Form **990**

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Α	Fort	the 2020 calen	dar year, or tax ye	ar begir	nning		, 2020	and endir	ng		,	20	
В	Check	if applicable:	С							D Employ		fication number	
	Д	Address change	Princeton-B	lairs	town Cen	ter. Inc				22-	60758	331	
		Name change	13 Roszel R			001, 1110				E Telepho			
		nitial return	Princeton,							and the second			
										(60	9) 92	21-0070	
		inal return/terminated									,		
	-	Amended return	F							G Gross r		1 1	8,200.
	A	Application pending	F Name and address	of principa	^{Il officer:} Pame	ela Grego	ry		H(a) Is this			10	s X No
			Same As C A	bove					H(b) Are all If "No,"	subordinates attach a list	included See inst	l?	es No
1_	Tax	-exempt status:	X 501(c)(3) 5	01(c) () ◄ (ins	sert no.)	947(a)(1) or	527	**********				
J	We	ebsite: ► ww	w.princetonl	olair	stown.org	J			H(c) Group	exemption n	umber 🕨		
K		m of organization:	X Corporation T	rust	Association	Other >	L,	Year of format	ion: 191	4 Ms	State of le	gal domicile: N	IJ
Pa	art I	Summar	У		,								
	1	Briefly descril	be the organization	n's missi	ion or most si	gnificant acti	vities:Pri	inceton	-Blair	stown	Cente	er empow	ers
d)		young pe	ople, prima:	rily :	from unde	er-resour	ced co	mmuniti	les, to	stre	athe	n their	
ũ		social-e	motional ski	ills 1	through e	experient	ial, e	nviron	nental,	and a	idven	ture-bas	
E		programm											
ove.	2	Check this bo	ox ► if the org	anizatio	n discontinue	d its operatio	ns or disp	osed of mo	ore than 2	5% of its	net ass	- – – – – . sets.	
Ö	3	Number of vo	ting members of the	ne gover	rning body (P.	art VI, line 1a	1)				3		22
S	4	Number of inc	dependent voting r	nembers	s of the gover	ning body (P	art VI, line	e 1b)			4		22
ij	5	Total number	of individuals emp	loyed in	n calendar yea	ar 2020 (Part	V, line 2a)			5		33
Activities & Governance	6		of volunteers (esti								6		50
Ac		Total unrelate	ed business revenu	e from F	Part VIII, colu	mn (C), line	12				7a		0.
	b	Net unrelated	business taxable	income	from Form 99	0-T, Part I, li	ne 11				7b		0.
										rior Year		Current	Year
Ф	8		and grants (Part V							359,9	12.	77.	2,584.
Revenue	9		ice revenue (Part \							642,4	18.	12	8,494.
eve	10		come (Part VIII, co							480,2	05.		7,778.
Œ	11		e (Part VIII, column							22,0	50.		4,478.
	12		 add lines 8 thro 							,504,5	85.	1,49	3,334.
	13		milar amounts paid										
	14		to or for members										
	15	Salaries, othe	r compensation, e	mployee	e benefits (Pa	rt IX, column	(A), lines	5-10)	. 1	,464,1	40.	1,19	3,165.
Expenses	16a	Professional f	undraising fees (P	art IX, c	olumn (A), Iir	ne 11e)							,
)en			ing expenses (Par						ESTINGUE SERVICE		NAME OF		
Ä			0.00		- C 0347 200 200 200 200 200 200 200 200 200 20	*100.00*		0,564.					
			es (Part IX, column							777,8			9,174.
	18		es. Add lines 13-17							,242,0			2,339.
	19	Revenue less	expenses. Subtrac	ct line 18	8 from line 12	2			_	-737,4		-44	9,005.
9 or										g of Curren		End of \	
alanc	20		Part X, line 16)						. 42	,563,5			9,175.
d B	21		(Part X, line 26).						2	475,8	93.	79	7,078.
Net Ass Fund Ba	22	Net assets or	fund balances. Su	btract lir	ne 21 from lin	e 20			. 42	,087,6	18.	44.79	2,097.
Pa	rt II	Signature	Block							-	-		7 - 7 - 7 - 7
Unde	r penal	ties of perjury, I dec	clare that I have examine er (other than officer) is	d this retu	rn, including accor	mpanying schedul	es and stater	nents, and to	the best of m	v knowledge	and belie	f. it is true, corre	ect and
comp	olete. D	eclaration of prepar	er (other than officer) is	based on a	all information of v	which preparer has	any knowled	dge.				• •	-11-11-
	x		wella x	Me	~					3	-2	1-21	
Sig	ın	Signature	e of officer	1					Dat	te			
Hei	re	▶ Pame	la Gregory		0				Presi	dent 8	CEO)	
		Type or p	orint name and title						11051	.uciic c	x CHO	<u> </u>	
		Print/Type pre	eparer's name		Preparer's signat	ture		Date		Check	if F	PTIN	
D - '	ل ا	5201 (6	Pannepacker, C	ת דמ			CDA				J."		
Pai	d pare					nnepacker,	CPA			self-employe	u F	00216902	
		L	Lear & Pan							2			
USE	e On	Firm's addres								Firm's EIN	22-2	2947255	
00000			Princeton,	NJ 08	540					Phone no.	(609)	452-2200	
May	the I	RS discuss this	s return with the p	reparer	shown above	? See instruc	tions					X Yes	No

Forr	m 990 (2020) Princeton-Blairstown Center, Inc.	22-6075831	Page 2
Pai	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1			
	See_Schedule_O		
2	Did the organization undertake any significant program services during the year which were not listed on the price	or	
	Form 990 or 990-EZ?	Yes	X No
	If "Yes," describe these new services on Schedule O.	les	V MO
3		vices?	77 N
Ū	If "Yes," describe these changes on Schedule O.	vices? Yes	X No
4	Describe the organization's program service accomplishments for each of its three largest program service section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocation	ces, as measured by e	xpenses.
	and revenue, if any, for each program service reported.	s to others, the total ex	cperises,
4 a	a (Code:) (Expenses \$ 1,471,817. including grants of \$) (R	evenue \$ 12	8,494.)
	See_Schedule 0		3,434.
	<u> </u>		
4 b	(Code:) (Expenses \$ including grants of \$) (Re	evenue \$)
		37	
4 c	(Code:) (Expenses \$ including grants of \$) (Re	evenue \$)
		TO THE PERSON NAMED IN COLUMN TO THE	
4 d	Other program services (Describe on Schedule O.)		
	Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$		

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	X	NO
2	Is the organization required to complete Schedule B, Schedule of Contributors See instructions?	2	Х	
3		3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
5		5		Х
6		6		X
7		7		X
8	- The state of the	8		X
9		9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If 'Yes,' complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
ı	b Did the organization report an amount for investments – other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII.	11 b	Х	
(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? If 'Yes,' complete Schedule D, Part VIII.	11 c		Х
(d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		Х
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f	Х	
12 a	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a	Х	
ŀ	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14 a	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
ŀ	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? If 'Yes,' complete Schedule F, Parts I and IV.	14b		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? If 'Yes,' complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19		Х
2 0 a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H.	20a		X
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.	21		X
ΛΛ.				

For	m 990 (2020) Princeton-Blairstown Center, Inc. 22-607583	1	F	age 4
Pa	art IV Checklist of Required Schedules (continued)			
22	2 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.		Yes	No
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	22		X
24	Schedule J. La 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	23		X
	complete Schedule K. If 'No, 'go to line 25a	24a		Х
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
	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		Х
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? <i>If 'Yes,' complete Schedule L, Part II.</i>	26		Х
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		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
	a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 'Yes,' complete Schedule L, Part IV	28a		Х
	b A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV	28b		Х
	c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If Yes, 'complete Schedule L, Part IV.	28c		Х
29	Did the organization receive more than \$25,000 in non-cash 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		Х
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		Х
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		Х
	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		Х
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
1	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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
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	1	Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa	rt 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			-
1:	a Enter the number reported in Box 3 of Form 1096, Enter -0- if not applicable		Yes	No
	b Enter the number of Forms W-2G included in line 1a, Enter -0- if not applicable			

Form 990 (2020) Princeton-Blairstown Center, Inc.

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

			Yes	No
2	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 33			
	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	20		
3	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a	alate 9	X
	b If 'Yes,' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation on Schedule 0</i>	3 b		
	a 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)?	4a		Х
	b If 'Yes,' enter the name of the foreign country▶	74		11
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a	Litera and	X
	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5с		
6	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
	a 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?	7 a	X	
	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b	X	
	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		Х
	d If 'Yes,' indicate the number of Forms 8282 filed during the year			
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		X
	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring		A STATE OF	
^	organization have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966?			
	b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 a		
	Section 501(c)(7) organizations, Enter:	9 b		
	a Initiation fees and capital contributions included on Part VIII, line 12			
	o Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter:			
	a Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a		
	of f 'Yes,' enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
ē	a Is the organization licensed to issue qualified health plans in more than one state?	13a		
ì	Note: See the instructions for additional information the organization must report on Schedule O.			
	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			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	olf 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation on Schedule O	14b		
15	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?	15		v
	excess parachute payment(s) during the year?	15		X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	10	(20)	X
. 0	If 'Yes,' complete Form 4720, Schedule O.	16		Λ
۸A	TEEA0105L 10/07/20	Form	990	2020)
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Form 990 (2020) Princeton-Blairstown Center, Inc. 22-6075831 Page 6 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. Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year..... 1 a 22 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. **b** Enter the number of voting members included on line 1a, above, who are independent..... 22 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?.... 2 X 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?..... 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?..... 4 X Did the organization become aware during the year of a significant diversion of the organization's assets?.... 5 6 Did the organization have members or stockholders?.... 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more 7 a 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?..... 7 b X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?.... 8a X **b** Each committee with authority to act on behalf of the governing body?..... X 8 b Is there any officer, director, trustee, or key employee listed in Parf VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses on Schedule Q..... 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes 10 a Did the organization have local chapters, branches, or affiliates?.... 10 a X b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... 11 a X b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13..... 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise Χ 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done ... See Schedule O X 12c 13 Did the organization have a written whistleblower policy?.... X 13 14 Did the organization have a written document retention and destruction policy?..... 14 X 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official.. See . Schedule.. O...... 15 a X **b** Other officers or key employees of the organization...See . Schedule . 0. 15b X If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?.... X 16 a **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?..... 16 b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ 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. Own website Another's website X Upon request Other (explain on Schedule O) 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. See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records ▶

Form 990 (2020)	Princeton-Blair	stown Center	Tnc
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22-6075831

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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

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

See 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.

		T		(C))					
(A) Name and title	(B) Average hours per	tha	n one s both dire	(do n box, an o	ot ch unles officer	eck moss pers and a ee)	on	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other
	per week (list any hours for related organiza tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	compensation from the organization and related organizations
(1) Pamela Gregory	_ 55									
President & CEO	0	<u> </u>		Χ				140,787.	0.	8,014.
_(2) Nicole Nilsson Dir Fin & Admin	$-\frac{40}{0}$			Х				75,417.	0.	
(3) Sarah Tantillo, EdD	4			Λ			-	75,417.	0.	20,642.
Board Chair		X		Х				0.	0.	0.
(4) Russell DaSilva, Esq.	1	11		21				0.	0.	<u> </u>
Trustee	0	X						0.	0.	0.
(5) Bruce Petersen	3							0.		<u> </u>
Treasurer	0	X	8	Х				0.	0.	0.
(6) Rev. Alison L. Boden, PhD.	3									<u> </u>
Secretary	0	X		Х				0.	0.	0.
_(7)_Minda_Alena	1									<u> </u>
Trustee	0	X						0.	0.	0.
(8) Bruce Ellsworth, Ph.D.	1								1	
Trustee	0	X						0.	0.	0.
<u>(9) William Miller</u>	1_									
Trustee	0	X						0.	0.	0.
(10) Christina Bailey	2									
Trustee	0	X						0.	0.	0.
(11) Courtney Lang, MBA	1									
Trustee	0	Х						0.	0.	0.
(12) Susan G. Danielson, Psy.D.	2									
Trustee	0	X	_					0.	0.	0.
(13) Yvette Saeko Lanneaux, Esq.	1	7223								
Trustee	0	Х	_					0.	0.	0.
(14) Christopher Moser	1									
Trustee	0	X						0.	0.	0.

Fart VII Section A. Officers, Directors, 17	ustees,	ney	En	npi	oye	es,	and	d Highest Com	pensated Emp	loyees (continued)
	(B)			((C)					
(A)	Average	(de	not o	Pos	sition	e than	one	(D)	(E)	(F)
Name and title	hours	box	, unle	ess pe	erson	is bot	h an	Reportable	Reportable	Estimated amount
	week (list any	_ =	1=	_			-	the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	of other compensation from
	hours	dir div	Stift	Officer	ey e	mplc ghe	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	the organization and related
	related organiza	director	tion	약	ğ	st co	4			organizations
	- tions below	ndividual trustee or director	nstitutional trustee		(ey employee	employee				
	dotted	stee) Stu		(0	ens				
	line)		ਲੱ			ated				
(15) Jessica Perry	1									
Trustee		X						0.	0	_
(16) Karen Richardson, Ed.M.	1	Λ						0.	0.	0.
Trustee		X						_	0	_
(17) Suman Rao	1	Λ						0.	0.	0.
Trustee		X						_	0	
		Λ		_				0.	0.	0.
(18) Praveena Joseph-de Saram	2	,								
Trustee	0	X						0.	0.	0.
(19) Meryl Kessler, Esq.	2							200	10	
Trustee	0	X						0.	0.	0.
(20) Donald R. Seitz, MBA	3								-	
Trustee	0	X						0.	0.	0.
(21) Warren M. Stock, MBA	2									
Trustee	0	X						0.	0.	0.
(22) Christopher Van Buren	2									
Vice Chair	0	X		X				0.	0.	0.
(23) William Wild	1									
Trustee	0	Х						0.	0.	0.
(24) Claudia Franco Kelly, MBA	3									
Trustee	0	X						0.	0.	0.
(25) Shawn Maxam, MSW	1									
Trustee	0	X						0.	0.	0.
1 b Subtotal							▶ _	216,204.	0.	28,656.
c Total from continuation sheets to Part VII, Section							▶ _	0.	0.	0.
d Total (add lines 1b and 1c)								216,204.	0.	28,656.
2 Total number of individuals (including but not limited	to those lis	sted a	abov	e) w	/ho r	eceiv	ed r	more than \$100,000	of reportable comp	ensation
from the organization • 1										
										Yes No
3 Did the organization list any former officer, direct	or, trustee	e, ke	y en	nplo	yee	, or h	nigh	est compensated	employee	
on line 1a? If 'Yes,' complete Schedule J for such	n individua	al								3 X
4 For any individual listed on line 1a, is the sum of	reportable	e cor	nper	nsat	ion	and	othe	er compensation fi	om	
the organization and related organizations greate such individual	r than \$15	50,00	0? /	f 'Ye	es,'	com	plet	e Schedule J for		4
										4 X
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes,	compens complet	e Sc.	า tro hedu	m a ule u	iny ι <i>I for</i>	unrei Suci	ated h pe	d organization or i	ndividual	5 X
Section B. Independent Contractors							, ,,			J A
1 Complete this table for your five highest compens	ated inde	pend	lent	con	trac	tors	that	received more th	an \$100,000 of	
compensation from the organization. Report compens		ne ca	lend	ar y	ear e	endin	ig w	Vacable	anization's tax year.	C
(A) Name and business addr	ess							(B) Description of	services	(C) Compensation
							-		22,7,000	
							+			
							+			
							+			
2 Total number of independent contractors (including but	ıt not limite	ed to	thos	e lie	ted	ahov	e) v	the received more	han	
\$100,000 of compensation from the organization		ou to	1103	,	nou	abov	۷۷ ری	mo received more t	IIaii	
BAA		FA01	noı	10/07	1/20					Farm 000 (0000)

Form 990

Continuation Sheet for Form 990

OMB No. 1545-0047

2020

Department of the Treasury Internal Revenue Service

Employler Identification number

22-6075831

Princeton-Blairstown Center, Inc.

Part VII Continuation: Officers, Directors, Trustees, Key Employees, and

(A)	(B)			((()			(D)	(E)	(F)
Name and title						that app		1 1	C XX	
	Average hours per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Andrew Morris, MBA Trustee	0	Х						0.	0.	0.
Heather Reilly Trustee	-1-0	Х						0.	0.	0.
Aline Silva	10	Х						0.	0.	
Derek Simpkins	1									0.
Trustee	0	X						0.	0.	0.
										7/1
				_						

Part VIII	Statement of Revenue
-----------	----------------------

		Check if Sched	ule C	contains	a resp	onse or note to an	y line in this Part VII			
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts	2 1	a Federated campai			1 a					
Contributions, Gifts, Grants	5	b Membership dues			1 b					
ts, C	2	c Fundraising event			1 c	71,344.				
E G	8	d Related organizati			1 d					
ls,		e Government grants (con			1 e	302,200.				
tiol	5	f All other contributions, similar amounts not inc	gitts, cluded	grants, and	1 f	399,040.				
e de	3	g Noncash contributions				333,040.				
ont	2	lines 1a-1f			1 g					
	3	h Total. Add lines 1a	a-11.			Business Code	772,584.			
Program Service Revenue	2	a Corrigo Foo	^		-	The second secon	100 404	100 404		
ek ek		a <u>Service Fee</u> b				611710	128,494.	128,494.		
Se.		ь с								
ervi		d								
٦S		e								
gra		f All other program	servi	ce revenu	e					
P		g Total. Add lines 2a	a-2f .		 		128,494.			
(6)	3	Investment income	(inclu	uding divide	ends, in	iterest, and	220/1511			
		other similar amou					587,778.	4		587,778.
	4	Income from inves			A 12 3 3 3 3 3 3 4 5 5 5 5 5 5 5 5 5 5 5 5 5	ONE CONTROL AND CONTROL OF THE CONTR				
	5	Royalties		(i) Re						
	6	- Cross rants	6-	(1) R6	eai	(ii) Personal				
		b Less: rental expenses	6a							
	1	c Rental income or (loss)	-			-				
		d Net rental income		255)	ma www.ascress	•				
				(i) Secur		(ii) Other		Research Control of		
		a Gross amount from sales of assets	_	100000000000000000000000000000000000000	the tipe and the second					
	١.	other than inventory Less: cost or other basis	7a							
		and sales expenses	7b							
		Gain or (loss)	7с							
	(Net gain or (loss).								
<u>o</u>	8 8	Gross income from fund	raisin	g events						
venue		(not including \$		71,344						
		of contributions reported								
Other Re	١.	See Part IV, line 18			8 a	10/110.				
the	9 000	Less: direct expens Net income or (loss			8b	17,000.				
0					Sing ev	vents	-1,751.			-1,751.
	9 a	Gross income from gami See Part IV, line 19			9a					
	l t	Less: direct expens			9 b					
		: Net income or (loss			activit	ties				
		Gross sales of inventory, returns and allowances.			10a					
	l .	Less: cost of goods			10b	160				
	С	: Net income or (loss) fro	m sales o	f inven					
S						Business Code				
Miscellaneous Revenue	11 a b c d	Other			9	000099	6,229.	6,229.		
	0									
Re	ام	All other revenue								
Ξ		Total. Add lines 11a	 a-11	٠		b	C 220			
_	12	Total revenue. See					6,229.	134 722	0	E0C 007
BAA							1,493,334. 109L 10/07/20	134,723.	0.	586,027.

Form 990 (2020) Princeton-Blairstown Center, Inc. 22Part 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 re not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21		одренеее	gerioral expenses	CAPCHISCS
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	244,860.	113,295.	109,245.	22,320
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0
7	Other salaries and wages	757,317.	671,265.	14,320.	71,732
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	21,816.	13,779.	7,043.	·
9	Other employee benefits	93,673.	61,567.	26,104.	994
10	Payroll taxes	75,499.	59,801.	8,223.	6,002
11	Fees for services (nonemployees):	13,433.	J9,001.	0,223.	7,475
	Management				
	Legal				
	: Accounting				
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	88,977.		88,977.	
g	Other. (If line 11g amount exceeds 10% of line 25, column		10 411	47	
12	(A) amount, list line 11g expenses on Schedule 0.)	48,877.	12,411.	33,311.	3,155
13	Office expenses				
14	Information technology	11,268.	4 005	2.016	2 265
15	Royalties	11,200.	4,985.	2,916.	3,367
16	Occupancy	167,781.	126,920.	24 706	C 075
17	Travel.	6,414.	3,045.	34,786. 3,120.	6,075
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.	0,414.	3,043.	3,120.	249
19	Conferences, conventions, and meetings				10
20	Interest	14,819.	14,819.		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	202,443.	202,443.		
23 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	94,331.	87,873.	5,633.	825
	expenses on Schedule O.)				
	Materials & Supplies	46,339.	44,959.	659.	721
	Outside Contracted Services	30,608.	30,608.		
	Food & Beverage	19,658.	19,658.		and particular particu
	Media & Promotion	11,957.	4,359.	F 601	7,598
	All other expenses	5,702.	30.	5,621.	51
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following	1,942,339.	1,471,817.	339,958.	130,564
AA	SOP 98-2 (ASC 958-720)	TEEA0110L 10/0	17/20		Form 990 (2020

Form 990 (2020) Princeton-Blairstown Center, Inc. 22-6075831 Page 11 Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X..... (A) Beginning of year End of year Cash – non-interest-bearing. 648,209 355,093. Savings and temporary cash investments..... 2 396,045. 720,890. Pledges and grants receivable, net..... 37,476. 3 110,788. Accounts receivable, net 405 4 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 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 Notes and loans receivable, net..... 7 Inventories for sale or use..... Prepaid expenses and deferred charges..... 9 26,702 13,621. 10 a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D..... 10a 7,316,527 **b** Less: accumulated depreciation..... 10b 3,416,901. 2,379,802 10 c 3,899,626. 11 Investments – publicly traded securities..... 11 Investments – other securities. See Part IV, line 11..... 38,208,837 12 40,449,150. Investments – program-related. See Part IV, line 11..... 13 14 Intangible assets.... 14 15 Other assets. See Part IV, line 11..... 15 866,035 40,007. Total assets. Add lines 1 through 15 (must equal line 33).... 42,563,511. 45,589,175. Accounts payable and accrued expenses..... 17 92,503 17 75,667. 18 Grants payable 18 19 Deferred revenue 52,194 19 37,862. 20 Escrow or custodial account liability. Complete Part IV of Schedule D..... Liabilities 21 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 Unsecured notes and loans payable to unrelated third parties..... 24 329,946 678,849. 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. 1,250 4,700. Total liabilities. Add lines 17 through 25..... 26 475,893 797,078. Organizations that follow FASB ASC 958, check here > Balances and complete lines 27, 28, 32, and 33. 6,163,121 7,383,845.

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32

Fund

₽

Net Assets

Total liabilities and net assets/fund balances.

Net assets with donor restrictions.....

Capital stock or trust principal, or current funds.....

Paid-in or capital surplus, or land, building, or equipment fund.....

Retained earnings, endowment, accumulated income, or other funds.....

Total net assets or fund balances.....

Organizations that do not follow FASB ASC 958, check here ▶

and complete lines 29 through 33.

45,589,175. Form 990 (2020)

44,792,097.

37,408,252.

35,924,497.

42,087,618.

42,563,511

29

30

31

32

		6075831		Pa	age 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI.				. П
1	Total revenue (must equal Part VIII, column (A), line 12)		1.4	93.3	334.
2	Total expenses (must equal Part IX, column (A), line 25)				339.
3	Revenue less expenses. Subtract line 2 from line 1	3			005.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	42,0		
5	Net unrealized gains (losses) on investments	5	1000	Transport to the second	184.
6	Donated services and use of facilities	6	-,-	007	
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,	2000			
- None	column (B))	10	44,7	92,0	97.
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.				
2 a	a 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 separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis	even-expense decrease man			
Ŀ	Were the organization's financial statements audited by an independent accountant?		2 b	Х	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separabasis, consolidated basis, or both:	ate			
	X Separate basis Consolidated basis 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?		2 c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. See Schedule O				
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3 a		X
b	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required aud or audits, explain why on Schedule O and describe any steps taken to undergo such audits	it	3 b		

TEEA0112L 10/19/20

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Form 990 (2020)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization Employer identification number Princeton-Blairstown Center, Inc. 22-6075831 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.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 Δ 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 X 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college 9 or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 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 10 June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 12 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. 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. 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. 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. 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 (iii) Type of organization (described on lines 1-10 above (see instructions)) (ii) EIN (iv) Is the organization listed in your governing document? (v) Amount of monetary (vi) Amount of other support (see instructions) support (see instructions) Yes (A) (B) (C) (D) (E) Total

Schedule A (Form 990 or 990-EZ) 2020 Princeton-Blairstown Center, Inc. 22-6075831

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 lis	sted below, please	complete Part III.	.)			
Sec	ction A. Public Support	40						
	endar year (or fiscal year inning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	303,791.	384,101.	281,789.	259,221.	470,384.	1,699,286.	
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.		·				0.	
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.	
4	Total. Add lines 1 through 3	303,791.	384,101.	281,789.	259,221.	470,384.	1,699,286.	
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)						0.	
6	Public support. Subtract line 5						0.	
	from line 4						1,699,286.	
Sec	tion B. Total Support	1	Г					
	ndar year (or fiscal year nning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total	
7	Amounts from line 4	303,791.	384,101.	281,789.	259,221.	470,384.	1,699,286.	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	1,281,378.	1,265,760.	559,099.	478,702.	587,778.	4,172,717.	
9	Net income from unrelated business activities, whether or not the business is regularly carried on	,	,		,	, , , , , ,	0.	
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). See Part VI.					27,678.	27,678.	
11	Total support. Add lines 7 through 10						5,899,681.	
12	Gross receipts from related activ	vities, etc. (see ins	structions)			12	0.	
13	First 5 years. If the Form 990 is organization, check this box and	for the organization	on's first, second,	third, fourth, or fif	th tax year as a s	section 501(c)(3)	▶□	
Sec	tion C. Computation of Pul							
	Public support percentage for 20			e 11, column (f))		14	28.80 %	
15	Public support percentage from :	2019 Schedule A,	Part II, line 14			15	24.54 %	
1 6 a	33-1/3% support test—2020. If the and stop here. The organization	he organization di qualifies as a pub	d not check the bo	ox on line 13, and ganization	line 14 is 33-1/3	% or more, check	this box	
b	b 33-1/3% support test—2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization							
1 7 a	10%-facts-and-circumstances te or more, and if the organization the organization meets the facts	meets the facts-a	nd-circumstances	test, check this bo	ox and stop here.	Explain in Part \	VI how	
b	10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and	meets the facts-a	nd-circumstances	test check this ho	ox and ston here	Explain in Part \	/I how the	
18	Private foundation. If the organization	zation did not che	ck a box on line 1	3, 16a, 16b, 17a,	or 17b, check this	s box and see ins	tructions ►	

Schedule A (Form 990 or 990-EZ) 2020 Princeton-Blairstown Center, Inc. 22-6075831 Pag

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.)

Sec	ction A. Public Support						
Caler 1	dar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
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.						
5	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
	organization without charge Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
С	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
	dar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						-
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b						
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is torganization, check this box and	for the organization	n's first, second,	third, fourth, or fi	fth tax year as a s	section 501(c)(3)	
Sec	tion C. Computation of Pul						
15	Public support percentage for 20	20 (line 8, column	(f), divided by lin				%
16	Public support percentage from 2	2019 Schedule A,	Part III, line 15				8
	tion D. Computation of Inve						
	Investment income percentage for						%
	Investment income percentage fr						%
	33-1/3% support tests—2020. If this not more than 33-1/3%, check	this box and stop	here. The organi	zation qualifies a	s a publicly suppo	rted organization	▶
b	33-1/3% support tests—2019. If the line 18 is not more than 33-1/3%	he organization di	d not check a box	on line 14 or lin	e 19a, and line 16	is more than 33-	1/3% and
20	Private foundation. If the organiz	ation did not ched	ck a box on line 1	4, 19a, or 19b, c	heck this box and	see instructions.	
ΛΛ			TEE 404021	00/14/00		11 4 = 00	

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on 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	Α.	AII	Supporting Organization	ıs

_				
			Yes	No
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.	1		
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).	2		
3	a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer lines 3b and 3c below.	3a		
1	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.	3b		
(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.	3c		
4	a 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.	4a		
ı	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.	4b		
(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.	4c		
5 a	a 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).	5a		
ł	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?	5b		
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5с		
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 .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	8		
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 .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI .	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI .	9c		
1 0 a	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.	10a	10.00	
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.).	10a		

P	art IV Supporting Organizations (continued)			
1	1 Has the organization accepted a gift or contribution from any of the following persons?		Yes	No
	a A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?	11a		
	b A family member of a person described in line 11a above?	11b		
	c A 35% controlled entity of a person described in line 11a or 11b above? If 'Yes' to line 11a, 11b, or 11c, provide detail in Part VI.	11c		
Se	ection B. Type I Supporting Organizations			
			Yes	No
1	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		
2	2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Se	ction C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Se	ction D. All Type III Supporting Organizations			
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	Yes	No
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in 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		
Se	ction E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
	a The organization satisfied the Activities Test. Complete line 2 below.			
	b The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	instru	ctions	:).
•		-		
	Activities Test. Answer lines 2a and 2b below.	No proces	Yes	No
	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.	2 a		
	b Did the activities described in 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		
3	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		

Schedule A	(Form 990 o	r 990-EZ) 2020	Princeton-Blairstown	Center	Tnc
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22-6075831

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Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	anizati	ons	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organization	t on No ns mus	v. 20, 1970 (explain i t complete Sections A	n Part VI). See through E.
Se	ction A — Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
_ 7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	ction B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
	A Average monthly value of securities	1a		
	Average monthly cash balances	1b		
(Fair market value of other non-exempt-use assets	1c		
-	d Total (add lines 1a, 1b, and 1c)	1d		
•	e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally integrated (see instructions).	grated T	ype III supporting org	ganization
DAA				

BAA

Schedule A (Form 990 or 990-EZ) 2020

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Su	Inporting Organiz	ations (continue	$\frac{-607}{(d)}$	5831 Page
	ction D – Distributions	ipporting organiza	ations (continue	<i>u)</i>	Current Year
1		rposes		1	ourient real
2		ns,	2		
3	Administrative expenses paid to accomplish exempt purposes of su	upported organizations		3	
4		pportod organizations		4	
5		details in Part VI		5	
6	Other distributions (describe in Part VI). See instructions.	detaile in ruit vij		6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the organization Part VI). See instructions.	on is responsive (provide	e details	8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sec	tion E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributio Pre-2020	ons	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reasonable cause required — explain in Part VI). See instructions.				
3	,				
	From 2015				
	From 2016				
	From 2017				
	From 2018				
	From 2019				
	f Total of lines 3a through 3e				
ç	Applied to underdistributions of prior years				
ŀ	Applied to 2020 distributable amount				
	Carryover from 2015 not applied (see instructions)				
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D, line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2020 distributable amount				
c	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, 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 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j and 4c.				
8	Breakdown of line 7:				
а	Excess from 2016				
b	Excess from 2017				
С	Excess from 2018				
d	Excess from 2019				
_	Excess from 2020				

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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.)

Part II, Line 10 - Other Income

Nature and Source	2020	2019	2018	2017	2016
Total	\$ 27,678. \$ 27,678.	\$ 0.	\$ 0.	\$ 0.	\$ 0.

Part II, Line 17a - 10% Facts and Circumstances Test - Current Year

The organization provides services to historically-marginalized youth in support of its mission. In addition to the organization's ongoing solicitations of contributions, these services are funded in part through portfolio income on contributions from the general public which were received and invested in prior years.

Part II, Line 17b - 10% Facts and Circumstances Test - Prior Year

The organization provides services to historically-marginalized youth in support of its mission. In addition to the organization's ongoing solicitations of contributions, these services are funded in part through portfolio income on contributions from the general public which were received and invested in prior years.

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2020

Employer identification number

Princ	eton-Blairstow	n Center, Inc.	22-6075831					
Organiz	Organization type (check one):							
Filers of	:	Section:						
Form 99	0 or 990-EZ	\overline{X} 501(c)(3) (enter number) organization						
		4947(a)(1) nonexempt charitable trust not treated as a private foundation	n					
		527 political organization						
Form 99	0-PF	501(c)(3) exempt private foundation						
		4947(a)(1) nonexempt charitable trust treated as a private foundation						
		501(c)(3) taxable private foundation						
		ed by the General Rule or a Special Rule. (8), or (10) organization can check boxes for both the General Rule and a Sp	ecial Rule. See instructions.					
General	Rule							
X	For an organization filir or property) from any o	ng Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling ne contributor. Complete Parts I and II. See instructions for determining a contributor	g \$5,000 or more (in money or's total contributions.					
Special F	Rules							
	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.							
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering 'N/A' in column (b) instead of the contributor name and address), II, and III.							
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.							

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer 'No' on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF,

Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 2020

Open to Public Inspection
Employer identification number

Pr	rinceton-Blairstown Center, Inc.		22-6075831					
Pa	or Accounts.							
<u></u>	Complete if the organization answered 'Yes' on Form 990, Part IV, line 6.							
(a) Donor advised funds (b) Funds and other accounts								
1	3							
2	3,77,7							
3								
4	Aggregate value at end of year							
5	are the organization's property, subject to the organization's exclusive legal cont	rol?	Yes	No				
6	Did the organization inform all grantees, donors, and donor advisors in writing the for charitable purposes and not for the benefit of the donor or donor advisor, or impermissible private benefit?	nat grant funds c for any other pur	an be used only rose conferring Yes	No				
Pa	art II Conservation Easements.							
	Complete if the organization answered 'Yes' on Form 990, Pa	art IV, line 7.						
1		pply).						
	Preservation of land for public use (for example, recreation or education)	Preservation of	of a historically important I	and area				
	Protection of natural habitat	Preservation of	of a certified historic struct	ure				
	Preservation of open space							
2	Complete lines 2a through 2d if the organization held a qualified conservation contribut last day of the tax year.	ion in the form of	10 miles (10 mil	- 13 - 7 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1				
			Held at the End of	the Tax Year				
	a Total number of conservation easements	Andreas Alexans remarks Antistration 1	2a					
	b Total acreage restricted by conservation easements.		2 b					
	\boldsymbol{c} Number of conservation easements on a certified historic structure included in (a	1)	2 c					
	d Number of conservation easements included in (c) acquired after 7/25/06, and no structure listed in the National Register.		2 d					
3	Number of conservation easements modified, transferred, released, extinguished, or ter tax year ►	rminated by the o	rganization during the					
4	Number of states where property subject to conservation easement is located ▶							
5		spection, handlir	ng of violations,					
	and enforcement of the conservation easements it holds?		Yes	No				
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and	enforcing conser	vation easements during the	year				
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enfo	orcing conservatio	n easements during the yea	r				
8	Does each conservation easement reported on line 2(d) above satisfy the require and section 170(h)(4)(B)(ii)?		Yes	No				
9	In Part XIII, describe how the organization reports conservation easements in its include, if applicable, the text of the footnote to the organization's financial stater conservation easements.	revenue and ex ments that descr	pense statement and bala ribes the organization's ac	nce sheet, and counting for				
Pa	rt III Organizations Maintaining Collections of Art, Historical Trea Complete if the organization answered 'Yes' on Form 990, Pa	asures, or Otl art IV, line 8.	her Similar Assets.					
1	a If the organization elected, as permitted under FASB ASC 958, not to report in its historical treasures, or other similar assets held for public exhibition, education, of Part XIII the text of the footnote to its financial statements that describes these it	or research in fu	nent and balance sheet wo rtherance of public service	orks of art, e, provide in				
ļ	b If the organization elected, as permitted under FASB ASC 958, to report in its revelocities historical treasures, or other similar assets held for public exhibition, education, or reserved amounts relating to these items:	arch in furtherand	e of public service, provide	of art, the				
	(i) Revenue included on Form 990, Part VIII, line 1							
	(ii) Assets included in Form 990, Part X		▶\$					
	If the organization received or held works of art, historical treasures, or other similar as: amounts required to be reported under FASB ASC 958 relating to these items:		J					
	a Revenue included on Form 990, Part VIII, line 1							
I	b Assets included in Form 990, Part X		▶\$					

Schedule D (Form 990) 2020 Prin	ceton-Blairst	own Center, I	nc. al Treasures, or	22-607 Other Similar Ass	5831 sets (contin	Page 2
Using the organization's acquisitio items (check all that apply):		records, check any of	the following that ma			uouy
a Public exhibition		d Loan or ex	change program			
b Scholarly research		e Other				
c Preservation for future gene						
4 Provide a description of the organi Part XIII.						
5 During the year, did the organizato be sold to raise funds rather to	ation solicit or receive	donations of art, his	torical treasures, or	other similar assets	□ v	П.,
Part IV Escrow and Custodia	A Arrangements	Complete if the	rganization and	word 'Vos' on Fo	Yes	<u></u> No
line 9, or reported an	amount on Form	990. Part X. line	21.	wered les offro	IIII 990, Pa	irt IV,
1 a Is the organization an agent, tru on Form 990, Part X?	stee, custodian or oth	ner intermediary for c	ontributions or other	r assets not included	Yes	□ No
b If 'Yes,' explain the arrangemen	t in Part XIII and com	plete the following ta	ble:			No
c Beginning balance					Amount	
d Additions during the year						
e Distributions during the year						
f Ending balance						
2a Did the organization include an a						
b If 'Yes,' explain the arrangement	in Part XIII Check h	ere if the explanation	scrow or custodial a	Lon Dort VIII	Yes	No
2 ii i say angam tila amangamam	an ran Am. Oncon m	ere ii tile explanation	rnas been provided	I OII Falt Alli		
Part V Endowment Funds. C	complete if the ord	anization answo	rod 'Vos' on For	m 000 Dort IV 1:	10	
in the second se	(a) Current year	(b) Prior year	(c) Two years back			1 1
1 a Beginning of year balance	5,437,575.	4,892,237.	4,321,038	(d) Three years back	(e) Four yea	
b Contributions	3,431,313.	4,032,231.	4,321,036		3,863	,141.
				25,000.		
c Net investment earnings, gains, and losses	704,459.	545,338.	571,199	451 071		600
d Grants or scholarships	704,433.	343,330.	371,199	. 451,971.	54	,680.
e Other expenditures for facilities						
and programs				0.	73	,754.
f Administrative expenses					,,,	,,,,,,
g End of year balance	6,142,034.	5,437,575.	4,892,237	. 4,321,038.	3,844	067
2 Provide the estimated percentage	e of the current year	end balance (line 1g,	column (a)) held as	s:	3,044	,007.
a Board designated or quasi-endowm		.50%	· //			
b Permanent endowment ▶	50.50%	<u> </u>				
c Term endowment ▶	%					
The percentages on lines 2a, 2b, ar	nd 2c should equal 100	%.				
3 a Are there endowment funds not in the organization by:			ld and administered f	or the	Yes	N.
(i) Unrelated organizations						No
(ii) Related organizations					3a(i) X 3a(ii)	V
b If 'Yes' on line 3a(ii), are the rela	ted organizations liste	ed as required on Scl	hedule R?		3b	X
4 Describe in Part XIII the intended	uses of the organiza	tion's endowment fur	nds Soo Part	VTTT	30	
Part VI Land, Buildings, and I	Fauipment	tion of ondominant fair	do. Dee rait	VIII		
Complete if the organize	zation answered	Yes' on Form 99	0, Part IV, line 1	11a. See Form 990), Part X, Ii	ne 10.
Description of property	(inv		Cost or other pasis (other)	(c) Accumulated depreciation	(d) Book v	alue
1 a Land	12 10 10 10 10 10 10 10 10 10 10 10 10 10		783,653.		783	,653.
b Buildings			4,458,604.	2,590,352.	1,868	,252.
c Leasehold improvements	AND THE PERSON NAMED IN COLUMN TO PERSON NAM		1,364,572.	222,147.	1,142	,425.
d Equipment			709,698.	604,402.		,296.
e Other						
Total. Add lines 1a through 1e. (Column	า (d) must equal Forn	n 990, Part X, columi	n (B), line 10c.)		3,899	,626.
BAA				Schedu	le D (Form 99	

Part VII Investments – Other Securities. Complete if the organization answered	l'Ves' on Form 90	O Part IV line 11h See Form 0	On Part V line 12
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-o	
(1) Financial derivatives	(b) book value	(c) Method of Valdation, cost of end-o	1-year market value
(2) Closely held equity interests.			
(3) Other Commonfund Managed accounts		End of Year Market Value	
(A)		Bild of feat Market Value	
(B)			
(C)			
(D)			
(E)			
(F)	_		
(G)			
(H)			
(l)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)	40,449,150.		
Part VIII Investments - Program Related.		N/A	
Complete if the organization answered	l 'Yes' on Form 99	0, Part IV, line 11c. See Form 9	90, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)	11-111-1		
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.)	37./7		
Part IX Other Assets. Complete if the organization answered	N/A	N O Part IV line 11d See Form 9	90 Part X line 15
	scription	o, r are rv, line rra. occ r omir 5	(b) Book value
(1)	,		(-)
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (b)	2) line 15)	>	
Part X Other Liabilities.	5) IIIIe 15.)		
Complete if the organization answered 'Yes' on F	orm 990 Part IV line 1	1e or 11f See Form 990 Part X line 25	
	ption of liability	10 0. 1111 000 101111 000, 1 are 71, 11110 20.	(b) Book value
(1) Federal income taxes	Topic vision 3 pro Production 10 P		()
(2) Employee Security Deposits			2,225.
(3) Other Current Liabilities			2,475.
(4)			
(5)			-
(6)			
(7)			
(8)			54 C
(9)			
(10)			
(11)			_ :_^c
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)			4,700.
2. Liability for uncertain tax positions. In Part XIII, provide the text of the foctors are positions under EASE ASC 740. Cheek here if the text of the feetbate has			
tax positions under FASB ASC 740. Check here if the text of the footnote has			
BAA	TEEA3303L 08/18/20	Sched	lule D (Form 990) 2020

Timecton Bialistown Center, Inc.	7-00/2831	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Ro	eturn.	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	4,572,707.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		1,0,2,101.
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants	-	
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d.	2 e	3,153,484.
3 Subtract line 2e from line 1	_	1,419,223.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.) See Part XIII 4b -14,866.		
c Add lines 4a and 4b.	4 c	74,111.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	1,493,334.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Return.	,,
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	1,868,228.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		1,000,220.
a Donated services and use of facilities		
b Prior year adjustments		
c Other losses		
d Other (Describe in Part XIII.) See Part XIII 2d 14,866.		
e Add lines 2a through 2d.	2 e	14,866.
3 Subtract line 2e from line 1	3	1,853,362.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		1,000,002.
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b.	4 c	88,977.
Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).	5 1	L,942,339.
Part XIII Supplemental Information		

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Part V, Line 4 - Intended Uses Of Endowment Fund

To endow various programs and projects in accordance with donor and/or board directions.

Part X - FASB ASC 740 Footnote

In accordance with ASC Topic 740 "Accounting for Uncertainty in Income Taxes", the Organization has evaluated its tax positions. A tax position is recognized as a benefit only if it is "more likely than not" that the tax position would be sustained

in a tax examination, with a tax examination being presumed to occur. The amount

BAA

Schedule D (Form 990) 2020

Part XIII | Supplemental Information (continued)

Part X - FASB ASC 740 Footnote (continued)

recognized is the largest amount of tax benefit that has a likelihood of being realized on examination of more than fifty percent. For tax positions not meeting the "more likely than not" test, no tax benefit is recorded. Under the "more likely than not" threshold guidelines, the Organization believes no significant uncertain tax positions exist, either individually or in the aggregate, that would give rise to the non-recognition of an existing tax benefit. In addition, the Organization had no material unrecognized tax benefits or accrued interest and penalties. The Organization's policy is to recognize interest related to unrecognized tax benefits in interest expense and penalties in income tax expense.

Schedule D, Part XI, Line 4b Other Revenue Included On Form 990 But Not Included In F/S

Special	event	expenses	\$ -14,866.
		Total	\$ -14,866.

Schedule D, Part XII, Line 2d Other Expenses And Losses Per Audited F/S

Special	event	expenses	\$ 14,866.
		Total	\$ 14,866.

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered 'Yes' on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Princeton-Blairstown Cent	er Inc				22-607583	
Fundraising Activities, Comple	te if the organiz	ation answ	ered 'Yes'	on Form 990. Part IV. line) T
Form 990-EZ filers are not re	quired to comp	lete this p	art.			
1 Indicate whether the organization a Mail solicitations	raised funds th	rough any				
	_		e		government grants	
	5		ī	Solicitation of gove		
c Phone solicitations d In-person solicitations			g	Special fundraising	events	
			: alt: al 1 /	:III II I		
2a Did the organization have a written o employees listed in Form 990, Par	t VII) or entity	in connec	tion with p	rofessional fundraising	rs, trustees, or key services?	Yes X No
b If 'Yes,' list the 10 highest paid incompensated at least \$5,000 by the	dividuals or ent	ities (fund	raisers) pu	ursuant to agreements	under which the fundra	
					(v) Amount paid to	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	have custo of contr	fundraiser dy or control ributions?	(iv) Gross receipts from activity	(or retained by) fundraiser listed in column (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
		-				
5						
					,	
6						
7						
8						
9						
10						
[otal					-	
3 List all states in which the organizatio				ontributions or has been	notified it is exempt from	0.
or licensing.	3			31 1100 53011		91-01 01011

Schedule G (Form 990 or 990-EZ) 2020 Prince			22-607583	
Part II Fundraising Events. Complete if more than \$15,000 of fundraising List events with gross receipts gr	event contributions	s and gross incom	orm 990, Part IV, line 18 e on Form 990-EZ, lines	3, or reported 1 and 6b.
g,g,	(a) Event #1	(h) Event #2	(c) Other events (d	Total events

a)			(a) Event #1 Golf Outing (event type)	(b) Event #2	(c) Other events None (total number)	(d) Total events (add column (a) through column (c))
Revenue	1	Gross receipts	84,459.		(**************************************	84,459.
æ	2	Less: Contributions	71,344.			71,344.
	3	Gross income (line 1 minus line 2)	13,115.			13,115.
	4	Cash prizes			7	
	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
Expe	7	Food and beverages	12,894.			12,894.
irect	8	Entertainment				
Δ	9	Other direct expenses	1,972.			1,972.
	10 11	Direct expense summary. Add lines 4 thr Net income summary. Subtract line 10 fro	14,866.			
Davi		Coming Complete if the comming	dir line 3, column (d)			-1,751.
rar	LIII	Gaming. Complete if the organiza \$15,000 on Form 990-EZ, line 6a.	ition answered Yes	s on Form 990, Pai	rt IV, line 19, or rep	oorted more than
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
~	1	Gross revenue				
Ses	2	Cash prizes				
Exper	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
Δ	5	Other direct expenses				
	6	Volunteer labor	Yes %	Yes %	Yes %	
			No	No	No	
	7	Direct expense summary. Add lines 2 thro	ough 5 in column (d)			
	8	Net gaming income summary. Subtract lin	ne 7 from line 1, colum	n (d)		
a b	Is the	r the state(s) in which the organization core organization licensed to conduct gaming o, explain:	activities in each of the	ese states?		

Scn	edule G (Form 990 or 990-EZ) 2020 Princeton-Blairstown Center, Inc. 22	2-6075831	Page 3
11			No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?	Yes	No
13	Indicate the percentage of gaming activity conducted in:		
	a The organization's facility	13a	%
	b An outside facility	13b	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name ►		
	Address •		
1	a Does the organization have a contract with a third party from whom the organization receives gaming revenue by If 'Yes,' enter the amount of gaming revenue received by the organization squared	e? Yes e amount	No
	Name •		1
	Address •		
16	Gaming manager information:		
	Name •		
	Gaming manager compensation ► \$		
	Description of services provided		
	☐ Director/officer ☐ Employee ☐ Independent contractor		
17	Mandatory distributions:		
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	Yes	No
Ŀ	• Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$	ne	
Par	Supplemental Information. Provide the explanations required by Part I, line 2b, column and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any information. See instructions.	ımns (iii) and (additional	<i>y</i>);

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

n for responses to specific questions on provide any additional information.

Form 990 or 990-EZ.

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization ► Go to www.irs.gov/Form990 for the latest information.

Inspection
Employer identification number

OMB No. 1545-0047

22-6075831

Princeton-Blairstown Center, Inc.

Form 990, Part III, Line 1 - Organization Mission

Princeton-Blairstown Center empowers young people, primarily from under-resourced communities, to strengthen their social-emotional skills through experiential, environmental, and adventure-based programming. Social Emotional Learning (SEL) includes five core competencies: self-awareness, self-management, social awareness, relationship skills, and responsible decision-making. Acquiring these skills will enable Princeton-Blairstown Center participants to change their communities and the world.

Form 990, Part III, Line 4a - Program Service Accomplishments

Blairstown Campus Programs:

During a typical year, groups of students and their chaperones come from across the Mid-Atlantic region to stay at PBC's 268-acre Blairstown Campus in the northwest corner of New Jersey near the Delaware Water Gap for one to five days. These students come from public schools, independent schools, and community-based organizations. Most of these organizations provide services to students from low-income communities who face numerous challenges such as poverty, low-performing schools, high-crime neighborhoods, food insecurity, single adult households, court-involved youth, or youth in foster care. The Blairstown Campus serves as an extension of their school or community organization - a place where they can learn critical 21st Century skills that can be taken back to their schools, families, and communities. These trips are organized by the administration or faculty of the visiting school or organization expressly for the purpose of obtaining instruction in non-cognitive skills using PBC's social and emotional learning (SEL) curriculum. The

Form 990, Part III, Line 4a - Program Service Accomplishments

empathy, and interpersonal skills; which skills are focused on depends on the needs of the individual student groups. During their time at PBC, students work in small groups with carefully trained instructors and spend most of the day in instructional activities, with time for meals, sleep, and personal reflection/journal writing. During a typical year, the Center serves between 7,500 and 8,000 students and leaders/chaperones.

Because of the global COVID-19 pandemic, the Center's Board of Trustees suspended in-person programming in March of 2020. During late winter and early spring, the Center's staff focused on curriculum development and the creation of weekly SEL lesson plans and environmental education videos to share with partners and the public. From late spring until year-end, the Center's staff produced virtual programming for partners including virtual trips to the Center, Virtual Summer Bridge programming, virtual after school programming, and virtual orientation programs. Throughout the summer and fall, Center staff ran a successful Family Camp program and a variety of day programs on and off Campus.

Form 990, Part VI, Line 11b - Form 990 Review Process

The Form 990 was circulated to all Board members and discussed at the March 2020 board meeting.

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

Employees of the Princeton-Blairstown Center who act on its behalf have an obligation to avoid activities or situations which may result in a conflict of interest or the appearance of conflict of interest. Employees must not use their positions to influence outside organizations or individuals for the direct financial, personal or professional benefit of themselves, members of their families or others with whom there is a personal relationship.

Name of the organization

Princeton-Blairstown Center, Inc.

Employer identification number 22-6075831

Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management

The budgeting process includes the review and approval of all staff salaries, including that of the President/CEO and all key employees. The Finance and Executive Committees of the board conduct this budget review and approval process.

Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers & Key Employees

The budgeting process includes the review and approval of all staff salaries, including that of the President/CEO and all key employees. The Finance and Executive Committees of the board conduct this budget review and approval process.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

The Center makes its governing documents, conflict of interest policy and financial statements available to the public upon request.

Form 990, Part XII, Line 2 - Change of Oversight or Selection Process

Finance committee approves engagement of auditors and audited financials statements