

# *Alfiero & Lucia Palestro Foundation, Inc.*

A Tax Exempt Private Foundation

333 Sylvan Avenue, Suite # 100

Englewood Cliffs, NJ 07632

Phone (201) 568-8000 Fax (201) 568-6973

E-mail: [info@palestroni.com](mailto:info@palestroni.com)

## **2025 ALFIERO & LUCIA PALESTRONI FOUNDATION GRANT APPLICATION**

Use this format only to apply for a grant

1. Name of Organization: **Foundation for Morristown Medical Center**

2. Address of Headquarters Office: **310 South Street, Fourth Floor  
Morristown, NJ 07960**

3. Telephone: **(973) 593-2400** Fax: **(973) 290-7561**

E-mail:

Website: [www.f4mmc.org](http://www.f4mmc.org)

4. Date Organized: **1995**

5. Date and Place of Incorporation: **Morristown, NJ**

6. Federal Tax Exempt Status: **501(c)(3)**

*Please include IRS Code Determination and a Copy of IRS letter as Exhibit 1.*

**7. Staff Head**

Name: **Jennifer Smith**

Title: **Chief Philanthropy Officer**

Volunteer or Compensated: **Compensated**

Amount of Compensation/Benefits (if any): **Please see 990, part 7.**

**8. Staff Head**

Name: **Bonnie Gannon**

Title: **Director, Corporate and Foundation Relations**

Volunteer or Compensated: **Compensated**

Amount of Compensation/Benefits (if any): **Please see 990, part 7.**

*Kindly list Officer/Members or the Board of Directors with Compensation/Benefits (if any) if they serve as Management as Exhibit 2.*

**9. Chief Purpose of the Organization:**

**As the philanthropic arm of Morristown Medical Center and Goryeb Children's Hospital, the Foundation for Morristown Medical Center inspires community philanthropy to advance exceptional health care. Through the generosity of our donors, Morristown Medical Center can continuously expand vital programs and services, enhance clinical education, prioritize excellence in patient care – and so much more.**

**Morristown Medical Center is committed to making our communities the healthiest in the nation by delivering high-quality, accessible and affordable patient care. This means assessing the health needs of every community we serve, developing scalable solutions to meet those needs, and investing human and financial resources where they're needed most because we believe everyone has a right to good health. Healthy communities lead to lower health care costs, robust community partnerships and enhanced quality of life.**

**10. Brief History of the Organization:**

**Founded in 1892, this once small community hospital has evolved into a 735-bed tertiary care facility treating 1.2 million people in north-central New Jersey. Morristown Medical Center is the flagship hospital of Atlantic Health System, which operates several non-profit medical centers in the state.**

11. Brief Description of the Organization's Programs in the Most Recent Year:

*Please include descriptive materials, publications, etc. as Exhibit 3.*

**Morristown Medical Center is the only hospital in New Jersey to earn ‘America’s 50 Best Hospitals Award’ from Healthgrades for seven consecutive years. This award places us in the top one percent of hospitals in the nation for clinical excellence. Leapfrog once again recognized the medical center with an “A” hospital safety grade.**

**Morristown Medical Center is nationally recognized in four adult specialties by U.S. News & World Report’s 2024-2025 Best Hospitals rankings: Cardiology, Heart & Vascular Surgery, Gastroenterology & GI Surgery, Orthopedics, and Urology. Additionally, Morristown Medical Center is recognized as high-performing in numerous adult procedures and conditions.**

12. Names of Six Major Contributors:

*Please include amount of support given by each last year.*

See below for our top corporate and foundation funders for FY2024:

<b>1. Delta Dental of New Jersey</b>	<b>Amount: \$1,105,000</b>
<b>2. Douglas M. Noble Family Foundation</b>	<b>Amount: \$855,000</b>
<b>3. The Valerie Fund</b>	<b>Amount: \$762,636</b>
<b>4. Margaret A. Darrin Charitable Trust</b>	<b>Amount: \$500,000</b>
<b>5. The Louise Washington Charitable Trust</b>	<b>Amount: \$325,000</b>
<b>6. The Dorothy B. Hersh Foundation</b>	<b>Amount: \$250,000</b>

13. Three Most Important Needs for Funding by the Palestroni Foundation and the amount you seek for each:

*Please list in order of priority.*

- 1. Hyperfine (Portable MRI):** Hyperfine’s Swoop® Portable MR Imaging System is an FDA-approved, ultra-low-field MRI device designed for point-of-care brain imaging. It can be easily transported to a patient’s bedside, plugged into a standard electrical outlet and operated via a wireless tablet. The system provides rapid imaging, delivering brain scans within minutes, which aids in timely clinical decision-making. Its portability and ease of use make it particularly valuable in settings like intensive care units and emergency departments, where quick access to diagnostic imaging is crucial. The first-generation portable MRI was not easy to use and had less than optimal image quality. We wish to purchase an improved second-generation portable MRI that will be used for perioperative brain tumor and vascular cases for both diagnosis as well as post-surgical assessment. This improved

**technology and functionality will enable us to provide more prompt diagnosis and treatment. The Hyperfine device will be used for adult patients as well as patients in our pediatric intensive care unit (PICU).**

**The portable MRI will make Morristown Medical Center the one of the first hospitals in the world to have this device onsite. We have raised over \$530,000 to date. A grant of \$25,000 will bring us significantly closer to fulfilling our philanthropic goal.**

Amount Requested: \$25,000

**2. Pediatrics Hematologist/Oncologist Pharmacist:** Pediatric oncology pharmacists are experts in treating children with cancer safely and effectively. All pediatric cancer medications currently dispensed to our young patients treated at the Valerie Fund Children's Center for pediatric cancer and blood disorders at Goryeb Children's Hospital are done through Morristown Medical Center's adult oncology pharmacy, located in a separate building from the pediatric cancer center.

This causes long wait times – sometimes two or more hours – before patients receive their medication and bottlenecks in the pediatric infusion center, where, again, patients must wait before beginning treatment, which can take hours. In addition, the pharmacist compounding medications varies daily and is generally unable to meet with patients and families to answer questions or establish a trusting relationship. The latter is vitally important as some children with cancer can be in active treatment for two or more years.

We aim to create a pediatric hematology and oncology pharmacy service and recruit a board-certified pediatric oncology pharmacist specially trained to identify the right therapy and optimal dosage for each patient, reduce side effects and minimize the late effects of treatment. They will hold bedside consultations to explain drug regimens and maintain open communication, as children with cancer are vulnerable and require at-the-elbow support during every step of treatment. This dedicated service will also improve workflow and eliminate delays in dispensing, which, in turn, will reduce wait times for infusions or delivering biologics. The pharmacist will also provide evidence-based education to our clinical staff, ensuring compliance with chemotherapy protocols and drug interactions/side effects to maintain the highest level of care.

Salary for the Pediatrics Hematologist/Oncologist Pharmacist will be \$217,000 per year for three years. Atlantic Health System requires three years of support for philanthropy-funded positions. We began fundraising for this role in 2025 and have raised nearly \$150,000 to date.

Amount Requested: \$25,000

**3. Good Neighbor Fund:** Many parents and caregivers of young patients with cancer or blood disorders find themselves in dire financial situations. The Good Neighbor Fund offers financial assistance to offset daily living expenses, such as gas and electric bills,

**childcare, mortgage or rent payments and medication. A key component of our family-centered care at Morristown Medical Center, the Good Neighbor Fund has helped thousands of families whose children are patients at Goryeb Children's Hospital. Support of \$25,000 will allow us to complete our annual philanthropic need for this important initiative.**

Amount Requested: **\$25,000**

14. Are Funds Donated to or Raised by the Organization Passed on to Other Charities? **No**

*If yes, please list the charities and the amounts given to each in the last two years. N/A*

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15. Gross Income in 2024: **\$41,807,721**

Program Expense in 2024: **\$10,767,733**

Management and General Costs in 2024: **\$5,847,701**

Fund Raising Costs in 2024: **\$153,080**

16. Copy of the Most Recent Financial Audit or Year End Financial Report.

*Please enclose as Exhibit 4.*

17. Copy of the Most Recent IRS 990 and Schedule A.

*Please enclose as Exhibit 5.*

18. Copy of Current Budget.

*Please enclose as Exhibit 6.*

19. Copy of the Current Annual Report if available.

*Please enclose as Exhibit 7.*

***PLEASE ENCLOSE ANY OTHER DOCUMENTATION WHICH YOU FEEL WOULD BE OF  
INTEREST AND/OR ASSISTANCE TO THE TRUSTEES AS EXHIBIT 8.***

**WE REQUIRE ONE FULL SET OF GRANT APPLICATION AND ATTACHMENTS IN ORDER TO PROCESS APPLICATION. WE ALSO ASK THAT YOU SEND THE APPLICATION ELECTRONICALLY TO [INFO@PALESTRONI.COM](mailto:INFO@PALESTRONI.COM)**

PLEASE SEND THE ONE COPY OF THE GRANT APPLICATION ALONG WITH ALL REQUESTED MATERIALS TO:

Alfiero & Lucia Palestro Foundation, Inc.

Attn: Kristine Sayrafe, Foundation Manager

333 Sylvan Avenue, Suite 100

Englewood Cliffs, NJ 07632

AS TRUSTEES MEET THROUGHOUT THE YEAR TO CONSIDER GRANT APPLICATIONS, WE ENCOURAGE YOU TO SEND THE COMPLETED FORMS AND EXHIBITS AT YOUR EARLIEST CONVENIENCE.

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July 14, 2025

Alfiero & Lucia Palestro Foundation, Inc.  
333 Sylvan Avenue, Suite 100  
Englewood Cliffs, NJ 07632  
Attn: Kristine Sayrafe, Foundation Manager

RE: 2025 Proposal

Dear Kristine,

Enclosed please find the Foundation for Morristown Medical Center's grant application to the Alfiero & Lucia Palestro Foundation. In addition to our proposal, the following attachments are included:

- Exhibit 1: IRS Code Determination and a Copy of IRS Letter
- Exhibit 2: List of Officers/Members of the Board of Directors
- Exhibit 3: Morristown Medical Center 2024 Fact Sheet
- Exhibit 4: Most Recent Financial Audit (FY2024)
- Exhibit 5: Most Recent IRS 990 and Schedule A (FY2023)
- Exhibit 6: Current Budget (2025 Operating Budget)
- Exhibit 7: Current Annual Report (2024)

We are grateful to the Alfiero & Lucia Palestro Foundation for their previous support and the opportunity to submit this new request. If you have any questions, please do not hesitate to contact me.

Sincerely,

A handwritten signature in black ink that reads "maria mega".

Maria Mega  
Corporate and Foundation Relations Officer  
(973) 593-2423  
[maria.mega@atlanticehealth.org](mailto:maria.mega@atlanticehealth.org)



P.O. Box 2508, Room 4010  
Cincinnati OH 45201

In reply refer to: 4077550279  
July 02, 2015 LTR 4168C 0  
22-3392808 000000 00  
00034633  
BODC: TE

FOUNDATION FOR MORRISTOWN MEDICAL  
CENTER INC  
MORRISTOWN MEMORIAL HEALTH FOUNDATI  
% JAMES F QUINN  
475 SOUTH ST  
MORRISTOWN NJ 07960-6459

014107

Employer Identification Number: 22-3392808  
Person to Contact: S BROWN  
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your June 17, 2015, request for information regarding your tax-exempt status.

Our records indicate that you were recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in October 1995.

Our records also indicate that you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section(s) 509(a)(1) and 170(b)(1)(A)(vi).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

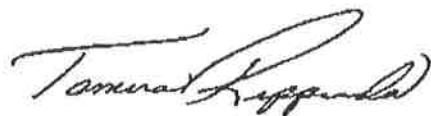
Please refer to our website [www.irs.gov/eo](http://www.irs.gov/eo) for information regarding filing requirements. Specifically, section 6033(j) of the Code provides that failure to file an annual information return for three consecutive years results in revocation of tax-exempt status as of the filing due date of the third return for organizations required to file. We will publish a list of organizations whose tax-exempt status was revoked under section 6033(j) of the Code on our website beginning in early 2011.

4077550279  
July 02, 2015 LTR 4168C 0  
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FOUNDATION FOR MORRISTOWN MEDICAL  
CENTER INC  
MORRISTOWN MEMORIAL HEALTH FOUNDATI  
% JAMES F QUINN  
475 SOUTH ST  
MORRISTOWN NJ 07960-6459

If you have any questions, please call us at the telephone number  
shown in the heading of this letter.

Sincerely yours,



Tamera Ripperda  
Director, Exempt Organizations

## 2025 Board of Trustees

**Marc Adee, Vice Chairman**

Chairman & CEO  
Crum & Forster

**Shawn Brennan**

Co-Founder & Managing Partner  
SIR Capital Management, LP

**William D. Bruen, Jr.\***

Chairman  
Bruen Wealth Management

**John “Jack” Burke III**

Wealth Management Advisor  
Managing Director  
Merrill Lynch Wealth Management

**Paul Cain**

Community Volunteer

**Kathleen “Kathy” Christie**

Former President  
Women’s Association of MMC

**Mary Courtemanche**

Past President  
Women’s Association of MMC

**Robert Coyne, MD**

Cardiologist, Electrophysiology Assoc.  
Atlantic Medical Group

**Brandee A. Fetherman MSN, RN, CCRN-K\***

Chief Nursing Officer  
Morristown Medical Center

**Kelly A. Frank, CPA, CGMA, Treasurer**

Partner  
Crowe Horwath Not-for-Profit and Higher  
Education Group

**Harvey Gerhard, MD**

President of the Medical/Dental Staff

**Christine C. Gilfillan**

President  
MCJ Amelior Foundation

**Carl Goldberg, Chairman**

Managing Member  
Canoe Brook Investors

**Deborah Hanson**

Executive Vice President  
Chief Risk Officer  
Principal  
The Hampshire Companies, LLC

**Eugene Huang**

Attorney/Partner  
Wiley, Malehorn, Sirota & Raynes

**Lori Barer Ingber, PhD, Secretary**

President & Founder  
Parent Match

**Walter Lewis, MD**

Anesthesiologist  
President, Anesthesia Associates of  
Morristown

**Meghan Lyon**  
Philanthropist and Community Volunteer

**Thomas P. Mac Mahon**  
Retired Chairman & CEO  
LabCorp (Laboratory Corporation of America)

**Srinivas "Sam" Maddali**  
CEO  
United Pharmacy Network GPO

**Brenda Matti-Orozco, MD, FACP**  
Atlantic Hospice Medical Director,  
Director of the Nancy and Skippy  
Weinstein Inpatient & Palliative Care  
Unit at MMC, and  
Chief of the Division of General Internal  
Medicine & Palliative Medicine at  
MMC

**Peter McRae**  
Managing Partner  
McRae Capital Management

**Matthew Mulcahy\***  
Chairman, Advisory Board  
Morristown Medical Center

**Thomas Murphy, MD**  
Associate Director of Neonatology, and  
Director of Neonatal Quality & Safety at  
MidAtlantic Neonatology Associates

**Monique Nelson**  
Chairman and CEO  
UniWorld Group, Inc.

**Trish O'Keefe, PhD, RN, NE-BEC\***  
President, Morristown Medical Center  
Sr. Vice President, Atlantic Health System  
Chief Nurse Executive, Atlantic Health  
System

**Chirag Patel**  
Co-founder and Co-chairman  
Amneal Pharmaceuticals

**Juliet Patsalos-Fox**  
Founder  
Ride + Reflect

**Christopher "Chris" Riccobono**  
Founder and Executive Chairman  
UNTUCKit

**Andrew "Kreamer" Rooke, Jr.**  
Principal & Co-Founder  
Station Partners

**Kathleen "Kathy" Ross**  
Community Volunteer

**Dale Scolnick\***  
President, Women's Association  
Morristown Medical Center

**J. Peter Simon**  
Managing Partner  
Simon Quick Advisors, LLC

**Kelly Sturman**  
Philanthropist and Community Volunteer

**Barbara Todd**  
Founder, CEO  
Renaissance Asset Management, Retired  
Philanthropist

**Teresa "Terry" Vega**  
Retired Senior Vice President  
Motorola  
Lucent Technologies

**Christopher Zipp, DO**  
Chairman  
Family Medicine at MMC

#### **Staff Officers**

**Jennifer L. Smith**  
Chief Philanthropy Officer

**Cynthia W. O'Donnell, JD,  
*Assistant Secretary***  
Director of Gift Planning

# Morristown Medical Center

100 Madison Avenue  
Morristown, NJ 07960  
973-971-5000

President: Trish O'Keefe, PhD, RN



## Vital Stats 2024

- 7,396 employees
- 2,114 physicians
- 318 medical residents<sup>1</sup>
- 735 licensed beds<sup>2</sup>
- 40,199 admissions<sup>3</sup>
- 5,737 births
- 107,402 emergency visits
- 890,512 outpatient visits<sup>4</sup>

<sup>1</sup>Includes Morristown and Overlook medical centers

<sup>2</sup>Normal newborn bassinets are not NJ DOH licensed; therefore, not included; pediatric intensive, and intermediate/intensive bassinets are licensed and included.

<sup>3</sup>Excluding births

<sup>4</sup>Includes patients seen at Rockaway Health Pavilion

## Mission

Designing and delivering high quality, innovative and personalized health care, to build healthier communities and improve lives for patients, consumers, and caregivers

## Vision

Improving Lives, Empowering Communities  
Through Health, Hope and Healing

## Awards, Certifications and Affiliations

- *U.S. News & World Report*
  - Ranked best hospital in NJ for Orthopedics and nationally ranked in the top 50 for Orthopedics, Urology, Gastroenterology & GI Surgery, Cardiology, Heart & Vascular Surgery
  - Ranked regionally in 22 high-performing specialties, procedures and conditions recognized
- *Newsweek*
  - Named one of the World's Best Hospitals (#51 in the U.S and #1 in New Jersey), recognized with the Infection Prevention Award and named one of the World's Best Smart Hospitals (2025)
  - Ranked as one of America's Best Cardiac Hospitals (#36), Orthopedic Hospitals (#39), Cancer Hospitals (#63), and Neurological Hospitals (#74) (2024)
  - Goryeb Children's Hospital Ranked as America's Best for Neurology (#41) and Gastroenterology (#43) (2024)
- *Healthgrades*
  - America's 50 Best Hospitals Award for 10 Years in a Row (2016-2025)
  - America's 50 Best Hospitals for Cardiac Surgery in 2025
  - America's 100 Best Hospitals for Cardiac Care and Coronary Intervention for 2 Years in a Row (2024-2025)
  - America's 100 Best Hospitals for Joint Replacement, Gastrointestinal Surgery and Gastrointestinal Care in 2025

- #1 in NJ for Cardiac Care and Joint Replacement, #3 in NJ for Cardiology, #4 in NJ for Gastrointestinal Care and Gastrointestinal Surgery and #5 in NJ for Gastrointestinal Medical Treatment
- *Money Magazine* (2025)
  - #9 hospital in the U.S. and the only NJ hospital in the top 20.
  - Maternity Care: Top 10 in the US, highest ranked in NJ.
  - Pediatric Care: Top 10 in the US, highest ranked in NJ.
  - Cardiac Care: Top 10 in the US, highest ranked in NJ.
  - Cancer Care: #40 in the country, top two in NJ.
- Named to Becker's Healthcare list of 'Great Hospitals in America' (2023, 2024)
- #1 NJBIZ Top 50 Hospitals (2024, 2025)
- #1 hospital in NJ among "Jersey's Best" Top Hospitals, selected by Castle Connolly Top Doctors for the 6th year (2024)
- Recognized by the Leapfrog Group with an "A" hospital safety grade—its highest—and named a Top Teaching Hospital
- Accredited as a level 1 Geriatric Emergency Department by the American College of Emergency Physicians (2021-2024)
- The Centers for Medicare and Medicaid Services recognized the medical center with its highest five-star rating again in 2023
- Magnet® Hospital for Excellence in Nursing Service for sixth consecutive time (2024), an honor claimed by less than 1% of the hospitals in the United States; over 1,600 nurses employed at medical center

Various programs recognized as part of the Blue Cross Blue Shield of New Jersey Association's Blue Distinction Specialty Care Program

- Blue Distinction Center +: Bariatric Surgery (November 2024), Knee and Hip Replacement (May 2024)
- Blue Distinction Center: Cancer Care (March 2023), Maternity Care (June 2024)
- Lead affiliate of the only New Jersey-based Community Oncology Research Program (NCORP) designated by the National Cancer Institute (NCI)
- Recipient of the prestigious American College of Surgeons' (ACS) Commission on Cancer's Outstanding Achievement Award, given to fewer than 15% of centers nationwide, three times in a row
- Accredited by the National Accreditation Program for Breast Centers (NAPBC) for providing high-quality care to patients with diseases of the breast
- Verified as Level I Regional Trauma Center by the American College of Surgeons and designated a Level II by the state of New Jersey
- Received The Joint Commission disease-specific certification in primary stroke, spine, knee replacement, hip replacement, ventricular assist devices, perinatal care, and wound care
- Level III Regional Perinatal Center for highest risk mothers and newborns
- Recognized as a Center of Excellence in Surgical Safety: Smoke Evacuation facility and recipient of the Association of periOperative Registered Nurses (AORN) Go Clear Award™ (2024)
- One of only 25 U.S. hospitals recognized by the American College of Surgeons National Surgical Quality Improvement Program for achieving exemplary outcomes in surgical patient care
- Recognized with platinum-level status by the U.S. Department of Health and Human Services (HHS) for efforts to increase enrollment in the New Jersey state donor registry and educate patients about organ and tissue donation
- Beacon Award for Critical Care Excellence: American Association of Critical Care Nurses
- Achieved the 2023 Emergency Nurses Association Lantern Award
- Designated as an MBSAQIP Accredited Center - Comprehensive Center with Adolescent
- Designated as a Level IV Regional Perinatal Health Care Center by The Joint Commission, in collaboration with the American College of Obstetricians and Gynecologists (ACOG) in 2024. Only the second hospital in NJ to achieve this designation
- Designated Baby-Friendly USA®- Maternity Center (2016) Re-Designated 2023-2028

- Recognized as a Top Performer (5 star, #9 in the large, specialized Complex Care Medical Center cohort) in the 2022 Bernard A. Birnbaum, MD, Quality Leadership Annual Ranking by Vizient, Inc.
- Recognized by NurseJournal.org as the third best hospital to work for nurses out of 5,000 hospitals in the U.S. (2021-2024)
- Named a Center of Excellence for the treatment of pancreatic cancer by the National Pancreas Foundation
- Atlantic Health System named Fortune 100 Best Companies to Work For® for the 15th year (2024)
- Honored by the American Heart Association and American Stroke Association with the 2024 Get With The Guidelines® Stroke Gold Plus Quality Achievement Awards with Target: Stroke Elite Plus Honor Roll and Target: Type 2 Diabetes Honor Rolls.
- Earned a three-star, top rating from the Society of Thoracic Surgeons (STS) for patient care and outcomes in 3 procedures: isolated CABG, AVR + CABG, and MVRR. Among only 4% of hospitals in the US to receive three stars in AVR (July 2021-June 2024).

## Key Services and Partnerships

- Specialties include: all areas of cardiovascular medicine, including the largest cardiac surgery program in NJ; orthopedics; trauma; oncology; neonatal intensive care unit; specialized care for children via Goryeb Children's Hospital
- Academic affiliation with the Sidney Kimmel Medical College of Thomas Jefferson University
- Official Health Care Partner of the New York Jets
- 12-bed Cardiac Step Down Unit (CSDU) where patients are cared for by multi-disciplinary team including a hospital medicine attending, cardiology attending, cardiology fellows, advanced practice providers, respiratory therapists, and other disciplines as required to ensure frequent monitoring to maintain hemodynamic stability and optimal cardiac functioning.
- Home to the Breakthrough Oncology Accelerator, a pioneering research and clinical collaboration affiliated with the Translational Genomics Research Institute (TGen) of Phoenix, AZ
- Site of care for the Gerald J. Glasser Brain Tumor Center

# **Foundation for Morristown Medical Center**

**Financial Statements  
December 31, 2024 and 2023**

# **Foundation for Morristown Medical Center**

## **Index**

**December 31, 2024 and 2023**

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	<b>Page(s)</b>
<b>Report of Independent Auditors .....</b>	1–2
<b>Financial Statements</b>	
Statements of Financial Position .....	3
Statements of Activities and Changes in Net Assets.....	4
Statements of Cash Flows.....	5
Notes to Financial Statements.....	6-16



## **Report of Independent Auditors**

To the Board of Trustees of Foundation for Morristown Medical Center

### ***Opinion***

We have audited the accompanying financial statements of Foundation for Morristown Medical Center (the "Company"), which comprise the statements of financial position as of December 31, 2024 and 2023, and the related statements of activities and changes in net assets, and of cash flows for the years then ended, including the related notes (collectively referred to as the "financial statements").

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the Company as of December 31, 2024 and 2023, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

### ***Basis for Opinion***

We conducted our audit in accordance with auditing standards generally accepted in the United States of America (US GAAS). Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Company and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

### ***Responsibilities of Management for the Financial Statements***

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Company's ability to continue as a going concern for one year after the date the financial statements are available to be issued.

### ***Auditors' Responsibilities for the Audit of the Financial Statements***

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with US GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.



In performing an audit in accordance with US GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Company's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Company's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

*PricewaterhouseCoopers LLP*

New York, New York  
April 11, 2025

# **Foundation for Morristown Medical Center**

## **Statements of Financial Position**

**December 31, 2024 and 2023**

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	<b>2024</b>	<b>2023</b>
<b>Assets</b>		
Investments	\$ 99,290,309	\$ 81,440,816
Pledges receivable, net	16,659,567	13,941,904
Other assets	1,572,277	1,609,076
Beneficial interest in planned gifts	2,633,512	2,208,508
Due from Morristown Division	<u>108,243,264</u>	<u>101,656,706</u>
Total assets	<u>\$ 228,398,929</u>	<u>\$ 200,857,010</u>
<b>Liabilities</b>		
Annuities payable	\$ 1,846,186	\$ 1,928,886
Accounts payable due to Morristown Division	3,245,309	2,817,804
Life interest obligation	<u>3,827,587</u>	-
Total liabilities	<u>8,919,082</u>	<u>4,746,690</u>
<b>Net assets</b>		
Without donor restrictions	58,215,647	50,234,255
With donor restrictions	<u>161,264,200</u>	<u>145,876,065</u>
Total net assets	<u>219,479,847</u>	<u>196,110,320</u>
Total liabilities and net assets	<u>\$ 228,398,929</u>	<u>\$ 200,857,010</u>

The accompanying notes are an integral part of these financial statements.

**Foundation for Morristown Medical Center**  
**Statements of Activities and Changes in Net Assets**  
**Years Ended December 31, 2024 and 2023**

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	2024			2023		
	Without Donor Restrictions	With Donor Restrictions	Total	Without Donor Restrictions	With Donor Restrictions	Total
<b>Revenue</b>						
Contributions	1,725,989	30,837,197	\$ 32,563,186	\$ 1,616,351	\$ 22,142,194	\$ 23,758,545
Event fundraising	332,190	101,288	433,478	-	421,050	421,050
Investment income, net	6,778,185	2,032,872	8,811,057	2,967,370	1,643,596	4,610,966
Net assets released from restriction	<u>10,564,268</u>	<u>(10,564,268)</u>	<u>-</u>	<u>7,252,320</u>	<u>(7,252,320)</u>	<u>-</u>
Total operating revenues	<u>19,400,632</u>	<u>22,407,089</u>	<u>41,807,721</u>	<u>11,836,041</u>	<u>16,954,520</u>	<u>28,790,561</u>
<b>Expenses</b>						
Program services	10,767,733	-	10,767,733	7,749,220	-	7,749,220
General and administrative	5,847,701	-	5,847,701	5,452,956	-	5,452,956
Event expense	<u>153,080</u>	<u>-</u>	<u>153,080</u>	<u>188,071</u>	<u>-</u>	<u>188,071</u>
Total operating expenses	<u>16,768,514</u>	<u>-</u>	<u>16,768,514</u>	<u>13,390,247</u>	<u>-</u>	<u>13,390,247</u>
Operating income (loss)	2,632,118	22,407,089	25,039,207	(1,554,206)	16,954,520	15,400,314
Beneficial interest in planned gifts	-	425,004	425,004	-	166,406	166,406
Change in net unrealized gains (losses)	<u>5,349,274</u>	<u>3,947,816</u>	<u>9,297,090</u>	<u>14,221,501</u>	<u>5,143,040</u>	<u>19,364,541</u>
Excess of revenues over expenses	7,981,392	26,779,909	34,761,301	12,667,295	22,263,966	34,931,261
Net assets released from restriction used for capital	11,391,774	(11,391,774)	-	8,094,472	(8,094,472)	-
Distributions to Morristown division - capital	<u>(11,391,774)</u>	<u>-</u>	<u>(11,391,774)</u>	<u>(8,094,472)</u>	<u>-</u>	<u>(8,094,472)</u>
Increase in net assets	7,981,392	15,388,135	23,369,527	12,667,295	14,169,494	26,836,789
<b>Net assets</b>						
Beginning of year	<u>50,234,255</u>	<u>145,876,065</u>	<u>196,110,320</u>	<u>37,566,960</u>	<u>131,706,571</u>	<u>169,273,531</u>
End of year	<u>\$ 58,215,647</u>	<u>\$ 161,264,200</u>	<u>\$ 219,479,847</u>	<u>\$ 50,234,255</u>	<u>\$ 145,876,065</u>	<u>\$ 196,110,320</u>

The accompanying notes are an integral part of these financial statements.

# Foundation for Morristown Medical Center

## Statements of Cash Flows

**Years Ended December 31, 2024 and 2023**

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	2024	2023
<b>Cash flows from operating activities</b>		
Increase in net assets	\$ 23,369,527	\$ 26,836,789
Adjustments to reconcile change in net assets to net cash used in operating activities		
Realized and unrealized gains on investments	(7,240,180)	(9,485,739)
Realized and unrealized gains on investments on assets held by Morristown Division	(5,201,339)	(10,116,241)
Restricted contributions for capital	(11,913,308)	(7,353,373)
Restricted contributions for permanent investments	(2,345,176)	(579,041)
Contributed securities	(3,199,760)	(2,370,533)
Proceeds from sales of contributed investments	1,514,983	1,983,163
Contributed real estate	(9,000,000)	-
Life interest obligation	3,827,587	
Changes in assets and liabilities		
Decrease (Increase) in pledges receivable and other assets	2,916,228	(1,622,092)
Increase in beneficial interest in planned gifts	(425,004)	(166,406)
Decrease in annuities payable	(82,700)	(107,146)
Increase in accounts payable to the Morristown Division	<u>427,505</u>	<u>150,746</u>
Cash used in operating activities	<u>(7,351,637)</u>	<u>(2,829,873)</u>
<b>Cash flows from investing activities</b>		
Purchase of investments	(11,033,744)	(5,157,556)
Proceeds from sales of investments	9,424,432	5,285,806
Distributions to Morristown Division	<u>(1,385,219)</u>	<u>(8,717,299)</u>
Cash used in investing activities	<u>(2,994,531)</u>	<u>(8,589,049)</u>
<b>Cash flows from financing activities</b>		
Restricted contributions for capital	9,331,651	9,921,860
Restricted contributions for permanent investments	<u>1,437,136</u>	<u>722,891</u>
Cash provided by financing activities	<u>10,768,787</u>	<u>10,644,751</u>
Change in cash, cash equivalents and restricted cash	422,619	(774,171)
<b>Cash, cash equivalents and restricted cash</b>		
Beginning of year	<u>796,573</u>	<u>1,570,744</u>
End of year	<u>\$ 1,219,192</u>	<u>\$ 796,573</u>
<b>Supplemental disclosure of cash flow information</b>		
Contributed securities	\$ 3,199,760	\$ 2,370,533
Contributed real estate	\$ 9,000,000	-

The accompanying notes are an integral part of these financial statements.

# **Foundation for Morristown Medical Center**

## **Notes to Financial Statements**

**December 31, 2024 and 2023**

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### **1. Organization**

The Foundation for Morristown Medical Center (the “Foundation”) is a not-for-profit fundraising organization which solicits funds in its general appeal to support both the Morristown Medical Center (the “Morristown Division”), which is a division of AHS Hospital Corp. (the “Hospital”), and the community as the Foundation’s Board may deem appropriate. The by-laws of the Foundation were amended on November 19, 2015, to provide that funds received by the Foundation after the date of the amendment may be used for the benefit of Atlantic Health System, Inc. (the “Parent”) and the Hospital upon approval of the Executive Committee of the Board of the Foundation. The Foundation is organized under the not-for-profit corporation law of the State of New Jersey and is exempt from the Federal income tax under Section 501(c)3 of the Internal Revenue Code.

### **2. Summary of Significant Accounting Policies**

The following is a summary of the Foundation's significant accounting policies:

#### **Basis of Accounting**

The financial statements have been prepared on the accrual basis of accounting, in conformity with accounting principles generally accepted in the United States of America (“GAAP”).

#### **Use of Estimates**

The preparation of financial statements in conformity with GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements, and the reported amounts of revenues and expenses during the reporting period. Significant estimates include the reserve for uncollectible pledges and valuation of investments. Actual results could differ from those estimates.

#### **Excess of Revenues over Expenses**

The statements of activities and changes in net assets include excess of revenues over expenses. Changes in net assets which are excluded from excess of revenues over expenses include net assets released from restrictions used for capital, and distributions to Morristown Division - capital.

The Foundation differentiates its operating activities through the use of operating income (loss) as an intermediate measure of operations. For the purposes of display, beneficial interest in charitable remainder unitrusts and change in net unrealized gains (losses), which management does not consider being a component of the Foundation's operating activities, is excluded from operating income (loss) in the statements of activities and changes in net assets.

#### **Investments**

Investments principally consist of marketable equity securities with readily determinable fair values including money market funds which are measured at fair value in the statements of financial position. Investment income, including realized and unrealized gains and losses, interest income and dividends, and investment management fees, are included in excess of revenues over expenses.

#### **Retained Life Estate**

In 2024, the Foundation received a gift in the form of a life interest in real estate (for a residential property). Pursuant to the Term Endowment Agreement, the donors designated the life estate as a term endowment for the benefit of Morristown Medical Center. Further, the donors transferred ownership of the real estate to the Foundation while retaining the right to use and occupy the

# **Foundation for Morristown Medical Center**

## **Notes to Financial Statements**

**December 31, 2024 and 2023**

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property for the remainder of their joint lifetimes. Upon termination of the life estate and sale of the property, the proceeds shall be held, administered, and distributed to the Foundation pursuant to the Term Endowment Agreement.

The Foundation recorded the life interest in the real estate at fair value at the contribution date in accordance with Financial Accounting Standards Board ("FASB") Accounting Standards Codification ("ASC") 958-605, *Not-for-profit Entities, Revenue Recognition*, within contributions with donor restrictions on the statement of activities and changes in net assets during the year ended December 31, 2024. The Foundation recorded \$5,172,413 for the contribution, which represents the estimated net present value of the retained life estate at the contribution date.

The real estate was valued at \$9,000,000 and recorded as an investment on the statement of financial position at December 31, 2024. Additionally, The Foundation has also recorded a life interest obligation of \$3,827,587 on the statement of financial position, which represents the estimated net present value of the expected future benefit to be realized by the donors over their remaining lifetime. The obligation will be adjusted periodically, but at least annually, based on changes in actuarial assumptions and will be fully extinguished upon the termination of the life estate.

### **Pledges Receivable**

Contributions, including unconditional promises to give ("pledges"), are reported as revenues in the period received or pledged.

Conditional promises to give are not recognized until they become unconditional, that is, when both the barrier to entitlement and the refund of amounts paid (or a release from obligation to make future payments) have been substantially met. Conditional contributions received, where the barrier to entitlement is not yet overcome, are recorded as deferred revenue.

Contributions of assets other than cash are recorded at their estimated fair value at the date of receipt if the Foundation received certain goods and services that meet criteria under GAAP for recognition as contributions. Contributions of property and equipment are recorded as increases in net assets without donor restrictions unless the donor places restrictions on their use. Pledges not expected to be received within one year are discounted at a risk-adjusted rate that includes a premium for credit risk, if any. In addition, provisions for uncollectible contribution receivables have been recorded at the amount necessary to reduce pledges receivable to its estimated realizable value.

### **Other Assets**

Other assets primarily includes restricted cash, which consists of cash held on behalf of the Women's Association of Morristown Medical Center at December 31, 2024 and 2023.

### **Restricted Cash**

The following table provides a reconciliation of restricted cash reported within the statements of financial position that total to the amounts shown in the of cash flows for each of the years:

	<b>2024</b>	<b>2023</b>
Other assets	\$ 1,219,192	\$ 796,573

Cash and cash equivalents include highly liquid short-term investments with original maturities of three months or less from the date of acquisition. The Foundation elected to treat highly liquid

# **Foundation for Morristown Medical Center**

## **Notes to Financial Statements**

**December 31, 2024 and 2023**

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short-term investments held within its investments financial statement line item as investments, and therefore exclude them from cash, cash equivalents and restricted cash in the statements of cash flows.

### **Beneficial Interest in Planned Gifts**

In 2024, the Foundation was designated as the sole irrevocable beneficiary of an Individual Retirement Account (IRA) distribution. Upon the donor's death, the funds will be distributed to the Foundation in accordance with the gift agreement. The donor has designated the gift in support of pediatric palliative care. The Foundation's interest in the IRA is recorded in the statements of financial position at \$206,431 as of December 31, 2024. On an annual basis, the Foundation shall revalue and record the estimated present value, discounted based on expected timing of receipt.

In 2022, the Foundation became a 25% beneficiary of an irrevocable charitable remainder unitrust administered by a third party. The donor has designated the remainder unitrust in support of the Joint Faculty Nurse Educator Program at Morristown Medical Center. The charitable remainder unitrust provides for the payment of distributions to the grantor or other designated beneficiaries over the trust's term (over the benefactor's lifetime). Upon the termination of annuity payments to the grantor, the Foundation will receive its respective remaining share of principal and income from the trust. The Foundation's interest in the trust is recorded in the statements of financial position at \$350,696 and \$324,365 as of December 31, 2024 and 2023, respectively. On an annual basis, the Foundation revalues the remainder unitrust based on a fixed payout rate over the estimated life of the benefactors, and accordingly, recognized \$26,331 and \$23,515 in net assets with donor restriction beneficial interest for the years ended December 31, 2024 and 2023, respectively.

In 2013, the Foundation became the sole beneficiary of an irrevocable charitable remainder unitrust administered by a third party. The donor has designated the remainder unitrust as a permanent endowment for the benefit of the emergency department at the Morristown Division. The charitable remainder unitrust provides for the payment of distributions to the grantor or other designated beneficiaries over the trust's term (over the benefactor's lifetime). Upon the termination of annuity payments to the grantor, the Foundation will receive its respective remaining share of principal and income from the trust. The Foundation's interest in the trust is recorded in the statements of financial position at \$2,076,385 and \$1,884,143 as of December 31, 2024 and 2023, respectively. On an annual basis, the Foundation revalues the remainder unitrust based on a fixed payout rate over the estimated life of the benefactors, and accordingly, recognized \$192,242 and \$142,891 in net assets with donor restriction beneficial interest for the periods ended December 31, 2024 and 2023, respectively.

### **Charitable Gift Annuities**

The Foundation has entered into certain agreements with donors which consist primarily of charitable gift annuities for which the Foundation serves as trustee. Within the investment portfolio, assets associated with the charitable gift annuities amounted to \$4,029,355 and \$4,260,417 at December 31, 2024 and 2023, respectively. Contributions related to these charitable gift annuities, net of related liabilities, increase net assets with donor restriction. Liabilities associated with charitable gift annuities represent the present value of the expected payments to the beneficiaries based on the terms of the agreements. At December 31, 2024 and 2023, there were liabilities of \$1,846,186 and \$1,928,886, respectively, on the statements of financial position.

### **Net Assets with Donor Restrictions**

Net assets with donor restrictions are those funds whose use by the Foundation has been limited by donors to a specific time period and/or purpose. Once the restrictions are satisfied, or have been deemed to have been satisfied, those assets with donor restrictions are released from

# **Foundation for Morristown Medical Center**

## **Notes to Financial Statements**

**December 31, 2024 and 2023**

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restrictions. Net assets that have been restricted by donors to be maintained by the Foundation in perpetuity will remain classified as net assets with donor restrictions.

Net assets associated with endowment funds are classified and reported based on the existence or absence of donor-imposed restrictions. Management of the Foundation has interpreted the State of New Jersey's enacted version of the Uniform Prudent Management of Institutional Funds Act ("UPMIFA") as requiring the preservation of the historic dollar value of donor-restricted endowment funds (absent explicit donor stipulations to the contrary). Historic dollar value is defined as the aggregate fair value in dollars of: (i) an endowment fund at the time it became an endowment, (ii) each subsequent donation to the fund at the time it is made, and (iii) each accumulation made pursuant to a direction in the applicable gift instrument at the time the accumulation is added to the fund. Based on this interpretation, the Foundation classifies as net assets with donor restrictions: (a) the original value of gifts donated to the restricted net assets, (b) the original value of subsequent gifts to the permanent endowment, (c) the net realizable value of future payments to restricted net assets in accordance with the donor's gift instrument (outstanding endowment pledges net of applicable discount), and (d) appreciation (depreciation), gains (losses) and income earned on the fund when the donor states that such increases or decreases are to be treated as changes in net assets with donor restriction. The remaining portions of the donor-restricted endowment fund that is not classified in net assets with donor restriction in perpetuity is classified as net assets with donor restriction until those amounts are appropriated for expenditure by the Foundation in a manner consistent with the standard of prudence prescribed by UPMIFA.

In accordance with UPMIFA, the Foundation considers the following factors in making a determination to appropriate or accumulate donor-restricted endowment funds:

- The duration and preservation of the fund;
- The purpose of the organization and the donor-restricted endowment fund;
- General economic conditions;
- The possible effect of inflation and deflation;
- The expected total return from income and the appreciation of investments;
- Other resources of the Foundation; and
- The investment policies of the Foundation.

The Foundation has an endowment spending policy that governs distributions each year to 5% of its endowment fund's average fair value over the prior 12 quarters through the calendar year end preceding the fiscal year in which the distribution is planned. In establishing this policy, the Foundation considered the long-term expected return on its endowment. This is consistent with the Foundation's objective to maintain the purchasing power of the endowment assets held in perpetuity or for a specified term as well as to provide additional real growth through new gifts and investment return. This method also compensates for any volatile year-to-year fluctuation in investment returns. The effective distribution rate under the endowment spending policy was equal to 4.0%, or \$2,709,461 and \$2,645,242, for each of the years ended December 31, 2024 and 2023, respectively. The Foundation records the appropriation of endowment assets for expenditure within net assets released from restriction on the statements of activities and changes in net assets.

# **Foundation for Morristown Medical Center**

## **Notes to Financial Statements**

**December 31, 2024 and 2023**

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Management further understands that expenditures from a donor-restricted fund is limited to the uses and purposes for which the endowment fund is established and the use of net appreciation, realized gains (with respect to all assets) and unrealized gains (with respect only to readily marketable assets) is limited to the extent that the fair value of a donor-restricted fund exceeds the historic dollar value of the fund (unless the applicable gift instrument indicates that net appreciation shall not be expended), to the extent that such expenditure is prudent, considering the long and short term needs of the Foundation in carrying out its purposes, its present and anticipated financial requirements, expected total return on its investments and general economic conditions. Under the policies established and approved by the Foundation's Investment Subcommittee, donor-restricted endowment funds are invested in income-generating investment vehicles to generate appreciation and preserve capital.

Unconditional promises to give cash and other assets are reported at fair value at the date the promise is received. The gifts are reported as net assets with donor restrictions if they are received with donor stipulations that limit the use of the donated assets. When a donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, net assets with donor restriction are reclassified as net assets without donor restriction and reported in the statements of activities and changes in net assets as net assets released from restrictions.

### **Fair Value Measurements**

FASB ASC 820, *Fair Value Measurements*, establishes a framework for measuring fair value under GAAP and enhances disclosures about fair value measurements. Fair value is defined as the exchange price that would be received for an asset or paid to transfer a liability (an exit price) in the principal or most advantageous market for the asset or liability in an orderly transaction between market participants on the measurement date. Fair value requires an organization to determine the unit of account, the mechanism of hypothetical transfer, and the appropriate markets for the asset or liability being measured.

ASC 820 establishes a hierarchy of valuation inputs based on the extent to which the inputs are observable in the marketplace. Observable inputs reflect market data obtained from sources independent of the reporting entity and unobservable inputs reflect the entities own assumptions about how market participants would value an asset or liability based on the best information available. Valuation techniques used to measure fair value must maximize the use of observable inputs and minimize the use of unobservable inputs. The guidance describes a fair value hierarchy based on three levels of inputs, of which the first two are considered observable and the last unobservable, that may be used to measure fair value.

The following describes the hierarchy of inputs used to measure fair value and the primary valuation methodologies used by the Foundation for financial instruments measured at fair value on a recurring basis. Alternative investments are not considered leveled investments and are treated similar to cash. The three levels of inputs are as follows:

- Level 1    Quoted market prices in active markets for identical assets or liabilities. Level 1 assets consist of short-term investments, including money market funds and common stock, as they are traded in an active market with sufficient volume and frequency of transactions.
- Level 2    Quoted prices in active markets for similar assets or liabilities, unadjusted quoted prices for identical or similar assets or liabilities in markets that are not active, or inputs other than quoted prices that are observable for the asset or liability. Level 2 assets consist of money market funds and mutual funds that are nonexchange trade and valued based on net asset values (NAVs) calculated by the funds' independent administrators which are

# **Foundation for Morristown Medical Center**

## **Notes to Financial Statements**

**December 31, 2024 and 2023**

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calculated at least daily. These valuations are readily observable in the market place or are supported by observable levels at which transactions are executed in the marketplace. As Level 2 investments include positions that are not traded in active markets and/or are subject to transfer restrictions, valuations may be adjusted to reflect illiquidity and / or nontransferability, which are generally based on available market information. Redemptions from each of the funds can be made at least daily on the latest reported NAV.

- Level 3** Unobservable inputs for the asset or liability that are supported by little or no market activity and that are significant to the fair value. Level 3 assets consist of beneficial interests in perpetual trusts held by third parties, primarily invested in equities and fixed income securities.

For investments in alternative investments, fair value is measured based on unobservable inputs that cannot be corroborated by observable market data where the Foundation does not exert significant influence to cover the waterfall concern. The Foundation accounts for these investments within its long-term investment portfolio using the NAV as a practical expedient, and as such these investments are excluded from the fair value hierarchy.

Assets and liabilities measured at fair value are based on one or more of three valuation techniques. The three valuation techniques are as follows:

Market Approach (M) - Prices and other relevant information generated by market transactions involving identical or comparable assets or liabilities;

Cost Approach (C) - Amount that would be required to replace the service capacity of an asset (i.e., replacement cost); and

Income Approach (I) - Techniques to convert future amounts to a single present amount based on market expectations (including present value techniques, option-pricing models, and lattice models).

A financial instrument's categorization within the valuation hierarchy is based upon the lowest level of input that is significant to the fair value measurement. Inputs are used in applying the various valuation techniques and broadly refer to the assumptions the market participants use to make valuation decisions. Inputs may include price information, credit data, liquidity statistics and other factors.

The Foundation utilized the best available information in measuring fair value (Note 5).

### **3. Liquidity and Availability of Resources**

The Foundation's financial assets available within one year of December 31, 2024 and 2023 for general expenditures are as follows:

	<b>2024</b>	<b>2023</b>
Investments	\$ 26,687,852	\$ 22,633,903
Other assets	<u>79,038</u>	<u>80,488</u>
	<u><b>\$ 26,766,890</b></u>	<u><b>\$ 22,714,391</b></u>

# **Foundation for Morristown Medical Center**

## **Notes to Financial Statements**

**December 31, 2024 and 2023**

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Management monitors the Foundation's cash flow on a regular basis. If needed, short-term investments are available and can be liquidated in order to meet financial needs.

In addition to its investments held by the Hospital, the Foundation shares an operating bank account with the Morristown Division. Activity related to the operating account is reflected on the statement of financial position as of December 31, 2024 and 2023 as due from Morristown Division, in the amount of \$108,243,264 and \$101,656,706, respectively, of which \$32,541,699 and \$28,274,306 are without restriction and are available upon request by the Foundation but are held by the Morristown Division for administrative purposes and to optimize investment performance. Such requests to transfer assets from the Morristown Division to the Foundation may be subject to the approval by the Board of Trustees of the Morristown Division.

The majority of the current portion of pledges receivable, net, at December 31, 2024 and 2023 (Note 6), are made up of contributions with donor restrictions. These restricted pledges are primarily used to support program services as reported on the statements of activities and changes in net assets.

### **4. Related-Party Transactions**

Accounts payable due to the Morristown Division arise from expenses incurred by the Foundation which are paid by the Morristown Division. The Morristown Division pays all expenses on behalf of the Foundation and is subsequently reimbursed by the Foundation. Distributions to the Morristown Division for capital are recorded as equity transfers on the statements of activities and changes in net assets.

At December 31, 2024 and 2023, for cash management purposes, the Foundation's cash is held at the Morristown Division and the Foundation correspondingly recognizes these amounts as part of due from Morristown Division in the statements of financial position, as is noted in Note 3 above.

### **5. Investments**

Investments at fair value at December 31, 2024 and 2023 consist of the following:

	<b>Market</b>	
	<b>2024</b>	<b>2023</b>
Money market funds	\$ 4,702,498	\$ 3,127,548
Mutual funds	77,641,602	74,815,861
Alternative investments-equity	7,946,209	3,497,407
Life interest in real estate	<u>9,000,000</u>	-
	<u>\$ 99,290,309</u>	<u>\$ 81,440,816</u>

# Foundation for Morristown Medical Center

## Notes to Financial Statements

December 31, 2024 and 2023

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The fair value of the Foundation's financial assets that are measured on a recurring basis at December 31, 2024 and 2023 are as follows:

	Based on					
	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)	Fair Value December 31, 2024	at 31, 2024	Valuation Technique (1)
<b>2024</b>						
Money market funds	\$ 4,702,498	\$ -	\$ -	\$ 4,702,498		M
Mutual funds	-	77,641,602	-	77,641,602		M
Life interest in real estate	-	-	9,000,000	9,000,000		M
	<u>\$ 4,702,498</u>	<u>\$ 77,641,602</u>	<u>\$ 9,000,000</u>	<u>91,344,100</u>		
Investments measured at NAV as practical expedient					7,946,209	
Total investments					<u>7,946,209</u>	
					<u>\$ 99,290,309</u>	
<b>2023</b>						
Money market funds	\$ 3,127,548	\$ -	\$ -	\$ 3,127,548		M
Mutual funds	-	74,815,861	-	74,815,861		M
	<u>\$ 3,127,548</u>	<u>\$ 74,815,861</u>	<u>\$ -</u>	<u>77,943,409</u>		
Investments measured at NAV as practical expedient					3,497,407	
Total investments					<u>3,497,407</u>	
					<u>\$ 81,440,816</u>	

(1) The three valuation techniques are market approach (M), cost approach (C), and income approach (I), as discussed in Note 2.

## 6. Pledges Receivable

Pledges receivable, net consists of the following as of December 31, 2024 and 2023:

	2024	2023
<b>Amounts expected to be collected in</b>		
Less than one year	\$ 8,224,272	\$ 6,829,092
One to five years	10,581,366	8,352,770
More than five years	<u>550,000</u>	<u>975,000</u>
	19,355,638	16,156,862
Discount to present value of future cash flows (at a rate of 4.38% and 3.84% for pledges made in 2024 and 2023, respectively)	1,728,289	1,407,115
Reserve for uncollectible amounts	<u>967,782</u>	<u>807,843</u>
Total pledges receivable, net	<u>\$ 16,659,567</u>	<u>\$ 13,941,904</u>

# **Foundation for Morristown Medical Center**

## **Notes to Financial Statements**

**December 31, 2024 and 2023**

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### **7. Net Assets with Donor Restrictions and Endowment Funds**

Net assets with donor restrictions consist of the following:

	<b>December 31,</b>	
	<b>2024</b>	<b>2023</b>
Research	\$ 9,745,846	\$ 9,721,432
Purchase of plant and equipment	4,707,257	4,157,844
Scholarships and education	5,055,647	4,895,180
Program services	<u>96,064,904</u>	<u>83,805,623</u>
Net assets with donor restrictions for specified purposes	115,573,654	102,580,079
Net assets with donor restrictions for permanent endowments	<u>45,690,546</u>	<u>43,295,986</u>
Total net assets with donor restrictions	<u>\$ 161,264,200</u>	<u>\$ 145,876,065</u>

Net assets with donor restrictions for permanent endowments in the table above includes both the original gift amounts within the endowment as well as pledges receivable for permanent endowment. To the extent that earnings on donor restricted-endowments have not yet been appropriated for spending under the Foundation's policy, these amounts are classified in the table above according to the purpose for which the donors have designated the earnings are to be spent.

The Foundation's donor-restricted endowment consists of individual funds established for a variety of purposes. The Foundation classifies as net assets with donor restrictions: (a) the original value of contributions donated to the permanent endowment, (b) the original value of subsequent contributions to the permanent endowment, (c) accumulations to the permanent endowment required by the applicable donor gift instrument and (d) appreciation related to donor-restricted endowment funds. When appreciation is appropriated for expenditure and utilized, those amounts are reclassified to net assets without donor restrictions through net assets released from restriction on the statements of activities and changes in net assets.

Changes in endowment funds for the fiscal years ended December 31, 2024 and 2023 were as follows:

	<b>2024</b>	<b>2023</b>
<b>Endowment net assets with donor restriction at beginning of year</b>	\$ 56,796,945	\$ 51,932,659
Investment income	5,980,688	6,786,637
Contributions	1,437,137	722,891
Appropriation of endowment assets for expenditure	<u>(2,709,461)</u>	<u>(2,645,242)</u>
<b>Endowment net assets with donor restriction at end of year</b>	<u>\$ 61,505,309</u>	<u>\$ 56,796,945</u>

# **Foundation for Morristown Medical Center**

## **Notes to Financial Statements**

**December 31, 2024 and 2023**

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During 2024 and 2023, net assets were released from donor restrictions by incurring expenses satisfying the restricted purpose of purchasing equipment in the amounts of \$11,391,774 and \$8,094,472, respectively, and other noncapital purposes in the amounts of \$10,564,268 and \$7,252,320, respectively.

### **8. Commitments and Contingencies**

The Foundation, from time to time, may be involved in various claims and legal actions arising in the ordinary course of business. In the opinion of management, there are no such known claims that could have a material adverse effect on the financial position of the Foundation.

### **9. Functional Expenses**

The financial statements report certain expense categories that are attributable to both program services and management and general functions. Therefore, the natural expenses require allocation on a reasonable basis that is consistently applied, across functional expense category. Salaries are allocated based on a percent-to-total of program salaries and management and general salaries to the applicable total expense categories. Costs not directly attributable to a function, including program services expenses spent in line with donor restrictions, are allocated to a function based on the same allocation rates as salaries.

Total expenses related to providing both program services and general and administrative functions at December 31, 2024 and 2023 are as follows:

Natural Expense Categories	2024		
	Program Services	General and Administrative	Total
Salaries	\$ 7,576,228	\$ 3,431,033	\$ 11,007,261
Supplies and other expenses	3,191,505	1,778,371	4,969,876
Employee benefits	-	791,377	791,377
	<u>\$ 10,767,733</u>	<u>\$ 6,000,781</u>	<u>\$ 16,768,514</u>

Natural Expense Categories	2023		
	Program Services	General and Administrative	Total
Salaries	\$ 4,467,935	\$ 3,174,421	\$ 7,642,356
Supplies and other expenses	3,281,285	1,722,084	5,003,369
Employee benefits	-	744,522	744,522
	<u>\$ 7,749,220</u>	<u>\$ 5,641,027</u>	<u>\$ 13,390,247</u>

# **Foundation for Morristown Medical Center**

## **Notes to Financial Statements**

**December 31, 2024 and 2023**

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### **10. Disclosure of Fair Value of Financial Instruments**

The Foundation currently has no other financial instruments subject to fair value measurement on a recurring basis. For other assets, accounts payable due to Morristown Division and annuities payable the net carrying value of these items approximates their fair value.

### **11. Subsequent Events**

Subsequent events have been evaluated through April 11, 2025, which is the date the financial statements were available to be issued.

**Caution:** Forms printed from within Adobe Acrobat may not meet IRS or state taxing agency specifications.  
When using Acrobat, select the "Actual Size" in the Adobe "Print" dialog.

CLIENT'S COPY

## Filing Instructions

Prepared for:	Prepared by:
Foundation for Morristown Medical Ce 475 South Street Morristown, NJ 07960	Ernst & Young U.S. LLP 1 Manhattan West New York, NY 10001

2023 FORM 990

### Electronic Filing:

This return has been prepared for electronic filing. If you wish to have it transmitted electronically to the IRS, please sign, date, and return Form 8453-TE to our office. We will then submit the electronic return to the IRS. Do not mail a paper copy of the return to the IRS.

2023 FORM 990-T

This return has been prepared for electronic filing. If you wish to have it transmitted electronically to the IRS, please sign, date, and return Form 8453-TE to our office. We will then submit the electronic return to the IRS. Do not mail a paper copy of the return to the IRS.

No amount is due on Form 990-T.

# Tax Exempt Entity Declaration and Signature for E-file

OMB No. 1545-0047

Department of the Treasury  
Internal Revenue Service

For calendar year 2023, or tax year beginning \_\_\_\_\_, 2023,

and ending \_\_\_\_\_, 20\_\_\_\_\_

For use with Forms 990, 990-EZ, 990-PF, 990-T, 1120-POL, 4720, 8868, 5227, 5330, and 8038-CP

Go to [www.irs.gov/Form8453TE](http://www.irs.gov/Form8453TE) for the latest information.**2023**

Name of filer

**Foundation for Morristown Medical Center****EIN or SSN**  
**22-3392808****Part I Type of Return and Return Information**

Check the box for the type of return being filed with Form 8453-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line of the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). If you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a <input checked="" type="checkbox"/> Form 990 check here	b Total revenue, if any (Form 990, Part VIII, column (A), line 12) .....	1b <b>28,600,440.</b>
2a <input type="checkbox"/> Form 990-EZ check here	b Total revenue, if any (Form 990-EZ, line 9) .....	2b _____
3a <input type="checkbox"/> Form 1120-POL check here	b Total tax (Form 1120-POL, line 22) .....	3b _____
4a <input type="checkbox"/> Form 990-PF check here	b Tax based on investment income (Form 990-PF, Part V, line 5) .....	4b _____
5a <input type="checkbox"/> Form 8868 check here	b Balance due (Form 8868, line 3c) .....	5b _____
6a <input type="checkbox"/> Form 990-T check here	b Total tax (Form 990-T, Part III, line 4) .....	6b _____
7a <input type="checkbox"/> Form 4720 check here	b Total tax (Form 4720, Part III, line 1) .....	7b _____
8a <input type="checkbox"/> Form 5227 check here	b FMV of assets at end of tax year (Form 5227, Item D) .....	8b _____
9a <input type="checkbox"/> Form 5330 check here	b Tax due (Form 5330, Part II, line 19) .....	9b _____
10a <input type="checkbox"/> Form 8038-CP check here	b Amount of credit payment requested (Form 8038-CP, Part III, line 22) .....	10b _____

**Part II Declaration of Officer or Person Subject to Tax**

- 11a  I authorize the U.S. Treasury and its designated Financial Agent to initiate an Automated Clearing House (ACH) electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.
- b  If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/990-PF (as specifically identified in Part I above) to the selected state agency(ies).

Under penalties of perjury, I declare that  I am an officer of the above named entity or  I am the person subject to tax with respect to

(name of entity)

(EIN)

and that I have examined a copy of the 2023 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund.

**Sign Here** \_\_\_\_\_ **SVP, CFO** \_\_\_\_\_  
 Signature of officer or person subject to tax Date Title, if applicable

**Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)**

I declare that I have reviewed the above return and that the entries on Form 8453-TE are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The entity officer or person subject to tax will have signed this form before I submit the return. I will give a copy of all forms and information to be filed with the IRS to the officer or person subject to tax, and have followed all other requirements in Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-File Providers for Business Returns. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

<b>ERO's Use Only</b>	ERO's signature	Date	Check if also paid preparer <input type="checkbox"/>	Check if self-employed <input type="checkbox"/>	ERO's SSN or PTIN
	Firm's name (or yours if self-employed), address, and ZIP code	Kenneth Butkowski 475 South Street Morristown, NJ 07960			P01470565
					EIN
					Phone no. 9734512005

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	Nicole Sokolowski				P01683199
	Firm's name	Ernst & Young U.S. LLP			Firm's EIN 34-6565596
	Firm's address	1 Manhattan West, New York, NY 10001			Phone no. 212-773-3000

For Privacy Act and Paperwork Reduction Act Notice, see back of form.

Form 8453-TE (2023)

Form 990

## Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2023

Department of the Treasury  
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.Open to Public  
Inspection

A For the 2023 calendar year, or tax year beginning \_\_\_\_\_ and ending \_\_\_\_\_

B Check if applicable:	C Name of organization <b>Foundation for Morristown Medical Center</b>		D Employer identification number <b>22-3392808</b>
<input type="checkbox"/> Address change	Doing business as		E Telephone number <b>973-593-2400</b>
<input type="checkbox"/> Name change	Number and street (or P.O. box if mail is not delivered to street address) <b>475 South Street</b>	Room/suite	G Gross receipts \$ <b>28,895,726.</b>
<input type="checkbox"/> Initial return	City or town, state or province, country, and ZIP or foreign postal code <b>Morristown, NJ 07960</b>		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Final return/terminated	F Name and address of principal officer: <b>Michael Walter same as C above</b>		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Amended return	I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		If "No," attach a list. See instructions
<input type="checkbox"/> Application pending	J Website: <a href="http://www.f4mmc.org">www.f4mmc.org</a>		H(c) Group exemption number
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of formation: <b>1995</b> M State of legal domicile: <b>NJ</b>	

## Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <b>Refer to Schedule O</b>		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a) .....	<b>3</b>	<b>37</b>
	4 Number of independent voting members of the governing body (Part VI, line 1b) .....	<b>4</b>	<b>31</b>
	5 Total number of individuals employed in calendar year 2023 (Part V, line 2a) .....	<b>5</b>	<b>0</b>
	6 Total number of volunteers (estimate if necessary) .....	<b>6</b>	<b>150</b>
	7a Total unrelated business revenue from Part VIII, column (C), line 12 .....	<b>7a</b>	<b>95.</b>
b Net unrelated business taxable income from Form 990-T, Part I, line 11 .....	<b>7b</b>	<b>0.</b>	
Revenue	8 Contributions and grants (Part VIII, line 1h) .....	<b>Prior Year</b>	<b>Current Year</b>
	9 Program service revenue (Part VIII, line 2g) .....	<b>29,657,009.</b>	<b>24,023,782.</b>
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) .....	<b>0.</b>	<b>0.</b>
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) .....	<b>2,504,815.</b>	<b>4,610,967.</b>
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) .....	<b>-7,033.</b>	<b>-34,309.</b>
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) .....	<b>32,154,791.</b>	<b>28,600,440.</b>
	14 Benefits paid to or for members (Part IX, column (A), line 4) .....	<b>0.</b>	<b>8,094,472.</b>
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) .....	<b>0.</b>	<b>0.</b>
	16a Professional fundraising fees (Part IX, column (A), line 11e) .....	<b>7,364,546.</b>	<b>8,386,877.</b>
	b Total fundraising expenses (Part IX, column (D), line 25) .....	<b>475,401.</b>	<b>353,311.</b>
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) .....	<b>5,398,605.</b>	<b>4,459,938.</b>
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) .....	<b>13,238,552.</b>	<b>21,294,598.</b>
Net Assets or Fund Balances	19 Revenue less expenses. Subtract line 18 from line 12 .....	<b>18,916,239.</b>	<b>7,305,842.</b>
	20 Total assets (Part X, line 16) .....	<b>Beginning of Current Year</b>	<b>End of Year</b>
	21 Total liabilities (Part X, line 26) .....	<b>173,976,621.</b>	<b>200,857,010.</b>
	22 Net assets or fund balances. Subtract line 21 from line 20 .....	<b>4,703,090.</b>	<b>4,746,690.</b>
	<b>169,273,531.</b>	<b>196,110,320.</b>	

## Part II Signature Block

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

Sign Here	Signature of officer <b>Michael Walter, SVP, CFO</b>		Date
	Type or print name and title		
Paid Preparer	Print/Type preparer's name <b>Nicole Sokolowski</b>	Preparer's signature <b>Nicole Sokolowski</b>	Date Check <input type="checkbox"/> if self-employed <b>PTIN P01683199</b>
	Firm's name <b>Ernst &amp; Young U.S. LLP</b>	Firm's EIN <b>34-6565596</b>	
Use Only	Firm's address <b>1 Manhattan West New York, NY 10001</b>	Phone no. <b>212-773-3000</b>	

May the IRS discuss this return with the preparer shown above? See instructions  Yes  No

LHA For Paperwork Reduction Act Notice, see the separate instructions. 332001 12-21-23

Form 990 (2023)

See Schedule O for Organization Mission Statement Continuation

### **Part III Statement of Program Service Accomplishments**

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

- |    |  |   |  |  |
|----|--|---|--|--|
| 1  | Briefly describe the organization's mission:   | <u>To inspire community philanthropy to advance exceptional health care for patients at Morristown Medical Center. The objective is to use philanthropy to preserve and expand the Medical Center's programs and services in patient care, clinical research, medical and public health</u> |  |  |
| 2  | Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |  |  |
|    | If "Yes," describe these new services on Schedule O.   |   |  |  |
| 3  | Did the organization cease conducting, or make significant changes in how it conducts, any program services?   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |  |  |
|    | If "Yes," describe these changes on Schedule O.  |   |  |  |
| 4  | Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.  |   |  |  |
| 4a | (Code: _____ ) (Expenses \$ <u>15,843,692.</u> including grants of \$ _____ ) (Revenue \$ _____ )<br>The Foundation for Morristown Medical Center (F4MMC) is a standalone foundation, which is a not-for-profit fundraising organization that solicits funds in its general appeal for the benefit and support of Atlantic Health System, Inc. and AHS Hospital Corporation (the Corporation), and all subsidiaries thereof. Morristown Medical Center is the principal recipient of the fundraising carried out by F4MMC. |   |  |  |
| 4b | (Code: _____ ) (Expenses \$ _____ including grants of \$ _____ ) (Revenue \$ _____ )   |   |  |  |
| 4c | (Code: _____ ) (Expenses \$ _____ including grants of \$ _____ ) (Revenue \$ _____ )   |   |  |  |
| 4d | Other program services (Describe on Schedule O.)<br>(Expenses \$ _____ including grants of \$ _____ ) (Revenue \$ _____ )  |   |  |  |
| 4e | Total program service expenses<br><u>15,843,692.</u>   |   |  |  |

**Part IV Checklist of Required Schedules**

	<b>Yes</b>	<b>No</b>
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors?</i> See instructions	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	X	
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	X	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>	X	
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	X	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	X	
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	X	
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	X	
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable. <ul style="list-style-type: none"> <li>a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i></li> <li>b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i></li> <li>c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i></li> <li>d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i></li> <li>e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i></li> <li>f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i></li> </ul>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	X	
14a Did the organization maintain an office, employees, or agents outside of the United States? <ul style="list-style-type: none"> <li>b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i></li> </ul>	X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	X	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	X	
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I. See instructions</i>	X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	X	
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	X	
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	X	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	

**Part IV Checklist of Required Schedules (continued)**

		<b>Yes</b>	<b>No</b>
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III .....	22	X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J .....	23	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a .....	24a	X
24b	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....	24b	
24c	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....	24c	
24d	d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....	24d	
25a	<b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I .....	25a	X
25b	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I .....	25b	X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II .....	26	X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III .....	27	X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
28a	a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV .....	28a	X
28b	b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV .....	28b	X
28c	c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV .....	28c	X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M .....	29	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M .....	30	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .....	31	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II .....	32	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I .....	33	X
34	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
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....	35a	X
35b	b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 .....	35b	X
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 .....	36	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI .....	37	X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O .....	38	X

**Part V Statements Regarding Other IRS Filings and Tax Compliance**Check if Schedule O contains a response or note to any line in this Part V 

		<b>Yes</b>	<b>No</b>
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable .....	1a	0
1b	b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable .....	1b	0
1c	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? .....	1c	

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

	Yes	No
<b>2a</b> 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 .....	<b>2a</b>	0
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .....	<b>2b</b>	
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year? .....	<b>3a</b>	<input checked="" type="checkbox"/>
<b>b</b> If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i> .....	<b>3b</b>	
<b>4a</b> At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? .....	<b>4a</b>	<input checked="" type="checkbox"/>
<b>b</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). .....		
<b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? .....	<b>5a</b>	<input checked="" type="checkbox"/>
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? .....	<b>5b</b>	<input checked="" type="checkbox"/>
<b>c</b> If "Yes" to line 5a or 5b, did the organization file Form 8886-T? .....	<b>5c</b>	
<b>6a</b> 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? .....	<b>6a</b>	<input checked="" type="checkbox"/>
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? .....		
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b> 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? .....	<b>7a</b>	<input checked="" type="checkbox"/>
<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided? .....	<b>7b</b>	<input checked="" type="checkbox"/>
<b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? .....	<b>7c</b>	<input checked="" type="checkbox"/>
<b>d</b> If "Yes," indicate the number of Forms 8282 filed during the year .....	<b>7d</b>	
<b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? .....	<b>7e</b>	<input checked="" type="checkbox"/>
<b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .....	<b>7f</b>	<input checked="" type="checkbox"/>
<b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? .....	<b>7g</b>	
<b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? .....	<b>7h</b>	
<b>8 Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? .....	<b>8</b>	
<b>9 Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b> Did the sponsoring organization make any taxable distributions under section 4966? .....	<b>9a</b>	
<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? .....	<b>9b</b>	
<b>10 Section 501(c)(7) organizations.</b> Enter:		
<b>a</b> Initiation fees and capital contributions included on Part VIII, line 12 .....	<b>10a</b>	
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities .....	<b>10b</b>	
<b>11 Section 501(c)(12) organizations.</b> Enter:		
<b>a</b> Gross income from members or shareholders .....	<b>11a</b>	
<b>b</b> Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) .....	<b>11b</b>	
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041? .....	<b>12a</b>	
<b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year .....	<b>12b</b>	
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b> Is the organization licensed to issue qualified health plans in more than one state? .....		
<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.		
<b>b</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 .....	<b>13b</b>	
<b>c</b> Enter the amount of reserves on hand .....	<b>13c</b>	
<b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year? .....	<b>14a</b>	<input checked="" type="checkbox"/>
<b>b</b> If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i> .....	<b>14b</b>	
<b>15</b> Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? .....	<b>15</b>	<input checked="" type="checkbox"/>
If "Yes," see the instructions and file Form 4720, Schedule N.		
<b>16</b> Is the organization an educational institution subject to the section 4968 excise tax on net investment income? .....	<b>16</b>	<input checked="" type="checkbox"/>
If "Yes," complete Form 4720, Schedule O.		
<b>17 Section 501(c)(21) organizations.</b> Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? .....		
If "Yes," complete Form 6069.		

**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 on Schedule O. See instructions.

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

### Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year .....	37	
1b	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.	31	
b	Enter the number of voting members included on line 1a, above, who are independent .....		X
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? .....		
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? .....		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .....		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .....		X
6	Did the organization have members or stockholders? .....		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? .....		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? .....		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body? .....		
b	Each committee with authority to act on behalf of the governing body? .....		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O .....		X

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

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

### Section C. Disclosure

17	List the states with which a copy of this Form 990 is required to be filed	<b>NJ , NY , PA , FL</b>
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	
	<input type="checkbox"/> Own website <input checked="" type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain on Schedule O)	
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.	
20	State the name, address, and telephone number of the person who possesses the organization's books and records <b>Ken Butkowski - 973-451-2005</b>	
	<b>475 South Street, Morristown, NJ 07960</b>	

**Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**
 Check if Schedule O contains a response or note to any line in this Part VII ..... 
**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.

Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

See the instructions for the order in which to list the persons above.

 Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W-2/1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(1) Kevin Lenahan EVP-Chief Business & Strat	2.00	X	X				0.	6,754,515.	406,954.
	55.00								
(2) Patricia O'Keefe SVP, CNE/Pres. MMC	2.00	X	X				0.	1,781,450.	250,125.
	55.00								
(3) Eric Whitman, MD Trustee	2.00	X					0.	1,070,539.	50,002.
	55.00								
(4) Michael Walter SVP-Chief Financial Office	2.00		X				0.	971,184.	137,577.
	55.00								
(5) Robert Coyne Trustee	2.00	X					0.	908,415.	30,947.
	55.00								
(6) Jennifer Smith Chief Development Officer	55.00		X				0.	495,749.	33,581.
(7) Brenda Matti-Orozco, MD, FACP Trustee	2.00	X					0.	450,240.	30,899.
	55.00								
(8) Branee Fetherman Trustee	2.00	X					0.	424,391.	41,143.
	55.00								
(9) Keerti Sharma, MD Trustee	2.00	X					0.	340,929.	26,902.
	55.00								
(10) Cynthia W O'Donnell Director of Gift Planning	55.00		X				0.	228,665.	39,058.
(11) Andrew Cooke, Jr. Trustee	2.00	X					0.	0.	0.
(12) Anthony A Lombardo Trustee	2.00	X					0.	0.	0.
(13) Shawn Bennan Trustee	2.00	X					0.	0.	0.
(14) Kelly Frank Trustee-Treasurer	2.00	X	X				0.	0.	0.
(15) Kathy Christie Trustee	2.00	X					0.	0.	0.
(16) Chirag Patel Trustee	2.00	X					0.	0.	0.
(17) Christine Gilfillan Trustee	2.00	X					0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W-2/1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(18) David Taylor, MD Trustee	2.00	X					0.	0.	0.
(19) Glenn Yarnis Trustee	2.00	X					0.	0.	0.
(20) Meghan Lyon Trustee	2.00	X					0.	0.	0.
(21) J Peter Simon Trustee	2.00	X					0.	0.	0.
(22) John Jack Burke III Trustee	2.00	X					0.	0.	0.
(23) Monique Nelson Trustee	2.00	X					0.	0.	0.
(24) Juliet Patsalos-Fox Trustee	2.00	X					0.	0.	0.
(25) Carl Goldberg Trustee	2.00	X					0.	0.	0.
(26) Kelly Sturman Trustee	2.00	X					0.	0.	0.
<b>1b Subtotal</b>							0.	13,426,077.	1,047,188.
<b>c Total from continuation sheets to Part VII, Section A</b>							0.	0.	0.
<b>d Total (add lines 1b and 1c)</b>							0.	13,426,077.	1,047,188.
<b>2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization</b>									0

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

**Section B. Independent Contractors**

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

(A) Name and business address	NONE	(B) Description of services	(C) Compensation

- 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

0

See Part VII, Section A Continuation sheets

Form 990 (2023)

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

Total to Part VII, Section A, line 1c

**Part VIII****Statement of Revenue**Check if Schedule O contains a response or note to any line in this Part VIII 

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns .....	<b>1a</b>			
	<b>b</b> Membership dues .....	<b>1b</b> 10,000.			
	<b>c</b> Fundraising events .....	<b>1c</b> 295,650.			
	<b>d</b> Related organizations .....	<b>1d</b> 70,000.			
	<b>e</b> Government grants (contributions) .....	<b>1e</b>			
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above .....	<b>1f</b> 23,648,132.			
	<b>g</b> Noncash contributions included in lines 1a-1f .....	<b>1g</b> \$ 108,829.			
	<b>h Total.</b> Add lines 1a-1f .....		<b>24,023,782.</b>		
<b>Program Service Revenue</b>		<b>Business Code</b>			
	<b>2 a</b> .....				
	<b>b</b> .....				
	<b>c</b> .....				
	<b>d</b> .....				
	<b>e</b> .....				
	<b>f</b> All other program service revenue .....				
	<b>g Total.</b> Add lines 2a-2f .....				
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) .....		<b>4,321,501.</b>		<b>95.</b> <b>4,321,406.</b>
	<b>4</b> Income from investment of tax-exempt bond proceeds .....				
	<b>5</b> Royalties .....				
		(i) Real (ii) Personal			
	<b>6 a</b> Gross rents .....	<b>6a</b>			
	<b>b</b> Less: rental expenses .....	<b>6b</b>			
	<b>c</b> Rental income or (loss) .....	<b>6c</b>			
	<b>d</b> Net rental income or (loss) .....				
	<b>7 a</b> Gross amount from sales of assets other than inventory .....		(i) Securities (ii) Other		
		<b>7a</b> 392,673.			
	<b>b</b> Less: cost or other basis and sales expenses .....	<b>7b</b> 103,207.			
	<b>c</b> Gain or (loss) .....	<b>7c</b> 289,466.			
	<b>d</b> Net gain or (loss) .....			<b>289,466.</b>	<b>289,466.</b>
	<b>8 a</b> Gross income from fundraising events (not including \$ 295,650. of contributions reported on line 1c). See Part IV, line 18 .....		<b>8a</b> 127,450.		
	<b>b</b> Less: direct expenses .....	<b>8b</b> 190,121.			
	<b>c</b> Net income or (loss) from fundraising events .....			<b>-62,671.</b>	<b>-62,671.</b>
	<b>9 a</b> Gross income from gaming activities. See Part IV, line 19 .....		<b>9a</b> 30,320.		
	<b>b</b> Less: direct expenses .....	<b>9b</b> 1,958.			
	<b>c</b> Net income or (loss) from gaming activities .....			<b>28,362.</b>	<b>28,362.</b>
	<b>10 a</b> Gross sales of inventory, less returns and allowances .....		<b>10a</b>		
	<b>b</b> Less: cost of goods sold .....	<b>10b</b>			
	<b>c</b> Net income or (loss) from sales of inventory .....				
<b>Miscellaneous Revenue</b>		<b>Business Code</b>			
	<b>11 a</b> .....				
	<b>b</b> .....				
	<b>c</b> .....				
	<b>d</b> All other revenue .....				
	<b>e Total.</b> Add lines 11a-11d .....				
	<b>12 Total revenue.</b> See instructions .....		<b>28,600,440.</b>	<b>0.</b>	<b>95.</b> <b>4,576,563.</b>

**Part IX Statement of Functional Expenses**

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

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

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>	<b>(A) Total expenses</b>	<b>(B) Program service expenses</b>	<b>(C) Management and general expenses</b>	<b>(D) Fundraising expenses</b>
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 .....	8,094,472.	8,094,472.		
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, trustees, and key employees .....				
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .....	7,642,356.	4,467,935.	1,286,524.	1,887,897.
7 Other salaries and wages .....				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) .....				
9 Other employee benefits .....	744,521.		301,738.	442,783.
10 Payroll taxes .....				
11 Fees for services (nonemployees):				
a Management .....	14,820.		14,820.	
b Legal .....	24,000.		24,000.	
c Accounting .....				
d Lobbying .....	353,311.			353,311.
e Professional fundraising services. See Part IV, line 17 .....				
f Investment management fees .....				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	513,921.		513,921.	
12 Advertising and promotion .....	331,821.			331,821.
13 Office expenses .....	3,306,144.	3,281,285.	10,075.	14,784.
14 Information technology .....				
15 Royalties .....				
16 Occupancy .....	182,592.		182,592.	
17 Travel .....	57,637.		23,359.	34,278.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .....				
19 Conferences, conventions, and meetings .....	29,003.		11,754.	17,249.
20 Interest .....				
21 Payments to affiliates .....				
22 Depreciation, depletion, and amortization .....				
23 Insurance .....				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a _____				
b _____				
c _____				
d _____				
e All other expenses _____				
<b>25 Total functional expenses.</b> Add lines 1 through 24e	21,294,598.	15,843,692.	2,368,783.	3,082,123.
<b>26 Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	1 Cash - non-interest-bearing .....		1	
	2 Savings and temporary cash investments .....		2	
	3 Pledges and grants receivable, net .....	15,457,282.	3	13,941,904.
	4 Accounts receivable, net .....		4	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		6	
	7 Notes and loans receivable, net .....	82,823,166.	7	101,656,706.
	8 Inventories for sale or use .....		8	
	9 Prepaid expenses and deferred charges .....		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	10a		
	b Less: accumulated depreciation .....	10b		
	11 Investments - publicly traded securities .....	68,483,514.	11	77,943,409.
	12 Investments - other securities. See Part IV, line 11 .....	3,599,813.	12	3,497,407.
	13 Investments - program-related. See Part IV, line 11 .....		13	
	14 Intangible assets .....		14	
	15 Other assets. See Part IV, line 11 .....	3,612,846.	15	3,817,584.
	<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	<b>173,976,621.</b>	<b>16</b>	<b>200,857,010.</b>
<b>Liabilities</b>	17 Accounts payable and accrued expenses .....	2,667,058.	17	2,817,804.
	18 Grants payable .....		18	
	19 Deferred revenue .....		19	
	20 Tax-exempt bond liabilities .....		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D .....		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		22	
	23 Secured mortgages and notes payable to unrelated third parties .....		23	
	24 Unsecured notes and loans payable to unrelated third parties .....		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....	2,036,032.	25	1,928,886.
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	<b>4,703,090.</b>	<b>26</b>	<b>4,746,690.</b>
<b>Net Assets or Fund Balances</b>	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions .....	37,566,960.	27	50,234,255.
	28 Net assets with donor restrictions .....	131,706,571.	28	145,876,065.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds .....		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund .....		30	
	31 Retained earnings, endowment, accumulated income, or other funds .....		31	
	32 Total net assets or fund balances .....	169,273,531.	32	196,110,320.
	<b>33 Total liabilities and net assets/fund balances</b> .....	<b>173,976,621.</b>	<b>33</b>	<b>200,857,010.</b>

**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response or note to any line in this Part XI 

1 Total revenue (must equal Part VIII, column (A), line 12) .....	1	28,600,440.
2 Total expenses (must equal Part IX, column (A), line 25) .....	2	21,294,598.
3 Revenue less expenses. Subtract line 2 from line 1 .....	3	7,305,842.
4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) .....	4	169,273,531.
5 Net unrealized gains (losses) on investments .....	5	19,364,541.
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 on Schedule O) .....	9	166,406.
10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) .....	10	196,110,320.

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response or note to any line in this Part XII 

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
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 on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
2b Were the organization's financial statements audited by an independent accountant? .....	2b	X
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input checked="" type="checkbox"/> Both consolidated and separate basis		
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? .....	2c	X
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? .....	3a	X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits .....	3b	

Form 990 (2023)

**SCHEDULE A**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2023**

Open to Public  
Inspection

Name of the organization

Foundation for Morristown Medical Center

Employer identification number

22-3392808

**Part I Reason for Public Charity Status.** (All organizations must complete this part.) See instructions.

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

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

(I) Name of supported organization	(II) EIN	(III) Type of organization (described on lines 1-10 above (see instructions))	(IV) Is the organization listed in your governing document?		(V) Amount of monetary support (see instructions)	(VI) Amount of other support (see instructions)
			Yes	No		
<b>Total</b>						

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	20,125,139.	19,322,498.	24,250,715.	24,297,150.	24,023,782.	112,019,284.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
3 The value of services or facilities furnished by a governmental unit to the organization without charge .....						
4 <b>Total.</b> Add lines 1 through 3 .....	20,125,139.	19,322,498.	24,250,715.	24,297,150.	24,023,782.	112,019,284.
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) .....						5,402,382.
<b>6 Public support.</b> Subtract line 5 from line 4.						106,616,902.

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4 .....	20,125,139.	19,322,498.	24,250,715.	24,297,150.	24,023,782.	112,019,284.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....	7,704,855.	6,456,681.	7,052,367.	2,755,455.	4,321,501.	28,290,859.
9 Net income from unrelated business activities, whether or not the business is regularly carried on .....	8,148.	215.	6,969.	2,784.	95.	18,211.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>11 Total support.</b> Add lines 7 through 10						140,328,354.
<b>12 Gross receipts from related activities, etc. (see instructions)</b> .....					12	
<b>13 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f)) .....	14	75.98	%
15 Public support percentage from 2022 Schedule A, Part II, line 14 .....	15	75.63	%
<b>16a 33 1/3% support test - 2023.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization .....			
<input checked="" type="checkbox"/>			
<b>b 33 1/3% support test - 2022.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization .....			
<input type="checkbox"/>			
<b>17a 10% -facts-and-circumstances test - 2023.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here</b> . Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....			
<input type="checkbox"/>			
<b>b 10% -facts-and-circumstances test - 2022.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here</b> . Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....			
<input type="checkbox"/>			
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....			<input type="checkbox"/>

Schedule A (Form 990) 2023

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose .....						
3 Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
5 The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</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 .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						
<b>14 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f)) .....	15	%
16 Public support percentage from 2022 Schedule A, Part III, line 15 .....	16	%

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f)) .....	17	%
18 Investment income percentage from 2022 Schedule A, Part III, line 17 .....	18	%
<b>19a 33 1/3% support tests - 2023.</b> If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization .....		
<b>b 33 1/3% support tests - 2022.</b> If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization .....		
<b>20 Private foundation.</b> If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions .....		

**Part IV Supporting Organizations**

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

	<b>Yes</b>	<b>No</b>
<b>1</b>		
<b>2</b>		
<b>3a</b>		
<b>3b</b>		
<b>3c</b>		
<b>4a</b>		
<b>4b</b>		
<b>4c</b>		
<b>5a</b>		
<b>5b</b>		
<b>5c</b>		
<b>6</b>		
<b>7</b>		
<b>8</b>		
<b>9a</b>		
<b>9b</b>		
<b>9c</b>		
<b>10a</b>		
<b>10b</b>		

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 lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c 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).

8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete **Part I** of Schedule L (Form 990).

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 on 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 on 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 line 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.)

**Part IV Supporting Organizations (continued)**

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?	11a	
b A family member of a person described on line 11a above?	11b	
c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.	11c	

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, 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	
<b>2</b> 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	

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> 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	

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> 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	
<b>2</b> 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	
<b>3</b> By reason of the relationship described on line 2, above, 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	

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
<b>2</b> Activities Test. Answer lines 2a and 2b below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a	
b Did the activities described on line 2a, above, 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	
<b>3</b> Parent of Supported Organizations. Answer lines 3a and 3b below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" 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 Part VI the role played by the organization in this regard.	3b	

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

**1**  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). See instructions.

All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

<b>Section A - Adjusted Net Income</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b> Net short-term capital gain	<b>1</b>		
<b>2</b> Recoveries of prior-year distributions	<b>2</b>		
<b>3</b> Other gross income (see instructions)	<b>3</b>		
<b>4</b> Add lines 1 through 3.	<b>4</b>		
<b>5</b> Depreciation and depletion	<b>5</b>		
<b>6</b> 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)	<b>6</b>		
<b>7</b> Other expenses (see instructions)	<b>7</b>		
<b>8 Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	<b>8</b>		
<b>Section B - Minimum Asset Amount</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b> Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
<b>a</b> Average monthly value of securities	<b>1a</b>		
<b>b</b> Average monthly cash balances	<b>1b</b>		
<b>c</b> Fair market value of other non-exempt-use assets	<b>1c</b>		
<b>d Total</b> (add lines 1a, 1b, and 1c)	<b>1d</b>		
<b>e Discount</b> claimed for blockage or other factors <i>(explain in detail in Part VI)</i> :			
<b>2</b> Acquisition indebtedness applicable to non-exempt-use assets	<b>2</b>		
<b>3</b> Subtract line 2 from line 1d.	<b>3</b>		
<b>4</b> Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	<b>4</b>		
<b>5</b> Net value of non-exempt-use assets (subtract line 4 from line 3)	<b>5</b>		
<b>6</b> Multiply line 5 by 0.035.	<b>6</b>		
<b>7</b> Recoveries of prior-year distributions	<b>7</b>		
<b>8 Minimum Asset Amount</b> (add line 7 to line 6)	<b>8</b>		
<b>Section C - Distributable Amount</b>			Current Year
<b>1</b> Adjusted net income for prior year (from Section A, line 8, column A)	<b>1</b>		
<b>2</b> Enter 0.85 of line 1.	<b>2</b>		
<b>3</b> Minimum asset amount for prior year (from Section B, line 8, column A)	<b>3</b>		
<b>4</b> Enter greater of line 2 or line 3.	<b>4</b>		
<b>5</b> Income tax imposed in prior year	<b>5</b>		
<b>6 Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	<b>6</b>		
<b>7</b> <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).			

Schedule A (Form 990) 2023

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i> )	5
6	Other distributions ( <i>describe in Part VI</i> ). See instructions.	6
7	<b>Total annual distributions.</b> Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive ( <i>provide details in Part VI</i> ). See instructions.	8
9	Distributable amount for 2023 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1 Distributable amount for 2023 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2023 (reasonable cause required - <i>explain in Part VI</i> ). See instructions.			
3 Excess distributions carryover, if any, to 2023			
a From 2018			
b From 2019			
c From 2020			
d From 2021			
e From 2022			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2023 distributable amount			
i Carryover from 2018 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2023 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2023 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 <b>Excess distributions carryover to 2024.</b> Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2019			
b Excess from 2020			
c Excess from 2021			
d Excess from 2022			
e Excess from 2023			

Schedule A (Form 990) 2023

## **Part VI**

**Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)



Atlantic  
Health System

Foundation for Morristown  
Medical Center

**2025 Operating  
Budget\***

<b>Contributions</b>	<b>\$25,978,500</b>
<b>Special Events</b>	<b>500,000</b>
<b>Total Operating Revenues</b>	<b>26,478,500</b>
<b>Salaries &amp; Employee Benefits</b>	<b>\$4,571,362</b>
<b>Office Supplies, Equipment &amp; Services</b>	<b>140,123</b>
<b>Professional and Consulting Fees</b>	<b>290,150</b>
<b>Occupancy</b>	<b>182,592</b>
<b>Direct Mail and Telemarketing</b>	<b>586,140</b>
<b>Promotion and Donor Relations</b>	<b>751,402</b>
<b>Staff Expense</b>	<b>86,446</b>
<b>Event Expense - Annual Golf Outing</b>	<b>220,000</b>
<b>Total Operating Expenses</b>	<b>6,828,215</b>
<b>Excess of Revenues over Expenses</b>	<b>\$19,650,285</b>

\*Does not include program service expense



July 14, 2025

Alfiero & Lucia Palestro Foundation, Inc.  
333 Sylvan Avenue, Suite 100  
Englewood Cliffs, NJ 07632  
Attn: Kristine Sayafe, Foundation Manager

RE: Exhibit 7 – Annual Report

Dear Kristine,

Please visit the following link to view the Foundation for Morristown Medical Center's 2024 Annual Report: <https://fmmcimpact.org/>

Sincerely,

A handwritten signature in black ink that reads "maria mega".

Maria Mega  
Corporate and Foundation Relations Officer  
(973) 593-2423  
[maria.mega@atlantichealth.org](mailto:maria.mega@atlantichealth.org)