Form **990**

Department of the Treasury

Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

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► The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0047

Open to Public

For the 2012 calendar year, or tax year beginning , 2012, and ending C Name of organization ARMSTRONG COUNTY COMMUNITY FOUNDATION Employer Identification Number Check if applicable: Address change Doing Business As 31-1625798 Number and street (or P.O. box if mail is not delivered to street addr) Name change Initial return 220 SOUTH JEFFERSON STREET В (724) 548-5897 City, town or country ZIP code + 4 Terminated 16201 Amended return KITTANNING PA receipts \$1,788,908 H(a) Is this a group return for affiliates? F Name and address of principal officer: Application pending H(b) Are all affiliates included? If 'No,' attach a list. (see instructions) PA 16201 MINDY KNAPPENBERG 220 S. JEFFERSON ST. ST KITTANNING Tax-exempt status X 501(c)(3) 501(c) (Website: ► H(c) Group exemption number www.accfound.org X Corporation Other > L Year of Formation: 1998 M State of legal domicile: PA Form of organization: Association Part I Summary Briefly describe the organization's mission or most significant activities: THE FOUNDATION DEVELOPS, MANAGES AND DISTRIBUTES CHARITABLE FUNDING TO MEET EXISTING AND CHANGING Activities & Governance COMMUNITY NEEDS. GRANTS AND SCHOLARSHIPS AWARDED IN 2012 TOTAL MORE THAN \$639,000. if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) 3 8 Number of independent voting members of the governing body (Part VI, line 1b) 4 8 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 5 4 Total number of volunteers (estimate if necessary) 6 . 5 7a Total unrelated business revenue from Part VIII, column (C), line 12 0. Prior Year Current Year Contributions and grants (Part VIII, line 1h) 604,815 910,149. Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 164,864. 267,645. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 15,150. 15,253. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 784,829. 1,193,047. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 392,344. 639,795. Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 98,930 102,134. Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 52,929. 51,445. 793,374. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 544,203. Revenue less expenses. Subtract line 18 from line 12 399,673. 240,626. End of Year Beginning of Current Year 6,117,357. 5,353,707 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) Net assets or fund balances. Subtract line 21 from line 20 22 5,353,707. 6,117,357. 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. Ð Date Sign nase G Here Type or print name and title Preparer's signature Print/Type preparer's name GERALD J. MICSKY, C.P.A. GERALD J. MICSKY, C.P.A. 10/01/13 P00124468 self-employed Paid GERALD J. MICSKY, C.P.A Preparer Firm's EIN $^{\triangleright}$ 25-1769029 Use Only Firm's address 316 HARRISON STREET 16201 (724) 543-2050 PA KITTANNING Yes May the IRS discuss this return with the preparer shown above? (see instructions)