Change in Accounting Period

Form 990-PF

Department of the Treasury

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

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

OMB No. 1545-0052

Internal Revenue Service ▶ Go to www.irs.gov/Form990PF for instructions and the latest information. Open to Public Inspection For calendar year 2018 or tax year beginning May 1, 2018, and ending Dec 31, 2018 Name of foundation A Employer identification number FRIENDS FOUNDATION FOR THE AGING 22-1524182 Number and street (or P.O. box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) PO BOX 1081 (215)478-6663City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here ▶ □ LANGHORNE PA 19047 ☐ Initial return G Check all that apply: ☐ Initial return of a former public charity D 1. Foreign organizations, check here . . . ▶ ☐ Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation · · · ▶ □ ☐ Name change ☐ Address change E If private foundation status was terminated under H Check type of organization: ▼ Section 501(c)(3) exempt private foundation section 507(b)(1)(A), check here ▶ □ ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

	end of	arket value of all assets at f year (from Part II, col. (c), 12,209,088. J Accounting method ☐ Other (specify) (Part I, column (d) must be		F II the loui	ndation is in a 60-mon ction 507(b)(1)(B), chec	oth termination
Pa	irt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)			人人的基础	
	2	Check ► 🗵 if the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	327,648.	327,648.		
	5a	Gross rents				
	b	Net rental income or (loss)				1267
0	6a	Net gain or (loss) from sale of assets not on line 10	697,593.			
Š	b	Gross sales price for all assets on line 6a 6, 305, 087.		L-6a Stmt		Malana Ka
Revenue	7	Capital gain net income (from Part IV, line 2)		697,593.		TO THE TABLE OF
	8	Net short-term capital gain				5000 100 MARCH
	9	Income modifications				
	10a	Gross sales less returns and allowances				国际国际的企业
	b	Less: Cost of goods sold	A CARLON CONTRACTOR			The second
	С	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)	-			
	12	Total. Add lines 1 through 11	1,025,241.	1,025,241.		
"	13	Compensation of officers, directors, trustees, etc.	47,568.			47,568.
Se	14	Other employee salaries and wages				
ë	15	Pension plans, employee benefits	0.			
ğ	16a	Legal fees (attach schedule) L-16a Stmt	15,997.			15,997.
Ē	b	Accounting fees (attach schedule) L-1.6b. Stmt.	23,275.			23,275.
Ņ	С	Other professional fees (attach schedule) L-16c Stmt	2,920.	281.		2,637.
rat	17	Interest				
ist	18	Taxes (attach schedule) (see instructions)e. Stmt.	23,639.			3,734.
Ë	19	Depreciation (attach schedule) and depletion	37.	37.		
d	20	Occupancy	2,931.			2,931.
A	21	Travel, conferences, and meetings	9,889.			9,889.
Ĕ	22	Printing and publications				
9	23	Other expenses (attach schedule) See .Stmt	32,837.	30,361.		2,476.
ţ	24	Total operating and administrative expenses.				
ž		Add lines 13 through 23	159,093.	30,679.		108,507.
Operating and Administrative Expenses	25	Contributions, gifts, grants paid	234,000.			234,000.
_	26	Total expenses and disbursements. Add lines 24 and 25	393,093.	30,679.		342,507.
	27	Subtract line 26 from line 12:				1
	а	Excess of revenue over expenses and disbursements	632,148.			
	b	Net investment income (if negative, enter -0-) .		994,562.		Here was
	С	Adjusted net income (if negative, enter -0-)				
For	Paper	work Reduction Act Notice, see instructions.	Cat.	No. 11289X	1	orm 990-PF (2018

Pa	irt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
		should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	4,911.	2,395.	2,395.
	2	Savings and temporary cash investments	19,590.	130,082.	130,082.
	3	Accounts receivable ►			WARK TIA YANG
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts ▶	No. William Programme Annual Control of the Control	NAME OF TAXABLE PARTY O	DOTE WAS DESCRIBED AND DESCRIB
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less: allowance for doubtful accounts ▶			
ts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments – U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule) L-10b Stmt	6,362,203.	5,400,378.	5,400,378.
	С	Investments—corporate bonds (attach schedule) L-10c Stmt	2,968,711.	3,389,199.	3,389,199.
	11	Investments—land, buildings, and equipment: basis ▶	And the second second	3/30//139:	3/303/13/3.
		Less: accumulated depreciation (attach schedule) ▶	Arris management are as a particular		
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule) . L-13 Stmt	3,967,643.	3,276,916.	3,276,916.
	14	Land, buildings, and equipment; basis • 0.	3/30//013:	3,270,310.	3/2/0/310.
		Less: accumulated depreciation (attach schedule) ► 0.	78.	0.	0.
	15	Other assets (describe ► L-15 Stmt)	30,860.	10,118.	10,118.
	16	Total assets (to be completed by all filers—see the	30,000.	10,110.	10,110.
		instructions. Also, see page 1, item I)	13,353,996.	12,209,088.	12,209,088.
_	17	Accounts payable and accrued expenses	61,665.	41,683.	12,203,000.
	18	Grants payable	01,003.	41,005.	
ies	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ab	21	Mortgages and other notes payable (attach schedule)			Age of the second
=	22		225,000.	125,000.	
	23	Other liabilities (describe ► L-22 Stmt) Total liabilities (add lines 17 through 22)	286,665.		
_		Foundations that follow SFAS 117, check here	200,003.	166,683.	
Balances		and complete lines 24 through 26, and lines 30 and 31.			
Š	24	Unrestricted	12 067 221	12 042 405	
ala	25	Temporarily restricted	13,067,331.	12,042,405.	
	26	Permanently restricted			
Net Assets or Fund		Foundations that do not follow SFAS 117, check here ▶		_	
F		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds			
ts	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
Se	29	Retained earnings, accumulated income, endowment, or other funds		-	
As	30	Total net assets or fund balances (see instructions)	13,067,331.	12 042 405	
et	31	Total liabilities and net assets/fund balances (see	13,067,331.	12,042,405.	
Z	31	instructions)	12 252 006	12 200 000	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances	13,353,996.	12,209,088.	
		al net assets or fund balances at beginning of year—Part II, colu	mp (a) line 20 (mus	at agree with	
1	end	of year figure reported on prior year's return)	inii (a), iiile 30 (mus	1	13,067,331.
2	Ento	er amount from Part I, line 27a		2	632,148.
3	Othe	er increases not included in line 2 (itemize) UNREALIZED GA	TN/LOSS	3	-1,657,074.
4		lines 1, 2, and 3			12,042,405.
5		venera not included in line O (itemine)		5	12,072,403.
970		reases not included in line 2 (itemize) all net assets or fund balances at end of year (line 4 minus line 5)—	Part II. column (b) lii		12,042,405.
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Form **990-PF** (2018)

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	V Capital Gains and L	osses for Tax on Investment	Income			
		of property sold (for example, real estate, or common stock, 200 shs. MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a (COMPUTER			P	03/21/2014	10/01/2018
b I	PUBLICLY TRADED SECU	RITIES		P	01/01/2000	12/31/2018
С						
d						
е						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis		ain or (loss) (f) minus (g))
a	0.	778.		819.		-41
b	6,305,087.			5,607,453.		697,63
С						
d						
е	Complete only for specific should	a gain in salvan (h) and avend his th	- formulation	10/01/60		
	Complete only for assets snowin	ng gain in column (h) and owned by th				ol. (h) gain minus ot less than -0-) or
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col. (i) l. (j), if any		(from col. (h))
а						-4:
b						697,63
С						
d						
е						
2	Capital gain net income or (r	net capital loss) { If gain, also If (loss), ent			2	697,593
art	V Qualification Under	Cootion 4040(a) for Dadusas				
or op sect as th	ptional use by domestic privation 4940(d)(2) applies, leave the foundation liable for the se	ction 4942 tax on the distributable	ion 4940(a) e amount o	tax on net inves	tment income.)	☐ Yes ⊠ N
or opsect as the	ptional use by domestic privation 4940(d)(2) applies, leave the foundation liable for the ses," the foundation doesn't qua	te foundations subject to the sect his part blank. ction 4942 tax on the distributable lify under section 4940(e). Do not	ion 4940(a) e amount o complete t	tax on net inves f any year in the this part.	tment income.) base period?	
or op sect as th "Yes	ptional use by domestic privation 4940(d)(2) applies, leave the foundation liable for the ses," the foundation doesn't quarenter the appropriate amoun	te foundations subject to the sect his part blank. ction 4942 tax on the distributable lify under section 4940(e). Do not ht in each column for each year; s	ion 4940(a) e amount o complete t	f any year in the this part.	tment income.) base period?	
sect as th 'Yes	ptional use by domestic privation 4940(d)(2) applies, leave the foundation liable for the ses," the foundation doesn't qua Enter the appropriate amour (a) Base period years	te foundations subject to the sect his part blank. ction 4942 tax on the distributable lify under section 4940(e). Do not it in each column for each year; so	e amount o complete t	tax on net inves f any year in the this part.	base period?	(d) istribution ratio
ect as th Yes	ptional use by domestic privation 4940(d)(2) applies, leave the foundation liable for the ses," the foundation doesn't quate Enter the appropriate amount (a) Base period years endar year (or tax year beginning in)	te foundations subject to the sect his part blank. ction 4942 tax on the distributable lify under section 4940(e). Do not to in each column for each year; so (b) Adjusted qualifying distributions	e amount of complete the instruction Net value of	f any year in the this part. uctions before means of noncharitable-use a	base period? aking any entries (col. (t	i. (d) istribution ratio o) divided by col. (c))
ect as th Yes	ptional use by domestic privation 4940(d)(2) applies, leave the foundation liable for the ses," the foundation doesn't quate Enter the appropriate amounts (a) Base period years endar year (or tax year beginning in)	te foundations subject to the sect his part blank. ction 4942 tax on the distributable lify under section 4940(e). Do not it in each column for each year; so Adjusted qualifying distributions	e amount of complete the instruction	f any year in the this part. uctions before more of noncharitable-use at 13,234,8	base period? aking any entries assets (col. (t	(d) Istribution ratio o) divided by col. (c)) 0.0571
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sect as th Yes	ptional use by domestic privation 4940(d)(2) applies, leave the foundation liable for the sets," the foundation doesn't quate Enter the appropriate amour (a) Base period years endar year (or tax year beginning in) 2017 2016 2015	te foundations subject to the sect his part blank. ction 4942 tax on the distributable lifty under section 4940(e). Do not it in each column for each year; so (b) Adjusted qualifying distributions 756,256. 636,784. 676,005.	e amount of complete the instruction with the complete the instruction of the complete the instruction of the complete the instruction of the complete the comple	f any year in the this part. uctions before moncharitable-use a 13,234,8 12,300,6 12,541,3	base period? aking any entries (col. (t) 314.	istribution ratio a) divided by col. (c)) 0.0571 0.0517 0.0539
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REV 02/01/19 PRO

Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see i	nstru	iction	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.			
_	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)			
b		19,8	91.	
	here ► ☐ and enter 1% of Part I, line 27b			
С	Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		0.	
3		19,8		
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 4	19,8	0.	
5 6	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	19,0	91.	
а	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 9,891.			
b	Exempt foreign organizations—tax withheld at source 6b			
c	Tax paid with application for extension of time to file (Form 8868) 6c 10,000.			
d	Backup withholding erroneously withheld 6d			
7		19,8	91.	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		0.	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10		0.	
11	Enter the amount of line 10 to be: Credited to 2019 estimated tax ▶ 0 . Refunded ▶ 11			
Part	VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		×
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		×
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.			
С	Did the foundation file Form 1120-POL for this year?	1c		×
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers. ► \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.	2		×
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			.,
4a	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes. Did the foundation have unrelated business gross income of \$1,000 or more during the year?	3 4a		×
4a b	If "Yes," has it filed a tax return on Form 990-T for this year?	4a 4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		×
	If "Yes," attach the statement required by General Instruction T.			^
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	×	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	×	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G?</i> If "No," attach explanation	8b	×	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
•	4942(j)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV.	9		×
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		×

Part	VII-A	Statements Regarding Activities (continuea)	1000		
	Teles Indian			Yes	No
11	meaning o	ne during the year, did the foundation, directly or indirectly, own a controlled entity within the foundation section 512(b)(13)? If "Yes," attach schedule. See instructions	11		×
12		undation make a distribution to a donor advised fund over which the foundation or a disqualified			
10		d advisory privileges? If "Yes," attach statement. See instructions	12	_	×
13		Indation comply with the public inspection requirements for its annual returns and exemption application ddress ► WWW.FRIENDSFOUNDATIONAGING.ORG			
14		s are in care of ► SUSAN HOSKINS Telephone no. ► (21		-6663	
		t ▶ PO BOX 1081 LANGHORNE PA ZIP+4 ▶ 190			
15		947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here the amount of tax-exempt interest received or accrued during the year 15		• •	▶ ⊔
16		the during calendar year 2018, did the foundation have an interest in or a signature or other authority	tv	Yes	No
		nk, securities, or other financial account in a foreign country?	16		×
		structions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name	of		
		n country ►		直数的	
Part		Statements Regarding Activities for Which Form 4720 May Be Required	THE REAL PROPERTY.		
		4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a		e year, did the foundation (either directly or indirectly): le in the sale or exchange, or leasing of property with a disqualified person?	Jo		
		w money from, lend money to, or otherwise extend credit to (or accept it from) a	40		
		alified person?	lo l		
	(3) Furnish	h goods, services, or facilities to (or accept them from) a disqualified person? Yes 🗵	Vo 💮		
		ompensation to, or pay or reimburse the expenses of, a disqualified person? $oximes$ Yes $igsqcup$ I	Vo O		
		fer any income or assets to a disqualified person (or make any of either available for			
		refit or use of a disqualified person)?	40		
	founda	to pay money or property to a government official? (Exception. Check "No" if the ation agreed to make a grant to or to employ the official for a period after ation of government service, if terminating within 90 days.)			
b		swer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described	100 200 200		
		ns section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions .	1b		×
	Organizati	ions relying on a current notice regarding disaster assistance, check here			
С		oundation engage in a prior year in any of the acts described in 1a, other than excepted acts, the	at 🔣		
		corrected before the first day of the tax year beginning in 2018?		:	×
2		failure to distribute income (section 4942) (does not apply for years the foundation was a privation defined in section 4942(j)(3) or 4942(j)(5)):	ite	-5	
а		d of tax year 2018, did the foundation have any undistributed income (lines 6d and			
		(III) for tax year(s) beginning before 2018?	No		
h		st the years ▶ 20 , 20 , 20 , 20 any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)	(2)	1,30	
U		o incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)		1	
		isted, answer "No" and attach statement—see instructions.)	2t		AND DESCRIPTION OF THE PERSON
С		visions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. , 20, 20, 20, 20, 20, 20, 20, 20, 20, 20			
3a	Did the fo	oundation hold more than a 2% direct or indirect interest in any business enterprise			
		le during the year?	No		
b	disqualifie	did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation ed persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by t	he		
	the 10-,	ioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the lapse by the lapse by the lapse is 2012).	he 🧠		
		n had excess business holdings in 2018.)	31	-	-
4a b	Did the fo	undation invest during the year any amount in a manner that would jeopardize its charitable purpose bundation make any investment in a prior year (but after December 31, 1969) that could jeopardize	its 4	90 120	×
-		purpose that had not been removed from jeopardy before the first day of the tax year beginning in 201			×
BAA		PEN 03/04/40 PPO		90-PI	

Part	VII-B Statemen	nts Regarding Activities	for W	nich Form	4/20 I	may Be R	equire	d (contin	uea)			
5a	A AND THE RESERVE OF THE PARTY	he foundation pay or incur a									Yes	No
		nda, or otherwise attempt t							⋈ No			
		come of any specific public		The same of the sa		CONTRACTOR	Action to the second					
		tly or indirectly, any voter registration drive?										
	(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No (4) Provide a grant to an organization other than a charitable, etc., organization described in											
	section 4945(d)(4)	(A)? See instructions						Yes	⊠ No			
		urpose other than religious, he prevention of cruelty to d							⊠ No			
b		s" to 5a(1)–(5), did any of th n 53.4945 or in a current no							cribed	5b		
		on a current notice regarding									4/4	
C	If the answer is "Yes	" to question 5a(4), does t	he four	ndation claim	exemp	otion from	the tax					
	because it maintaine	d expenditure responsibility	for the	grant?				Yes	☐ No			
	If "Yes," attach the s	tatement required by Regula	ations s	ection 53.49	45-5(d)).						
6a		luring the year, receive any		00 100 100 100 100 100 100 100 100 100	100							
	on a personal benefit							☐ Yes	⊠ No			
b		luring the year, pay premiun	ns, dire	ctly or indired	tly, on	a personal	benefi	t contract?	? .	6b		×
	If "Yes" to 6b, file Fo								U.S.L			
7a		tax year, was the foundation							⊠ No	21.1		
b	If "Yes," did the foun	dation receive any proceeds	s or hav	e any net ind	ome a	ttributable	to the t	ransaction	? .	7b		
8		eject to the section 4960 ta										4
		ess parachute payment(s) du									43	
Par		n About Officers, Direc	tors, T	rustees, Fo	ounda	tion Man	agers,	Highly P	aid E	mploy	ees,	
	and Contr	The state of the s										
1	List all officers, dire	ctors, trustees, and found										
	(a) Name a	nd address	hou	e, and average rs per week ed to position	(If r	mpensation not paid, iter -0-)	emple	Contributions byee benefit perred compen	olans	(e) Exper other a	nse acc allowan	ces
	ES ERIC ANDREWS		V.PRESI	DENT/TREASUER								
2 L(ONGVIEW TERRACE	MORRISTOWN NJ 07960		3.00	Lawrence Lawrence	0.			0.			0.
	N COOLEY		TRUST									
		ROAD DUNDEE NY 14837		2.00		0.			0.			0.
	AN HOSKINS		EXEC	DIRECTOR								
		LANGHORNE PA 19047		20.00		47,568.			0.	and the same		0.
See	Statement											
				15.00		0.			0.	\ 16		0.
2	"NONE."	ve highest-paid employed	es (oth	er than thos	se incli	uded on li	ine 1—	see instru	uction	s). It no	one, e	enter
	(a) Name and address of ea	ch employee paid more than \$50,00	00	(b) Title, and a hours per v devoted to pe	veek	(c) Compe	nsation	(d) Contributemployee It plans and docompens	benefit leferred	(e) Expe	nse acc allowan	
NONE	2											
Total	number of other empl	oyees paid over \$50,000 .							. •	0		
BAA				1 00/04/40 550						Form 99	0-PF	(2018)
DAA			KE'	V 02/01/19 PRO								

Part VII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Er and Contractors (continued)	nployees,
3 Fiv	ve highest-paid independent contractors for professional services. See instructions. If none, enter "NON	IE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		
		-
	nber of others receiving over \$50,000 for professional services	0
Part IX-		1
List the organiza	foundation's four largest direct charitable activities during the tax year, Include relevant statistical information such as the number of tions and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
	ONE	1
		0.
2		
3		
4		
Part IX		
	the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 NO	DNE	
		0.
2		
All other	program-related investments. See instructions.	
3		
Tatal A	Id Proce d Abressesh O	
otal. Ac	d lines 1 through 3	Form 990-PF (2018
A A	DEV 02/04/40 DDO	FOIII 333-1 (201

Part	see instructions.)	gn tol	undations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
	Average monthly fair market value of securities	1a	12,922,637.
	Average of monthly cash balances	1b	-7,804.
	Fair market value of all other assets (see instructions)	1c	
	Total (add lines 1a, b, and c)	1d	12,914,833.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
	Acquisition indebtedness applicable to line 1 assets	2	
	Subtract line 2 from line 1d	3	12,914,833.
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	193,722.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	12,721,111.
6	Minimum investment return. Enter 5% of line 5	6	426,942.
Part 2	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for and certain foreign organizations, check here ► and do not complete this part.)	ounda	ations
1	Minimum investment return from Part X, line 6	1	426,942.
	Tax on investment income for 2018 from Part VI, line 5		420, 342.
b	Income tax for 2018. (This does not include the tax from Part VI.) 2b		
	Add lines 2a and 2b	2c	19,891.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	407,051.
4	Recoveries of amounts treated as qualifying distributions	4	107,031.
5	Add lines 3 and 4	5	407,051.
6	Deduction from distributable amount (see instructions)	6	10.70021
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	407,051.
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	342,507.
b	Program-related investments—total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	342,507.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b. See instructions	5_	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	342,507.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whe	ther the foundation

Part	XIII Undistributed Income (see instruction	ons)			
		(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1	Distributable amount for 2018 from Part XI, line 7				407,051.
2	Undistributed income, if any, as of the end of 2018:				10,700 21
а	Enter amount for 2017 only			0.	
b	Total for prior years: 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2018:				
а	From 2013				
b	From 2014 37,993.				
С	From 2015 54,663.				
d	From 2016 32,416.	10 · 64			1 4 W 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
е	From 2017 110,929.			the first way from	
f	Total of lines 3a through e	236,001.			
4	Qualifying distributions for 2018 from Part XII, line 4: ► \$342,507.				
а	Applied to 2017, but not more than line 2a .				
b	Applied to undistributed income of prior years (Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2018 distributable amount				342,507.
е	Remaining amount distributed out of corpus	0.			A CHIEN
5	Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a).)	64,544.			64,544.
6	Enter the net total of each column as indicated below:	0.70111			
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	171,457.			
b	Prior years' undistributed income. Subtract line 4b from line 2b		0.		
_	Enter the amount of prior years' undistributed				March 1997
С	income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable amount—see instructions		0.		
е	Undistributed income for 2017. Subtract line 4a from line 2a. Taxable amount—see instructions			0.	
f	Undistributed income for 2018. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019		W 10		0.
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)				
8	Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions).	0.			
9	Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	171,457.			
10	Analysis of line 9:				
а	Excess from 2014 0 .				
b	Excess from 2015 28,112.				
С	Excess from 2016 32,416.				
d	Excess from 2017110,929.			in-	THE STATE OF
e	Excess from 2018 0 .	Real Age of the second		The state of the s	

Part	XIV Private Operating Founda	tions (see instru	uctions and Part	VII-A, question 9	9)	N/A
10000	If the foundation has received a ruling					
	foundation, and the ruling is effective for					
b	Check box to indicate whether the four	ndation is a private	e operating founda	ition described in se	ection 4942(j)(3	3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
	each year listed					
b	85% of line 2a					
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test-enter:					
	(1) Value of all assets					
	(2) Value of assets qualifying under					
724	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in					
	Part X, line 6 for each year listed					
С	"Support" alternative test-enter:					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
Part		n (Complete t	his part only if	the foundation I	nad \$5,000 or mo	ore in assets at
	any time during the year-					
1	Information Regarding Foundation	Managers:				
	List any managers of the foundation before the close of any tax year (but on NONE					by the foundation
	List any managers of the foundation ownership of a partnership or other e					rge portion of the
	NONE					
2	Information Regarding Contribution Check here ► ☒ if the foundation unsolicited requests for funds. If the foundation complete items 2a, b, c, and d. See it	only makes contoundation makes	tributions to pres	elected charitable		
а	The name, address, and telephone no	umber or email ac	ddress of the perso	on to whom applic	ations should be ad	ddressed:
b	The form in which applications should	be submitted an	nd information and	materials they sho	ould include:	
C	Any submission deadlines:					
d	Any restrictions or limitations on av	vards, such as b	oy geographical a	areas, charitable f	ields, kinds of ins	titutions, or other

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During t	he Year or Approve	ed for Fut	ture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	contribution	
a Paid during the year NEW YORK YEARLY MEETING 15 RUTHERFORD PLACE NEW YORK NY 10003	N/A	PUBLIC	PASTORAL CARE FOR SENIORS AND ADULTS WITH DISABILITIES-ARCH	64,000.
FRIENDS SERVICES FOR THE AGING 670 SENTRY PARKWAY #120 BLUE BELL PA 19422 FRIENDS HOUSE RETIREMENT COMMUNITY	N/A N/A	PUBLIC	DEVELOP CAPABLE STAFF THROUGH LEADERSHIP INSTITUTE & STUDENT INTERNSHIPS AGING WELL WITH	35,000.
17340 QUAKER LANE SANDY SPRING MD 20860 QUAKER LIVING CONSORTIUM FRIENDS LIFECARE PARTNERS 531 PLYMOUTH RD, STE 500	N/A	PUBLIC	FRIENDS PROGRAMS, TRANSPORTATION & SUPPORT STUDY ISOLATION AND LONELINESS IN	40,000.
PLYMOUTH MEETING PA 19462 PHILIP JAISOHN FOUNDATION	N/A	PUBLIC	SENIOR LIVING DEVELOPE CARE	30,000.
6075 OLD YORK RD PHILADELPHIA PA 19126 AMERICAN FRIENDS SERVICE COMMITTEE	N/A	PUBLIC		15,000.
1501 CHERRY STREET PHILADELPHIA PA 19123		PUBLIC	EXPAND CAPACITY TO PROVIDE SERVICE TO ISOLATED IMMIGRANT ELDERS	50,000.
Total			▶ 3a	224 000
b Approved for future payment	· · · · · · ·		Ja	234,000.
Total			> 3b	
	190 190 190 190 190 190 190 190 190 190			

Enter gros	s amounts unless otherwise indicated.	Unrelated business income Excluded by section 512, 513, or				14 (e)	
1 Progr	ram service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemp function income (See instructions.)	
a							
b _							
c		700100000000000000000000000000000000000					
ď							
e							
f							
g F	ees and contracts from government agencies						
2 Mem	bership dues and assessments						
3 Intere	est on savings and temporary cash investments						
4 Divid	ends and interest from securities			14	327,648.		
5 Net r	ental income or (loss) from real estate:						
a D	ebt-financed property						
b N	ot debt-financed property						
	ental income or (loss) from personal property						
	r investment income						
	or (loss) from sales of assets other than inventory			18	697,593.		
	ncome or (loss) from special events						
10 Gros	s profit or (loss) from sales of inventory						
11 Othe	r revenue: a						
b _							
С _							
d _							
е_							
	otal. Add columns (b), (d), and (e)				1,025,241.		
					13	1,025,241.	
	sheet in line 13 instructions to verify calculation		of Evens	-1 D			
Part XV							
▼	Explain below how each activity for which accomplishment of the foundation's exempt pu	income is repo irposes (other thar	rted in column by providing fu	n (e) of Part XVI- unds for such purpo	-A contributed i oses). (See instru	mportantly to tr ctions.)	
_							

						*	
-							
					-		
		The second particular and the second					

Firm's address ▶

BAA

197 STATE ROUTE 18 EAST BRUNSWICK

Part	XVII	Information Organization		rding Tran	nsfers to	and Tra	ansactio	ns an	nd Rela	ationshi	ps W	ith No	nchar	itable	Exe	mpt
1	Did th	ne organization of	lirectly o	r indirectly	engage in	any of th	ne followi	na with	anv of	her orga	nizatio	n desc	ribed		Yes	No
	in se	ection 501(c) (o	ther tha	n section	501(c)(3)	organiza	ations) c	r in s	section	527, re	lating	to po	litical			
	Seem Nicketter State	izations?														
а		fers from the rep														
		ash											•	1a(1)		×
		ther assets .											•	1a(2)		×
b		transactions:														
		ales of assets to												1b(1)		×
		urchases of asse											• •	1b(2)	_	×
		ental of facilities,									• •		•	1b(3)		×
		eimbursement ar											•	1b(4)		×
		oans or loan gua											•	1b(5)		×
		erformance of se												1b(6)		×
C		ng of facilities, e												1c		×
d		answer to any														
		of the goods, of in any transaction														
(a) Line		b) Amount involved		Name of nonc						on of transfe		Transfer of the second				
(a) Line	e 110. (b) Amount involved	(C)	Name of nonc	mantable exe	empt organiz	zation	(a) L	Description	on of transfe	ers, tran	sactions,	, and sna	ring arra	angeme	ents
	-+							+								
	-							+		-					-	
	-					-		+								
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	-							-						_	-	-
							-	+	***************************************							-
	-															
2a	le the	foundation dire	octly or	indirectly a	effiliated v	uith or ro	plated to	one o	or more	tov ovo	mpt o	raoniza	ations	-		
Za		ribed in section 5							or more	lax-exe	ilipi 0	nyaniza	ations	_ v.	es 🛚	l Na
b		s," complete the				(0)(0)) 01 1	5001101	1027.	•		•			□ 16	25 🔼] 140
	11 10	(a) Name of organ		ig scriodaic	,. 	(b) Type of	organizatio	n			(c) Des	cription	of relation	nshin		
	_	(a) Hamo or organ	- Lation			(b) Type of	Organizatio	<u>'</u>			(0) 500	onpuon .	or rolation	Юпр		
-								-					Januarian	-		-
	-								-						-	
-							······	_								
	Unde	r penalties of perjuyy, I	declare tha	t I have examin	ed this return	including ac	companying	schedule	es and etc	tements an	d to the	best of m	v knowled	ge and	belief it	is true
Sign		ct, and complete. Decl														
		To be IM	tele	7		11/07/0	010	DECTE	DENIE .				May the IF with the pr			
Here		ature of officer or trus	stee /			11/07/20 Date	019 / P	RESIL	DENT.				See instruc			
360	- Sell	Print/Type preparer			Preparer	's signature		-		Date			- I	PTIN	-	
Paid				OD.	4	Evang		CPA			2010	Check self-em	X If		7553	0
Prep		M R EVANGE	the second of the	Part of the second seco	P. Daniel W. (Carlotte Street, Assessed		The second section	-		1/07/2			ployed I			d
Use	Only	Firm's name	FRAZE	EK, EVAN	IGELIST.	A & CO	MPANY,	LLC			Firm's	S EIN P	14-18	20.2	000	

NJ 08816

Phone no. (732)828-2800

Form **990-PF** (2018)

Form 990-PF: Return of Private Foundation

Part VIII: Information about Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors Continuation Statement

Name and address	Title, and average hours per week devoted to position	Compensation	Contributions to employee benefit plans and deferred compensation	Expense account, other allowances
BETH HUDSON KELLER 353 CAMBRIDGE LANE NEWTOWN, PA 18940	TRUSTEE 2.00	0.	0.	0.
JAMES WHITELY 46 COLONIAL WAY SHORT HILLS, NJ 07078	PRESIDENT 5.00	0.	0.	0.
BETH YINGLING 34 MOUNTAIN HEIGHTS AVE LINCOLN PK, NJ 07035	SECRETARY 2.00	0.	0.	0.
R.E.TYLER HOFF 3 MARTIN COURT NEWTOWN, PA 18940	TRUSTEE 2.00	0.	0.	0.
CONRAD PERSON 537 W. ALLENS LANE PHILADELPHIA, PA 19119	TRUSTEE 2.00	0.	0.	0.
LISA OGLETREE 12 LLANBERRIS ROAD BALA CYNWYD, PA 19004	TRUSTEE 2.00	0.	0.	0.
		0.	0.	0.

Additional information from your Form 990-PF: Return of Private Foundation

Form 990-PF: Return of Private Foundation

Taxes

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
PAYROLL TAXES	3,734.			3,734.
FEDERAL TAX -INVESTMENT I	19,891.			
FOREIGN TAXES	14.			
Total	23,639.			3,734.

Form 990-PF: Return of Private Foundation

Other Expenses

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
BANK/CUSTODIAL ACCOUNT FE	30,235.	30,235.		
INSURANCE	2,476.			2,476.
BANK FEES	126.	126.		
Total	32,837.	30,361.		2,476.

Employer Identification No. Name FRIENDS FOUNDATION FOR THE AGING 22-1524182 Asset Information: Description of Property COMPUTER

Business Code _ _ _ Exclusion Code . . . 18 _ _ _ _ -------Date Acquired . ___03/21/14 How Acquired . Purchased Date Sold . . . _ _ 10/01/18 Name of Buyer . _ _ _ Check Box, if Buyer is a Business . . . Sales Expense . _ _ _ Valuation Method. . . _ _ _ _ _ _

 Total Gain (Loss)
 -41. Accumulated Depreciation
 778.

 Description of Property
 PUBLICLY TRADED SECURITIES

 Business Code _ _ _ Exclusion Code . . . 18 _ _ _ Date Acquired . ___01/01/00 How Acquired . Purchased Date Sold . . . _ _ 12/31/18 Name of Buyer . _ _ _ _ Check Box, if Buyer is a Business . . . Sales Price. . . _ 6, 305, 087. Cost or other basis (do not reduce by depreciation). . _ 5, 607, 453. Total Gain (Loss) 697, 634. Accumulated Depreciation Description of Property _ _ _ _ _ Business Code _____Exclusion Code . . . _____ Date Acquired . ____ How Acquired . _____ Date Sold . . . _____ Name of Buyer . _____ Check Box, if Buyer is a Business . . . Sales Price. . . _ _ _ Cost or other basis (do not reduce by depreciation). . _ _ _ _ Sales Expense . _____ Valuation Method. . . _____ Business Code ____ Exclusion Code . . . ____ Date Acquired . _____ How Acquired . _____ Date Sold . . . _ _ _ Name of Buyer . _ _ _ Check Box, if Buyer is a Business . . . Sales Price. . . _ _ _ Cost or other basis (do not reduce by depreciation). . _ _ _ _ Sales Expense . _____ Valuation Method. . . _____ Description of Property Business Code ____ Exclusion Code . . . _____ Date Acquired . _____ How Acquired . ______ Date Sold . . . _ ____ Name of Buyer . _ _ _ _ Check Box, if Buyer is a Business . . . Sales Price. . . _ _ _ Cost or other basis (do not reduce by depreciation). . _ _ _ _ Sales Expense . _ _ _ Valuation Method . . _ _ _ _ . _ _ _ . _ _ _ . _ _ . _ _ . _ _ . _ _ . _ _ . Total Gain (Loss) Accumulated Depreciation Totals: Total Gain (Loss) of all assets 697, 593. Gross Sales Price of all assets . . . 6,305,087. Unrelated Business Income Business Code . Excluded by section 512, 513, 514 697, 593. Exclusion Code . 18 Related/Exempt Function Income . . __ QuickZoom here to Form 990-PF, Page 1......

2018

Name Employer Identification No. 22-1524182

Line 16a - Legal Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MCCARTER & ENGLISH, LLP	LEGAL	15,997.			15,997.
Total to Form 990-	PF, Part I, Line 16a	15,997.			15,997.

Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FRAZER, EVANGELISTA & CO	ACCOUNTING	23,275.			23,275.
Total to Form 990-	PF, Part I, Line 16b	23,275.			23,275.

Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PAYCHEX CPA ALTERNATIVE LLC ROUNDING	PAYROLL SERVICES BOOKKEEPING SERVICES ROUNDING	2,637. 281. 2.	281.		2,637.
Total to Form 990-	PF, Part I, Line 16c	2,920.	281.		2,637.

ame RIENDS FOUNDATION FOR T	THE AGING			ployer Identification No.
Line 10a - Investments - US and State Government Obligations:	End of Year State and Local Obligations Book Value FMV		End US Governmen Obligations Book Value	d of Year nt US Government Obligations FMV
Tot to Fm 990-PF, Pt II, Ln 10a				
Line 10b - Investm	ents - Corporate	Stock:	End Book Value	d of Year Fair Market Value
EQUITY SECURITIES			5,400,378	5,400,378.
Totals to Form 990-PF, Part II, I	Line 10b		5,400,378	5,400,378.
Line 10c - Investme	ents - Corporate I	Bonds:	En Book Value	d of Year Fair Market Value
FIXED INCOME SECURITIES	S		3,389,199	3,389,199.
Totals to Form 990-PF, Part II, I	Line 10c		3,389,199	3,389,199.
Line 12 - Investme	ents - Mortgage I	oans:	En Book Value	d of Year Fair Market Value
Totals to Form 990-PF, Part II, I	Line 12			
			En	d of Year
Line 13 - Inv	estments - Other		Book Value	Fair Market Value
ALTERNATIVE ASSET INVE			482,03	4. 2,551,464.
OTHER INVESTMENT - ZIE Totals to Form 990-PF, Part II,			3,276,91	

Form 990-PF Part II, Line 11

Investments — Land, Buildings, and Equipment

2018

ame RIENDS FOUNDATION FOR THE AGING			er Identification No 524182	
Line 11b - Description of Investments Land, Buildings and Equipment	(a) Cost/Other Basis	(b) Accumulated Depreciation	(c) Book Value	
otals to Form 990-PF, Part II, Line 11				
Form 990-PF Land, Buildi Part II, Line 14	ngs, and Equipr	nent		
Line 14b - Description of Land, Buildings, and Equipment	(a) Cost/Other Basis	(b) Accumulated Depreciation	(c) Book Value	
CCUMULATED DEPRECIATION	0.	0.		

0.

0.

0.

Totals to Form 990-PF, Part II, Line 14

Name Employer Identification No. 22-1524182

	Beginning	End of	Year
Line 15 - Other Assets:	Year Book Value	Book Value	Fair Market Value
OTHER RECEIVABLES	28,352.	5,786.	5,786.
PREPAID INSURANCE	1,714.	3,009.	3,009.
ACCRUED INTEREST RECEIVAB	794.	1,324.	1,324.
ROUNDING	0.	-1.	
Totals to Form 990-PF, Part II, line 15	30,860.	10,118.	10,118.

Line 22 - Other Liabilities:	Beginning Year Book Value	Ending Year Book Value
IEGLER FUND CAPITAL COMM	225,000.	125,000.
otals to Form 990-PF, Part II, line 22	225,000.	125,000

Form 8879-E0

IRS e-file Signature Authorization for an Exempt Organization

For calendar year 2018, or fiscal year beginning May 1 , 2018, and ending Dec 31, 20 18

Do not send to the IRS. Keep for your records.

2018

OMB No. 1545-1878

Department of the Treasury

Internal Revenue Service	► Go to www.irs.gov/Form8879EO for the latest information	on.	
Name of exempt organization	n	Employer identification	on number
FRIENDS FOUNDAT	ION FOR THE AGING	22-1524182	
Part I Type of	Return and Return Information (Whole Dollars Only)		
Check the box for the check the box on line leave line 1b, 2b, 3b,	return for which you are using this Form 8879-EO and enter the applica 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return 14b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you enow. Do not complete more than one line in Part I.	being filed with this	form was blank, then
2a Form 990-EZ chee3a Form 1120-POL c4a Form 990-PF chee	ere ▶ □ b Total revenue, if any (Form 990, Part VIII, column (A), line of the here ▶ □ b Total revenue, if any (Form 990-EZ, line 9)		2b
Part II Declara	tion and Signature Authorization of Officer		_
organization's electro to send the organizati the transmission, (b) to authorize the U.S. Tre financial institution ac return, and the financ Agent at 1-888-353-4 involved in the proces resolve issues related electronic return and, Officer's PIN: check	complete. I further declare that the amount in Part I above is the amount nic return. I consent to allow my intermediate service provider, transmitted on's return to the IRS and to receive from the IRS (a) an acknowledgement he reason for any delay in processing the return or refund, and (c) the datasury and its designated Financial Agent to initiate an electronic funds we count indicated in the tax preparation software for payment of the organial institution to debit the entry to this account. To revoke a payment, I meson to later than 2 business days prior to the payment (settlement) date using of the electronic payment of taxes to receive confidential information to the payment. I have selected a personal identification number (PIN) a if applicable, the organization's consent to electronic funds withdrawal. One box only ERO firm name	er, or electronic retuent of receipt or real ate of any refund. If withdrawal (direct delization's federal taxinust contact the U.S. I also authorize the on necessary to ans	arn originator (ERO) son for rejection of applicable, I whit) entry to the ses owed on this are Treasury Financial entinancial institutions wer inquiries and the organization's as my signature
being filed with ERO to enter my	ion's tax year 2018 electronically filed return. If I have indicated within the a state agency(ies) regulating charities as part of the IRS Fed/State programmer. PIN on the return's disclosure consent screen. The organization, I will enter my PIN as my signature on the organization'	ram, I also authorize	the aforementioned
If I have indicate	ed within this return that a copy of the return is being filed with a state ag te program/I will enter my PIN on the return's disclosure consent screen	ency(ies) regulating	
Officer's signature ▶	La Mutily Date >	11/07/2019	
	ation and Authentication		
	er your six-digit electfonic filing identification ed by your five-digit self-selected PIN.	2 2 2 3 0 A	4 8 2 8 2 8 er all zeros
indicated above. I con	e numeric entry is my PIN, which is my signature on the 2018 electronical firm that I am submitting this return in accordance with the requirement rized IRS <i>e-file</i> Providers for Business Returns.		
ERO's signature ▶	Narylee Evangelistes CPA Date >	11/07/2019	
	ERO Must Retain This Form — See Instruction Do Not Submit This Form to the IRS Unless Requested		

Form **8868**

(Rev. January 2019)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-1709

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filling of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number, see instructions Name of exempt organization or other filer, see instructions. Employer identification number (EIN) or Type or FRIENDS FOUNDATION FOR THE AGING 22-1524182 print Number, street, and room or suite no. If a P.O. box, see instructions. Social security number (SSN) File by the due date for filing your City, town or post office, state, and ZIP code. For a foreign address, see instructions. return. See LANGHORNE PA 19047 instructions Enter the Return Code for the return that this application is for (file a separate application for each return) 0 4 **Application** Return Return **Application** Code Is For Code Is For Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 08 Form 4720 (individual) Form 4720 (other than individual) 09 03 10 Form 990-PF 04 Form 5227 Form 990-T (sec. 401(a) or 408(a) trust) Form 6069 11 05 Form 990-T (trust other than above) 06 Form 8870 12 The books are in the care of ► SUSAN HOSKINS **Telephone No.** ► (215) 478-6663 Fax No. ▶ • If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box . . . ▶ □ . If it is for part of the group, check this box ▶ □ and attach a list with the names and EINs of all members the extension is for. I request an automatic 6-month extension of time until Nov 15 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► □ calendar year 20 ▶ 🖹 tax year beginning May 1 , 20 18 , and ending Dec 31 , 20 18 . If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Change in accounting period 3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. 18,591. 3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 8,591. 3b |\$ Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. 10,000.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Transmit Electronic Filing Returns/Extensions/Payments Log

11/15/2019 12:45:55--Transmit Electronic Filing Returns/Extensions/Payments for EFIN ***304 friends foundation for the aging 18n

FRIENDS FOUNDATION FOR THE AGING (**-***4182)

Form 990: Tax-Exempt Orgs:

Return transmitted and received successfully.

11/15/2019 12:45:59--Retrieve Electronic Filing Status from the Intuit Host Server for EFIN ***304 \\NB2SRVR\ProSeries\ProNet18\18data\friends foundation for the aging 18n (Federal) Return Received by Intuit.

Please note, the return was e-filed on 11/15/19. On Monday, 11/18/19 We received a rejection notice and promptly filed a paper copy of the return. The rejection was caused by filing a short year that was neither an initial nor a final return, but instead a Change in Accounting Period.