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Form			U

### EXTENDED TO NOVEMBER 15, 2019

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

and ending

▶ Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 8 Open to Public Inspection

Department of the Treasury	Do not enter soc
Internal Revenue Service	Go to www.irs
A For the 2018 calend	ar vear, or tax vear beginning

			<u> </u>	1			
B C	heck if pplicab	e: C Name of organization		D Employer identifie	cation number		
X	Addre chang		THE LIGHTHOUSE FOUNDATION				
	Name Chang	e Doing business as		25-1	547324		
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number			
	Final return	PO BOX 366			586-5554		
	termir ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	1,096,029.		
	Amen return			H(a) Is this a group re	turn		
	Applic	F Name and address of principal officer: VICTORIA SPRENG		for subordinates			
	pendi	<sup>19</sup> SAME AS C ABOVE		H(b) Are all subordinates in			
IT	ax-ex	empt status: X 501(c)(3) 501(c) ( ) ◀ (insert no.) 4947(a)(1) c	or 527		list. (see instructions)		
		te: WWW.THELIGHTHOUSEPA.ORG		H(c) Group exemption			
		organization: X Corporation Trust Association Other ►	L Year		State of legal domicile: PA		
_	rt I	Summary					
	1	Briefly describe the organization's mission or most significant activities: $\frac{ ext{THE}}{ ext{IIE}}$ I	LIGHTH	OUSE FOUNDA	TION IS A		
nce		CHRISTIAN OUTREACH ORGANIZATION MEETING	THE NE	EDS OF IMPO	VERISHED		
rna	2	Check this box 🕨 🛄 if the organization discontinued its operations or dispos	sed of more	than 25% of its net as	sets.		
ove	3			3	10		
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)		9			
s 8	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)		19			
Activities & Governance		Total number of volunteers (estimate if necessary)			175		
ctiv		Total unrelated business revenue from Part VIII, column (C), line 12			0.		
٩		Net unrelated business taxable income from Form 990-T, line 38			0.		
				Prior Year	Current Year		
e	8	Contributions and grants (Part VIII, line 1h)		1,098,642.	846,984.		
Revenue	9	Program service revenue (Part VIII, line 2g)		51,427.	46,578.		
eve	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		66.	-659.		
Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-24,623.	30,264.		
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) .		1,125,512.	923,167.		
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.		
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.		
SS	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) _		448,374.	494,045.		
nse.	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.		
Expenses	b	Total fundraising expenses (Part IX, column (D), line 25)	38.				
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		557,305.	537,380.		
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,005,679.	1,031,425.		
	19	Revenue less expenses. Subtract line 18 from line 12		119,833.	-108,258.		
s or			Be	ginning of Current Year	End of Year		
sets alan	20	Total assets (Part X, line 16)		1,525,504.	1,536,671.		
Net Assets or Fund Balances	21	Total liabilities (Part X, line 26)		83,425.	202,850.		
		Net assets or fund balances. Subtract line 21 from line 20		1,442,079.	1,333,821.		
Pa	rt 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 VICTORIA SPRENG, EXECUTIVE DIRECTOR Type or print name and title	Date							
Paid	Print/Type preparer's name Preparer's signature KAREN N LEONARD CPA	Date Check PTIN 11/13/19 <sup>if</sup> P00239135							
Preparer	Firm's name MCCALL SCANLON & TICE, LLC	Firm's EIN <b>26-2728289</b>							
Use Only	Firm's address 5500 CORPORATE DR #240								
	PITTSBURGH, PA 15237	Phone no. $412 - 635 - 9314$							
May the II	May the IRS discuss this return with the preparer shown above? (see instructions)								
832001 12-3	332001       12-31-18       LHA       For Paperwork Reduction Act Notice, see the separate instructions.       Form 990 (2018)								

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Check if Schedule O contains a response or note to any line in this Part III Check if Schedule O contains a response or note to any line in this Part III THE LIGHTHOUSE FOUNDATION IS A CHRISTIAN OUTREACH ORGANIZATION MEETIN THE NEEDS OF IMPOVERISHED INDIVIDUALS AND FAMILIES IN NORTHERN ALLEGHENY AND BUTLER COUNTIES. THE LIGHTHOUSE PROVIDES BASIC NECESSITIES SUCH AS FOOD AND SHELTER, TRANSITIONAL AND INTERIM 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E27 If "Ves," describe these new services on Schedule 0. 3 Did the organization cease conducting, or make significant changes in how it conducts, any 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. 4 (Code: )(Expenses & 122,094. helding grants of \$ ) (Reemes \$ 4,62 LICO: THIS PROGRAM INVOLVES MARING REPAIRS TO DONATED VEHICLES. IN TURN, THE VEHICLES ARE SOLD ON DONATED TO NEEDY INDIVIDUALS WOA ARE ATTEMPTING TO RE-ENTER THE WORKFORCE. 14 VEHICLES WERE SOLD AND 64 VEHICLES WERE DONATED DURING 2018 TO SUPPORT THIS PROGRAM.  4 (Code: )(Expenses 197,729. including grants of \$ ) (Reemes \$ 29,92 FOOD BANK: THE FOUNDATION OBTAINS FOOD FOR DISTRIBUTION TO UNEMPLOYE AND OTHER NEEDY INDIVIDUALS IN THE LOCAL AREA. THE FOOD BANK SERVED TOTAL OF 7,271 PEOPLE IN ALLEGHENY AND BUTLER COUNTIES IN 2018.		990 (2018) THE LIGHTHOUSE FOUNDATION	25-154	7324	Page
<ul> <li>for the sequence of the organization mission:         THE LIGHTHOUSE FOUNDATION IS A CHRISTIAN OUTREACH ORGANIZATION MEETIN         THE NEEDS OF IMPOVENTSHED INDIVIDUALS AND FAMILIES IN NORTHERN         ALLEGHTHOUSE PAOLIDES BASIC         NECESSITIES SUCH AS FOOD AND SHELTER, TRANSITIONAL AND INTERIM         Did the organization undertake any soundarian program services during the year which were not issed on the         prior Form 900 e90627         T'ves, 'describe these new services on Schedule 0.         Tves, 'describe these new services on Schedule 0.         Tves, 'describe these new services on Schedule 0.         Tves, 'describe these changes on Schedule 0.         Decorbe the organization increase compliahments for each of its three largest program services, as measured by expenses.         Section 501(6)(3) and 501(6/4) organizations are required to report the amount of grants and allocations to others, the total expenses, and         revenue, far, for each program service accompliahments for each of its three largest program services, as measured by expenses.         Section 501(6)(3) and 501(6/4) organizations are required to report the amount of grants and allocations to others, the total expenses, and         revenue, far, for each program service accompliahments for each of its three largest program services, as measured by expenses.         Section 501(6)(3) and 501(6/4) organization (SCHORE) MARKING REPAILS TO DONATED VEHICLES. IN         TURN, THE VEHICLES ARE SOLD OR DONATED TO NEEDY INDIVIDUALS WHO ARE         ATTEMPTING TO REPORT THE FOUNDATION OBTAINS FOOD FOR DISTRIBUTION TO UNEEMPLOYE         AND OTHER NEEDY INDIVIDUALS IN THE LOCAL AREA. THE FOOD BANK SERVED         TOTAL OF 7,271 PEOPLE IN ALLEGHENY AND BUTLER COUNTIES IN 2018.</li></ul>	Pa				
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10 "Yes," describe these new services on Schedule 0.         30 Did the organization cases conducting, or make significant changes in how it conducts, any program services?       Yes [X if Yes," describe these changes on Schedule 0.         40 Describe the organization's program service accomplishments for each of its three largest program services?       Yes [X if Yes," describe these changes on Schedule 0.         41 Core:       1/Core in the organization's program service accomplishments for each of its three largest program services?       4.52         41 Core:       1/Core in the organization's program service accomplishments for each of its three largest program services?       4.52         42 (Core:       1/Core in the VEHICLES ARE SCID OR DOWNEED TO NEEDY INDUVIDUALS NO ARE ANTEMPTING TO RE-ENTRER THE WORKFORCE. 14 VEHICLES WERE SOLD AND 64       VEHICLES WERE DONATED DURING 2018 TO SUPPORT THIS PROGRAM.         44 (core:       1/Devenues 197,729.       industry prediction of DISTRIBUTION TO UNEMPLOYE AND OTHER NEEDY INDUVIDUALS IN THE LOCAL AREA. THE FOOD BANK SERVED TOTAL OF 7,271 PEOPLE IN ALLEGHENY AND BUTLER COUNTIES IN 2018.         45 (core:       1/Devenues 364,668.       industry prediction of DEVINITIES IN 2018.         46 (core:       1/Devenues 164,668.       industry prediction of DEVINITIES IN 2018.         47 (Core:       1/Devenues 364,668.       industry prediction of DEVINITIES IN 2018.         48 (core:       1/Devenues 164,668.       industry prediction of DEVINITIES IN 2018.         49 (core:       1/Dev	2	Did the organization undertake any significant program services during the year which were not listed on the	e		
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Part IV Checklist of Required Schedules

THE LIGHTHOUSE FOUNDATION

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			v
-	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			v
-	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-		x
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			x
0	Schedule D, Part III	8		
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?			
	If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	5		
10	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
-	Part VI	11a	х	
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? If "Yes," complete Schedule D, Part VII	11b		x
с	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? If "Yes," complete Schedule D, Part VIII	11c		Х
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? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		37	
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			37
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If</i> "Yes," <i>complete Schedule E</i>	13		A X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
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	446		x
15	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b		- 23
15	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		
10	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
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	Did the organization report more than \$5,000 of grants or other assistance to or for demostic individuals on			
	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
0	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
	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? If "Yes," complete			x
	Schedule J	23		
	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? If "Yes," answer lines 24b through 24d and complete			x
	Schedule K. If "No," go to line 25a	24a		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		+
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	05-		x
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
	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? If "Yes," complete			x
	Schedule L, Part I	25b		
	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? If "Yes,"			x
	complete Schedule L, Part II	26		
	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	07		x
	of any of these persons? If "Yes," complete Schedule L, Part III	27		
	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):			x
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			x
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	x	
	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	29		
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		x
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		x
2	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete Schedule N, Part II</i>	32		x
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
5a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	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)? If "Yes," complete Schedule R, Part V, line 2	35b		
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
	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? If "Yes," complete Schedule R, Part VI	37		X
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
Par				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 3			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b			
b	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1		
с	(gambling) winnings to prize winners?	1c		

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Form 990	(2018)	THE	LIGHTHOUSE	FOUNDAT	ION
Part V	Statements	Regardi	ing Other IRS Fil	ings and Tax	Compliance (continued)

			Yes	No				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,							
	filed for the calendar year ending with or within the year covered by this return 2a 19		х					
b	<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns?							
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)							
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X				
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b						
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	4		x				
h	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		- 11				
a	b If "Yes," enter the name of the foreign country: ► See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).							
5a		5a		x				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X				
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c						
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit							
	any contributions that were not tax deductible as charitable contributions?	6a		x				
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts							
	were not tax deductible?	6b						
7	Organizations that may receive deductible contributions under section 170(c).							
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Х					
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х					
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required							
	to file Form 8282?	7c		X				
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d							
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X				
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	37					
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	X					
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	-						
~	sponsoring organization have excess business holdings at any time during the year?	8						
9	Sponsoring organizations maintaining donor advised funds.	0-						
a ⊾	Did the sponsoring organization make any taxable distributions under section 4966?	9a 9b						
b 10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	90						
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12							
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities							
11	Section 501(c)(12) organizations. Enter:							
	Gross income from members or shareholders 11a							
	Gross income from other sources (Do not net amounts due or paid to other sources against							
	amounts due or received from them.)							
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
а	Is the organization licensed to issue qualified health plans in more than one state?	13a						
	Note. See the instructions for additional information the organization must report on Schedule O.							
b	Enter the amount of reserves the organization is required to maintain by the states in which the							
	organization is licensed to issue qualified health plans 13b							
	Enter the amount of reserves on hand 13c			v				
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X				
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>	14b		<b> </b>				
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			v				
	excess parachute payment(s) during the year?	15		X				
16	If "Yes," see instructions and file Form 4720, Schedule N.	16		x				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16						

Form **990** (2018)

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Form 990 (	(2018)
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### THE LIGHTHOUSE FOUNDATION

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.

bec:	tion A. Governing Body and Management						<del>.</del>
4 -			l	10		Yes	╞
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		ᅳᅴ			
<b>b</b>	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	4		9			L
	Enter the number of voting members included in line 1a, above, who are independent	1b	a mu ath an	긕			1
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh				•	Х	ł
•	officer, director, trustee, or key employee?			····  -	2		╀
3	Did the organization delegate control over management duties customarily performed by or under the		-				
	of officers, directors, or trustees, or key employees to a management company or other person?				3		╀
	Did the organization make any significant changes to its governing documents since the prior Form			···· -	4		╀
	Did the organization become aware during the year of a significant diversion of the organization's as				5		╀
6	Did the organization have members or stockholders?			····  -	6		╀
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a						
	more members of the governing body?				7a		∔
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockh	olders, or				
	persons other than the governing body?				7b		∔
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	-	-				ſ
а	The governing body?				8a	Х	ļ
b	Each committee with authority to act on behalf of the governing body?			[	8b		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re-	ached a	at the				l
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O				9		
Sect	tion B. Policies (This Section B requests information about policies not required by the Internal F	levenue	e Code.)				
				_		Yes	
l0a	Did the organization have local chapters, branches, or affiliates?				10a		
b	If "Yes," did the organization have written policies and procedures governing the activities of such o	hapter	s, affiliates,				Ι
	and branches to ensure their operations are consistent with the organization's exempt purposes?				10b		l
1 <b>1</b> a	Has the organization provided a complete copy of this Form 990 to all members of its governing boo				11a	Х	T
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.						Ī
				- 1	12a	Х	I
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris				12b	Х	t
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "			···· F			t
	in Schedule O how this was done				12c	Х	l
	Did the organization have a written whistleblower policy?				13		t
14	Did the organization have a written document retention and destruction policy?				14		t
15	Did the process for determining compensation of the following persons include a review and approv			····			t
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		laoponaon				l
а	The organization's CEO, Executive Director, or top management official			- 1	15a	х	T
	Other officers or key employees of the organization				15a 15b		t
U	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			····	130		ł
16-		mont	with a				1
oa	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange				16-		ł
Ŀ	taxable entity during the year?				16a		╁
a	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate in initiative transfer and taken and ta						1
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga				10		1
	exempt status with respect to such arrangements?				16b		1
	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed $PA$		T (0 - 1'	-)/2)			
	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024 A if applicable), 990, a	nd 990	-1 (Section 501(	c)(3)s	only)	availa	a
	for public inspection. Indicate how you made these available. Check all that apply.						
	Own website Another's website I Upon request Other (explain						
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co	onflict c	of interest policy	, and	finan	cial	
	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 be	ooks ar	nd records 🕨 _				
10	DANIEL HARTZLER - 724-586-5554						
20							
	P.O. BOX 366, BAKERSTOWN, PA 15007						
					Form	990	(

Part VII	Compensation of Officers	Directors,	Trustees,	Key	Employees,	Highest	Compensat	ec
	<b>Employees, and Independ</b>	ent Contra	ctors					

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	(C) Position (do not check more than one						<b>(D)</b> Reportable	<b>(E)</b> Reportable	<b>(F)</b> Estimated
	hours per week	box offi	, unle	ss pe	rson	is bot pr/trus	h an	compensation from	compensation from related	amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) CHARITY RANKIN	1.00	x						0.	0.	0.
BOARD MEMBER (2) ROBERT FERREE	1.00	<u>^</u>						0.	0.	0.
(2) ROBERT FERREE BOARD MEMBER	1.00	x						0.	0.	0.
(3) ALLAN OSTERWISE	1.00									<b>.</b>
BOARD MEMBER		x						0.	0.	0.
(4) JENNIFER ZATCHEY	2.00									
TREASURER		x		x				0.	0.	0.
(5) JUD STEWART	1.00									
BOARD MEMBER		Х						0.	0.	0.
(6) LESLIE OSCHE	1.00									_
BOARD MEMBER		х						0.	0.	0.
(7) BRYAN CIPOLETTI	1.00									
BOARD MEMBER	1 00	X						0.	0.	0.
(8) JANIS PANTHER	1.00							0	0	0
BOARD MEMBER	2.00	X						0.	0.	0.
(9) HELEN WARD	2.00	x		x				0.	0.	0.
PRESIDENT (10) STEPHANIE AZARCON	2.00	^		<u> </u>				0.	0.	0.
SECRETARY	2.00	x		x				0.	0.	0.
(11) CYNTHIA CIPOLETTI	40.00			11						
EXECUTIVE DIRECTOR				x				65,000.	0.	0.
(12) DANIEL HARTZLER	40.00									
BUSINESS MANAGER		1		x				30,808.	0.	9,155.
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7 2018.05000 THE LIGHTHOUSE FOUNDATION

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Par	t VII Section A. Officers, Directors, Trus		ploy	ees			ghe	st C						
	<b>(A)</b> Name and title	(B) Average hours per week	box, offic	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				n an	<b>(D)</b> Reportable compensation from	(E) Reportable compensatio from related	n I	am	(F) timate nount o other	of
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization: (W-2/1099-MIS		fro orga and	pensa om the anizati d relate nizatio	e on ed
						×	e +	LL.						
	Sub-total								95,808.		0.		9,1	
	Total from continuation sheets to Part VI Total (add lines 1b and 1c) Total number of individuals (including but no								0 • 95,808 •	000 of roportabl	0.		9,1	0. 55.
	compensation from the organization		056	IISLE		0076	=) wi			,000 of reportabl	e		Vee	0 No
3	Did the organization list any <b>former</b> officer, line 1a? <i>If</i> "Yes," <i>complete Schedule J for su</i>				-	•	•		highest compensated e			3	Yes	X
4	For any individual listed on line 1a, is the su and related organizations greater than \$150	m of reportabl	le co	omp	ensa	atior	n and	l ot	her compensation from	the organization		4		Х
5	Did any person listed on line 1a receive or a rendered to the organization? <i>If "Yes," comption B. Independent Contractors</i>					-			-			5		Х
1	Complete this table for your five highest con the organization. Report compensation for t										ipensa	ation f	rom	
	(A) Name and business					VILLI	or w		(B) Description of s		C	(C omper	;) nsatior	า
2	Total number of independent contractors (ir \$100,000 of compensation from the organiz	•	ot lir	nite	d to	tho:	se lis )	tec	above) who received m	nore than				
		-										Form	<b>990</b> (2	2018)

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	n 990 (i		USE FOUNDA'	<u>FION</u>		25-1547	324 Page 9
	rt VIÌ						
		Check if Schedule O contains a respor	ise or note to any lin	e in this Part VIII		<u></u>	
				<b>(A)</b> Total revenue	<b>(B)</b> Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	<b>(D)</b> Revenue excluded from tax under sections 512 - 514
nts nts	1 a	Federated campaigns 1a	34,096.				
Contributions, Gifts, Grants and Other Similar Amounts							
Am (	с	Fundraising events 1c	99,607.				
lar Iar	d	Related organizations 1d					
ini,	е	Government grants (contributions) 1e	30,872.				
rio S	f	All other contributions, gifts, grants, and					
l t f n		similar amounts not included above If	682,409.				
and the second	g	Noncash contributions included in lines 1a-1f: \$	100,706.				
āČ	h	Total. Add lines 1a-1f		846,984.			
			Business Code	46 570	46 570		
ice	2 a	PROGRAMS AND EVENTS	624310	46,578.	46,578.		
ue v	b		_				
n S /en	с		_				
Be	d						
Program Service Revenue	e		_				
-	t	All other program service revenue		46,578.			
	<u> </u>	Total. Add lines 2a-2f		40,570.			
	3	Investment income (including dividends, in		72.	72.		
	4	other similar amounts) Income from investment of tax-exempt bor	r i i i i i i i i i i i i i i i i i i i	72.	/ 2 •		
	- 5	Royalties	· ·				
	Ŭ	(i) Real	(ii) Personal				
	6 a						
	b		0.				
	c	Rental income or (loss) 29,22	0.				
	d			29,220.	29,220.		
	7 a	Gross amount from sales of (i) Securitie					
		assets other than inventory					
	b	Less: cost or other basis					
		and sales expenses	731.				
	с	Gain or (loss)	-731.				
	d	Net gain or (loss)	►	-731.	-731.		
Other Revenue	8 a	Gross income from fundraising events (not including \$ 99,607. of contributions reported on line 1c). See					
er H		Part IV, line 18	a 49,582.				
Ę	b	Less: direct expenses	b 53,874.				
Ŭ	с	Net income or (loss) from fundraising event	is 🕨	-4,292.			-4,292.
	9 a	Gross income from gaming activities. See					
		Part IV, line 19					
		Less: direct expenses					
		Net income or (loss) from gaming activities	····				
	10 a	Gross sales of inventory, less returns	122 002				
		and allowances	a 122,883. b 118,257.				
		Less: cost of goods sold		1 626	1 626		
-	С	Net income or (loss) from sales of inventory		4,626.	4,626.		
ŀ	44 -	Miscellaneous Revenue MISCELLANEOUS INCOME	Business Code 900099	710.	710.		
	11 а ь	HIDCHIRMEOOD INCOME	-	/±0•	/ 10 •		
	b		-				
	c d	All other revenue					
	d e	All other revenue		710.			
	12	Total revenue. See instructions		923,167.	80,475.	0.	-4,292.
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THE LIGHTHOUSE FOUNDATION 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).

Do r	Check if Schedule O contains a respons not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		•	5 1	•
_	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
_	individuals. See Part IV, line 22				
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,	104,963.	83,970.	12,596.	0 207
	trustees, and key employees	104,903.	03,970.	12,590.	8,397
6	Compensation not included above, to disqualified				
	persons (as defined under section $4958(f)(1)$ ) and				
_	persons described in section 4958(c)(3)(B)	324,100.	261,547.	38,065.	24,488
7	Other salaries and wages	524,100.	201,547.	30,005.	24,400
8	Pension plan accruals and contributions (include				
~	section 401(k) and 403(b) employer contributions)	29,215.	20,410.	6,965.	1,840
9	Other employee benefits	35,767.	28,805.	4,218.	2,744
10	Payroll taxes	55,107.	20,003.	4,210.	2,/44
11	Fees for services (non-employees):				
	Management				
		27,303.		27,303.	
	Accounting	27,303.		27,303.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	11,412.	1,088.	10,324.	
	column (A) amount, list line 11g expenses on Sch 0.)	11,726.	9,741.	199.	1,786
12	Advertising and promotion	12,950.	11,144.	1,345.	461
13	Office expenses	12,950.	11,144.		401
14	Information technology				
15	Royalties	103,729.	96,944.	5,905.	880
16	Occupancy	105,725.	90,944.	5,905.	000
17	Travel				
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings	5,434.	4,849.	585.	
20	Interest	5,454.	Ŧ,0ŦĴ•	• • • • •	
21	Payments to affiliates	60,637.	46,813.	13,824.	
22	Depreciation, depletion, and amortization	43,189.	39,058.	4,131.	
23 24	Other expenses. Itemize expenses not covered		55,050.	+, +, +, +, +, +, +, +, +, +, +, +, +, +	
24	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 0.)				
2	DIRECT PROGRAM COSTS	66,403.	66,337.	66.	
a h	FOOD PROGRAMS	50,146.	50,146.		
5	REPAIRS & MAINTENANCE	41,684.	38,887.	2,681.	116
d	CONTRACTED LABOR	41,467.	40,567.	900.	
	All other expenses	61,300.	46,108.	11,166.	4,026
е 25	Total functional expenses. Add lines 1 through 24e	1,031,425.	846,414.	140,273.	44,738
26	<b>Joint costs</b> . Complete this line only if the organization	.,,			,
-0	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

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Form 990 (			LIGHTHOUSE	FOUNDATION
Part X	Balance Shee	t		

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		Check if Schedule O contains a response or not	e to an	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing				1	
	2	Savings and temporary cash investments			383,468.	2	139,000.
	3	Pledges and grants receivable, net			29,410.	3	31,672.
	4	Accounts receivable, net				4	6,529.
	5	Loans and other receivables from current and fo					
		trustees, key employees, and highest compensation	ited em	oloyees. Complete			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disquali	ied per	sons (as defined under			
		section 4958(f)(1)), persons described in section	4958(c	(3)(B), and contributing			
		employers and sponsoring organizations of sect	ion 501	(c)(9) voluntary			
ţ		employees' beneficiary organizations (see instr).	Comple	ete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net				7	
Ä	8	Inventories for sale or use			25,443.	8	8,892.
	9				4,042.	9	8,813.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	2,179,715. 837,950.			
	b	Less: accumulated depreciation		837,950.	1,083,141.	10c	1,341,765.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line 1	1			12	
	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equa	al line 3	4)	1,525,504.	16	1,536,671.
	17	Accounts payable and accrued expenses			17,876.	17	15,000.
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability. Complete I	Part IV o	f Schedule D		21	
es	22	Loans and other payables to current and former					
Liabilities		key employees, highest compensated employee					
iab		Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrela			65,549.	23	129,850.
	24	Unsecured notes and loans payable to unrelated	d third p	arties		24	
	25	Other liabilities (including federal income tax, pa	yables t	o related third			
		parties, and other liabilities not included on lines	17-24).	Complete Part X of	•		<b>F</b> 0 000
		Schedule D			0.	25	58,000.
	26	Total liabilities. Add lines 17 through 25			83,425.	26	202,850.
		Organizations that follow SFAS 117 (ASC 958		here 🕨 🔽 and			
ces		complete lines 27 through 29, and lines 33 an			1 100 105		1 000 105
an	27	Unrestricted net assets			<u>1,199,105.</u> 242,974.	27	1,232,185.
Ba	28	Temporarily restricted net assets			242,974.	28	101,030.
or Fund Balances	29					29	
ц		Organizations that do not follow SFAS 117 (A	50 958	, cneck nere 🕨 🛄			
o s	20	and complete lines 30 through 34.					
set	30 21	Capital stock or trust principal, or current funds				30	
Net Assets	31 22	Paid-in or capital surplus, or land, building, or eq				31 32	<u> </u>
Nei	32 33	Retained earnings, endowment, accumulated in Total net assets or fund balances		E	1,442,079.	32	1,333,821.
						. 33	
	33 34	Total liabilities and net assets/fund balances			1,525,504.	34	1,536,671.

### Form 990 (2018)

Form	1990 (2018) THE LIGHTHOUSE FOUNDATION	25-	1547324	Pag	ge <b>12</b>
Pa	rt 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	92	3,1	67.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,03	<u>1,4</u>	25.
3	Revenue less expenses. Subtract line 2 from line 1	3	-10		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,44	2,0	79.
5	Net unrealized gains (losses) on investments	5			
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	1,33	3,8	21.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,	,		
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	ngle Au	dit		
	Act and OMB Circular A-133?		За		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired aud	dit		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits				
				000	

Form **990** (2018)

832012 12-31-18

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form	990	or	990-	·EZ)
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# 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.

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

2018	
Open to Public Inspection	

OMB No. 1545-0047

Name of the organization

Name of the organization Employer identification									
_				FOUNDATION					5-1547324
Pa	rtI	Reason for Public (	Charity Status (A	All organizations must co	omplete th	iis part.) Se	ee instruction	S.	
The	organ	ization is not a private found		•		,			
1		A church, convention of ch	urches, or associatio	on of churches describe	d in <b>sectio</b>	on 170(b)(*	1)(A)(i).		
2		A school described in sect	ion 170(b)(1)(A)(ii).	Attach Schedule E (Forn	n 990 or 9	90-EZ).)			
3		A hospital or a cooperative	hospital service orga	anization described in <b>s</b> e	ection 170	)(b)(1)(A)(i	ii).		
4		A medical research organiz	ation operated in co	njunction with a hospita	l described	d in <b>sectio</b>	n 170(b)(1)(A	)(iii). Enter	the hospital's name,
		city, and state:							
5		An organization operated for	or the benefit of a co	llege or university owne	d or opera	ted by a g	overnmental	unit describ	oed in
		section 170(b)(1)(A)(iv). (C	Complete Part II.)						
6		A federal, state, or local gov	vernment or governn	nental unit described in	section 17	70(b)(1)(A)	(v).		
7	X	An organization that norma	lly receives a substa	Intial part of its support f	rom a gov	rernmental	unit or from t	he general	public described in
		section 170(b)(1)(A)(vi). (C							
8		A community trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)				
9		An agricultural research org	anization described	in section 170(b)(1)(A)(	ix) operate	ed in conju	unction with a	land-grant	college
		or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the	name, cit	y, and state o	f the colleg	e or
		university:							
10		An organization that norma	lly receives: (1) more	e than 33 1/3% of its sup	port from	contributi	ons, member	ship fees, a	nd gross receipts from
		activities related to its exen							
		income and unrelated busir							
		See section 509(a)(2). (Cor		· · · · · · · · · · · · · · · · · · ·		•	2	0	
11		An organization organized a		ively to test for public sa	fety. See	section 50	09(a)(4).		
12		An organization organized a	and operated exclus	ively for the benefit of, to	o perform	the functio	ons of, or to c	arry out the	purposes of one or
		more publicly supported or	ganizations describe	ed in section 509(a)(1) o	r section	509(a)(2).	See section	509(a)(3). (	Check the box in
		lines 12a through 12d that							
а		<b>Type I.</b> A supporting orga	anization operated, s	supervised, or controlled	by its sup	ported or	ganization(s),	typically by	giving
		the supported organization		-	•				
		organization. You must c							
b		<b>Type II.</b> A supporting org	-		tion with it	ts support	ed organizatio	on(s), by ha	ving
		control or management o	-				•		-
		organization(s). You mus			·				
с		] Type III functionally inte	-		in connec	tion with.	and functiona	Ilv integrate	ed with.
		its supported organization						, ,	·
d		] Type III non-functionally						rted organi	zation(s)
		that is not functionally int	egrated. The organiz	zation generally must sa	tisfy a dist	ribution re	quirement an	d an attent	iveness
		requirement (see instruct			-		-		
е		Check this box if the orga						II. Type III	
		functionally integrated, or					, , , , , , , , , , , , , , , , , , ,	/ 11	
f	Ente	r the number of supported of							
		ide the following informatior							
	<b>(</b> i	) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	anization listed ing document?	(v) Amount o	fmonetary	(vi) Amount of other
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see ir	nstructions)	support (see instructions)
						1			
Tota	1								
		aperwork Reduction Act N	lotice. see the Instr	ructions for Form 990 o	r 990-EZ.	832021 10-	11-18 Sche	dule A (For	m 990 or 990-EZ) 2018

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### Schedule A (Form 990 or 990 EZ) 2018 THE LIGHTHOUSE FOUNDATION

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Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization

fails to qualify under the tests listed below, please complete Part III.)

See	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	827,339.	745,695.	764,500.	1039761.	747,376.	4124671.
2	Tax revenues levied for the organ-						
	ization'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 $\dots$						
4	Total. Add lines 1 through 3	827,339.	745,695.	764,500.	1039761.	747,376.	4124671.
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)						351,197.
	Public support. Subtract line 5 from line 4.						3773474.
	ction B. Total Support						
	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 4	827,339.	745,695.	764,500.	1039761.	747,376.	4124671.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	27 460	21 205	20 242		20 202	144 675
	and income from similar sources $\dots$	37,460.	21,295.	28,342.	28,286.	29,292.	144,675.
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					710	710
	assets (Explain in Part VI.)					710.	710. 4270056.
	Total support. Add lines 7 through 10		<u> </u>			40	158,324.
	Gross receipts from related activities,	•	,			12	130,324.
13	First five years. If the Form 990 is for	•			•		
Sec	organization, check this box and stor ction C. Computation of Publ	ic Support Pe	rcentage				
	Public support percentage for 2018 (			column (f))		14	88.37 %
	Public support percentage from 2017		-			15	89.15 %
	<b>33 1/3% support test - 2018.</b> If the c						,-
	stop here. The organization qualifies						
b	<b>33 1/3% support test - 2017.</b> If the c						
	and <b>stop here.</b> The organization qual	-					
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"				-	-	
b	10% -facts-and-circumstances tes	-	-	• • • •			
	more, and if the organization meets th	-					
	organization meets the "facts-and-cire						
18	Private foundation. If the organization						
_	<b>_</b>					dule A (Form 990	

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### Schedule A (Form 990 or 990-EZ) 2018 THE LIGHTHOUSE FOUNDATION

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.)

	ndar year (or fiscal year beginning in)	<b>(a)</b> 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 20	18	(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 per- formed, 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 bus-								
	iness under section 513								
4	Tax revenues levied for the organ-								
	ization'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								
	Add lines 7a and 7b								_
	Public support. (Subtract line 7c from line 6.)								_
	ction B. Total Support								
	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 20	18	(f) Total	
	Amounts from line 6								
	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								
	Add lines 10a and 10b 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								
13	assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.)						-+		_
	First five years. If the Form 990 is for	the organization'	i s first second thi	rd fourth or fifth t	I ax vear as a sectio	1 = 501(c)(3)	organiza	ation	
••		-			-		-	<b>►</b>	٦
Sec	ction C. Computation of Publi							<b>P</b> L	_
	Public support percentage for 2018 (li			column (f))		15			0/
	Public support percentage for 2018 (II Public support percentage from 2017					15			% %
	ction D. Computation of Invest								70
	•		-			17			0/
	Investment income percentage for 20								%
	Investment income percentage from 2					<b>18</b>	nd line of T		%
19a	<b>33 1/3% support tests - 2018.</b> If the								
b	more than 33 1/3%, check this box ar 33 1/3% support tests - 2017. If the	organization did r	not check a box or	n line 14 or line 19a	a, and line 16 is mo	ore than 33		nd	
00	line 18 is not more than 33 1/3%, che								$\exists$
	Private foundation. If the organization	n ala not check a	box on line 14, 19	a, or 19b, check t					
33202	23 10-11-18			15	Sch	edule A (Fo	orm 990	or 990-EZ) 20	18
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						-			

### Schedule A (Form 990 or 990-EZ) 2018 THE LIGHTHOUSE FOUNDATION

### 25-1547324 Page 4

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Yes

No

### 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

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? 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.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- 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)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? 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.
- 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)? 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.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? 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).
- **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? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disgualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 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))? If "Yes," provide detail in Part VI.
- 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? If "Yes," provide detail in Part VI.
- 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? If "Yes," provide detail in Part VI.
- 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)? If "Yes," answer 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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Schedule A (Form 990 or 990-EZ) 2018

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# Schedule A (Form 990 or 990 EZ) 2018 THE LIGHTHOUSE FOUNDATION Part IV Supporting Organizations (continued)

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			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		100	
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
a	below, the governing body of a supported organization?	11a		
h	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in <b>Part VI.</b>	11c		
	tion B. Type I Supporting Organizations	TIC		
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		165	NU
•				
	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 <b>Part VI</b> 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.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	ction C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	ction D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described 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.	3		
Sec	tion 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 yea(see instructions)			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins	tructions	s).	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described 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.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	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.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		
83202	5 10-11-18 Schedule A (Form 9	90 or 99	90-EZ)	2018
	17			

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### Schedule A (Form 990 or 990-EZ) 2018 THE LIGHTHOUSE FOUNDATION

 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.

Sect	on 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		
Sect	on 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in <b>Part VI</b> ):			
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		
Sect	on 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	Check here if the current year is the organization's first as a non-functional	y integra	ted Type III supporting org	ganization (see

instructions).

Schedule A (Form 990 or 990-EZ) 2018

832026 10-11-18

## Schedule A (Form 990 or 990 EZ) 2018 THE LIGHTHOUSE FOUNDATION

Pa	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continued)	
Sect	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe			
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	IS	
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	ne organization is responsive	e	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018			
a	From 2013			
b	From 2014			
c	From 2015			
d	From 2016			
e	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D,			
	line 7: \$			
	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in <b>Part VI.</b> See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
-	Excess from 2014			
-	Excess from 2015			
-	Excess from 2016			
-	Excess from 2017			
e	Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2018

832027 10-11-18

	Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
2028 10-11-1	8 Schedule A (Form 990 or 990-EZ
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25-1547324 Page 8

SCHEDULE D

### (Form 990)

Part I

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.

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the

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



Employer identification number 25-1547324

Department of the Treasury Internal Revenue Service Name of the organization

### THE LIGHTHOUSE FOUNDATION

	organization answered "Yes" on Form 990, Part IV, li	ne 6.				
		(a) Donor advised funds		( <b>b)</b> Fur	nds and other acco	unts
1	Total number at end of year					
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	sed fur	nds		
	are the organization's property, subject to the organization's	s exclusive legal control?			Yes	<b>N</b>
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be	used	only		
	for charitable purposes and not for the benefit of the donor	or donor advisor, or for any other purpose	confe	rring		
					Yes	N
Pa	rt II Conservation Easements. Complete if the or	-	Part IV	, line 7		
1	Purpose(s) of conservation easements held by the organizat					
	Preservation of land for public use (e.g., recreation or					
	Protection of natural habitat	Preservation of a cert	tified h	istoric	structure	
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qual	ified conservation contribution in the form	of a co	onserv		
	day of the tax year.				Held at the End of t	he Tax Yea
а	Total number of conservation easements			2a		
b	Total acreage restricted by conservation easements			2b		
С	Number of conservation easements on a certified historic st			2c		
d	Number of conservation easements included in (c) acquired		ure			
	listed in the National Register			2d		
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the	e orgar	nizatio	n during the tax	
	year 🕨					
4	Number of states where property subject to conservation ea					
5	Does the organization have a written policy regarding the pe					
	violations, and enforcement of the conservation easements				Yes	∟ N
6	Staff and volunteer hours devoted to monitoring, inspecting	i, handling of violations, and enforcing con	servati	on eas	sements during the	year
_						
7	Amount of expenses incurred in monitoring, inspecting, han	idling of violations, and enforcing conserva	ation ea	aseme	nts during the year	
0	\$	we esticity the requirements of eastion 170	)/b)/ <i>4</i> \/r	<b>-</b> )/;)		
8					Yes	
9	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservat					
9		•				
	include, if applicable, the text of the footnote to the organiza	ation's infancial statements that describes	the or	gamza	tion's accounting i	or
)a	conservation easements. rt III Organizations Maintaining Collections of	of Art Historical Treasures or O	ther	Simi	lar Assets	
u	Complete if the organization answered "Yes" on Form			0		
1a	If the organization elected, as permitted under SFAS 116 (A	, ,	ment a	nd hal	ance sheet works (	ofart
ľ	historical treasures, or other similar assets held for public ex					
	the text of the footnote to its financial statements that descr	, ,		public		
h	If the organization elected, as permitted under SFAS 116 (A		t and h	alanc	e sheet works of a	t historic
<sup>N</sup>	treasures, or other similar assets held for public exhibition, e					
	relating to these items:			1100,		ig arriour
	(i) Revenue included on Form 990, Part VIII, line 1				\$	
2	If the organization received or held works of art, historical tre					
~	the following amounts required to be reported under SFAS		a gan,	provid		
2	Revenue included on Form 990, Part VIII, line 1				¢	
	Assets included in Form 990, Part X					
	For Paperwork Reduction Act Notice, see the Instruction			. 💌	→ Schedule D (Forr	n 990) 20.
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Sche	dule D (Form 990) 2018 THE LIG	HTHOUSE FO	UNDATION		25-	1547324	Page 2
Par	t III Organizations Maintaining C	Collections of A	rt, Historical T	reasures, or Ot	her Similar A	ssets(contin	ued)
3	Using the organization's acquisition, access	ion, and other record	ls, check any of the	e following that are a	a significant use o	f its collectior	n items
	(check all that apply):						
а	Public exhibition	d	I 🛄 Loan or ex	change programs			
b	Scholarly research	e	e 🔄 Other				
с	Preservation for future generations						
4	Provide a description of the organization's c					Part XIII.	
5	During the year, did the organization solicit of	or receive donations	of art, historical tre	asures, or other sim	ilar assets	_	
	to be sold to raise funds rather than to be m					Yes	No No
Par	t IV Escrow and Custodial Arran reported an amount on Form 990, Pa		ete if the organizati	on answered "Yes"	on Form 990, Par	t IV, line 9, or	
1a	Is the organization an agent, trustee, custod	lian or other intermed	diary for contributio	ons or other assets n	ot included		
	on Form 990, Part X?					Yes	🗌 No
b	If "Yes," explain the arrangement in Part XIII						
						Amount	
с	Beginning balance				1c		
d	Additions during the year				1d		
е	Distributions during the year				1e		
f	Ending balance				1f		
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for escrow or o	custodial account lia	bility?	Yes	No No
	If "Yes," explain the arrangement in Part XIII						
Par	<b>t V</b> Endowment Funds. Complete	· · · · · · · · · · · · · · · · · · ·		1	1		
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years t	ack <b>(e)</b> Four	years back
1a	Beginning of year balance						
b	Contributions						
c	Net investment earnings, gains, and losses						
d	Grants or scholarships						
е	Other expenditures for facilities						
	and programs						
	Administrative expenses						
g	End of year balance			(-))   -			
2	Provide the estimated percentage of the cur	rent year end baland		(a)) held as:			
a h	Board designated or quasi-endowment	%	_%				
u o	Permanent endowment						
C	Temporarily restricted endowment ▶ The percentages on lines 2a, 2b, and 2c sho	%					
20	Are there endowment funds not in the posse		ation that are hold	and administored fo	r the organization		
Ja	by:	ession of the organiz			i the organization		Yes No
	(i) unrelated organizations						
	(ii) related organizations						
b	If "Yes" on line 3a(ii), are the related organiza	ations listed as requi	red on Schedule R	?		3b	
4	Describe in Part XIII the intended uses of the			•			
Par	t VI Land, Buildings, and Equipn						
	Complete if the organization answere		0, Part IV, line 11a.	See Form 990, Part	X, line 10.		
	Description of property	(a) Cost or o	· · · · ·		Accumulated	(d) Book	value
		basis (investr	• • •	. ,	depreciation	(,==0)	
1a	Land		1	23,140.		123	3,140.
	Buildings	44 5		29,864.	688,522.	959	9,053.
	Leasehold improvements			71,011.	4,305.	166	5,706.
	Equipment	14,		81,877.	36,155.		),164.
	Other		725. 1	35,945.	108,968.		2,702.
Total	Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X, column (B), line	10c.)		1,341	L,765.
					0.1	dula D /Cause	

Schedule D (Form 990) 2018

832052 10-29-18

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)									
(B)									
(C)									
(D)									
(E)									
(F)									
(G)									
(H)									
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ►									

### 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.

0, Part X, line 25.

Complete if the organization answered "Yes" on Fe	
. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) LINE OF CREDIT	58,000.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
otal. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	58,000.

icial 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 L

Schedule D	(Form 990)	2018
Schedule D	F0111 330	2010

832053 10-29-18

	dule D (Form 990) 2018 THE LIGHTHOUSE FOUNDATION				154/324	Page <b>4</b>
Pa	t XI Reconciliation of Revenue per Audited Financial Stateme		Revenue per R	eturr	า.	
	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	1,171,	836.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	. 2a				
b	Donated services and use of facilities	_ 2b	76,538.			
С	Recoveries of prior year grants	_ 2c				
d	Other (Describe in Part XIII.)	2d	172,131.			
е	Add lines 2a through 2d			2e		669.
3	Subtract line 2e from line 1			3	923,	167.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a				
b	Other (Describe in Part XIII.)	. 4b				-
С	Add lines 4a and 4b			4c		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	-	167.
Pa	t XII Reconciliation of Expenses per Audited Financial Statem	nents Wit	h Expenses per	Retu	rn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a					
1	Total expenses and losses per audited financial statements			1	1,280,	094.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities	_ 2a	76,538.			
b	Prior year adjustments	_ 2b				
С	Other losses	_ 2c				
d	Other (Describe in Part XIII.)	2d	172,131.			
е	Add lines 2a through 2d			2e		669.
3	Subtract line 2e from line 1			3	1,031,	425.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a				
b	Other (Describe in Part XIII.)	. 4b				
				4c		Ο.
С	Add lines 4a and 4b					
5	Total expenses. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form 990, Part I, line 18.</i> )			5	1,031,	425.
5					1,031,	425.

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lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART XI, LINE 2D - OTHER ADJUSTMENTS:	
FUNDRAISING EXPENSES AGAINST REVENUE	53,874.
COST OF VEHICLES SOLD AGAINST REVENUE	118,257.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	172,131.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
FUNDRAISING EXPENSES AGAINST REVENUE	53,874.
COST OF VEHICLES SOLD AGAINST REVENUE	118,257.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	172,131.

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SCHEDULE G	Suppleme	ental Information Regarding	Fune	drais	ing or Gaming	Acti	vities	OMB No. 1545-0047
(Form 990 or 990-EZ)								2018
	organization entered more than \$15,000 on Form 990-EZ, line 6a. ► Attach to Form 990 or Form 990-EZ.							Open to Public
Department of the Treasury Internal Revenue Service	► Go	to www.irs.gov/Form990 for instru				ion.		Inspection
Name of the organization		HTHOUSE FOUNDATION					Employer ide	entification number
Part I Fundrais		Complete if the organization answe		'es" o	n Form 990, Part IV,	line 1		
	complete this par		a aati	vitioo	Chaole all that apply			
a Mail solicitat	-	sed funds through any of the followir e 🗔 Solicitat	-		overnment grants			
<b>b</b> Internet and	email solicitations	s f Solicitat	ion of	gover	nment grants			
c Phone solici		g 🛄 Special	fundra	aising	events			
		or oral agreement with any individual	(inclue	ding o	fficers, directors, tru	stees	, or	
key employees list	ed in Form 990, P	Part VII) or entity in connection with p	rofess	ional f	undraising services?	?	Yes	s 🗌 No
<b>b</b> If "Yes," list the 10 compensated at le	-	viduals or entities (fundraisers) pursu organization.	ant to	agree	ements under which	the fu	undraiser is to I	be
· .	<b>,</b>		/;;;)	Did		60	Amount paid	
(i) Name and addres or entity (fund		(ii) Activity	(iii) fundr have c or con contribu	ustody trol of	(iv) Gross receipts from activity	to (o	fundraiser ted in col. <b>(i)</b>	(vi) Amount paid to (or retained by) organization
			Yes	No				
Total								
<ol> <li>List all states in whi or licensing.</li> </ol>	ch the organizatio	on is registered or licensed to solicit o	contrib	oution	s or has been notifie	d it is	exempt from r	egistration
LHA For Paperwork Re	eduction Act Not	ice, see the Instructions for Form	990 or	990-	EZ. S	Sche	dule G (Form 9	990 or 990-EZ) 2018

832081 10-03-18

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### Schedule G (Form 990 or 990-EZ) 2018 THE LIGHTHOUSE FOUNDATION

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

_		of fundraising event contributions and gr	ross income on Form 990 (a) Event #1	0-EZ, lines 1 and 6b. List e	events with gross receip (c) Other events	ots greater than \$5,000 T
						(d) Total events
				DINE & DANCE	3	(add col. <b>(a)</b> through col. <b>(c)</b> )
an			(event type)	(event type)	(total number)	
Hevenue	1	Gross receipts	55,280.	45,674.	48,235.	149,189
	2	Less: Contributions	37,280.	33,173.	29,154.	99,607
	3	Gross income (line 1 minus line 2)	18,000.	12,501.	19,081.	49,582
	4	Cash prizes				
es	5	Noncash prizes				
nireci Experises	6	Rent/facility costs		11,582.	20,408.	31,990
קוברו י	7	Food and beverages	15,590.			15,590
-	8	Entertainment		1,500.		1,500 4,794
	9	Other direct expenses	2,812.	682.	1,300.	
		Direct expense summary. Add lines 4 throug			•	53,874
	rt I	Net income summary. Subtract line 10 from I II Gaming. Complete if the organization		n 990. Part IV, line 19, or r		-4,292
_		\$15,000 on Form 990-EZ, line 6a.				
,			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
			(a) 5go	bingo/progressive bingo	(e) out of gaining	col. (a) through col. (c
┥	1	Gross revenue				
,	2	Cash prizes				
	3	Noncash prizes				
	4	Rent/facility costs				
	5	Other direct expenses				
┫	<u> </u>		Yes %	Yes %	Yes %	
	6	Volunteer labor	No	No	No	
	7	Direct expense summary. Add lines 2 throug	h 5 in column (d)			
	8	Net gaming income summary. Subtract line 7	7 from line 1 column (d)		•	
4	<u> </u>	Het gaming meente summary. Subtract inte r				
)	Ent	ter the state(s) in which the organization cond	ucts gaming activities:			
		he organization licensed to conduct gaming a				Yes N
b	lf "	No," explain:				
		ere any of the organization's gaming licenses r Yes," explain:			year?	Yes N
208	2 10	D-03-18			Schedule G (Fo	rm 990 or 990-EZ) 20 <sup>.</sup>
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Sch	edule G (Form 990 or 990-EZ) 2018 THE LIGHTHOUSE FOUNDATION	25 - 1!	547324	Page 3
	Does the organization conduct gaming activities with nonmembers?		Yes	No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?		Yes	No No
13	Indicate the percentage of gaming activity conducted in:			
а	The organization's facility			%
	An outside facility		13b	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and record	ds:		
	Name ►			
	Name			
	Address			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	🗌 No
b	If "Yes," enter the amount of gaming revenue received by the organization <b>&gt;</b> \$ and the amount	unt		
	of gaming revenue retained by the third party ▶\$			
с	If "Yes," enter name and address of the third party:			
	Name			
	Address ►			
16	Gaming manager information:			
	Name			
	Gaming manager compensation ▶ \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		Ves	
h	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent i			
D D	organization's own exempt activities during the tax year <b>&gt;</b> \$	ii uie		
Ра	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v);	and Part	III, lines 9,	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.		, ,	
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	,				
				Schedule G (F	orm 990 or 990-EZ)
832084 04-01-18		33			
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### SCHEDULE M (Form 990)

### **Noncash Contributions**

OMB No. 1545-0047

**Open to Public** 

18

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.

Attach to Form 990.

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

Inspection Employer identification number 25-1547324

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Name of the organization	on
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### THE LIGHTHOUSE FOUNDATION

Pa	TTI Types of Property							
		(a)	(b)	(c)	(d)			
		Check if applicable	Number of contributions or	Noncash contribution amounts reported on	Method of de noncash contribu		•	
		applicable		Form 990, Part VIII, line 1g	Honcash contribu	JUON A	nount	5
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	Х	64	100,706	NAT'L AUTO	DEA	LER	SA
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded							
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ()							
26	Other  ()							
27	Other ()							
28	Other 🕨 ( )							
29	Number of Forms 8283 received by the organiz		0 ,					
	for which the organization completed Form 828	33, Part IV, I	Donee Acknowled	gement 29				
							Yes	No
30a	During the year, did the organization receive by					ſ		
	must hold for at least three years from the date			•				v
	exempt purposes for the entire holding period?	·····				30a		X
	If "Yes," describe the arrangement in Part II.							v
31	Does the organization have a gift acceptance p					31		X
32a	Does the organization hire or use third parties of		•					v
	contributions?					32a		X
	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in co	olumn (c) fo	r a type of propert	y for which column (a) is ch	eckea,			
	describe in Part II							( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )

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

Schedule M (Form 990) 2018

832141 10-18-18

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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.

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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ.

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



25-1547324

THE LIGHTHOUSE FOUNDATION

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

INDIVIDUALS AND FAMILIES IN NORTHERN ALLEGHENY AND BUTLER COUNTIES.

THE LIGHTHOUSE PROVIDES BASIC NECESSITIES SUCH AS FOOD AND SHELTER,

TRANSITIONAL AND INTERIM HOUSING. THE LIGHTHOUSE ALSO OFFERS PROGRAMS

TO HELP PEOPLE ACHIEVE SELF-SUFFICIENCY WHICH INCLUDE: LOW INCOME CAR

OWNERSHIP, FAITH BASED JOB TRAINING, FINANCIAL LITERACY, COMPUTER

SKILLS, AND PARENTING CLASSES. THE LIGHTHOUSE DELIVERS HIGH QUALITY

PROGRAMS AND MINISTRIES THAT OFFER PEOPLE HOPE FOR A BETTER FUTURE AND

THAT RESULT IN POSITIVE LIFE CHANGES.

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

HOUSING. THE LIGHTHOUSE ALSO OFFERS PROGRAMS TO HELP PEOPLE ACHIEVE

SELF-SUFFICIENCY WHICH INCLUDE: LOW INCOME CAR OWNERSHIP, FAITH BASED

JOB TRAINING, FINANCIAL LITERACY, COMPUTER SKILLS, AND PARENTING

CLASSES. THE LIGHTHOUSE DELIVERS HIGH QUALITY PROGRAMS AND MINISTRIES

THAT OFFER PEOPLE HOPE FOR A BETTER FUTURE AND THAT RESULT IN POSITIVE

LIFE CHANGES.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

THE FOUNDATION ALSO OPERATES VARIOUS OTHER PROGRAMS SUCH AS COMPUTER

COURSES FOR MEMBERS OF THE COMMUNITY.

EXPENSES \$ 161,923. INCLUDING GRANTS OF \$ 0. REVENUE \$ 29,271.

FORM 990, PART VI, SECTION A, LINE 2:

THE EXECUTIVE DIRECTOR, CINDY CIPOLETTI, AND A BOARD MEMBER, BRYAN

CIPOLETTI, ARE WIFE AND HUSBAND.

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 For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 Schedule O (Form 990 or 990-EZ) (2018)

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2018.05000 THE LIGHTHOUSE FOUNDATION 00696\_01

Name of the organization

THE LIGHTHOUSE FOUNDATION

FORM 990, PART VI, SECTION A, LINE 8B:

THE ORGANIZATION DOES NOT HAVE COMMITTEES WHO HAVE THE AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY.

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

A COPY OF FORM 990 IS PROVIDED TO THE BOARD PRIOR TO FILING OF THE RETURN.

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

THE LIGHTHOUSE FOUNDATION'S BOARD OF DIRECTORS MEETS 5-6 TIMES PER YEAR. IN BETWEEN MEETINGS, IF THERE ARE MAJOR ISSUES THAT REQUIRE THE BOARD'S ATTENTION, MEETINGS ARE CONDUCTED EITHER VIA PHONE CONFERENCE OR EMAIL CORRESPONDENCE. THROUGH ROUTINE MEETINGS AND CORRESPONDENCE, AS WELL AS THROUGH LEGAL COUNSEL (THE BOARD OF DIRECTORS HAS AND WILL CONTINUE TO HAVE AT LEAST ONE PRACTICING ATTORNEY AS A MEMBER), THE BOARD OF DIRECTORS ENSURES COMPLIANCE WITH THE FOUNDATION'S CONFLICT OF INTEREST POLICY.

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

THE COMPENSATION OF OFFICERS AND KEY EMPLOYEES IS INDEPENDENTLY REVIEWED BY THE BOARD OF DIRECTORS ON AN ANNUAL BASIS.

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

THE FOUNDATION PROVIDES PUBLIC ACCESS TO ITS GOVERNING DOCUMENTS AND

AUDITED FINANCIAL STATEMENTS BY REQUEST.

PART XII, LINE 2C

THE FOUNDATION HAS NOT CHANGED EITHER ITS OVERSIGHT PROCESS OR

SELECTION PROCESS DURING THE TAX YEAR.

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

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Schedule O (Form 990 or 9 Name of the organization	/30°LZ) (4	2010/			Page 2 Employer identification number 25-1547324			
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