

Return of Organization Exempt From Income Tax
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.
▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

A For the 2016 calendar year, or tax year beginning **JUL 1, 2016** and ending **JUN 30, 2017**

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	C Name of organization DELAWARE COMMUNITY FOUNDATION, INC Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite P.O. BOX 1636 City or town, state or province, country, and ZIP or foreign postal code WILMINGTON, DE 19899 F Name and address of principal officer: JOHN STUART COMSTOCK-GAY SAME AS C ABOVE	D Employer identification number 22-2804785 E Telephone number 302-571-8004 G Gross receipts \$ 116,783,071. 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) H(c) Group exemption number ▶
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		
J Website: ▶ WWW.DELCF.ORG		
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: 1986		M State of legal domicile: DE

Part I Summary

1	Briefly describe the organization's mission or most significant activities: BUILDING A SHARED VISION FOR DELAWARE, GROUNDED IN KNOWLEDGE, INSPIRED BY THE COMMON GOOD AND		
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	26
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	25
5	Total number of individuals employed in calendar year 2016 (Part V, line 2a)	5	21
6	Total number of volunteers (estimate if necessary)	6	50
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
7b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
8	Contributions and grants (Part VIII, line 1h)	Prior Year 17,588,208.	Current Year 10,610,060.
9	Program service revenue (Part VIII, line 2g)	0.	0.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	5,008,539.	3,391,828.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,426,703.	956,089.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	24,023,450.	14,957,977.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	16,991,386.	33,430,958.
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)	1,586,549.	1,804,328.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,890,627.		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	4,453,501.	3,810,129.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	23,031,436.	39,045,415.
19	Revenue less expenses. Subtract line 18 from line 12	992,014.	-24,087,438.
20	Total assets (Part X, line 16)	Beginning of Current Year 229,354,539.	End of Year 223,455,347.
21	Total liabilities (Part X, line 26)	41,500,154.	43,905,418.
22	Net assets or fund balances. Subtract line 21 from line 20	187,854,385.	179,549,929.

Part II Signature Block

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

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

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: BUILDING A SHARED VISION FOR DELAWARE, GROUNDED IN KNOWLEDGE, INSPIRED BY THE COMMON GOOD AND ADVANCED THROUGH PHILANTHROPY. WE ENVISION, VIBRANT COMMUNITIES, DRIVEN BY COLLABORATIONS THAT UNITE GENEROSITY, KNOWLEDGE AND OTHER RESOURCES TO ADDRESS DELAWARE'S EVOLVING NEEDS AND

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

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

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

4a (Code:) (Expenses \$ 36,014,251. including grants of \$ 33,430,958.) (Revenue \$ 956,089.) IN THE FISCAL YEAR ENDED JUNE 30, 2017, THE DELAWARE COMMUNITY FOUNDATION SUPPORTED COMMUNITY NEEDS BY AWARDING MORE THAN \$38 MILLION IN GRANTS AND PROGRAM EXPENSES TO NONPROFIT ORGANIZATIONS AND LOCAL STUDENTS. OVER \$8.5 MILLION OF THESE AWARDS CAME FROM DONOR-DIRECTED COMPONENT FUNDS AT THE DCF. THE DCF UNRESTRICTED GRANTS PROGRAM FUNDED SIX COLLABORATIVE GRANTS. THESE GRANTS SEEK TO INSPIRE AND SUPPORT SPECIAL INITIATIVES IN WHICH MULTIPLE NONPROFIT ORGANIZATIONS COLLABORATE AND LEVERAGE EACH OTHER'S RESOURCES TO MAXIMIZE THE IMPACT OF THE GRANT DOLLARS. SEE SCHEDULE O FOR THE REMAINING DESCRIPTION.

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

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

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

4e Total program service expenses 36,014,251.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 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>		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

Part IV Checklist of Required Schedules (continued)

	Yes	No
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	
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?	X	

Note. All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Input box for Schedule O

Main table with columns for question numbers (1a-14b), Yes/No, and numerical responses (166, 0, 21). Includes questions about Form 1096, Form W-2G, Form W-3, and various IRS forms.

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
	1a 26		
b	Enter the number of voting members included in line 1a, above, who are independent		
	1b 25		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

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

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

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **NONE**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records: **JOHN STUART COMSTOCK-GAY - 302-571-8004**
P.O. BOX 1636, WILMINGTON, DE 19899

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

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

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

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

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

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 line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ANDY STATON BOARD MEMBER	2.00	X					0.	0.	0.	
(2) CINDY L. SZABO, ESQ. BOARD MEMBER	2.00	X					0.	0.	0.	
(3) DAVID SINGLETON TREASURER	2.00	X		X			0.	0.	0.	
(4) DONALD W. NICHOLSON JR., CFP AA BOARD MEMBER	2.00	X					0.	0.	0.	
(5) DONEENE KEEMER DAMON, ESQ. BOARD MEMBER	2.00	X					0.	0.	0.	
(6) GARY STOCKBRIDGE BOARD MEMBER	2.00	X					0.	0.	0.	
(7) JAMES MAZARAKIS BOARD MEMBER	2.00	X					0.	0.	0.	
(8) JANICE E. NEVIN, MD, MPH BOARD MEMBER	2.00	X					0.	0.	0.	
(9) JENNINGS P. HASTINGS, CPA, ABV BOARD MEMBER	2.00	X					0.	0.	0.	
(10) JOAN L. SHARP BOARD MEMBER	2.00	X					0.	0.	0.	
(11) JOHN C. HAWKINS BOARD MEMBER	2.00	X					0.	0.	0.	
(12) JOHN W. PARADEE, ESQ. BOARD MEMBER	2.00	X					0.	0.	0.	
(13) KATHLEEN FUREY MCDONOUGH, ESQ. BOARD MEMBER	2.00	X					0.	0.	0.	
(14) LYNN ADAMS KOKJOHN BOARD MEMBER	2.00	X					0.	0.	0.	
(15) MARILYN R. HAYWARD IMMEDIATE PAST CHAIR	2.00	X					0.	0.	0.	
(16) MARTHA S. GILMAN BOARD MEMBER	2.00	X					0.	0.	0.	
(17) MICHELLE A. TAYLOR BOARD MEMBER	2.00	X					0.	0.	0.	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) NANCY KARIBJANIAN BOARD MEMBER	2.00	X						0.	0.	0.
(19) ROBERT N. MACGOVERN, JR. BOARD MEMBER	2.00	X						0.	0.	0.
(20) THOMAS E. HANSON, JR., ESQ. BOARD MEMBER	2.00	X						0.	0.	0.
(21) THOMAS J. SHOPA, CPA, CFP, CVA BOARD MEMBER	2.00	X						0.	0.	0.
(22) THOMAS L. SAGER, ESQ. CHAIRPERSON	2.00	X		X				0.	0.	0.
(23) WILLIAM C. DUGDALE CORPORATE SECRETARY	2.00	X		X				0.	0.	0.
(24) KAY KEENAN BOARD MEMBER	2.00	X						0.	0.	0.
(25) JOHN STUART COMSTOCK-GAY PRESIDENT & CEO	35.00			X				248,018.	0.	62,089.
(26) KELLY FIRMENT VICE-CHAIRPERSON	2.00			X				0.	0.	0.
1b Sub-total								248,018.	0.	62,089.
c Total from continuation sheets to Part VII, Section A								170,423.	0.	29,153.
d Total (add lines 1b and 1c)								418,441.	0.	91,242.

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? If "Yes," complete Schedule J for such individual		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? If "Yes," complete Schedule J for such individual	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? If "Yes," complete Schedule J for such person		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
PMG CONSULTING LLC, 29471 SKIPTON ESTATES DRIVE, CORDOVA, MD 21625	CONSULTING	256,208.
CHRISTINE CANNON 131 WYETH WAY, HOCKESSIN, DE 19707	CONSULTING	150,000.

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 **2**

SEE PART VII, SECTION A CONTINUATION SHEETS

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(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			
(27) RICHARD A. GENTSCH EXECUTIVE VICE PRESIDENT	35.00			X				170,423.	0.	29,153.
Total to Part VII, Section A, line 1c								170,423.		29,153.

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	1 a Federated campaigns	1a 159,095.					
	b Membership dues	1b 34,625.					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e 541,510.					
	f All other contributions, gifts, grants, and similar amounts not included above	1f 9,874,830.					
	g Noncash contributions included in lines 1a-1f: \$	1,715,416.					
	h Total. Add lines 1a-1f		10,610,060.				
	Program Service Revenue	2 a _____	Business Code				
b _____							
c _____							
d _____							
e _____							
f All other program service revenue							
g Total. Add lines 2a-2f							
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		2,730,524.			2,730,524.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real	3,400.				
		(ii) Personal					
		b Less: rental expenses	0.				
		c Rental income or (loss)	3,400.				
	d Net rental income or (loss)		3,400.	3,400.			
	7 a Gross amount from sales of assets other than inventory	(i) Securities	102,486,398.				
		(ii) Other					
		b Less: cost or other basis and sales expenses	101,825,094.				
		c Gain or (loss)	661,304.				
	d Net gain or (loss)		661,304.			661,304.	
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
		b Less: direct expenses	b				
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	a						
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	a						
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11 a EVENT INCOME	900099	584,338.	584,338.				
b ADMINISTRATIVE FEE REVEUNE	561000	355,999.	355,999.				
c LOAN INTEREST INCOME	900099	11,873.	11,873.				
d All other revenue	900099	479.	479.				
e Total. Add lines 11a-11d		952,689.					
12 Total revenue. See instructions.		14,957,977.	956,089.	0.	3,391,828.		

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	33,387,862.	33,387,862.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	43,096.	43,096.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	445,967.	165,019.	64,257.	216,691.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	993,779.	367,723.	143,189.	482,867.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	43,211.	15,989.	6,226.	20,996.
9 Other employee benefits	228,772.	84,651.	32,963.	111,158.
10 Payroll taxes	92,599.	34,894.	12,168.	45,537.
11 Fees for services (non-employees):				
a Management				
b Legal	32,279.	31,222.	221.	836.
c Accounting	64,942.	13,332.	42,756.	8,854.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	716,059.		716,059.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	1,248,452.	1,159,888.	30,588.	57,976.
12 Advertising and promotion	52,413.	22,599.	83.	29,731.
13 Office expenses	246,518.	107,488.	23,118.	115,912.
14 Information technology	35,410.	24,175.	2,353.	8,882.
15 Royalties				
16 Occupancy	114,440.	57,812.	9,668.	46,960.
17 Travel	20,432.	7,098.	1,150.	12,184.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	75,340.	59,113.	3,497.	12,730.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	43,124.		43,124.	
23 Insurance	42,071.	16,689.	3,906.	21,476.
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 FUNDRAISING EXPENSES	649,671.			649,671.
b UNITRUST/CRUT PAYMENT	209,193.	209,193.		
c CHANGE IN ANNUITY VALUE	61,818.	61,818.		
d SUBSCRIPTIONS & PUBLICA	61,791.	28,606.	3,240.	29,945.
e All other expenses	136,176.	115,984.	1,971.	18,221.
25 Total functional expenses. Add lines 1 through 24e	39,045,415.	36,014,251.	1,140,537.	1,890,627.
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 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		1	
	2 Savings and temporary cash investments	35,361,531.	2	10,571,300.
	3 Pledges and grants receivable, net	320,475.	3	812,129.
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	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 instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net	1,180,111.	7	1,180,362.
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 548,053.		
	b Less: accumulated depreciation	10b 345,449.		
	11 Investments - publicly traded securities	116,031,533.	11	182,418,848.
	12 Investments - other securities. See Part IV, line 11	75,720,448.	12	27,316,211.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	515,554.	15	953,893.
16 Total assets. Add lines 1 through 15 (must equal line 34)	229,354,539.	16	223,455,347.	
Liabilities	17 Accounts payable and accrued expenses	279,482.	17	370,142.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	41,220,672.	25	43,535,276.
	26 Total liabilities. Add lines 17 through 25	41,500,154.	26	43,905,418.
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	187,642,253.	27	179,319,422.
	28 Temporarily restricted net assets	212,132.	28	230,507.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	187,854,385.	33	179,549,929.	
34 Total liabilities and net assets/fund balances	229,354,539.	34	223,455,347.	

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	14,957,977.
2	Total expenses (must equal Part IX, column (A), line 25)	2	39,045,415.
3	Revenue less expenses. Subtract line 2 from line 1	3	-24,087,438.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	187,854,385.
5	Net unrealized gains (losses) on investments	5	15,782,982.
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	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	179,549,929.

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?		X
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		
b Were the organization's financial statements audited by an independent accountant?	X	
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		
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?	X	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		
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)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Open to Public Inspection

Name of the organization

DELAWARE COMMUNITY FOUNDATION, INC

Employer identification number

22-2804785

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		
Total						

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) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	13891718.	21112680.	40430829.	17606886.	10575435.	103617548
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	13891718.	21112680.	40430829.	17606886.	10575435.	103617548
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)						40918150.
6 Public support. Subtract line 5 from line 4.						62699398.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7 Amounts from line 4	13891718.	21112680.	40430829.	17606886.	10575435.	103617548
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3102533.	2788052.	3220998.	3142995.	2733316.	14987894.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						118605442
12 Gross receipts from related activities, etc. (see instructions)					12	
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 2016 (line 6, column (f) divided by line 11, column (f))	14	52.86 %
15 Public support percentage from 2015 Schedule A, Part II, line 14	15	50.95 %
16a 33 1/3% support test - 2016. 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 - 2015. 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 - 2016. 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 - 2015. 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) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge ...						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources ...						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 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 2016 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2015 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2015 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2016. 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 - 2015. 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 (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?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .		

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? 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.		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		

Section C. Type II Supporting Organizations

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

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?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
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? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

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? 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.		
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? 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.		
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? Provide details in Part VI .		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		

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

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

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

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	
9 Distributable amount for 2016 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1 Distributable amount for 2016 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2016 (reasonable cause required- explain in Part VI). See instructions			
3 Excess distributions carryover, if any, to 2016:			
a			
b			
c From 2013			
d From 2014			
e From 2015			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2016 distributable amount			
i Carryover from 2011 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2016 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2016 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions			
6 Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions			
7 Excess distributions carryover to 2017. Add lines 3j and 4c			
8 Breakdown of line 7:			
a			
b Excess from 2013			
c Excess from 2014			
d Excess from 2015			
e Excess from 2016			

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2016

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

- ▶ **Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.**
- ▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.**

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

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

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

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

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

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

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

- 2 Political campaign activity expenditures ▶ \$ _____
- 3 Volunteer hours for political campaign activities

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

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

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

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

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

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

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

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)														
b Total lobbying expenditures to influence a legislative body (direct lobbying)														
c Total lobbying expenditures (add lines 1a and 1b)														
d Other exempt purpose expenditures														
e Total exempt purpose expenditures (add lines 1c and 1d)														
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:35%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width:65%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e.													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.													
Over \$17,000,000	\$1,000,000.													
g Grassroots nontaxable amount (enter 25% of line 1f)														
h Subtract line 1g from line 1a. If zero or less, enter -0-														
i Subtract line 1f from line 1c. If zero or less, enter -0-														
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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

	(a)		(b)
	Yes	No	Amount
<i>For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.</i>			
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..		X	
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?	X		6,300.
j Total. Add lines 1c through 1i			6,300.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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

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

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

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

Part IV Supplemental Information

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

PART II-B, LINE 1, LOBBYING ACTIVITIES:

MISCELLANEOUS LOBBYING EXPENSES

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Open to Public Inspection

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

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

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

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

Form with multiple questions (1-9) regarding conservation easements, including checkboxes for types of easements, a table for tracking easements at the end of the tax year, and questions about monitoring and reporting.

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

Form with questions (1a, 1b, 2) regarding the reporting of art and historical treasures, including revenue and asset amounts.

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	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	1,554,921.	1,681,455.	1,745,843.	1,711,179.	1,355,920.
b Contributions	0.	500.	875.	86,851.	301,089.
c Net investment earnings, gains, and losses	184,150.	-47,999.	-1,053.	226,033.	95,843.
d Grants or scholarships					
e Other expenditures for facilities and programs	88,574.	79,035.	64,210.	278,220.	41,673.
f Administrative expenses					
g End of year balance	1,650,497.	1,554,921.	1,681,455.	1,745,843.	1,711,179.

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

- a Board designated or quasi-endowment 100.00 %
- b Permanent endowment .00 %
- c Temporarily restricted endowment .00 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
- (ii) related organizations

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

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

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		548,053.	345,449.	202,604.
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 202,604.

Part VII Investments - Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) FORRESTER -		
(B) MULTI-STRATEGY HEDGE FUND	13,503,703.	END-OF-YEAR MARKET VALUE
(C) WEATHERLOW -		
(D) MULTI-STRATEGY HEDGE FUND	13,645,755.	END-OF-YEAR MARKET VALUE
(E) HIRTLE - MULTI-STRATEGY		
(F) HEDGE FUND	166,753.	END-OF-YEAR MARKET VALUE
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	27,316,211.	

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) CHARITABLE GIFT ANNUITY	504,768.
(3) NON PROFIT ENDOWMENTS	43,030,508.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	43,535,276.

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	30,382,168.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	15,782,982.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	15,782,982.
3	Subtract line 2e from line 1	3	14,599,186.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	358,791.
c	Add lines 4a and 4b	4c	358,791.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	14,957,977.

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	38,686,624.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	38,686,624.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	358,791.
c	Add lines 4a and 4b	4c	358,791.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	39,045,415.

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 X, LINE 2:

DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48: INCOME NOT RELATED TO THE FOUNDATION'S TAX-EXEMPT PURPOSE MAY BE SUBJECT TO TAXATION AS UNRELATED BUSINESS INCOME. ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA IMPOSE A THRESHOLD FOR DETERMINING WHEN AN INCOME TAX BENEFIT CAN BE RECOGNIZED IN REGARD TO UNCERTAIN TAX POSITIONS. THE FOUNDATION HAS DETERMINED THAT NO LIABILITY FOR UNCERTAIN TAX POSITIONS IS REQUIRED TO BE ACCRUED AND INCLUDED IN THE STATEMENTS OF FINANCIAL POSITION AS OF JUNE 30, 2017 AND 2016.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

EXPLANATION: ADMIN FEE REVENUE REPORTED AS REVENUE ON 990 -

Part XIII Supplemental Information (continued)

NETTED WITH EXPENSES FROM FINANCIAL STATEMENTS \$355,999

EXPLANATION: INTERCO INCOME REPORTED AS REVENUE ON 990-

NETTED WITH EXPENSES FROM FINANCIAL STATEMENTS \$2,792

PART XII, LINE 4B - OTHER ADJUSTMENTS:

EXPLANATION: ADMIN FEE REVENUE REPORTED AS REVENUE ON 990 -

NETTED WITH EXPENSES FROM FINANCIAL STATEMENTS \$355,999

EXPLANATION: INTERCO INCOME REPORTED AS REVENUE ON 990-

NETTED WITH EXPENSES FROM FINANCIAL STATEMENTS \$2,792

PART V, LINE 4

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

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Open to Public
Inspection

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

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
A.I. DUPONT BAND BOOSTERS 50 HILLSIDE ROAD WILMINGTON, DE 19807	51-6000279		9,000.	0.			ARTS, CULTURE & HUMANITIES
AMERICAN CANCER SOCIETY 320 BILMAR DRIVE PITTSBURGH, PA 15205	13-1788491	501(C)(3)	38,500.	0.			PHASE 17 1/2
AMERICAN HEART ASSOCIATION 200 CONTINENTAL DR., SUITE 101 NEWARK, DE 19713	13-5613797	501(C)(3)	22,421.	0.			HEALTH CARE
AMERICAN LEGION MILFORD POST #3 P.O. BOX 124 MILFORD, DE 19963	51-6022762	501(C)(19)	5,832.	0.			QUARTERLY
ATLANTIC SALMON FEDERATION PO BOX 807 CALAIS, ME 04619	13-2618801	501(C)(3)	10,000.	0.			ANNUAL
AUTISM DELAWARE 924 OLD HARMONY ROAD, SUITE 201 NEWARK, DE 19713	20-2110190	501(C)(3)	20,773.	0.			HUMAN SERVICES

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **259.**
- 3** Enter total number of other organizations listed in the line 1 table **18.**

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

Schedule I (Form 990) (2016)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BAYHEALTH FOUNDATION 640 SOUTH STATE STREET DOVER, DE 19901-3530	22-2559843	501(C)(3)	76,596.	0.			HEALTH CARE
BEEBE MEDICAL FOUNDATION 902 SAVANNAH ROAD LEWES, DE 19958	51-0319455	501(C)(3)	20,764.	0.			HOSPITALS
BENEDICTINE SISTERS OF RIDGELY MARYLAND - 14259 BENEDICTINE LANE - RIDGELY, MD 21660	52-0787237	501(C)(3)	20,568.	0.			SEMI-ANNUAL
BETHLEHEM UNITED METHODIST CHURCH 4 WESTTOWN RD. THORNTON, PA 19373	23-2145767		15,000.	0.			RELIGION-RELATED
BIG BROTHERS BIG SISTERS OF DELAWARE - 413 LARCH CIRCLE - WILMINGTON, DE 19804	51-6018399	501(C)(3)	17,000.	0.			BIG BROTHERS & BIG SISTERS
BOYS AND GIRLS CLUB OF NOBLESVILLE 1448 CONNER ST. NOBLESVILLE, IN 46060	35-1054426	501(C)(3)	7,500.	0.			THREE IMPACT AREAS-ACADEMIC SUCCESS, GOOD CHARACTER & HEALTHY LIFESTYLES
BOYS AND GIRLS CLUBS OF DELAWARE, INC. - 669 SOUTH UNION ST. - WILMINGTON, DE 19805	51-0068712	501(C)(3)	282,261.	0.			BOYS & GIRLS CLUBS
BRANDYWINE CONSERVANCY P.O. BOX 141 CHADDS FORD, PA 19317	51-6020908	501(C)(3)	10,000.	0.			ENVIRONMENT
BREASTCANCER.ORG 120 E. LANCASTER AVE., SUITE 201 ARDMORE, PA 19003	23-3082851	501(C)(3)	10,000.	0.			HEALTH CARE

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAMP POSSIBILITIES PO BOX 4411 GREENVILLE, DE 19807	51-0412903	501(C)(3)	5,500.	0.			HEALTH CARE
CAMP REHOBOTH 37 BALTIMORE AVE. REHOBOTH BEACH, DE 19971	51-0331962	501(C)(3)	22,750.	0.			CAPITAL GRANT FY17
CANCER SUPPORT COMMUNITY OF DELAWARE - 4810 LANCASTER PIKE - WILMINGTON, DE 19807	51-0351863	501(C)(3)	86,100.	0.			ACH
CAPE HENLOPEN SCHOOL DISTRICT 1270 KINGS HIGHWAY LEWES, DE 19958	51-6000279	501(C)(3)	10,001.	0.			ELEMENTART & SECONDARY SCHOOLS
CAREY'S UNITED METHODIST CHURCH 22750 CAREY'S CAMP ROAD MILLSBORO, DE 19966	51-0273581	501(C)(3)	9,600.	0.			PROTESTANT
CARING HEARTS HELPING HANDS, INC. P.O. BOX 415 CAMDEN, DE 19934	81-0573899	501(C)(3)	10,000.	0.			HUMAN SERVICES
CARSON SCHOLARS FUND, USA 305 W. CHESAPEAKE AVENUE SUITE 310 TOWSON, MD 21204	52-1851346	501(C)(3)	8,000.	0.			FUNDRAISING & FUND DISTRIBUTION
CATHOLIC CHARITIES, INC. 2601 W. 4TH STREET WILMINGTON, DE 19805	51-0065685	501(C)(3)	57,750.	0.			HUMAN SERVICES
CATHOLIC DIOCESE OF WILMINGTON P.O. BOX 2030 WILMINGTON, DE 19899	51-0095439	501(C)(3)	22,356.	0.			INCOME

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENDEL FOUNDATION 101 WEST LOCKERMAN ST., SUITE 2C DOVER, DE 19904	26-3590221	501(C)(3)	41,557.	0.			PHILANTHROPY, VOLUNTARISM & GRANTMAKING FOUNDATION
CENTER FOR GROWING TALENT BY PMA PO BOX 6036 NEWARK, DE 19714-6036	51-0565938	501(C)(3)	10,675.	0.			YOUTH DEVELOPMENT - AGRICULTURAL
CERTS, INC. 1501 CASHO MILL ROAD, SUITE 1 NEWARK, DE 19711	01-0592853	501(C)(3)	11,200.	0.			HEALTH CARE
CHEER, INC. 546 SOUTH BEDFORD STREET GEORGETOWN, DE 19947-1852	51-0112599	501(C)(3)	39,000.	0.			GENERAL SUPPORT
CHESAPEAKE BAY FOUNDATION 6 HERNDON AVENUE ANNAPOLIS, MD 21403	52-6065757	501(C)(3)	7,000.	0.			ALLIANCES & ADVOCACY
CHILDREN & FAMILIES FIRST 2005 BAYNARD BOULEVARD WILMINGTON, DE 19802	51-0065731	501(C)(3)	83,593.	0.			ANNUAL
CHILDREN'S BEACH HOUSE 100 W. 10TH ST., SUITE 411 WILMINGTON, DE 19801	51-0070966	501(C)(3)	32,750.	0.			CAPITAL GRANT FY17
CHOIR SCHOOL OF DELAWARE C/O EPISCOPAL CHURCH OF STS. ANDREW AND MATTHEW - 719 N. SHIPLEY STREET - WILMINGTON, DE 19801	20-5486245	501(C)(3)	20,100.	0.			YOUTH DEVELOPMENT PROGRAMS
CHRIST EPISCOPAL CHURCH CHRISTIANA HUNDRED - P.O. BOX 3510 - WILMINGTON, DE 19807-0510	20-8521736	501(C)(3)	15,950.	0.			RELIGION RELATED

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHRISTIANA CARE HEALTH SYSTEMS, INC. - P.O. BOX 1668 - WILMINGTON, DE 19899	51-0103684	501(C)(3)	16,716.	0.			ANNUAL
CLARENCE FRAIM CENTER BOYS AND GIRLS CLUB - 669 S. UNION ST. - WILMINGTON, DE 19805	51-0068712	501(C)(3)	21,697.	0.			ANNUAL
CLAYMONT COMMUNITY CENTER 3301 GREEN STREET CLAYMONT, DE 19703	51-0164850	501(C)(3)	6,000.	0.			FUND BALANCES
COLLEGE OF THE DESERT FOUNDATION 43500 MONTEREY AVENUE PALM DESERT, CA 92260	95-3829219	501(C)(3)	100,000.	0.			EARLY CHILDHOOD EDUCATION KITCHEN GARDEN
COLLEGE OF WILLIAM AND MARY PO BOX 1693 WILLIAMSBURG, VA 23187-8779	54-0734117	501(C)(3)	52,500.	0.			EDUCATION
COMMUNITIES IN SCHOOLS OF DELAWARE 101 W. LOOCKERMAN STREET SUITE 2A DOVER, DE 19904	51-0343981	501(C)(3)	30,000.	0.			ALLIANCES & ADVOCACY
COMMUNITY EDUCATION BUILDING 1200 N. FRENCH STREET WILMINGTON, DE 19801	45-4797267	501(C)(3)	612,000.	0.			MANAGEMENT & TECHNICAL ASSISTANCE
COMMUNITY LEGAL AID SOCIETY, INC 100 W. 10TH ST., SUITE 801 WILMINGTON, DE 19801	51-6000158	501(C)(3)	8,500.	0.			ALLIANCES & ADVOCACY
CONNECTIONS CSP, INC. 3821 LANCASTER PIKE WILMINGTON, DE 19805	51-0279138	501(C)(3)	22,128.	0.			NCC

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CREATIVE COASTAL CONNECTIONS CORP. 20474 OLD MEADOW LANE LEWES, DE 19958	81-2042125	501(C)(3)	10,500.	0.			ARTS, CULTURE & HUMANITIES
CULINARY INSTITUTE OF AMERICA 1946 CAMPUS DRIVE HYDE PARK, NY 12538-1499	06-0653264	501(C)(3)	6,000.	0.			UNDERGRADUATE COLLEGES
DELAWARE ADOLESCENT PROGRAM, INC. 2900 N. VAN BUREN STREET WILMINGTON, DE 19802	51-0108498	501(C)(3)	27,425.	0.			PREGNANCY CENTERS
DELAWARE ALLIANCE FOR NONPROFIT ADVANCEMENT - 100 WEST 10TH ST., SUITE 1012 - WILMINGTON, DE 19801	22-2792474	501(C)(3)	15,000.	0.			ALLIANCES AND ADVOCACY
DELAWARE ART MUSEUM 2301 KENTMERE PARKWAY WILMINGTON, DE 19806	51-0065746	501(C)(3)	148,923.	0.			ANNUAL
DELAWARE BREAST CANCER COALITION 111 W. 11TH STREET SUITE 3 WILMINGTON, DE 19801	52-2045298	501(C)(3)	74,358.	0.			ALLIANCES & ADVOCACY
DELAWARE CENTER FOR CONTEMPORARY ARTS - 200 SOUTH MADISON STREET - WILMINGTON, DE 19801	51-0242942	501(C)(3)	26,159.	0.			ANNUAL DISTRIBUTION
DELAWARE CENTER FOR HORTICULTURE 1810 NORTH DUPONT STREET WILMINGTON, DE 19806-3308	51-0252857	501(C)(3)	101,697.	0.			ENVIRONMENTAL BEAUTIFICATION
DELAWARE COLLEGE OF ART & DESIGN 600 NORTH MARKET STREET WILMINGTON, DE 19801	52-2027415	501(C)(3)	6,300.	0.			EDUCATION

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DELAWARE COMMUNITY REINVESTMENT ACTION COUNCIL - 600 SOUTH HARRISON STREET - WILMINGTON, DE 19805	51-0329119	501(C)(3)	35,000.	0.			CAPITAL GRANT FY17
DELAWARE DIVISION OF THE ARTS 820 NORTH FRENCH STREET CARVEL STATE OFFICE BUILDING - WILMINGTON, DE 19801	51-6000279	501(C)(3)	75,000.	0.			ANNUAL DISTRIBUTION/ACH
DELAWARE FINANCIAL LITERACY INSTITUTE - THE M - 3301 GREEN STREET - CLAYMONT, DE 19703	51-0411299	501(C)(3)	8,425.	0.			SUSSEX
DELAWARE FUTURES 1104 N. ADAMS ST. WILMINGTON, DE 19801	51-0378138	501(C)(3)	34,350.	0.			HUMAN SERVICES
DELAWARE GRANTMAKERS ASSOCIATION 100 W. 10TH ST. STE. 500 WILMINGTON, DE 19801	27-2529635	501(C)(3)	342,879.	0.			GRANT PROGRAMS
DELAWARE GUIDANCE SERVICES FOR CHILDREN AND YOUTH - 1213 DELAWARE AVENUE - WILMINGTON, DE 19806	51-0071906	501(C)(3)	78,298.	0.			CHILDREN AND YOUTH SERVICES
DELAWARE HOSPICE, INC. 16 POLLY DRUMMOND CENTER, 2ND FLOOR NEWARK, DE 19711	51-0258883	501(C)(3)	149,411.	0.			SPECIALTY HOSPITALS
DELAWARE HUMANE ASSOCIATION 701 A STREET WILMINGTON, DE 19801	51-0082499	501(C)(3)	141,654.	0.			ANIMAL PROTECTION AND WELFARE
DELAWARE LAW SCHOOL AT WIDENER UNIVERSITY - 4601 CONCORD PIKE - WILMINGTON, DE 19803-0474	23-1386178	501(C)(3)	10,000.	0.			GRADUATE & PROFESSIONAL SCHOOLS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DELAWARE MAGIC SOFTBALL PO BOX 7024 NEWARK, DE 19714	56-2430762	501(C)(3)	6,927.	0.			BASEBALL AND SOFTBALL
DELAWARE NATURE SOCIETY P.O. BOX 700 HOCKESSIN, DE 19707-0700	51-6018321	501(C)(3)	8,250.	0.			ENVIRONMENT
DSTA BENEVOLENT FUND, INC. PO BOX 168 CHESWOLD, DE 19936	82-1401901	501(C)(3)	44,012.	0.			FUND BALANCE
DELAWARE SYMPHONY ASSOCIATION 100 W. 10TH ST. STE. 1003 WILMINGTON, DE 19801	51-6017449	501(C)(3)	83,598.	0.			SEMI-ANNUAL DISTRIBUTIONS/ACH
DELAWARE TECHNICAL & COMMUNITY COLLEGE OWENS CAMPUS - JASON BUILDING - 21179 COLLEGE DRIVE - GEORGETOWN, DE 19947	51-6000279	501(C)(3)	76,522.	0.			INTERNATIONAL STUDIES
DELAWARE THEATRE COMPANY 200 WATER STREET WILMINGTON, DE 19801	51-0229918	501(C)(3)	111,088.	0.			THEATER
DELAWARE WILD LANDS, INC. PO BOX 505 ODESSA, DE 19730	51-0101678	501(C)(3)	12,500.	0.			NATURAL RESOURCES CONSERVATION AND PROTECTION
DELMAR SCHOOL DISTRICT 200 NORTH EIGHTH STREET DELMAR, DE 19440	51-6000279		26,251.	0.			STUDENT LAPTOP CART
DELMARVA CHRISTIAN HIGH SCHOOL 21777 SUSSEX PINES ROAD GEORGETOWN, DE 19947	51-0392535	501(C)(3)	40,854.	0.			SECONDARY & HIGH SCHOOLS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DEPARTMENT OF STATE HISTORICAL & CULTURAL AFFAIRS - 21 THE GREEN, SUITE B - DOVER, DE 19901	51-6000279	501(C)(3)	75,938.	0.			ANNUAL
DIAMOND STATE SWOOP 14902 LAUREL ROAD LAUREL, DE 19956	47-4945182	501(C)(3)	8,024.	0.			RECREATION & SPORTS
DOCTORS WITHOUT BORDERS USA, INC. 333 SEVENTH AVENUE, 2ND FLOOR NEW YORK, NY 10001	13-3433452	501(C)(3)	5,500.	0.			HEALTH CARE
DSP TROOP 5 NEEDY FAMILY FUND 9265 PUBLIC SAFETY WAY BRIDGEVILLE, DE 19933	51-6000279	501(C)(3)	7,500.	0.			FUNDRAISING & FUND DISTRIBUTION
DUFFY'S HOPE INC. 100 W. 10TH ST., SUITE 9 WILMINGTON, DE 19801	06-1652976	501(C)(3)	7,500.	0.			GENERAL PROGRAM SUPPORT
DYNAMIC CATHOLIC INSTITUTE 5081 OLYMPIC BLVD. ERLANGER, KY 41018	26-4549213	501(C)(3)	25,000.	0.			RELIGION-RELATED
EASTER SEALS OF DE AND MD'S EASTERN SHORE, INC. - 61 CORPORATE CIRCLE - NEW CASTLE, DE 19720-2405	51-0066728	501(C)(3)	39,200.	0.			REHABILITATIVE CARE
EBENEZER MAXWELL MANSION 200 W. TULPEHOCKEN ST. PHILADELPHIA, PA 19144	23-1971984	501(C)(3)	12,678.	0.			MUSEUMS
EDEN DELMARVA INC 1307 SAVANNAH ROAD LEWES, DE 19958	77-0606842	501(C)(3)	33,000.	0.			2017 COLLABORATIVE GRANT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EISENHOWER FELLOWSHIPS 250 SOUTH 16TH STREET PHILADELPHIA, PA 19102	23-1505095	501(C)(3)	15,000.	0.			FUNDRAISING & FUND DISTRIBUTION
ELEUTHERIAN MILLS RESIDENCE COMMITTEE - PO BOX 3630 - WILMINGTON, DE 19807	51-0070531	501(C)(3)	10,000.	0.			ARTS, CULTURE & HUMANITIES
EMMANUEL ORTHODOX PRESBYTERIAN CHURCH - 1006 WILSON ROAD - WILMINGTON, DE 19803	51-6000137	501(C)(3)	50,000.	0.			PROTESTANT
ESF DREAM CAMP FOUNDATION 750 E. HAVERFORD ROAD BRYN MAWR, PA 19010	23-3045020	501(C)(3)	10,000.	0.			ALLIANCES & ADVOCACY
FAITHFUL FRIENDS, INC. 12 GERMAY DRIVE WILMINGTON, DE 19804	51-0410508	501(C)(3)	11,904.	0.			ANIMAL PROTECTION AND WELFARE
FAME, INC. 100 W. 10TH ST. STE. 409 WILMINGTON, DE 19801	51-0210266	501(C)(3)	27,879.	0.			STEMULATE CHANGE OUTREACH INITIATIVE
FAMILY COUNSELING CENTER OF ST. PAUL'S - 1010 W. 4TH ST. - WILMINGTON, DE 19805-3602	27-3361236	501(C)(3)	65,000.	0.			HUMAN SERVICES
FAMILY PROMISE OF NORTHERN NEW CASTLE COUNTY - 2104 ST. JAMES CHURCH ROAD - WILMINGTON, DE 19808	26-2373936	501(C)(3)	11,500.	0.			NCC
FIND-'M FRIENDS, INC. 8752 N. BRIARPATCH AVE. CRYSTAL RIVER, FL 34428	46-5514778	501(C)(3)	130,000.	0.			ANIMAL PROTECTION & WELFARE

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FIRST PARISH FEDERATED CHURCH 150 MAIN STREET SOUTH BERWICK, ME 03908-1509	01-6013734	501(C)(3)	66,993.	0.			ANNUAL 90% SPENDABLE
FIRST PRESBYTERIAN CHURCH OF NEWARK - 292 W. MAIN STREET - NEWARK, DE 19711	51-6000112	501(C)(3)	20,276.	0.			ANNUAL DISTRIBUTION
FIRST STATE COMMUNITY LOAN FUND 100 W. 10TH ST., STE. 1005 WILMINGTON, DE 19801-6603	51-0345258	501(C)(3)	77,380.	0.			2017 COLLABORATIVE GRANT
FOOD BANK OF DELAWARE 14 GARFIELD WAY NEWARK, DE 19713	51-0258984	501(C)(3)	160,730.	0.			PHASE 17 1/2
FOR ALL SEASONS, INC. 300 TALBOT STREET EASTON, MD 21601	52-1496434	501(C)(3)	34,000.	0.			IN SUPPORT OF "HEART AND MUSIC" FUNDRAISER
FOUNDATION OF THE AMERICAN SOCIETY OF NEURORADIOLOGY - 800 ENTERPRISE DRIVE, SUITE 205 - OAK BROOK, IL 60523	23-7122927	501(C)(6)	900,000.	0.			WIRE TRANSFER/ACH
FRAIM CENTER FOR ACTIVE ADULTS 669 SOUTH UNION STREET WILMINGTON, DE 19805	51-0290329	501(C)(3)	10,670.	0.			ANNUAL DISTRIBUTION
FRESH START SCHOLARSHIP FOUNDATION, INC. - P.O. BOX 7784 - WILMINGTON, DE 19803	51-0378642	501(C)(3)	11,677.	0.			TUITION SCHOLARSHIPS AND SCHOLAR FEES
FRIENDS OF ANIMALS 777 POST ROAD SUITE 205 DARIEN, CT 06820	13-6018549	501(C)(3)	7,444.	0.			ANNUAL

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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FRIENDS OF THE HOCKESSIN LIBRARY PO BOX 55 HOCKESSIN, DE 19707	51-0185744	501(C)(3)	10,442.	0.			FUND BALANCE
FRIENDS OF THE NEWARK FREE LIBRARY, INC. - 750 LIBRARY AVENUE - NEWARK, DE 19711	23-7098836	501(C)(3)	7,470.	0.			ANNUAL DISTRIBUTION
FRIENDSHIP HOUSE, INC. P.O. BOX 1517 WILMINGTON, DE 19899	51-0306759	501(C)(3)	67,097.	0.			ANNUAL GIFT
GATEWAY HOUSE, INC. 121 NORTH POPLAR STREET WILMINGTON, DE 19801	51-0374347	501(C)(3)	10,000.	0.			CAPITAL GRANT FY17
GAUDENZIA, INC. 604 W. 10TH ST. WILMINGTON, DE 19801	23-1706895	501(C)(3)	10,000.	0.			CAPITAL GRANT FY17
GENERATIONS HOME CARE, INC 2 PENNS WAY, SUITE 303 NEW CASTLE, DE 19720	51-0109657	501(C)(3)	10,000.	0.			HOME HEALTH CARE
GIRL SCOUTS OF THE CHESAPEAKE BAY COUNCIL - 225 OLD BALTIMORE PIKE - NEWARK, DE 19702	51-0064337	501(C)(3)	60,000.	0.			GIRL SCOUTS OF THE U.S.A.
GIRLS ON THE RUN DELAWARE INC. 615 W 18TH ST WILMINGTON, DE 19802	20-2751642	501(C)(3)	10,250.	0.			HEALTH CARE
GLEANERS FOOD BANK OF INDIANA 3737 WALDEMERE AVE. INDIANAPOLIS, IN 46241	35-1483868		13,000.	0.			BACKSACKS: WEEKEND FOOD FOR KIDS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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GLOBAL AWAKENING 1451 CLARK STREET MECHANICSBURG, PA 17055	20-3938700	501(C)(3)	8,500.	0.			CHRISTIANITY
GLOBAL CELEBRATION 2406 SR 60 E #755 VALRICO, FL 35594	91-1341558	501(C)(3)	15,900.	0.			YOUTH DEVELOPMENT
GLORY OF ZION INTERNATIONAL MINISTRIES, INC. - PO BOX 1601 - DENTON, TX 76202	75-2892493	501(C)(3)	10,600.	0.			RELIGION-RELATED
GOODWILL INDUSTRIES OF DELAWARE 300 EAST LEA BOULEVARD WILMINGTON, DE 19802	51-0064311	501(C)(3)	8,800.	0.			GENERAL SUPPORT
GRAND OPERA HOUSE 818 NORTH MARKET STREET WILMINGTON, DE 19801	51-0116569	501(C)(3)	337,236.	0.			PERFORMING ARTS CENTER
GREENWOOD MENNONITE SCHOOL 12802 MENNONITE SCHOOL ROAD GREENWOOD, DE 19950	51-0401543	501(C)(3)	8,604.	0.			ANNUAL DISTRIBUTION
H.O.P.E., INC PO BOX 403 LYNDONVILLE, VT 05851	27-0226630	501(C)(3)	25,000.	0.			HUMAN SERVICES
HABITAT FOR HUMANITY OF NEW CASTLE COUNTY - 1920 HUTTON STREET - WILMINGTON, DE 19802	51-0294138	501(C)(3)	23,750.	0.			ONE TIME CONTRIBUTION FOR HOUSING
HAGLEY MUSEUM AND LIBRARY PO BOX 3630 WILMINGTON, DE 19807	51-0070531	501(C)(3)	11,000.	0.			HISTORY MUSEUMS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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HARRY K FOUNDATION 313 SOUTH BOARDWALK REHOBOTH BEACH, DE 19971	46-2934019	501(C)(3)	7,500.	0.			SINGLE ORGANIZATION SUPPORT
HEALTHY FOODS FOR HEALTHY KIDS PO BOX 847 HOCKESSIN, DE 19707	30-0444914	501(C)(3)	13,227.	0.			NUTRITION
HELEN F. GRAHAM CANCER CENTER, CHRISTIANA CARE - 4701 OGLETOWN-STANTON ROAD, SUITE 1214 - NEWARK, DE 19713	51-0103684	501(C)(3)	60,000.	0.			DELAWARE OVARIAN CANCER FOUNDATION RESEARCH INITIATIVE
HISTORIC CHARLESTON FOUNDATION P.O. BOX 1120 CHARLESTON, SC 29402-1120	57-6000599	501(C)(3)	15,000.	0.			ARTS, CULTURE, & HUMANITIES
HOPE COMMISSION 38 VANDEVER AVENUE WILMINGTON, DE 19802	26-2280375	501(C)(3)	60,000.	0.			2017 COLLABORATIVE GRANT
HUNTINGTON'S DISEASE SOCIETY OF AMERICA - 505 EIGHTH AVENUE, SUITE 902 - NEW YORK, NY 10018	90-0658125	501(C)(3)	10,000.	0.			RESEARCH IN DELAWARE REGION
IMMANUEL UNITED METHODIST CHURCH P.O. BOX 60 TOWNSEND, DE 19734	51-0261122	501(C)(3)	6,816.	0.			QUARTERLY
INDIAN RIVER SCHOOL DISTRICT 31 HOISER STREET SELBYVILLE, DE 19975	51-6000279	501(C)(3)	7,250.	0.			MANAGEMENT & TECHNICAL ASSISTANCE
INDIANA REPERTORY THEATRE, INC. 140 W. WASHINGTON ST. INDIANAPOLIS, IN 46204	35-1186290	501(C)(3)	10,000.	0.			2016-2017 EDUCATIONAL PROGRAMMING

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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INTERNATIONAL LITERACY ASSOCIATION PO BOX 8139 NEWARK, DE 19714-8139	46-3994293	501(C)(3)	109,433.	0.			FCL GRANT
JEFFERSON AWARDS FOR PUBLIC SERVICE - 100 W. 10TH ST. STE. 215 - WILMINGTON, DE 19801	52-0959336	501(C)(3)	10,450.	0.			HUMAN SERVICES
JEWISH FAMILY SERVICES OF DELAWARE 99 PASSMORE ROAD WILMINGTON, DE 19803	51-0097026	501(C)(3)	63,400.	0.			PHASE 14/2 OF 2
JOSHUA M. FREEMAN FOUNDATION 31556 WINTERBERRY PARKWAY SELBYVILLE, DE 19975	20-8592383	501(C)(3)	16,000.	0.			PERFORMING ARTS
JUNIOR ACHIEVEMENT OF DELAWARE, INC. - 522 SOUTH WALNUT STREET - WILMINGTON, DE 19801-5230	51-0078199	501(C)(3)	12,690.	0.			PROGRAM
JUSST SOOUP MINISTRY, INC. 18483 COOL SPRING RD. MILTON, DE 19968	59-3820809	501(C)(3)	16,979.	0.			EMERGENCY ASSISTANCE
KENT-SUSSEX INDUSTRIES, INC. 301 NORTH REHOBOTH BOULEVARD MILFORD, DE 19963-1305	51-0097856	501(C)(3)	5,830.	0.			QUARTERLY
KIDS R FIRST PO BOX 3242 RESTON, VA 20195	54-1905551	501(C)(3)	7,500.	0.			TO SUPPORT NAVIENT EMPLOYEES' BANK TO SCHOOL BACKPACK DONATIONS
KIDS RUNWAY FOR RESEARCH 44 LOWER VALLEY LANE NEWARK, DE 19711	81-1990694	501(C)(3)	24,573.	0.			FUNDRAISING & FUND DISTRIBUTION

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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KIMMEL CENTER FOR THE ARTS 1500 WALNUT STREET, FLOOR 17 PHILADELPHIA, PA 19102	23-2865855	501(C)(3)	25,000.	0.			ARTS, CULTURE & HUMANITIES
KIND TO KIDS FOUNDATION 100 W. 10TH ST., SUITE 606 WILMINGTON, DE 19801	80-0641000	501(C)(3)	11,500.	0.			ANNUAL
KINGSWOOD COMMUNITY CENTER 2300 BOWERS STREET WILMINGTON, DE 19802	51-0064319	501(C)(3)	55,000.	0.			ACH
KIWANIS CLUB OF SEAFORD, INC. PO BOX 1017 SEAFORD, DE 19973	51-0303505	501(C)(3)	29,546.	0.			COMMUNITY IMPROVEMENT & CAPACITY BUILDING
LA ESPERANZA INC. 216 N. RACE STREET GEORGETOWN, DE 19947	31-1606956	501(C)(3)	22,000.	0.			NEIGHBORHOOD CENTERS
LA RED HEALTH CENTER 21444 CARMEAN WAY GEORGETOWN, DE 19947	14-1850828	501(C)(3)	137,922.	0.			2017 COLLABORATIVE GRANT
LAND CONSERVANCY FOR SOUTHERN CHESTER COUNTY - 541 CHANDLER MILL ROAD - AVONDALE, PA 19311	23-2817418	501(C)(3)	10,000.	0.			ENVIRONMENT
LATIN AMERICAN COMMUNITY CENTER 403 NORTH VAN BUREN STREET WILMINGTON, DE 19805	23-7047048	501(C)(3)	32,500.	0.			EARLY DEVELOPMENT CENTER PROGRAMS
LAWYERS COMMITTEE FOR CIVIL RIGHTS UNDER LAW - 1401 NEW YORK AVENUE, NW SUITE 400 - WASHINGTON, DC 20005	52-0799246	501(C)(3)	10,000.	0.			HIGGINBOTHAM DINNER

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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LEADERSHIP WILKES-BARRE 4 PUBLIC SQUARE WILKES-BARRE, PA 18701	23-2205981	501(C)(3)	9,500.	0.			CORE, EXECUTIVE, MASTERS, JUNIOR & IMPACT PROGRAMS
LEGAL SERVICES CORPORATION OF DELAWARE, INC. - 100 W. 10TH STREET, SUITE 203 - WILMINGTON, DE 19801-1641	51-0372955	501(C)(3)	10,000.	0.			ALLIANCES AND ADVOCACY
LEWES HISTORICAL SOCIETY 110 SHIPCARPENTER STREET LEWES, DE 19958	51-6017951	501(C)(3)	9,552.	0.			HISTORICAL SOCIETIES & HISTORIC PRESERVATION
LEWES PRESBYTERIAN CHURCH 133 KINGS HIGHWAY LEWES, DE 19958	51-0251512	501(C)(3)	22,106.	0.			RELIGION-RELATED
LEWES PUBLIC LIBRARY, INC. 111 ADAMS AVENUE LEWES, DE 19958	51-0350650	501(C)(3)	5,350.	0.			SOLAR PANEL FUND
LIFESONG FOR ORPHANS PO BOX 40 GRIDLEY, IL 61744	35-1902841	501(C)(3)	12,500.	0.			MBO PROJECT
LIMEN HOUSE, INC. P.O. BOX 1306 WILMINGTON, DE 19899	23-7029073	501(C)(3)	20,300.	0.			HUMAN SERVICES
LITERACY DELAWARE INC. P.O. BOX 2083 WILMINGTON, DE 19899-2083	51-0410054	501(C)(3)	11,500.	0.			REMEDIAL READING & ENCOURAGEMENT
LITTLE SISTERS OF THE POOR 185 SALEM CHURCH ROAD NEWARK, DE 19713	51-0095986	501(C)(3)	8,097.	0.			ANNUAL GIFT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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LUTHERAN CHURCH OF OUR SAVIOR 20275 BAY VISTA ROAD REHOBOTH BEACH, DE 19971-1482	43-0658188	501(C)(3)	57,400.	0.			RELIGION RELATED
LUTHERAN COMMUNITY SERVICES 2809 BAYNARD BOULEVARD WILMINGTON, DE 19802	51-0102403	501(C)(3)	29,819.	0.			ANNUAL GIFT
LUZERNE COUNTY HEAD START 23 BEEKMAN STREET WILKES-BARRE, PA 18702	23-2038753	501(C)(3)	9,000.	0.			SCHOLARSHIPS FOR GRADUATING HIGH SCHOOL SENIOR
LYDIA'S WAY 305 SOUTH GOVERNORS AVENUE DOVER, DE 19904	51-0317506	501(C)(3)	15,000.	0.			STATEWIDE
LYME DISEASE ASSOCIATION OF THE EASTERN SHORE OF MARYLAND - PO BOX 5360 - SALISBURY, MD 21801	74-3102097	501(C)(3)	33,000.	0.			RESEARCH INSTITUTE & PUBLIC POLICY ANALYSIS
MAINE HISTORICAL SOCIETY 489 CONGRESS STREET PORTLAND, ME 04102-3643	01-0211530	501(C)(3)	10,000.	0.			ARTS, CULTURE & HUMANITIES
MEALS ON WHEELS DELAWARE 100 WEST 10TH ST., SUITE 207 WILMINGTON, DE 19801	51-0355145	501(C)(3)	16,590.	0.			ADOPT-A-SENIOR
MEALS ON WHEELS, LEWES-REHOBOTH, INC. - 32409 LEWES GEORGETOWN HIGHWAY - LEWES, DE 19958	51-0355145	501(C)(3)	6,000.	0.			MEALS ON WHEELS
MEMORIAL SLOAN-KETTERING CANCER CENTER - 1275 YORK AVENUE - NEW YORK, NY 10021	13-1624182	501(C)(3)	10,000.	0.			RESEARCH INSTITUTES AND PUBLIC POLICY ANALYSIS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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MENTAL HEALTH ASSOCIATION IN DELAWARE INC. - 100 W. 10TH ST. STE. 600 - WILMINGTON, DE 19801	51-0069000	501(C)(3)	17,110.	0.			MENTAL HEALTH
MHDC 977 E. MASTEN CIRCLE MILFORD, DE 19963	51-0218904	501(C)(3)	40,500.	0.			HOUSING DEVELOPMENT, CONSTRUCTION & MANAGEMENT
MICHAEL J. FOX FOUNDATION FOR PARKINSON'S RESEARCH - DONATION PROCESSING P.O. BOX 5014 - HAGERSTOWN, MD 21741-5014	13-4141945	501(C)(3)	10,300.	0.			HEALTH CARE
MID-SHORE COMMUNITY FOUNDATION 102 EAST DOVER STREET EASTON, MD 21601	52-1782373	501(C)(3)	5,158.	0.			RIISING ABOVE DISEASE (RAD)
MILFORD LIONS CLUB C/O KSI 301 N. REHOBOTH BLVD. MILFORD, DE 19963	51-0365044	501(C)(3)	5,830.	0.			QUARTERLY
MILFORD NEW CENTURY CLUB 200 LAKEVIEW AVENUE MILFORD, DE 19963	34-2061572	501(C)(3)	5,830.	0.			QUARTERLY
MILFORD NEW FRONTIER CLUB 204 NORTH REHOBOTH BLVD. MILFORD, DE 19963	53-0204696	501(C)(3)	5,830.	0.			QUARTERLY
MILFORD PUBLIC LIBRARY 11 SE FRONT STREET MILFORD, DE 19963-1941	51-0099181	501(C)(3)	461,809.	0.			BULK OF FUND BALANCE/ACH
MILFORD SCHOOL DISTRICT 906 LAKEVIEW AVENUE MILFORD, DE 19963	51-6000279	501(C)(3)	16,446.	0.			ELEMENTARY & SECONDARY SCHOOLS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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MILFORD VETERANS OF FOREIGN WARS 77 VETERANS DRIVE MILFORD, DE 19963	23-7193708	501(C)(4)	5,830.	0.			MILITARY & VETERANS' ORGANIZATIONS
MINISTRY OF CARING 115 E. 14TH ST. WILMINGTON, DE 19801	51-0209843	501(C)(3)	49,347.	0.			HUMAN SERVICES
MOFFITT CANCER CENTER FOUNDATION 12902 MAGNOLIA DRIVE TAMPA, FL 33612	59-3238636	501(C)(3)	3,500,000.	0.			FUND RAISING & FUND DISTRIBUTION
MOT JEAN BIRCH SENIOR CENTER 300 SOUTH SCOTT STREET MIDDLETOWN, DE 19709-1355	51-6021578	501(C)(3)	21,000.	0.			CAPITAL GRANT FY17
MOUNT AUBURN PRESERVATION FOUNDATION - 65 COMMONWEALTH AVENUE, UNIT 3A - BOSTON, MA 02116-2304	46-3411055	501(C)(3)	10,000.	0.			HISTORICAL ORGANIZATIONS
NAMI-DE 2400 W. 4TH ST. WILMINGTON, DE 19805	22-2490797	501(C)(3)	75,000.	0.			EXPAND HISPANIC SERVICES INITIATIVE
NANTICOKE HEALTH SERVICES 801 MIDDLEFORD ROAD SEAFORD, DE 19973	51-0069243	501(C)(3)	17,750.	0.			GENERAL HOSPITALS
NANTICOKE SENIOR CENTER 1001 W. LOCUST STREET SEAFORD, DE 19973	23-7202136	501(C)(3)	20,546.	0.			SENIOR CENTERS
NANTUCKET COTTAGE HOSPITAL FOUNDATION - 57 PROSPECT STREET - NANTUCKET, MA 02554	04-2103823	501(C)(3)	10,000.	0.			GENERAL HOSPITALS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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NATIONAL PUBLIC EDUCATION SUPPORT FUND - 1825 K STREET, NW, SUITE 400 - WASHINGTON, DC 20006	26-3015634	501(C)(3)	10,000.	0.			VISION COALITION OF DELAWARE ANNUAL MEMBERSHIP TO EDUCATION FUNDER STRATGY GROUP
NATIONAL WILDLIFE FEDERATION P.O. BOX 1691 MERRIFIELD, VA 22116-1691	53-0204616	501(C)(3)	11,739.	0.			ANNUAL DISTRIBUTION
NATIVITY PREPARATORY SCHOOL OF WILMINGTON, INC. - 1515 LINDEN STREET - WILMINGTON, DE 19805	22-3884703	501(C)(3)	30,450.	0.			PRIMARY AND ELEMENTARY SCHOOLS
NCALL RESEARCH 363 SAULSBURY ROAD DOVER, DE 19904	52-6054476	501(C)(3)	40,000.	0.			HOUSING DEVELOPMENT, CONSTRUCTION & MANAGEMENT
NEMOURS FUND FOR CHILDREN'S HEALTH 1600 ROCKLAND ROAD WILMINGTON, DE 19803	59-0634433	501(C)(3)	127,783.	0.			PEDIARTICS
NEUMANN UNIVERSITY ONE NEUMANN DRIVE ASTON, PA 19014	23-1657958	501(C)(3)	6,500.	0.			LATINO MENTAL HEALTH WORKFORCE PROGRAM
NEW CASTLE COUNTY HEAD START 256 CHAPMAN RD., #103 NEWARK, DE 19702-5417	51-0191916	501(C)(3)	11,182.	0.			FCL GRANT
NEW LIFE SANCTUARY MINISTRIES 500 MARYLAND AVE. ESSEX, MD 21221	52-2148529	501(C)(3)	9,772.	0.			RELIGION-RELATED
NEWARK COUNTRY CLUB 300 WEST MAIN STREET NEWARK, DE 19711	51-0035715	501(C)(7)	29,574.	0.			RECREATION & SPORTS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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NEWARK DAY NURSERY & CHILDREN'S CENTER - 921 BARKSDALE ROAD - NEWARK, DE 19711-3205	51-0096130	501(C)(3)	6,000.	0.			CAPITAL GRANT FY17
NEWARK SENIOR CENTER 200 WHITE CHAPEL DRIVE NEWARK, DE 19713	51-0104695	501(C)(3)	13,688.	0.			FUND BALANCE
OPERADELAWARE 4 SOUTH POPLAR STREET WILMINGTON, DE 19801	51-6018055	501(C)(3)	67,437.	0.			OPERA
OPERATION: JOB READY VETERANS 9130 OTIS AVENUE, SUITE A INDIANAPOLIS, IN 46216	80-0729214	501(C)(3)	10,000.	0.			VETERAN EMPLOYMENT TRANSITION SEMINAR
OSHER LIFELONG LEARNING INSTITUTE UNIVERSITY OF DELAWARE, 115 ARSHT HALL 2700 PENNSYLVANIA AVENUE - WILMINGTON	51-6000297	501(C)(3)	10,000.	0.			RENEWING THE DREAM CAMPAIGN FOR OLLI
OSTERHOUT FREE LIBRARY 71 S. FRANKLIN STREET WILKES-BARRE, PA 18701	24-0795971	501(C)(3)	10,000.	0.			LITERACY DEVELOPMENT PROGRAMS & TEEN ADVISORY COUNCIL
PADUA ACADEMY 905 NORTH BROOM STREET WILMINGTON, DE 19806	51-0095439	501(C)(3)	9,960.	0.			SECONDARY & HIGH SCHOOLS
PATHWAYS TO SUCCESS, INC. 231 S. RACE STREET GEORGETOWN, DE 19947	76-0811283	501(C)(3)	6,000.	0.			SUSSEX
PAWS FOR PEOPLE PO BOX 9955 NEWARK, DE 19714	76-0780197	501(C)(3)	21,983.	0.			ALLIANCES AND ADVOCACY

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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PEACE DRUMS USA, INC. 2200 ARCH ST., SUITE 915 PHILADELPHIA, PA 19103	81-3007724	501(C)(3)	10,000.	0.			PROMOTION OF INTERNATIONAL UNDERSTANDING
PEACE WORK LTD. PO BOX 138 MONTCHANIN, DE 19710	23-2812145	501(C)(3)	10,000.	0.			ARTS PROGRAMMING AT NCC DETENTION CENTER
PENINSULA COUNCIL OF NEGRO WOMEN 602 NORTH STREET MILFORD, DE 19963	53-0173054	501(C)(3)	5,830.	0.			QUARTERLY
PENNSYLVANIA STATE UNIVERSITY 201 SHIELDS BLDG UNIVERSITY PARK, PA 16802-1294	25-1554003	501(C)(3)	13,510.	0.			TO PROVIDE FUNDING FOR A SOLAR INSTALLATION PROJECT IN ROATAN, HONDURAS 2017
PETE DU PONT FREEDOM FOUNDATION PO BOX 221 MONTCHANIN, DE 19710	82-1237132	501(C)(3)	20,250.	0.			PHILANTHROPY, VOLUNTARISM & GRANTMAKING FOUNDATION
PICKERING CREEK AUDUBON CENTER 11450 AUDUBON LANE EASTON, MD 21601	13-1624102	501(C)(3)	8,000.	0.			ENVIRONMENT
PILOT SCHOOL, INC. 208 WOODLAWN ROAD WILMINGTON, DE 19803	51-0080692	501(C)(3)	20,500.	0.			PRIMARY AND ELEMENTARY SCHOOLS
PLANNED PARENTHOOD OF DELAWARE 625 N SHIPLEY STREET WILMINGTON, DE 19801	51-0066725	501(C)(3)	10,463.	0.			REPRODUCTIVE HEALTH CARE
PLANNED PARENTHOOD OF SOUTHEASTERN PENNSYLVANIA - 1144 LOCUST STREET - PHILADELPHIA, PA 19107	23-1352509	501(C)(3)	8,500.	0.			HEALTH CARE

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
POLICE ATHLETIC LEAGUE OF WILMINGTON - 3707 N. MARKET ST. - WILMINGTON, DE 19802	22-2606531	501(C)(3)	20,000.	0.			CAPITAL GRANT FY17
POLYTECH ADULT EDUCATION P.O. BOX 102 WOODSIDE, DE 19980	51-6000279	501(C)(3)	50,000.	0.			FAMILY LITERACY PROGRAM
PROJECT NEW START 3301 GREEN STREET CLAYMONT, DE 19703	47-2300080	501(C)(3)	8,000.	0.			2017 COLLABORATIVE GRANT
PUBLIC ALLIES 100 WEST 10TH STREET, STE. 812 WILMINGTON, DE 19801	52-1759564	501(C)(3)	27,500.	0.			ALLIANCE AND ADVOCACY
READ ALOUD DELAWARE 100 W. 10TH ST. STE. 309 WILMINGTON, DE 19801	51-0280486	501(C)(3)	16,739.	0.			FCL GRANT
READING ASSIST INSTITUTE 100 W. 10TH ST., SUITE 910 WILMINGTON, DE 19801	51-0317415	501(C)(3)	36,682.	0.			READING CORPS INTERVENTION PROGRAM
READING IS FUNDAMENTAL 1730 RHODE ISLAND AVE, NW, SUITE 11 WASHINGTON, DC 20036	52-0976257	501(C)(3)	26,983.	0.			TO SUPPORT 6 RIF PROGRAMS IN 4 NAVIENT COMMUNITIES
REHOBOTH ART LEAGUE, INC. 12 DODDS LANE REHOBOTH BEACH, DE 19971	51-0097839	501(C)(3)	73,936.	0.			ANNUAL DISTRIBUTION/ACH
REHOBOTH BEACH HISTORICAL SOCIETY & MUSEUM, I - 511 REHOBOTH AVENUE - REHOBOTH BEACH, DE 19971	51-0203755	501(C)(3)	10,000.	0.			SECOND FLOOR COMPLETION

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RODEL CHARITABLE FOUNDATION 100 W. 10TH ST., SUITE 704 WILMINGTON, DE 19801	91-1944585	501(C)(3)	20,000.	0.			ENGLISH LEARNERS IN DELAWARE FACT SHEETS
RONALD MCDONALD HOUSE OF DELAWARE 1901 ROCKLAND ROAD WILMINGTON, DE 19803-3627	51-0295320	501(C)(3)	30,173.	0.			FAMILY SERVICES
ROTARY CLUB MILFORD ATTN: HIRSCH FUNDS - PO BOX 10 - MILFORD, DE 19963	51-6018040	501(C)(4)	5,830.	0.			QUARTERLY
SALESIANUM SCHOOL 1801 N. BROOM STREET WILMINGTON, DE 19802	51-0066743	501(C)(3)	10,798.	0.			SECONDARY & HIGH SCHOOLS
SALVATION ARMY P. O. BOX 308 WILMINGTON, DE 19899	13-5562351	501(C)(3)	38,375.	0.			SALVATION ARMY
SAN MATEO POLICE ACTIVITIES LEAGUE 200 FRANKLIN PARKWAY SAN MATEO, CA 94403	31-1593896		10,000.	0.			YOUTH CENTERS & CLUBS
SEAFORD DISTRICT LIBRARY 600 N. MARKET STREET EXTENDED SEAFORD, DE 19973	51-0101879	501(C)(3)	31,129.	0.			LIBRARIES
SEAFORD HISTORICAL SOCIETY INC. 203 HIGH STREET SEAFORD, DE 19973	51-0200225	501(C)(3)	47,546.	0.			HISTORICAL SOCIETIES & HISTORIC PRESERVATION
SEAFORD SENIOR HIGH SCHOOL 399 N. MARKET ST. EXT. SEAFORD, DE 19973	51-6000279	501(C)(3)	25,000.	0.			SECONDARY & HIGH SCHOOLS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SECOND HELPINGS 1121 SOUTHEASTERN AVENUE INDIANAPOLIS, IN 46202	35-1484281	501(C)(3)	8,000.	0.			GENERAL PURPOSES
SERVIAM GIRLS ACADEMY, INC. 14 HALCYON DRIVE NEW CASTLE, DE 19720	26-0792594	501(C)(3)	15,450.	0.			PRIMARY & ELEMENTARY SCHOOLS
ST. ANNE'S EPISCOPAL SCHOOL 211 SILVER LAKE ROAD MIDDLETOWN, DE 19709	51-0404800	501(C)(3)	7,500.	0.			CAPITAL CAMPAIGN
ST. ELIZABETH HIGH SCHOOL 1500 CEDAR STREET WILMINGTON, DE 19805	51-0095439	501(C)(3)	17,876.	0.			SECONDARY & HIGH SCHOOLS
ST. JOHN'S UNITED METHODIST CHURCH 300 NORTH PINE STREET SEAFORD, DE 19973	23-7259492	501(C)(3)	8,000.	0.			ANNUAL GIVING
STARFISH INITIATIVE 6958 HILLSDALE COURT INDIANAPOLIS, IN 46250	56-2442758	501(C)(3)	15,000.	0.			MENTORING MATCHES & PROGRAMMING
STATE OF DELAWARE, DEPARTMENT OF TRANSPORTATION - PO BOX 778 - DOVER, DE 19903	51-6000297		8,430.	0.			HUMAN SERVICES
STEHM, INC. P.O. BOX 2617 WILMINGTON, DE 19805-0617	51-0309114	501(C)(3)	7,616.	0.			QUARTERLY
STRIVE: HOW YOU LEAD MATTERS 1007 NORTH ORANGE STREET 4TH FLOOR WILMINGTON, DE 19801	04-3839260	501(C)(3)	9,800.	0.			NCC

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SUNDAY BREAKFAST MISSION 110 N. POPLAR STREET WILMINGTON, DE 19801	51-0073080	501(C)(3)	46,171.	0.			HUMAN SERVICES
SURVIVORS OF ABUSE IN RECOVERY, INC. (SOAR) - 405 FOULK ROAD - WILMINGTON, DE 19803	51-0345109	501(C)(3)	8,500.	0.			PERSONAL SOCIAL SERVICES
SUSSEX ACADEMY FOUNDATION P.O. BOX 693 LEWES, DE 19958	45-3820950	501(C)(3)	100,000.	0.			CAPITAL CAMPAIGN
SUSSEX CHILD HEALTH PROMOTION COALITION - 21133 STERLING AVENUE, SUITE 12 - GEORGETOWN, DE 19947	22-2804785	501(C)(3)	97,500.	0.			CHILD SERVICES
SUSSEX COUNTY HABITAT FOR HUMANITY P. O. BOX 759 GEORGETOWN, DE 19947	51-0334057	501(C)(3)	21,000.	0.			HOUSING REHABILITATION
SUSSEX TECH ADULT DIVISION PO BOX 351 GEORGETOWN, DE 19947	51-6000279	501(C)(3)	8,500.	0.			21ST CCLC AFTER SCHOOL PROGRAM
TEENSHARP, INC. 100 W. 10TH ST., SUITE 704 WILMINGTON, DE 19801	27-2246880	501(C)(3)	64,000.	0.			DELAWARE GOES TO COLLEGE ACADEMIES
THE CONSERVATION FUND 1655 N. FORT DR, SUITE 1300 ARLINGTON, VA 22209-9708	52-1388917	501(C)(3)	18,000,600.	0.			ENVIRONMENT
THE MUSIC SCHOOL OF DELAWARE 4101 WASHINGTON STREET EXT WILMINGTON, DE 19802	51-0066934	501(C)(3)	76,431.	0.			MUSIC

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE NATURE CONSERVANCY IN DELAWARE 100 W. 10TH ST. STE. 1107 WILMINGTON, DE 19801	53-0242652	501(C)(3)	28,000.	0.			ENVIRONMENT
THE SUMMER LEARNING COLLABORATIVE 1313 N. MARKET ST., SUITE 1150 NW WILMINGTON, DE 19801	22-2804785	501(C)(3)	73,955.	0.			EDUCATION
TOM JOYNER FOUNDATION, INC 13760 NOEL ROAD, #750 DALLAS, TX 75240	75-2730557	501(C)(3)	6,500.	0.			EDUCATION
TOWER HILL SCHOOL 2813 W. 17TH STREET WILMINGTON, DE 19806	51-0065745	501(C)(3)	20,170.	0.			ELEMENTARY & SECONDARY SCHOOLS
TOWN OF ELSMERE 11 POPLAR AVENUE WILMINGTON, DE 19805	51-6001118	501(C)(3)	5,700.	0.			ANNUAL DISTRIBUTION
TRI-STATE BIRD RESCUE & RESEARCH, INC. - 110 POSSUM HOLLOW ROAD - NEWARK, DE 19711-3910	51-0265807	501(C)(3)	12,400.	0.			CAPITAL GRANT FY17
UCSF FOUNDATION BOX 45339 SAN FRANCISCO, CA 94145	94-2829914	501(C)(3)	60,000.	0.			DR. SHERR'S DDX3X RESEARCH
UNITED WAY OF DELAWARE 625 NORTH ORANGE STREET WILMINGTON, DE 19801	51-0073399	501(C)(3)	12,500.	0.			FEDERATED GIVING PROGRAMS
UNITED WAY OF SOUTHERN CHESTER COUNTY - 106 W. STATE ST. - KENNETT SQUARE, PA 19348	23-1260899	501(C)(3)	10,750.	0.			FEDERATED GIVING PROGRAMS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF WYOMING VALLEY 100 N. PENNSYLVANIA AVE., 2ND FLOOR WILKES-BARRE, PA 18711	24-0831490	501(C)(3)	22,000.	0.			JW AGENCIES (\$16,000) & JUMP START PROGRAM (\$6,000) AT LUZERNE COUNTY HEAD START
UNIVERSITY OF DELAWARE 104 HULLIHEN HALL NEWARK, DE 19716	51-6000297	501(C)(3)	191,360.	0.			UNIVERSITIES
UNIVERSITY OF PENNSYLVANIA DEVELOPMENT AND ALUMNI RELATIONS - 2929 WALNUT STREET, SUITE 300 - PHILADELPHIA, PA 19104	23-1352685	501(C)(3)	13,250.	0.			UNIVERSITIES
UPSTREAM USA 1630 SAN PABLO AVENUE SUITE 400 OAKLAND, CA 94612	35-2581424	501(C)(3)	7,750.	0.			DELAWARE CAN
URBAN PROMISE WILMINGTON 2401 THATCHER ST. WILMINGTON, DE 19802	20-8156160	501(C)(3)	35,000.	0.			NCC
VANDERBILT UNIVERSITY 2201 WEST END AVENUE NASHVILLE, TN 37240	62-0476822	501(C)(3)	20,000.	0.			UNIVERSITIES
VISION TO LEARN 4023 KENNETT PIKE WILMINGTON, DE 19807	45-3457853	501(C)(3)	15,000.	0.			STATEWIDE
WASHINGTON COLLEGE 300 WASHINGTON AVENUE CHESTERTOWN, MD 21620-1197	52-0591691	501(C)(3)	15,000.	0.			TO SUPPORT THE WORK OF DR. JOSEPH PRUD'HOMME
WEBB INSTITUTE OF NAVAL ARCHITECTURE - 298 CRESCENT BEACH ROAD - GLEN COVE, NY 11542	11-1630912	501(C)(3)	10,000.	0.			CAMPAIGN FOR WEBB/PETER A. SILVIA '62, FOR INFRASTRUCTURE PROJECT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WESLEY COLLEGE 34 N. STATE STREET, ALUMNI HOUSE DOVER, DE 19901	51-0064335	501(C)(3)	59,068.	0.			UNDERGRADUATE COLLEGES
WESLEY UNITED METHODIST CHURCH 209 SOUTH STATE STREET DOVER, DE 19901	13-5562279	501(C)(3)	9,500.	0.			PROTESTANT
WEST END NEIGHBORHOOD HOUSE 710 N. LINCOLN STREET WILMINGTON, DE 19805	51-0064301	501(C)(3)	42,281.	0.			NEIGHBORHOOD CENTERS
WHAT IS YOUR VOICE, INC. 109 N. BEDFORD ST., SUITE 1 GEORGETOWN, DE 19947	47-2276605	501(C)(3)	15,000.	0.			SUSSEX
WHYY, INCORPORATED 150 NORTH SIXTH STREET PHILADELPHIA, PA 19106	23-1438083	501(C)(3)	104,250.	0.			MEDIA COMMUNICATIONS
WIDENER UNIVERSITY ONE UNIVERSITY PLACE CHESTER, PA 19013-5792	23-1386178	501(C)(3)	15,000.	0.			UNIVERSITIES
WILMINGTON COUNTRY CLUB 4825 KENNETT PIKE WILMINGTON, DE 19807	51-0054440	501(C)(7)	47,250.	0.			RECREATION & SPORTS
WILMINGTON FRIENDS SCHOOL 101 SCHOOL ROAD WILMINGTON, DE 19803	51-0064310	501(C)(3)	19,600.	0.			ELEMENTARY & SECONDARY SCHOOLS
WILMINGTON HEAD START 100 W. 10TH ST. STE. 1016 WILMINGTON, DE 19801	51-0276298	501(C)(3)	11,182.	0.			FCL GRANT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WILMINGTON LIBRARY P.O. BOX 2303 WILMINGTON, DE 19899	51-0064340	501(C)(3)	123,001.	0.			FCL GRANT
WILMINGTON SENIOR CENTER, INC. 1901 MARKET STREET WILMINGTON, DE 19802	51-0078398	501(C)(3)	8,000.	0.			SENIOR CENTERS
WINTERTHUR MUSEUM, GARDEN & LIBRARY - 5105 KENNETT PIKE - WINTERTHUR, DE 19735	51-0066038	501(C)(3)	21,937.	0.			MUSEUMS
WOODBIDGE SCHOOL DISTRICT 16359 SUSSEX HIGHWAY BRIDGEVILLE, DE 19933	51-6000279	501(C)(3)	6,000.	0.			ELEMENTARY & SECONDARY SCHOOLS
WOODLAWN LIBRARY 2020 W. 9TH STREET WILMINGTON, DE 19805		501(C)(3)	6,388.	0.			ANNUAL
WYOMING COUNTY COMMUNITY ACTION, INC. - 6470, ROUTE 20A, SUITE 1 - PERRY, NY 14530	16-1488538	501(C)(3)	5,102.	0.			ACTION ANGELS PROGRAM
YMCA OF DELAWARE 100 W. 10TH ST. STE. 1100 WILMINGTON, DE 19801	51-0065748	501(C)(3)	65,750.	0.			YOUNG MEN'S OR YOUNG WOMEN'S ASSOCIATION
YOUTH MENTORING INITIATIVE PO BOX 743 FISHERS, IN 46038	26-2543447	501(C)(3)	7,000.	0.			RIVERSIDE INTERMEDIATE PROGRAM
YWCA DELAWARE 100 W. 10TH STREET, SUITE 515 WILMINGTON, DE 19801	51-0064344	501(C)(3)	32,250.	0.			YOUNG MEN'S OR YOUNG WOMEN'S ASSOCIATIONS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WAKE FOREST UNIVERSITY PO BOX 7227 WINSTON-SALEM, NC 27109	56-0532138	501(C)(3)	20,000.	0.			ANNUAL FUND & SCHOLARSHIP FUND

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SCHOLARSHIPS	228	43,096.	0.		

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

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Open to Public
Inspection

Name of the organization

DELAWARE COMMUNITY FOUNDATION, INC

Employer identification number

22-2804785

Part I Questions Regarding Compensation

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

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

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

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

3 Indicate which, if any, of the following the 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 type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

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

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

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

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

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

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

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

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

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

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

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

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

Schedule J (Form 990) 2016

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) JOHN STUART COMSTOCK-GAY PRESIDENT & CEO	(i)	248,018.	0.	0.	18,000.	44,089.	310,107.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) RICHARD A. GENTSCH EXECUTIVE VICE PRESIDENT	(i)	170,423.	0.	0.	0.	29,153.	199,576.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(ii)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

PART I, LINE 4B:

JOHN STUART COMSTOCK-GAY \$18,000

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2016

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.
- ▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

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

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	30,661	1,676,171.	FMV ON DATE OF CONTR
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other (IN KIND GIFTS)	X	175	39,245.	FAIR MARKET VALUE
26 Other ()				
27 Other ()				
28 Other ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** **0**

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

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

Schedule M (Form 990) (2016)

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.

SCHEDULE M, LINE 32B:

THE ORGANIZATION USES AN INVESTMENT COMPANY TO SELL CONTRIBUTIONS OF PUBLICLY TRADED SECURITIES.

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.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Open to Public
Inspection

Name of the organization

DELAWARE COMMUNITY FOUNDATION, INC

Employer identification number

22-2804785

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

ADVANCED THROUGH PHILANTHROPY. WE ENVISION THRIVING, VIBRANT
COMMUNITIES, DRIVEN BY COLLABORATIONS THAT UNITE GENEROSITY, KNOWLEDGE
AND OTHER RESOURCES TO ADDRESS DELAWARE'S EVOLVING NEEDS AND
OPPORTUNITIES.

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

OPPORTUNITIES.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

THE PROGRAMS CHOSEN FOR THESE GRANTS WERE: PROTECTING THE ENVIRONMENT,
GROUNDWATER AND DRINKING WATER IN SUSSEX COUNTY FOR \$33,000, \$25,000
FOR RENOVATIONS TO A MOBILE MEDICAL OFFICE SERVING NEW CASTLE COUNTY
AND KENT COUNTIES THAT OFFERS ACUTE CARE TO THE HOMELESS AND UNINSURED,
AN ECONOMIC REVITALIZATION PROJECT ON WILMINGTON'S EAST SIDE FOR
\$77,380, \$60,000 FOR A PROGRAM TO INCREASE THE CAPACITY TO MEET THE
HEALTH CARE NEEDS OF THE GROWING SENIOR POPULATION IN SUSSEX COUNTY AND
\$8,000 FOR A PROGRAM IN NEW CASTLE COUNTY TO PROVIDE TECHNICAL SKILLS
NECESSARY FOR MEDIUM TO HIGH RISK/HIGH NEED OFFENDERS TO SUCCESSFULLY
TRANSITION OUT OF PRISON. UNRESTRICTED GRANTS ALSO SUPPORTED OVER
\$253,000 IN CAPITAL AND EQUIPMENT GRANTS FOR 18 NONPROFIT ORGANIZATIONS
IN DELAWARE. THE FOUNDATION'S SCHOLARSHIP PROGRAM OF 98 FUNDS SUPPORTED
LOCAL STUDENTS BY AWARDING A TOTAL OF \$324 THOUSAND IN SCHOLARSHIPS TO
228 WINNERS.

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

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

Schedule O (Form 990 or 990-EZ) (2016)

Name of the organization

DELAWARE COMMUNITY FOUNDATION, INC

Employer identification number

22-2804785

THE CORPORATION'S MEMBERS (THE "MEMBERS") SHALL CONSIST OF (1) THE CORPORATION'S DIRECTORS (THE "DIRECTORS"), (2) TEN INDIVIDUALS, EACH OF WHOM IS A DISTRIBUTION ADVISOR OR OTHER REPRESENTATIVE OF A DONOR-ADVISED OR ENDOWMENT FUND HELD BY THE CORPORATION, SELECTED BY THE DIRECTORS, AND (3) ALL OF THE CORPORATION'S PAST DIRECTORS (OTHER THAN ANY SUCH PAST DIRECTOR WHO WAS REMOVED FROM OFFICE BY THE BOARD OF DIRECTORS (THE "BOARD")) WHO INDICATE, IN WRITING, A WILLINGNESS TO SERVE AS MEMBERS.

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

THE NOMINATING COMMITTEE OF THE FOUNDATION SENDS NOMINATIONS FOR THE BOARD OF DIRECTORS TO THE MEMBERS WHO VOTE ON EACH CANDIDATE FOR A SEAT ON THE DCF BOARD.

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

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

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

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

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

COMPENSATION IS REVIEWED ANNUALLY BY THE CHIEF FINANCIAL OFFICER AND THE

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

CHIEF EXECUTIVE OFFICER.

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

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AVAILABLE THROUGH THEIR WEBSITE.

FORM 990, PART XII, LINE 2C:

THE PROCESS HAS NOT CHANGED.

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Open to Public Inspection

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

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

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

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

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

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	

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

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

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

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

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

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) RODEL CHARITABLE FOUNDATION - DE	L	76,858.	ADMIN FEES PAID
(2)			
(3)			
(4)			
(5)			
(6)			

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

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

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

TAX RETURN FILING INSTRUCTIONS

FORM 990-T

FOR THE YEAR ENDING

..... JUNE 30, 2017

Prepared for	DELAWARE COMMUNITY FOUNDATION, INC P.O. BOX 1636 WILMINGTON, DE 19899
Prepared by	GUNNIP & COMPANY LLP 2751 CENTERVILLE RD., STE. 300 WILMINGTON, DE 19808
Amount due or refund	NO AMOUNT IS DUE.
Make check payable to	NO AMOUNT IS DUE.
Mail tax return and check (if applicable) to	DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE CENTER OGDEN, UT 84201-0027
Return must be mailed on or before	MAY 15, 2018
Special Instructions	MAILED TIMELY ON MAY 15 TH FROM GUNNIP & COMPANY.

Form 990-T

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

OMB No. 1545-0687

For calendar year 2016 or other tax year beginning JUL 1, 2016, and ending JUN 30, 2017

2016

Department of the Treasury Internal Revenue Service

Information about Form 990-T and its instructions is available at www.irs.gov/form990t. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

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

Header section containing organization name (DELAWARE COMMUNITY FOUNDATION, INC), address (P.O. BOX 1636, WILMINGTON, DE 19899), and identification numbers (EIN: 22-2804785, Unrelated business activity codes: 900000).

Section C: Book value of all assets at end of year (223,455,346). Section F: Group exemption number. Section G: Check organization type (501(c) corporation).

H Describe the organization's primary unrelated business activity: INVESTMENTS

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? No

J The books are in care of JOHN STUART COMSTOCK-GAY Telephone number 302-571-8004

Table with 4 columns: Description, (A) Income, (B) Expenses, (C) Net. Rows include Gross receipts or sales, Cost of goods sold, Capital gain net income, etc. Total income is 0.

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

Table with 4 columns: Description, (A) Income, (B) Expenses, (C) Net. Rows include Compensation of officers, Salaries and wages, Repairs and maintenance, etc. Total deductions are 1,000.

Part III Tax Computation

35 Organizations Taxable as Corporations. See instructions for tax computation. Controlled group members (sections 1561 and 1563) check here <input type="checkbox"/> See instructions and:		
a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order): (1) \$ _____ (2) \$ _____ (3) \$ _____		
b Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$ _____ (2) Additional 3% tax (not more than \$100,000) \$ _____		
c Income tax on the amount on line 34	35c	0.
36 Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	36	
37 Proxy tax. See instructions	37	
38 Alternative minimum tax	38	
39 Tax on Non-Compliant Facility Income. See instructions	39	
40 Total. Add lines 37, 38 and 39 to line 35c or 36, whichever applies	40	0.

Part IV Tax and Payments

41a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	41a	
b Other credits (see instructions)	41b	
c General business credit. Attach Form 3800	41c	
d Credit for prior year minimum tax (attach Form 8801 or 8827)	41d	
e Total credits. Add lines 41a through 41d	41e	
42 Subtract line 41e from line 40	42	0.
43 Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach schedule)	43	
44 Total tax. Add lines 42 and 43	44	0.
45a Payments: A 2015 overpayment credited to 2016	45a	
b 2016 estimated tax payments	45b	
c Tax deposited with Form 8868	45c	
d Foreign organizations: Tax paid or withheld at source (see instructions)	45d	
e Backup withholding (see instructions)	45e	
f Credit for small employer health insurance premiums (Attach Form 8941)	45f	
g Other credits and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other _____ Total	45g	
46 Total payments. Add lines 45a through 45g	46	
47 Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	47	
48 Tax due. If line 46 is less than the total of lines 44 and 47, enter amount owed	48	0.
49 Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid	49	0.
50 Enter the amount of line 49 you want: Credited to 2017 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	50	

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

51 At any time during the 2016 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here	Yes	No
		X
52 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file.		X
53 Enter the amount of tax-exempt interest received or accrued during the tax year \$		

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

Sign Here
 Signature of officer _____ Date _____
 VP-FINANCE & ADMINISTRATION
 Title _____
 May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

Paid Preparer Use Only
 Print/Type preparer's name: KATHERINE L. SILICATO
 Preparer's signature: _____ Date: _____
 Check if self-employed PTIN: P00543107
 Firm's name: GUNNIP & COMPANY LLP Firm's EIN: 51-0076769
 2751 CENTERVILLE RD., STE. 300
 Firm's address: WILMINGTON, DE 19808 Phone no. 302-225-5000

FORM 990-T NET OPERATING LOSS DEDUCTION STATEMENT 1

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