
3b			

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		
2	Recoveries of prior-year distributions		
3	Other gross income (see instructions)		
4	Add lines 1 through 3.	0	0
5	Depreciation and depletion		
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)		
7	Other expenses (see instructions)		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	0	0
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		
b	Average monthly cash balances		
c	Fair market value of other non-exempt-use assets		
d	Total (add lines 1a, 1b, and 1c)	0	0
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets		
3	Subtract line 2 from line 1d.	0	0
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	0	0
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	0	0
6	Multiply line 5 by .035.	0	0
7	Recoveries of prior-year distributions	0	0
8	Minimum Asset Amount (add line 7 to line 6)	0	0
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)		0
2	Enter 85% of line 1		0
3	Minimum asset amount for prior year (from Section B, line 8, Column A)		0
4	Enter greater of line 2 or line 3.		0
5	Income tax imposed in prior year		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).		0
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	0
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2018 from Section C, line 6	0
10 Line 8 amount divided by line 9 amount	0.000

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			0
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required—explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2018			
a From 2013	0		
b From 2014	0		
c From 2015	0		
d From 2016	0		
e From 2017	0		
f Total of lines 3a through e	0		
g Applied to underdistributions of prior years		0	
h Applied to 2018 distributable amount			0
i Carryover from 2013 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.	0		
4 Distributions for 2018 from Section D, line 7: \$ 0			
a Applied to underdistributions of prior years		0	
b Applied to 2018 distributable amount			0
c Remainder. Subtract lines 4a and 4b from 4.	0		
5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.		0	
6 Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			0
7 Excess distributions carryover to 2019. Add lines 3j and 4c.	0		
8 Breakdown of line 7:			
a Excess from 2014	0		
b Excess from 2015	0		
c Excess from 2016	0		
d Excess from 2017	0		
e Excess from 2018	0		

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.)

Lined area for supplemental information with horizontal dashed lines.

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2018

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Department of the Treasury
Internal Revenue Service

▶ **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.**

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 Berks County Community Foundation, Inc.	Employer identification number 23-2769892
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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. (see instructions for definition of "political campaign activities")

2 Political campaign activity expenditures (see instructions) ▶ \$

3 Volunteer hours for political campaign activities (see instructions)

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 ▶ \$ 0

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-.
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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 (grass roots lobbying)		0												
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	385	0												
c	Total lobbying expenditures (add lines 1a and 1b)	385	0												
d	Other exempt purpose expenditures	6,298,812	0												
e	Total exempt purpose expenditures (add lines 1c and 1d)	6,299,197	0												
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	464,960	0												
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)	116,240	0												
h	Subtract line 1g from line 1a. If zero or less, enter -0-	0	0												
i	Subtract line 1f from line 1c. If zero or less, enter -0-	0	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?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2a Lobbying nontaxable amount	337,403	354,763	454,190	464,960	1,611,316
b Lobbying ceiling amount (150% of line 2a, column(e))					2,416,974
c Total lobbying expenditures	1,357	12,000	13,490	385	27,232
d Grassroots nontaxable amount	84,351	88,691	113,548	116,240	402,830
e Grassroots ceiling amount (150% of line 2d, column (e))					604,245
f Grassroots lobbying expenditures	0	0	0	0	0

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?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			0
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
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	0
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 expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	0

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 IV Supplemental Information *(continued)*

A series of horizontal dashed lines providing space for supplemental information.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization: Berks County Community Foundation, Inc. Employer identification number: 23-2769892

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include Total number at end of year, Aggregate value of contributions, grants, and end of year, and two Yes/No questions regarding donor advisement.

Part II Conservation Easements.

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

Form for Part II Conservation Easements. Includes questions about purpose of easements, total number and acreage, monitoring policy, and expenses. Includes a table for 'Held at the End of the Tax Year' with rows 2a, 2b, 2c, and 2d.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Includes questions about reporting works of art and historical treasures, and amounts required to be reported.

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

Part IV Escrow and Custodial Arrangements.

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 0 |
| d Additions during the year | |
| e Distributions during the year | |
| f Ending balance | 0 |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	68,213,456	64,400,861	51,989,845	51,570,006	51,503,706
b Contributions	13,845,890	3,460,185	8,713,910	4,968,347	1,768,675
c Net investment earnings, gains, and losses	4,247,983	5,801,727	7,335,259	-1,184,998	1,538,832
d Grants or scholarships	3,933,169	4,526,283	2,803,894	2,595,628	2,511,591
e Other expenditures for facilities and programs					
f Administrative expenses	1,121,608	923,034	834,259	767,882	729,616
g End of year balance	81,252,552	68,213,456	64,400,861	51,989,845	51,570,006

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment 100%
 - b Permanent endowment %
 - c Temporarily restricted endowment %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|-----|----|
| (i) unrelated organizations | | X |
| (ii) related organizations | | X |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | | |
- 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	0	243,754		243,754
b Buildings	0	6,105,225	1,526,449	4,578,776
c Leasehold improvements	0	0	0	0
d Equipment	0	159,364	108,764	50,600
e Other	0	191,333	187,395	3,938

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) ▶ 4,877,068

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	9,992,796	F
(2) Closely-held equity interests	0	
(3) Other Private equity partnerships	7,174,320	F
(A) -----		
(B) -----		
(C) -----		
(D) -----		
(E) -----		
(F) -----		
(G) -----		
(H) -----		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶	17,167,116	

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. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶	0	

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, col. (B) line 15.) ▶	0

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	0
(2) Annuity payment liability	369,008
(3) Funds held as agency endowment	501,490
(4) Security deposits	1,655
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	872,153

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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

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

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

1	Total revenue, gains, and other support per audited financial statements		1	19,817,138
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	-797,510	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	104,849	
e	Add lines 2a through 2d			2e -692,661
3	Subtract line 2e from line 1			3 20,509,799
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	136,556	
b	Other (Describe in Part XIII.)	4b	42,132	
c	Add lines 4a and 4b			4c 178,688
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)			5 20,688,487

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	7,202,619
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	85,744	
e	Add lines 2a through 2d			2e 85,744
3	Subtract line 2e from line 1			3 7,116,875
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	136,556	
b	Other (Describe in Part XIII.)	4b	59,529	
c	Add lines 4a and 4b			4c 196,085
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)			5 7,312,960

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 The Community Foundation helps individuals, families and businesses find the

 best way to make charitable gifts that support causes or organizations they care about.

 The goal is to develop a charitable giving strategy that fulfills their personal

 objectives and makes the most sense financially. The Foundation makes grants from the

 endowment funds in support of its mission to promote philanthropy and improve the quality

 of life for the residents of Berks County.

 Part X Line 2 The Foundation accounts for uncertain tax positions in accordance with the

 "Income Taxes" Topic ASC 740, formerly issued as FASB Interpretation No.48, "Accounting

 for Uncertainty in Income Taxes - An Interpretation of FASB 109". ASC 740 prescribes a

 recognition threshold and measurement attribute for financial statements recognition and

 measurement of a tax position taken or expected to be taken in a tax return and also

 provides guidance on various matters such as derecognition, interest, penalties and

 disclosures required. The Foundation recognizes interest and penalties, if any, related to

Part XIII Supplemental Information (continued)

the unrecognized tax benefits in tax expense.

Part XI Line 2d Direct Expenses shown net of income on 990: Special Event expense \$85,744

+ Change in FMV of beneficial interest in perpetual trust \$19,105 = \$104,849

Part XI Line 4b Contributions, investment income and gains agency endowment: \$42,132

Part XII Line 2d Direct Expenses shown net of income on 990: Special Event expense \$85,744

Part XII Line 4b Supporting Organization expenses shown on separate form 990EZ BCCF

Properties II: \$44,426 + Grant expense on agency endowment funds: \$15,103 = \$59,529

Part I The Foundation maintains a fund known as the Metropolitan Edison Company

Sustainable Energy Fund. Metropolitan Edison Company, a "First Energy Company" was a party

in restructuring proceedings overseen and approved by the Pennsylvania Public Utilities

Commission (PUC). A portion of the proceeds from this settlement were used to establish

this fund. The Foundation does not believe the fund meets the criteria of a donor advised

fund. The fund is governed by PUC-approved bylaws that require an advisory board of no

fewer than seven and no more than nine members, which must include one member from each of

the seven groups with interests and expertise in sustainable energy, including one

representative of First Energy. The remaining positions may be filled with representatives

of Pennsylvania ratepayers and stakeholders interested in Pennsylvania's electric

industry. Nomination and election procedures are pursuant to order of the PUC and may be

amended only by further order of the PUC. Pursuant to these procedures, the Foundation

controls selection of members, within the parameters approved by the PUC. It is the

Foundation's understanding that First Energy's one position on the seven to nine member

board is a result of the PUC-approved settlement and is based on industry expertise, as is

the case with all other advisory boards.

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

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.

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization

Berks County Community Foundation, Inc.

Employer identification number

23-2769892

Part I 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

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, 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			
1					0	0	0
2					0	0	0
3					0	0	0
4					0	0	0
5					0	0	0
6					0	0	0
7					0	0	0
8					0	0	0
9					0	0	0
10					0	0	0
Total					0	0	0

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.

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	
		<u>Cystic Fibrosis Gala</u> (event type)	<u>Veterans Luncheon</u> (event type)	<u>2</u> (total number)	(add col. (a) through col. (c))	
Revenue	1	Gross receipts	195,462	106,450	23,355	325,267
	2	Less: Contributions	108,885	95,873	8,654	213,412
	3	Gross income (line 1 minus line 2)	86,577	10,577	14,701	111,855
Direct Expenses	4	Cash prizes			0	0
	5	Noncash prizes			0	0
	6	Rent/facility costs	2,500	14,886	6,216	23,602
	7	Food and beverages	36,382		4,782	41,164
	8	Entertainment	870	7,500	2,965	11,335
	9	Other direct expenses	4,432	5,212	0	9,644
	10	Direct expense summary. Add lines 4 through 9 in column (d) ▶				(85,745)
11	Net income summary. Subtract line 10 from line 3, column (d) ▶				26,110	

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))
		Revenue	1	Gross revenue	
Direct Expenses	2	Cash prizes			0
	3	Noncash prizes			0
	4	Rent/facility costs			0
	5	Other direct expenses			0
	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) ▶				(0)
8	Net gaming income summary. Subtract line 7 from line 1, column (d) ▶				0

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: _____

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2018

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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.

Name of the organization

Berks County Community Foundation, Inc.

Employer identification number

23-2769892

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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) 18th Wonder Improvement Associa 400 Hancock Blvd. Reading, PA 19611	82-3815954	501c3	15,000				For local economic development
(2) Albright College 1621 N. 13th Street Reading, PA 19611	23-1352615	501c3	13,667				2019 Albright College intern program
(3) Albright College 1621 N. 13th Street Reading, PA 19611	23-1352615	501c3	1,000,000				Track and Field Facility
(4) Albright College 1621 N. 13th Street Reading, PA 19611	23-1352615	501c3	20,000				13th Street Partnership
(5) Albright College 1621 N. 13th Street Reading, PA 19611	23-1352615	501c3	10,000				ACRE or Intern Summer Support for
(6) Allegheny Evangelical Lutheran Ch 1327 Allegheny Road Mohnton, PA 191	23-6271758	501c3	10,000				Energy efficiency improvements
(7) Allegheny Evangelical Lutheran Ch 1327 Allegheny Road Mohnton, PA 191	23-6271758	501c3	8,000				Energy Audit
(8) Alvernia University 400 St. Bernardine Street Reading, PA	23-1522643	501c3	40,000				Reading Collegiate Scholars Program
(9) Animal Rescue League of Berks Co 58 Kennel Road Birdsboro, PA 19508	23-1417505	501c3	5,800				Annual Distribution
(10) Animal Rescue League of Berks Co 58 Kennel Road Birdsboro, PA 19508	23-1417505	501c3	10,000				To pay for trees and other operating
(11) Animal Rescue League of Berks Co 58 Kennel Road Birdsboro, PA 19508	23-1417505	501c3	20,000				General Operating Support
(12) Barrio Alegria 116 North 11th Street Reading, PA 196	83-1617182	501c3	6,390				Disbursement of fund

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶
- 3** Enter total number of other organizations listed in the line 1 table ▶ **151**

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

Schedule I (Form 990) (2018)

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 noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1 Scholarships to primary and secondary schools	364	911,659			
2 Support for special needs children	2		43,342	Book	Vertical lift, bathroom remodel,tub
3 Funeral expenses	5	2,150			
4 Respite care	1	1,025			
5 Camp scholarships	7	2,675			
6 Support for extraordinary needs	103	38,090			
7					

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

Continuation Sheet for Schedule I (Form 990)

Name of the organization Berks County Community Foundation, Inc.	Employer identification number 23-2769892
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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(13) Barrio Alegria 116 North 11th Street Reading, PA 19606	83-1617182	501c3	5,500				ElCirro del Barrio on Penn Street
(14) Ben Franklin Technology Partners of NE 116 Research Drive, Plaza Level Bethlehem, PA 18018	23-2517422	501c3	10,000				General operating support
(15) Berks Alliance 606 Court St. Reading, PA 19601	22-2661138	501c3	25,000				General Support of Berks Alliance
(16) Berks Catholic High School 955 East Wyomissing Blvd. Reading, PA 19610	32-0336345	501c3	7,500				Annual Distribution
(17) Berks Community Health Center 838 Penn Street Reading, PA 19602	27-3795179	501c3	9,870				Brush Up!-A Pediatric Education Program
(18) Berks Community Health Center 838 Penn Street Reading, PA 19602	27-3795179	501c3	40,000				Equipment for Dental Suite at Rockland Center
(19) Berks Connections/Pretrial Services 633 Court St. Reading, PA 19601	23-1969810	501c3	10,000				General operating support
(20) Berks Counseling Center 645 Penn Street, 2nd Fl. Reading, PA 19601-3	23-2043478	501c3	10,000				General operating support
(21) Berks County Chiefs of Police Association P.O. Box 13296 Reading, PA 19612-3295	23-2414091	501c3	5,644				2018 Training Program expenses
(22) Berks County Community Foundation, Inc. 237 Court St. Reading, PA 19601	23-2769892	501c3	9,660				Energy Audit
(23) Berks History Center 940 Centre Avenue Reading, PA 19601	23-1421917	501c3	6,000				For Education Program
(24) Berks Nature 575 St. Bernardine Street Reading, PA 19607	23-1966295	501c3	10,000				For conservation work
(25) Bernardine Franciscan Sisters 450 St. Bernardine Street Reading, PA 19607	23-1691743	501c3	22,000				Replacement of chapel roof at St. Bernardine
(26) Borough Council, Borough of Shillington P.O. Box 247 Shillington, PA 19607	23-6002944	Gov	10,000				Annual Distribution
(27) Boyertown Area Multi-Service, Inc. 200 West Spring Street Boyertown, PA 19512	23-7289405	501c3	6,400				Food Access Program
(28) Breast Cancer Support Services of Berks 529 Reading Avenue, Suite C Reading, PA 19601	23-2762595	501c3	7,750				Support women in Berks County with breast cancer
(29) Building a Better Boyertown 3 E. Philadelphia Avenue Boyertown, PA 19512	04-3724833	501c3	12,800				Historic District nomination and/or the

Continuation Sheet for Schedule I (Form 990)

Name of the organization Berks County Community Foundation, Inc.	Employer identification number 23-2769892
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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(30) <u>Calvary United Methodist Church</u> 1 W. Wyomissing Avenue Mohnton, PA 19540	23-1705296	501c3	5,600				2019 distribution
(31) <u>Caron Treatment Centers</u> P.O. Box 150 Wernersville, PA 19565-0150	23-6050680	501c3	10,000				General Support
(32) <u>Center for Governmental Research</u> One South Washington Street Rochester, NY	16-0754774	501c3	50,000				Updates to Vital Signs through 2020
(33) <u>Centro Hispano Daniel Torres</u> 501 Washington Street Reading, PA 19603	23-2041081	501c3	10,000				For job training efforts
(34) <u>Centro Hispano Daniel Torres</u> 501 Washington Street Reading, PA 19603	23-2041081	501c3	8,000				Annual Support
(35) <u>Christ Episcopal Church</u> 435 Court Street Reading, PA 19603-1094	23-1360838	501c3	6,000				General Support
(36) <u>City of Reading Police Department</u> 815 Washington Street Reading, PA 19601	23-6001907	Gov	10,000				K9 Unit
(37) <u>City of Reading Police Department</u> 815 Washington Street Reading, PA 19601	23-6001907	Gov	12,200				K9 Unit
(38) <u>Clay on Main</u> 313 Main Street Oley, PA 19547	26-3306974	501c3	9,702				Art activities at festivals & Berks
(39) <u>Co-County Wellness Services</u> 429 Walnut Street Reading, PA 19603-8626	23-2657264	501c3	113,154				Berks Teens Matter Program
(40) <u>Colebrookdale Railroad Preservation Tru</u> 100 South Chestnut St. Boyertown, PA 19512	45-4265442	501c3	450,000				Railyard restoration project
(41) <u>Colton Underwood Legacy Foundation</u> 1270 West Cruger Road Washington, IL 6157	81-1371510	501c3	13,583				From Cystic Fibrosis Valentine's Gala
(42) <u>Community Foundation for the Allegheni</u> 216 Franklin Street, Suite 400 Johnstown, PA	25-1637373	501c3	76,750				Settlement on loan receivable
(43) <u>Community Prevention Partnership of Be</u> 200 Penn Street, 2nd Fl. Reading, PA 19602	23-2735283	501c3	10,000				Bright Smiles
(44) <u>Concern - Prof Services for Children</u> 1 West Main Street Fleetwood, PA 19522	23-2052170	501c3	15,000				Enhancements to CONCERN's
(45) <u>Conrad Weiser Area School District</u> 44 Big Spring Road Robeson, PA 19551	23-6005756	501c3	10,142				Bio-Rad - Cell imager, cell counter, slides
(46) <u>County of Berks</u> 633 Court Street, 3rd Fl. Reading, PA 19601	23-6003049	Gov	50,000				For the Berks County Complete Count

Continuation Sheet for Schedule I (Form 990)

Name of the organization Berks County Community Foundation, Inc.	Employer identification number 23-2769892
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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(47) Diocese of Allentown P.O. Box F Allentown, PA 18105-1538	23-1598116	501c3	7,500				Annual Distribution
(48) Exeter Township Police Department 4975 DeMoss Road Reading, PA 19606	23-6000327	Gov	9,766				Vet bills, K9-related training costs,
(49) Foundation for Reading Area Community 10 South Second St. Reading, PA 19603-1706	23-2273163	501c3	17,000				General Support
(50) Foundation for Reading Area Community 10 South Second St. Reading, PA 19603-1706	23-2273163	501c3	75,000				President's Initiative Fund
(51) Foundation for Reading Area Community 10 South Second St. Reading, PA 19603-1706	23-2273163	501c3	10,000				Gala Sponsor/Scholarship
(52) Foundation for the Reading Public Museum 500 Museum Road West Reading, PA 19611-	23-2563964	501c3	10,000				First floor gallery lighting
(53) Foundation for the Reading Public Museum 500 Museum Road West Reading, PA 19611-	23-2563964	501c3	6,500				Feed Their Imagination
(54) Foundation for the Reading Public Museum 500 Museum Road West Reading, PA 19611-	23-2563964	501c3	10,000				General Support
(55) Foundation for the Reading Public Museum 500 Museum Road West Reading, PA 19611-	23-2563964	501c3	9,900				Annual Distribution
(56) Friends of Yemin Orde 4340 East West Hwy, Ste. 202 Bethesda, MD	22-3090463	501c3	10,000				General Support
(57) Genesis Theatre 153 North Tenth Street Reading, PA 19601	23-2362920	501c3	20,000				Replace stage lighting with LED
(58) Girl Scouts of Eastern Pennsylvania 330 Manor Rd. Miquon, PA 19444	23-1352309	501c3	10,000				For Berks County troops
(59) GoggleWorks Center for the Arts 201 Washington Street Reading, PA 19601	41-2165262	501c3	23,400				To replace damaged windows on the 5th floor
(60) GoggleWorks Center for the Arts 201 Washington Street Reading, PA 19601	41-2165262	501c3	10,000				Art Festival Sponsorship
(61) GoggleWorks Center for the Arts 201 Washington Street Reading, PA 19601	41-2165262	501c3	10,000				General Operating Support
(62) GoggleWorks Center for the Arts 201 Washington Street Reading, PA 19601	41-2165262	501c3	25,000				Virtual reality experience around
(63) Greater Reading Chamber Alliance 606 Court St. Reading, PA 19601	22-2661138	501c3	60,000				Salary for a local Economic Development

Continuation Sheet for Schedule I (Form 990)

Name of the organization Berks County Community Foundation, Inc.	Employer identification number 23-2769892
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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(64) Habitat for Humanity of Berks County 531 Canal Street, Ste. 404 Reading, PA 19602	23-2500851	501c3	30,000				General Support
(65) Hamburg Area Education Foundation P.O. Box 402 Hamburg, PA 19526	22-8577034	501c3	5,800				Annual Distribution
(66) Hawk Mountain Council Boy Scouts of America 5027 Pottsville Pike Reading, PA 19605	23-1352047	501c3	10,000				General Support
(67) Hawk Mountain Sanctuary 1700 Hawk Mountain Road Kempton, PA 19525	23-1392700	501c3	10,000				General Operating Support
(68) Helping Harvest 117 Morgan Drive Sinking Spring, PA 19608	22-2456238	501c3	25,000				General Operating Support
(69) Hire Heroes USA 1360 Union Hill Road, Bldg 2, Ste. A Alpharett	43-1562688	501c3	10,000				General Operating Support
(70) Holy Cross U.M.C. Calvary Campus 831 North Wyomissing Blvd. Wyomissing, PA	23-6259703	501c3	9,600				For the Calvary Campus Boiler Fund
(71) Holy Cross U.M.C. Calvary Campus 831 North Wyomissing Blvd. Wyomissing, PA	23-6259703	501c3	12,000				3 air conditioners at Calvary Campus
(72) Hope Lutheran Church 601 North Front Street Reading, PA 19601	23-6001181	501c3	5,625				Cafe Esperanza
(73) Hope Lutheran Church 601 North Front Street Reading, PA 19601	23-6001181	501c3	10,000				To support Cafe Esperanza
(74) Hope Rescue Mission 645 North 6th Street Reading, PA 19601	23-1413677	501c3	10,000				General Support
(75) Hope Rescue Mission 645 North 6th Street Reading, PA 19601	23-1413677	501c3	6,500				Monthly Utility Contribution
(76) IFP Fiscal Sponsorship 30 John Street Brooklyn, NY 11201	13-3118525	501c3	10,000				Filming of Dust Nuggets @ McArdeles
(77) J.K. Boyer Boyertown Community Library 24 N. Reading Ave. Boyertown, PA 19512	23-2519885	501c3	6,230				General operating support
(78) Jewish Federation of Reading-Berks 1100 Berkshire Blvd., Suite 125 Wyomissing, PA	23-1728784	501c3	25,000				For the Local Community Fund
(79) Jewish Federation of Reading-Berks 1100 Berkshire Blvd., Suite 125 Wyomissing, PA	23-1728784	501c3	7,500				General Support
(80) Jewish Federation of Reading-Berks 1100 Berkshire Blvd., Suite 125 Wyomissing, PA	23-1728784	501c3	23,400				To support the Jewish Family Service

Continuation Sheet for Schedule I (Form 990)

Name of the organization Berks County Community Foundation, Inc.	Employer identification number 23-2769892
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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(81) John Paul II Center for Special Learning 1092 Welsh Road Shillington, PA 19607	46-2673757	501c3	5,750				General Support
(82) Kirkridge Retreat & Study Center 2495 Fox Gap Road Bangor, PA 18013	24-0791777	501c3	7,500				Kirkridge Retreat & Study Center energy
(83) Kutztown University Foundation P.O. Box 151 Kutztown, PA 19530	23-2256893	501c3	25,000				For KU Small Business
(84) Lancaster Theological Seminary 555 West James Street Lancaster, PA 17603	23-1353386	501c3	6,000				Way Forward Capital Campaign IHO
(85) Lauren's Foundation 1114 Fairview Avenue Wyomissing, PA 19610	45-4988978	501c3	12,010				Distribution of balance of fund
(86) Lifeline of Berks County, Inc. 612 Reading Avenue Reading, PA 19611	23-2071962	501c3	7,500				Annual Distribution
(87) Literacy Council of Reading-Berks, Inc. 35 South Dwight Street West Lawn, PA 19609	23-2004957	501c3	20,000				General operating support
(88) Livingston Food Resource Center 202 South 2nd Street Livingston, MT 59047	20-3550306	501c3	7,500				General Support
(89) Mifflin Community Library 6 Philadelphia Avenue Shillington, PA 19607	23-2980611	501c3	10,000				Annual Distribution
(90) Miller-Keystone Blood Center 1465 Valley Center Parkway Bethlehem, PA 1	23-1731796	501c3	15,000				Trima Accel System a Reading Blood
(91) National Geographic Society 1145 17th St., NW Washington, DC 20090-819	53-0193519	501c3	10,000				General Operating Support
(92) National Wildlife Refuge Association 1001 Connecticut Ave., NW, Ste. 905 Washing	23-7447365	501c3	10,000				General Operating Support
(93) Olivet Boys and Girls Club of Reading & 1161 Pershing Boulevard Reading, PA 19611	23-1365380	501c3	10,000				Satellite program in partnership w/Grace
(94) Olivet Boys and Girls Club of Reading & 1161 Pershing Boulevard Reading, PA 19611	23-1365380	501c3	10,000				General Support
(95) Our Town Foundation 335 State Street Hamburg, PA 19526	25-1896200	501c3	14,750				Performances, public art installation & new
(96) Our Town Foundation 335 State Street Hamburg, PA 19526	25-1896200	501c3	20,000				Improvements to Hamburg Strand
(97) Partners for Sacred Places 1700 Sansom Street, 10th Floor Philadelphia,	23-2560361	501c3	8,750				Sacred Places project for Berks County

Continuation Sheet for Schedule I (Form 990)

Name of the organization Berks County Community Foundation, Inc.	Employer identification number 23-2769892
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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(98) Penn State Berks P.O. Box 7009 Reading, PA 19610-7009	24-6000376	501c3	50,000				Beaver Community Center project
(99) Penn State Berks P.O. Box 7009 Reading, PA 19610-7009	24-6000376	501c3	10,000				Fleming Creativity, Entrepreneurship & Financial Literacy
(100) Penn State Health St. Joseph 2500 Bernville Road Reading, PA 19603-0316	23-2649362	501c3	6,630				Baby Steps to Better Dental Care
(101) Penn State Health St. Joseph 2500 Bernville Road Reading, PA 19603-0316	23-2649362	501c3	7,750				To provide support services & education for women who are
(102) Penn State Health St. Joseph 2500 Bernville Road Reading, PA 19603-0316	23-2649362	501c3	10,000				Centering Parenting Program
(103) Penn State Health St. Joseph 2500 Bernville Road Reading, PA 19603-0316	23-2649362	501c3	10,000				Annual Fund
(104) Pennsylvania School for the Deaf 100 West School House Lane Philadelphia, PA	23-1581227	501c3	9,372				Annual Distribution
(105) Planned Parenthood Keystone P.O. Box 813 Trexlertown, PA 18087-0813	23-2450112	501c3	6,270				General operating support - Berks County Berks
(106) Reach Out and Read 89 South Street, Suite 201 Boston, MA 02111	04-3481253	501c3	8,000				Account #2539, All About Children
(107) Reading Downtown Improvement District 645 Penn St., 5th Fl. Reading, PA 19603	23-2798872	Gov	50,000				For local economic development -
(108) Reading Hospital Foundation 6th Avenue & Spruce Street, A2 South Reading, PA	47-3054125	501c3	10,143				2019 Quality improvement award
(109) Reading Public Library 100 South Fifth Street Reading, PA 19602	23-2903846	501c3	5,500				Tap Into Your Library
(110) Reading Public Library 100 South Fifth Street Reading, PA 19602	23-2903846	501c3	20,000				To support entrepreneur outreach
(111) Reading Recreation Commission 320 South 3rd Street Reading, PA 19602	38-3860043	501c3	12,000				Barbey's Playground program
(112) Reading Recreation Commission 320 South 3rd Street Reading, PA 19602	38-3860043	501c3	8,000				2019 COR Tennis Summer Club
(113) Reading School District 800 Washington Street Reading, PA 19601-36	23-6004134	501c3	10,000				School-Based Summer Sealant
(114) Reading School District 800 Washington Street Reading, PA 19601-36	23-6004134	501c3	17,980				Dental Department's School-Based

Continuation Sheet for Schedule I (Form 990)

Name of the organization Berks County Community Foundation, Inc.	Employer identification number 23-2769892
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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(115) Reading Symphony Orchestra 147 N. Fifth Street, Ste. 2 Reading, PA 19601	23-1741046	501c3	6,000				Perform Peter and the Wolf at Penn Bernville
(116) Reform Congregation Oheb Sholom 555 Warwick Drive Wyomissing, PA 19610-18	23-1664967	501c3	7,500				Annual Dues
(117) Reform Congregation Oheb Sholom 555 Warwick Drive Wyomissing, PA 19610-18	23-1664967	501c3	10,500				\$10,000 General Support; \$500
(118) Ringgold Band 3539-A Fremont Avenue Laureldale, PA 19602	23-6003396	501c3	7,250				WWII, Tree Lighting Ceremony,
(119) Rock Hollow Woods Environmental Learn 615 Rock Hollow Road Birdsboro, PA 19508	46-0558242	501c3	20,000				Down payment to purchase the property
(120) Rodale Institute 611 Siegfriedale Road Kutztown, PA 19530	23-7606884	501c3	50,000				Honeybee Conservancy
(121) Ryerss Farm for Aged Equines 1710 Ridge Road Pottstown, PA 19465	23-6215037	501c3	20,000				For rescue horses and those in need of care
(122) Safe Berks 255 Chestnut Street Reading, PA 19602	23-2087191	501c3	23,400				To support the Emergency Safe
(123) Salvation Army - Reading Citadel Corps 301 S. 5th Street Reading, PA 19602	13-5562351	501c3	5,750				For the Red Kettle Program
(124) South Mountain YMCA 201 Cushion Peak Road Reinholds, PA 17569	23-2239399	501c3	7,000				Annual Distribution
(125) South Mountain YMCA 201 Cushion Peak Road Reinholds, PA 17569	23-2239399	501c3	6,900				Annual Distribution
(126) South Mountain YMCA 201 Cushion Peak Road Reinholds, PA 17569	23-2239399	501c3	32,800				Quarterly Distribution
(127) South Mountain YMCA 201 Cushion Peak Road Reinholds, PA 17569	23-2239399	501c3	33,200				Quarterly Distribution
(128) St. Ignatius Loyola Roman Catholic Church 2810 St. Alban's Drive Sinking Spring, PA 19603	23-1684800	501c3	9,372				Annual Distribution
(129) St. Ignatius Loyola Roman Catholic Church 2810 St. Alban's Drive Sinking Spring, PA 19603	23-1684800	501c3	5,750				General Support
(130) St. Joseph Medical Center Foundation P.O. Box 316 Reading, PA 19603-0316	23-2649362	501c3	10,000				To support the TAVR Team at Penn State
(131) St. Jude Children's Research Hospital 501 St. Jude Place Memphis, TN 38105	62-0646012	501c3	7,500				Annual Distribution

Continuation Sheet for Schedule I (Form 990)

Name of the organization Berks County Community Foundation, Inc.	Employer identification number 23-2769892
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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(132) State Theatre Preservation Society 61 North Reading Avenue Boyertown, PA 195	81-0915823	501c3	10,000				More Than Just Movies program
(133) The Highlands at Wyomissing 2000 Cambridge Avenue Wyomissing, PA 196	22-2790840	501c3	50,000				Toro tractor
(134) The Nature Conservancy 4245 N. Fairfax Drive, Ste. 100 Arlington, VA 2	53-0242652	501c3	10,000				For PA chapter work in PA
(135) The S.P.A.R.K.S. Foundation 110 West Wyomissing Avenue Mohnton, PA 1	06-1689284	501c3	7,000				Hands-on classroom science experiments - CMBP
(136) The Salvation Army - Boyertown Corps P.O. Box 254 Boyertown, PA 19512	13-5562351	501c3	10,000				Community Canteen
(137) Threshold Rehabilitation Services, Inc. 1000 Lancaster Avenue Reading, PA 19607	23-1681448	501c3	10,000				General operating support
(138) Tower Health at Home 1170 Berkshire Boulevard Wyomissing, PA 19	23-1466250	501c3	7,500				Community Allies Program
(139) Tulpehocken Area School District 27 Rehrersburg Road Bethel, PA 19507	23-6050725	501c3	7,850				Teacher grants for the 2018/2019 school
(140) United Way of Berks County P.O. Box 702 Reading, PA 19603-0702	23-1655375	501c3	9,300				2018 Distribution
(141) United Way of Berks County P.O. Box 702 Reading, PA 19603-0702	23-1655375	501c3	10,000				2019 Annual Campaign
(142) United Way of Boyertown Area P O Box 213 Boyertown, PA 19512-0213	23-6395495	501c3	5,148				General Support
(143) Villanova University 800 East Lancaster Avenue Villanova, PA 190	23-1352688	501c3	9,372				Annual Distribution
(144) Vision Resource Center of Berks County 2020 Hampden Boulevard Reading, PA 19604	23-1381374	501c3	17,000				For general operating support
(145) West Reading Community Revitalization 500 Chestnut Street West Reading, PA 19611	23-2959713	501c3	50,000				For local economic development
(146) West Reading Police Department 500 Chestnut Street West Reading, PA 19611	23-6002959	GOV	6,500				K9 Unit
(147) Wildlife for Everyone Foundation 341 Science Park Road State College, PA 168	20-1434680	501c3	10,000				Seedlings for Schools Program
(148) Wyomissing Public Library 9 Reading Avenue Wyomissing, PA 19610	23-1237320	501c3	9,400				Annual Distribution

Continuation Sheet for Schedule I (Form 990)

Name of the organization Berks County Community Foundation, Inc.	Employer identification number 23-2769892
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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(149) YMCA of Reading & Berks County P.O. Box 1622 Reading, PA 19603	23-1244009	501c3	7,500				Women's Services: Child Care,
(150) YMCA of Reading & Berks County P.O. Box 1622 Reading, PA 19603	23-1244009	501c3	10,000				Day Care Center Support
(151) Yocum Institute for Arts Education 3000 Penn Ave. West Lawn, PA 19609	23-1365985	501c3	15,060				Performances of Charlotte's Web
(152)							
(153)							
(154)							
(155)							
(156)							
(157)							
(158)							
(159)							
(160)							
(161)							
(162)							
(163)							
(164)							
(165)							

Continuation Sheet for Schedule I (Form 990)

Name of the organization Berks County Community Foundation, Inc.	Employer identification number 23-2769892
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Part III Continuation of Grants and Other Assistance to Individuals in the United States

(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 non-cash assistance
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

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

2018

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization

Employer identification number

Berks County Community Foundation, Inc.

23-2769892

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 checked="" 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

	Yes	No
1b	X	

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?

2	X	
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3 Indicate which, if any, of the following the filing 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 checked="" type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" 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.

4a		X
4b		X
4c		X

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.

5a		X
5b		X

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.

6a		X
6b		X

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

7		X
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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

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

9		
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Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
Kevin K. Murphy 1 President	(i)	188,293	20,000		6,442	9,789	224,524	
	(ii)						0	
Frances A. Aitken 2 Treasurer & Senior VP Finance & Op	(i)	132,337	10,000		4,352	5,884	152,573	
	(ii)						0	
3	(i)							
	(ii)							
4	(i)							
	(ii)							
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

Part III Supplemental Information

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

Part II Line 1a A portion of social club dues is reimbursed due to networking and meetings with local key leaders in the
community.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2018

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

Name of the organization Berks County Community Foundation, Inc.	Employer identification number 23-2769892
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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	1	185,958	High Low Daily Average
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 IV, Donee Acknowledgement	29	
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		Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?	30a		
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?	31	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		X
b If "Yes," describe in Part II.			
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.			

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

Area with horizontal dashed lines for supplemental information.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2018

**Open to Public
Inspection**

Name of the organization

Berks County Community Foundation, Inc.

Employer identification number

23-2769892

Form 990, Part VI, Line 11b: The Foundation's Audit Committee's primary function is to assist

the Board in fulfilling its oversight responsibilities relating to monitoring the quality,

reliability and integrity of the external financial reporting process. This includes the

audited financial statements as well as the IRS Form 990. The Audit Committee reviews both

documents and will make a recommendation to the Board for approval. The Board is provided

copies of the consolidated financial statements and Form 990 for review before approval.

Form 990, Part VI, Line 12c: Annually all board members, committee members, and staff are

required to complete a conflict of interest form. Completed forms are submitted to the

Governance Committee. One of the Governance Committee's roles is to annually review the

conflict of interest forms submitted and make any necessary disclosures if a conflict is

noted.

Form 990, Part VI, Line 15a: The compensation of the President of the Community Foundation is

reviewed and recommended annually by the Executive Committee of the Board. The committee meets

in executive session without staff present. They review the established performance objectives

and results of the President. In addition, the committee reviews industry compensation data

from Forms 990 of peer group entities. It also reviews comparable local data provided

periodically by a regional human resources consulting firm. After reviewing that material, the

Executive Committee establishes a compensation level that is designed to recognize current

market conditions and performance in the position. This information is then reviewed in

executive session with the board, which votes upon compensation.

Form 990, Part VI, Line 19: The Foundation has an open book policy of disclosure of

information to the public. All board members, committee members and staff are aware of the

Foundation's conflict of interest policy as they are required to annually read the policy and

complete a questionnaire as to any conflicts they may have. These forms are reviewed by the

Foundation's Governance Committee and, if necessary, disclosure of any noted conflict is made

to the board, committee, staff and disclosed in the Foundation's audited financial statements.

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

Schedule O (Form 990 or 990-EZ) (2018)

Name of the organization

Employer identification number

Berks County Community Foundation, Inc.

23-2769892

Governing documents are made available to anyone who asks for them. All fund agreements

reference the governing documents and are provided to anyone who requests a copy. Audited

financial statements and Form 990 are available to the public immediately after they are

completed on the Foundation's website. Form 1023 is available upon request.

Form 990, Part XI, Line 9: Other changes in net assets or fund balances = Change in Agency

Funds (\$27,029) plus \$19,105 Change in value beneficial interest in perpetual trust = (\$7,924)

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2018

**Open to Public
Inspection**

- ▶ 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.

Department of the Treasury
Internal Revenue Service

Name of the organization
Berks County Community Foundation, Inc.

Employer identification number
23-2769892

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
(1) BCCF Properties LLC 81-2246750 237 Court Street Reading, PA 19601	Hold and manage real estate	PA		13	Berks Cnty Comm I
(2) Community Properties LLC 35-2549052 237 Court Street Reading, PA 19601	Hold and manage real estate	PA		6,600	Berks Cnty Comm I
(3) -----					
(4) -----					
(5) -----					
(6) -----					

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
(1) Berks County Comm Fdn Properties II 43-1985063 237 Court Street Reading, PA 19601	To accept gifts of real property	PA	501(c)(3)	509(A)(3) Type I	N/A		X
(2) Berks Community Health Alliance 23-6783277 237 Court Street Reading, PA 19601	Accept gifts for charitable purposes	PA	501(c)(3)	509(A)(3) Type I	N/A		X
(3) South Mountain Camps Foundation 26-4511865 237 Court Street Reading, PA 19601	Accept gifts for charitable purposes	PA	501(c)(3)	509(A)(3) Type I	N/A		X
(4) -----							
(5) -----							
(6) -----							
(7) -----							

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) -----												
(2) -----												
(3) -----												
(4) -----												
(5) -----												
(6) -----												
(7) -----												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) -----									
(2) -----									
(3) -----									
(4) -----									
(5) -----									
(6) -----									
(7) -----									

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	
b Gift, grant, or capital contribution to related organization(s)	1b	
c Gift, grant, or capital contribution from related organization(s)	1c	
d Loans or loan guarantees to or for related organization(s)	1d	
e Loans or loan guarantees by related organization(s)	1e	
f Dividends from related organization(s)	1f	
g Sale of assets to related organization(s)	1g	
h Purchase of assets from related organization(s)	1h	
i Exchange of assets with related organization(s)	1i	
j Lease of facilities, equipment, or other assets to related organization(s)	1j	
k Lease of facilities, equipment, or other assets from related organization(s)	1k	
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	
o Sharing of paid employees with related organization(s)	1o	
p Reimbursement paid to related organization(s) for expenses	1p	
q Reimbursement paid by related organization(s) for expenses	1q	
r Other transfer of cash or property to related organization(s)	1r	
s Other transfer of cash or property from related organization(s)	1s	

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)			
(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.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
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Mail to:
Pennsylvania Department of State
Bureau of Corporations and Charitable Organizations
207 North Office Building
Harrisburg, PA 17120
See www.dos.pa.gov/charities for more information

Charitable Organization Registration Statement

BCO-10 (rev. 8/2017)

Fee: See instructions

Read all instructions prior to completing form.

Certificate number: 12688
(N/A if initial registration)

Fiscal year ended: 06/30/2019
MM DD YYYY

FEIN: 23-2769892

If this is a voluntary registration, check and complete the applicable box(es). For a registration to be voluntary, at least one of the following must apply:

Organization is exempt from registration because

Organization does not solicit contributions in Pennsylvania

1. Legal name of organization: Berks County Community Foundation, Inc.

Check if name change and give previous name _____

2. All other names used to solicit contributions: _____

3. Contact person: Frances A. Aitken Contact's e-mail: frankia@bccf.org

4. Principal address of organization: _____ Mailing address (if different than principal address): _____

237 Court Street

Reading PA 19601

County: Berks

Phone number: (610) 685-2223

800 number: _____

Fax number: _____

Email (if different than Contact's email): _____

Website: www.bccf.org

5. Type of organization (e.g. non-profit corporation, unincorporated association, etc.):

non-profit corporation

Where established: Pennsylvania Date established:** 06/06/1994

*Initial registrants must submit copies of organizational documents such as charter, articles of incorporation, constitution or other organizational instrument and by-laws.

6. Name and addresses of all offices, chapters, branches, auxiliaries, affiliates or other subordinate units located in Pennsylvania, which share in the contributions or other revenue raised in the Commonwealth: (Attach a separate sheet if necessary)

See the attached statement

7. Short form registration applicability – Specified types of charitable organizations described in §162.7(a) of the Act may file a short form registration, which permits the organization to register without filing a financial report. Check the section that describes the organization. If the organization does not meet any of the criteria below for short form registration, check "Not Applicable":

- §162.7(a)(1) – Persons or organizations which solicit contributions for the relief of a specific individual, when all of the contributions collected are turned over to the named beneficiary for his/her use without any deductions and provided that all contributions collected shall be held in trust
§162.7(a)(2) – Organizations which only solicit within the membership of the organization by other members of the organization. The term "membership" shall not include those persons who are granted a membership solely upon making a contribution as the result of solicitation. "Member" means a person having membership in a nonprofit corporation, or other organization, in accordance with the provisions of its articles of incorporation, bylaws or other instruments creating its form and organization and having bona fide rights and privileges in the organization such as the right to vote, to elect officers and directors, to hold office or position as ordinarily conferred on members of such organizations.
§162.7(a)(3) – Organizations which receive gross contributions of no more than \$25,000 per fiscal year whose fundraising activities are carried on only by volunteers, members, officers or permanent employees and only permanent employees are compensated for those fundraising activities
§162.7(a)(4) – Veterans organizations chartered under Federal law, organizations of volunteer firemen, ambulance associations, rescue squad associations and their auxiliaries or affiliates, which are not exempt from registration, did not receive gross contributions in excess of \$100,000 and did not use a professional solicitor.
[X] Not Applicable

Charitable organizations which check boxes §162.7(a)(1) – §162.7(a)(4) are not required to file a financial report with this registration. If "Not Applicable" is checked, the charitable organization must submit financial reports which are audited, reviewed, compiled or internally prepared. See Instructions.

Items 8 and 9 are required to be completed by initial registrants only

- 8. Date organization first solicited contributions from Pennsylvania residents: MM DD YYYY
Other
9. If organization solicited Pennsylvania residents and received gross* contributions totaling more than \$25,000 in any given fiscal year, provide the date the organization first received contributions totaling more than \$25,000. MM DD YYYY
Other

*Includes contributions received both within and outside Pennsylvania before any deductions or expenses.

10. Has the organization been granted IRS tax-exempt status? Yes No

A. If "Yes," under which IRS code section: 501(c)3 and attach a copy of the IRS exemption letter if not previously submitted.

B. Has the organization's tax-exempt status ever been denied, revoked or modified? Yes No
(If "Yes," attach a copy of the denial, revocation or modification and subsequent reinstatement, if any, and if not previously submitted.)

11. Was the organization required to file any type of IRS 990 return, including 990, 990EZ, 990PF or 990N and applicable schedules, for its most recently completed fiscal year? Yes No

(If "Yes," attach a copy of the most recently filed 990, 990EZ, 990PF or 990N and include all schedules.
If "No," attach an explanation of why the organization is exempt from filing an IRS 990 return. An organization that is not required to file an IRS 990 return or an organization that files a 990N, 990EZ or 990PF, must file a Pennsylvania public disclosure form (BCO-23).)

12. Manner in which contributions are solicited (e.g. direct mail, telephone, internet, etc.):

Literature, local media coverage and verbal communications by staff and key leaders in the community

13. A clear description of the specific programs for which contributions are used or will be used, and a statement describing whether such programs are planned or in existence.

Endowment program in existence to attract and manage funds and apply them to social, educational, environmental and cultural programs that benefit the local community.

14. Is the organization registered to solicit contributions in any other state or municipality?
 Yes No (If "Yes," list all states and municipalities. Attach a separate sheet if necessary.)

15. Is any person compensated, or does the organization intend to compensate any person, who solicits contributions in Pennsylvania, including, but not limited to, employees of the organization and professional solicitors? (Do not check "Yes" if the organizations only uses or intend to only use a professional fundraising counsel.) Yes No

If "Yes," give the date the person or entity started or will start soliciting contributions from

Pennsylvania residents: 07/01/1994
Month Day Year

16. Names, addresses, and telephone numbers of all professional solicitors the organization uses or intends to use to solicit contributions from Pennsylvania residents. For each entry, include the beginning and ending dates of all contracts and dates Pennsylvania residents were first solicited, or will be solicited: (Attach a separate sheet if necessary)

None

17. Names, addresses, and telephone numbers of all professional fundraising counsel the organizations uses or intends to use to provide services with respect to the solicitation of contributions from Pennsylvania residents. For each entry, include the beginning and ending dates of all contracts and dates services began, or will begin, with respect to soliciting contributions from Pennsylvania residents: (Attach a separate sheet if necessary)

None

18. Names, addresses, and telephone numbers of any commercial coventurers under contract with the organization: (Attach a separate sheet if necessary)

None

19. If the registering charity is a parent organization located in Pennsylvania, does the organization elect to file a combined registration covering all of its Pennsylvania affiliates? (See note "Affiliate and Parent Organization") Yes No Not Applicable

If "Yes," give all names and certificate numbers of the affiliate organizations: (Each affiliate whose parent organization files an IRS 990 group return must submit a copy of the parent organization's 990 group return and file a public disclosure form (BCO-23) for each affiliate.)

20. Is the registering charity a Pennsylvania affiliate of a parent organization, which elected to file a combined registration on the registering charity's behalf? (See note "Affiliate and Parent Organization") Yes No Not Applicable

If "Yes," provide the name and, if available, certificate number of the parent organization. (Each affiliate whose parent organization files an IRS 990 group return must submit a copy of the parent organization's 990 group return and file a public disclosure form (BCO-23) for each affiliate.)

Legal name of parent organization

Pennsylvania certificate number

21. Provide the names and addresses of all officers, directors, trustees and principal salaried executive staff officers. (Attach separate sheet if necessary. A reference to the 990 or the BCO-23 is not sufficient.)

See Attached Statement

22. Names of the individuals or officers of the organization who: (Attach a separate sheet if necessary)

A. Are in charge of solicitation activities:

Kevin K. Murphy, President

Frances A. Aitken, Senior VP for Finance & Operations

B. Have final responsibility for the custody of contributions:

Board of Directors (see the attached statement)

C. Have final responsibility for final distribution of contributions:

Board of Directors (see the attached statement)

D. Are responsible for custody of financial records:

Kevin K. Murphy, President

Frances A. Aitken, Senior VP for Finance & Operations

23. Are any officers, directors, trustees, or employees related by blood, marriage, or adoption to:

A. Any other officer, director, trustee, or employee? Yes No

B. Any officer, agent, or employee of any professional fundraising counsel or solicitor under contract with organization? ** Yes No

C. Any officers, agents or employees of any supplier or vendor providing goods or services? ** Yes No

** (this includes any officer, director, trustee, or employee of the charitable organization who is also an officer, director, trustee, employee or owner of a professional fundraising counsel, professional solicitor, supplier or vendor)

If "Yes" is checked to any of the above, attach a list of related individuals including names, business, and residence addresses of related parties.

24. Has the organization or any of its present officers, directors, executive personnel or trustees ever:

A. Been found to have engaged in unlawful practices in the solicitation of contributions or administration of charitable assets or been enjoined from soliciting contributions or currently has such proceedings pending in this or any other jurisdiction? Yes No

B. Had its registration or license to solicit contributions denied, suspended, or revoked by any governmental agency? Yes No

C. Entered into any legally enforceable agreement (such as a consent agreement, an assurance of voluntary compliance or discontinuance or any similar agreement) with any district attorney, Office of Attorney General, or other local or state governmental agency? Yes No

(If "Yes" is checked in response to any of the above, attach a written explanation, including the reasons for actions, and copies of all relevant documents.)

Certification – This registration statement must be signed by two different officers of the organization, one of whom shall be the chief fiscal officer or the equivalent.

I certify that the information provided in this registration, including all statements and attached documentation, is true and correct to the best of my knowledge, information and belief. I understand that the falsification of any statement or documentation made is subject to the penalties of 18 Pa.C.S. §4904 (relating to unsworn falsification to authorities) and 10 P.S. §162.17 (relating to administrative enforcement and penalties).

Signature of Chief Fiscal Officer

Date

Type or print name and title of Chief Fiscal Officer

Signature of Other Authorized Officer

Date

Type or print name and title of Other Authorized Officer

Checklist for registration:

- Completed registration statement properly signed and dated.
- A copy of the IRS 990/990EZ/990PF/990N Return and required schedules, signed and dated by an authorized officer
- Public Disclosure Form BCO-23 (if required)
- Applicable Financial Statements (audited, reviewed, compiled or internally prepared)
- Registration fee and any late filing fees
- Initial Registrants Only: IRS determination letter, articles of incorporation or charter and by-laws.

See Instructions for more information on completing this form and attachments.