

Form **8879-TE**

IRS E-file Signature Authorization for a Tax Exempt Entity

OMB No. 1545-0047

For calendar year 2024, or fiscal year beginning, 2024, and ending, 20

Do not send to the IRS. Keep for your records.
Go to www.irs.gov/Form8879TE for the latest information.

2024

Department of the Treasury
Internal Revenue Service
Name of filer

**SALEM HEALTH AND WELLNESS
FOUNDATION INC**

EIN or SSN
01-0625542

Name and title of officer or person subject to tax
**PAUL S. DILORENZO
EXECUTIVE DIRECTOR**

Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not complete more than one line in Part I.**

1a Form 990 check here	<input type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	
2a Form 990-EZ check here	<input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check here	<input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here	<input checked="" type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part V, line 5)	4b	33,682
5a Form 8868 check here	<input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b	
6a Form 990-T check here	<input type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4)	6b	
7a Form 4720 check here	<input type="checkbox"/>	b Total tax (Form 4720, Part III, line 1)	7b	
8a Form 5227 check here	<input type="checkbox"/>	b FMV of assets at end of tax year (Form 5227, Item D)	8b	
9a Form 5330 check here	<input type="checkbox"/>	b Tax due (Form 5330, Part II, line 19)	9b	
10a Form 8038-CP check here	<input type="checkbox"/>	b Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b	

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that I am an officer of the above entity or I am a person subject to tax with respect to (name of entity) _____, (EIN) _____ and that I have examined a copy of the 2024 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

I authorize **Martini & Martini CPA, P. A.** to enter my PIN **50125** as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the tax year 2024 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2024 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax _____ Date **05/01/25**

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

22205512898
Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2024 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature **Dominick Merighi** Date **05/01/25**

ERO Must Retain This Form — See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So

Form **990-PF**

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

OMB No. 1545-0047

2024

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/Form990PF for instructions and the latest information.

Open to Public Inspection

For calendar year **2024** or tax year beginning , and ending

Name of foundation SALEM HEALTH AND WELLNESS FOUNDATION INC		A Employer identification number 01-0625542
Number and street (or P.O. box number if mail is not delivered to street address) 91 S VIRGINIA AVE STE A	Room/suite	B Telephone number (see instructions) 856-299-4460
City or town, state or province, country, and ZIP or foreign postal code PENNS GROVE NJ 08069-1765		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 40,831,405	J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule) ...	422,113			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	933,794	933,794		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	1,444,311			
	b Gross sales price for all assets on line 6a 4,756,300				
	7 Capital gain net income (from Part IV, line 2)		1,444,311		
	8 Net short-term capital gain			0	
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule) Stmt 1	180,005	180,005			
12 Total. Add lines 1 through 11	2,980,223	2,558,110	0		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	167,201	8,360		158,841
	14 Other employee salaries and wages	104,492	5,224		109,901
	15 Pension plans, employee benefits	34,202	1,710		32,492
	16a Legal fees (attach schedule) See Stmt 2	110,363	2,207		108,948
	b Accounting fees (attach schedule) Stmt 3	30,990	12,396		15,495
	c Other professional fees (attach schedule) Stmt 4	112,196	105,069		7,127
	17 Interest				
	18 Taxes (attach schedule) (see instructions) Stmt 5	33,682			
	19 Depreciation (attach schedule) and depletion Stmt 6	4,974			
	20 Occupancy				
	21 Travel, conferences, and meetings	15,877			15,877
	22 Printing and publications				
	23 Other expenses (att. sch.) Stmt 7	52,198			57,260
	24 Total operating and administrative expenses. Add lines 13 through 23	666,175	134,966	0	505,941
	25 Contributions, gifts, grants paid	497,779			447,000
26 Total expenses and disbursements. Add lines 24 and 25	1,163,954	134,966	0	952,941	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	1,816,269				
b Net investment income (if negative, enter -0-)		2,423,144			
c Adjusted net income (if negative, enter -0-)			0		

For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2024)

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash — non-interest-bearing	622,840	639,675	639,675
	2 Savings and temporary cash investments	881,369	232,304	232,304
	3 Accounts receivable			
	Less: allowance for doubtful accounts			
	4 Pledges receivable			
	Less: allowance for doubtful accounts			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (att. schedule)			
	Less: allowance for doubtful accounts	0		
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges	64,365	23,357	23,357
	10a Investments — U.S. and state government obligations (attach schedule)			
	b Investments — corporate stock (attach schedule) See Stmt 8	13,149,883	15,671,279	15,671,279
	c Investments — corporate bonds (attach schedule) See Stmt 9	8,878,897	9,022,842	9,022,842
	11 Investments — land, buildings, and equipment: basis			
Less: accumulated depreciation (attach sch.)				
12 Investments — mortgage loans				
13 Investments — other (attach schedule)				
14 Land, buildings, and equipment: basis 93,273				
Less: accumulated depreciation (attach sch.) Stmt 10 55,017	43,228	38,256		
15 Other assets (describe See Statement 11)	13,985,116	14,653,705	15,241,948	
16 Total assets (to be completed by all filers — see the instructions. Also, see page 1, item I)	37,625,698	40,281,418	40,831,405	
Liabilities	17 Accounts payable and accrued expenses	90,013	102,581	
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe)			
	23 Total liabilities (add lines 17 through 22)	90,013	102,581	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30 <input checked="" type="checkbox"/>			
	24 Net assets without donor restrictions	26,679,898	28,833,582	
	25 Net assets with donor restrictions	10,855,787	11,345,255	
	Foundations that do not follow FASB ASC 958, check here and complete lines 26 through 30 <input type="checkbox"/>			
	26 Capital stock, trust principal, or current funds			
	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds			
29 Total net assets or fund balances (see instructions)	37,535,685	40,178,837		
30 Total liabilities and net assets/fund balances (see instructions)	37,625,698	40,281,418		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year — Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	37,535,685
2 Enter amount from Part I, line 27a	2	1,816,269
3 Other increases not included in line 2 (itemize) See Statement 12	3	826,883
4 Add lines 1, 2, and 3	4	40,178,837
5 Decreases not included in line 2 (itemize)	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5) — Part II, column (b), line 29	6	40,178,837

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P — Purchase D — Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a BROKER HELD PUBLICALLY TRADED SECURI	P		
b BROKER HELD PUBLICALLY TRADED SECURIT	P		
c BROKER HELD PUBLICALLY TRADED SECURI	P		
d BROKER HELD PUBLICALLY TRADED SECURI	P		
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))
a 9,257		8,135	1,122
b 496,905		282,534	214,371
c 204,004		203,243	761
d 2,908,998		2,818,077	90,921
e 1,137,136			1,137,136

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			1,122
b			214,371
c			761
d			90,921
e			1,137,136

2 Capital gain net income or (net capital loss) If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2	1,444,311
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8 }	3	1,883

Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948—see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary — see instructions)	1	33,682
b All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b)		
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	2	0
3 Add lines 1 and 2	3	33,682
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4	0
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	33,682
6 Credits/Payments:		
a 2024 estimated tax payments and 2023 overpayment credited to 2024	6a	48,202
b Exempt foreign organizations — tax withheld at source	6b	
c Tax paid with application for extension of time to file (Form 8868)	6c	
d Backup withholding erroneously withheld	6d	
7 Total credits and payments. Add lines 6a through 6d	7	48,202
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	14,520
11 Enter the amount of line 10 to be: Credited to 2025 estimated tax 14,520 Refunded	11	

Part VI-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition		X
If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. \$ _____ (2) On foundation managers. \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?		X
If "Yes," attach a detailed description of the activities.		
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?		X
If "Yes," attach the statement required by <i>General Instruction T</i> .		
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: ● By language in the governing instrument, or ● By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. NJ		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2024 or the tax year beginning in 2024? See the instructions for Part XIII. If "Yes," complete Part XIII		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions		X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	X	
Website address WWW.SALEMWELLNESSFOUNDATION.ORG		
14 The books are in care of PAUL S. DILORENZO Telephone no. 856-299-4460 91 S. VIRGINA AVE.		
Located at CARNEYS POINT NJ ZIP+4 08069		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — check here	<input type="checkbox"/>	
and enter the amount of tax-exempt interest received or accrued during the year 15 _____		
16 At any time during calendar year 2024, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?		X
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country		

Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

		Yes	No
1a	During the year, did the foundation (either directly or indirectly):		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?		X
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?		X
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		X
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		X
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?		X
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)		X
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions		
	Organizations relying on a current notice regarding disaster assistance, check here <input type="checkbox"/>		
d	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2024?		
 N/A		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a	At the end of tax year 2024, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2024? If "Yes," list the years		X
	20, 20, 20, 20		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement — see instructions.)		
 N/A		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		
	20, 20, 20, 20		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?		X
b	If "Yes," did it have excess business holdings in 2024 as a result (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2024.)		
 N/A		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2024?		X

Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required *(continued)*

	Yes	No
5a During the year, did the foundation pay or incur any amount to:		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?		X
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?		X
(3) Provide a grant to an individual for travel, study, or other similar purposes?		X
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d) (4)(A)? See instructions		X
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?		X
b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions	N/A	
c Organizations relying on a current notice regarding disaster assistance, check here	<input type="checkbox"/>	
d If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d).	N/A	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.		X
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?		X
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	N/A	
8 Is the foundation 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?		X

Part VII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Statement 13				

2 Compensation of five highest-paid employees (other than those included on line 1 — see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
EMILY HERNANDEZ 132 BRIDGETON AVE	BRIDGETON NJ 08302	GRANTS ADMIN 69,909	0	0
Total number of other employees paid over \$50,000				0

Part VII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
SEI PRIVATE TRUST COMPANY 1 FREEDOM VALLEY DR. OAKS PA 19456	INVESTMENT MGMT	105,069
FAEGRE DRINKER BIDDLE & REATH LLP 600 CAMPUS DRIVE FLORHAM PARK NJ 07932	LEGAL SERVICES	88,781
.....		
.....		
.....		
Total number of others receiving over \$50,000 for professional services		0

Part VIII-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 SUPPORT - CONTRIBUTION TO GRANTMAKERS IN HEALTH TO SUPPORT THEIR MISSION - HEALTH PHILANTHROPY	266,779
2 See Statement 14	51,000
3 See Statement 15	180,000
4	

Part VIII-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	

Part IX Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	23,797,901
b	Average of monthly cash balances	1b	1,257,029
c	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	25,054,930
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	25,054,930
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions)	4	375,824
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	5	24,679,106
6	Minimum investment return. Enter 5% (0.05) of line 5	6	1,233,955

Part X Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here and do not complete this part.)

1	Minimum investment return from Part IX, line 6	1	1,233,955
2a	Tax on investment income for 2024 from Part V, line 5	2a	33,682
b	Income tax for 2024. (This does not include the tax from Part V.)	2b	
c	Add lines 2a and 2b	2c	33,682
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,200,273
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	1,200,273
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1	7	1,200,273

Part XI Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	1a	952,941
b	Program-related investments — total from Part VIII-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4	4	952,941

Part XII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2023	(c) 2023	(d) 2024
1 Distributable amount for 2024 from Part X, line 7				1,200,273
2 Undistributed income, if any, as of the end of 2024:				
a Enter amount for 2023 only				
b Total for prior years: 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2024:				
a From 2019	21,319,657			
b From 2020	14,374,244			
c From 2021				
d From 2022				
e From 2023				
f Total of lines 3a through e	35,693,901			
4 Qualifying distributions for 2024 from Part XI, line 4: \$ 952,941				
a Applied to 2023, but not more than line 2a				
b Applied to undistributed income of prior years (Election required — see instructions)				
c Treated as distributions out of corpus (Election required — see instructions)				
d Applied to 2024 distributable amount				952,941
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2024 (If an amount appears in column (d), the same amount must be shown in column (a).)	247,332			247,332
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	35,446,569			
b Prior years' undistributed income. Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable amount — see instructions				
e Undistributed income for 2023. Subtract line 4a from line 2a. Taxable amount — see instructions				
f Undistributed income for 2024. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2025				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions)				
8 Excess distributions carryover from 2019 not applied on line 5 or line 7 (see instructions)	21,072,325			
9 Excess distributions carryover to 2025. Subtract lines 7 and 8 from line 6a	14,374,244			
10 Analysis of line 9:				
a Excess from 2020	14,374,244			
b Excess from 2021				
c Excess from 2022				
d Excess from 2023				
e Excess from 2024				

Part XIII Private Operating Foundations (see instructions and Part VI-A, question 9)

1a	If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2024, enter the date of the ruling				
b	Check box to indicate whether the foundation is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)				
2a	Tax year	Prior 3 years			(e) Total
	(a) 2024	(b) 2023	(c) 2022	(d) 2021	
	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part IX for each year listed				
b	85% (0.85) of line 2a				
c	Qualifying distributions from Part XI, line 4, for each year listed				
d	Amounts included in line 2c not used directly for active conduct of exempt activities				
e	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c				
3	Complete 3a, b, or c for the alternative test relied upon:				
a	"Assets" alternative test — enter:				
	(1) Value of all assets				
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)				
b	"Endowment" alternative test — enter 2/3 of minimum investment return shown in Part IX, line 6, for each year listed				
c	"Support" alternative test — enter:				
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)				
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)				
	(3) Largest amount of support from an exempt organization				
	(4) Gross investment income				

Part XIV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year — see instructions.)

- 1 Information Regarding Foundation Managers:**
- a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)
N/A
- b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.
N/A
- 2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**
- Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.
- a** The name, address, and telephone number or email address of the person to whom applications should be addressed:
N/A
- b** The form in which applications should be submitted and information and materials they should include:
N/A
- c** Any submission deadlines:
N/A
- d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:
N/A

Part XIV Supplementary Information *(continued)*

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a <i>Paid during the year</i>				
APPEL FARM ARTS AND MUSIC CENTER 457 SHIRLEY RD ELMER NJ 08318	NONE	PC	ARTS DAY CAMP	15,000
ARC OF SALEM COUNTY 150 SALEM-WOODSTOWN RD SALEM NJ 08079	NONE	PC	GIFT MATCHING PROGRAM	20,000
ARC OF SALEM COUNTY 150 SALEM-WOODSTOWN RD SALEM NJ 08079	NONE	PC	TRANSPORTATION PROGRAM	45,000
CALVARY BAPTIST CHURCH OF CARNEYS P 300 GEORGETOWN ROAD PENNS GROVE NJ 08069	NONE	PC	YOUTH SOCCER CAMP	3,000
CITY OF SALEM 17 MARKET STREET SLAEM NJ 08079	NONE	PC	GIFT MATCHING PROGRAM	20,000
CORNERSTONE WOMEN'S RESOURCE CENTER PO BOX 63 SALEM NJ 08079	NONE	PC	GIFT MATCHING PROGRAM	20,000
HABITAT FOR HUMANITY OF SALEM COUNT 416 S. PENNSVILLE-AUBURN CARNEYS POINT NJ 08069	NONE	PC	MINI GRANT CAPACITY BUILDING	3,000
HABITAT FOR HUMANITY OF SALEM COUNT 416 S. PENNSVILLE-AUBURN CARNEYS POINT NJ 08069	NONE	PC	GIFT MATCHING PROGRAM	20,000
INTER-AGENCY COUNCIL, INC. 98 MARKET STREET SALEM NJ 08079	NONE	PC	PUBLIC HEALTH FELLOWSHIP	55,000
LOWER ALLOWAYS CREEK SCHOOL DISTRIC 967 MAIN STREET SALEM NJ 08079	NONE	PC	EMOTIONAL LEARNING CIRRICULUM	2,000
Total			3a	447,000
b <i>Approved for future payment</i>				
APPEL FARMS ARTS AND MUSIC 457 SHIRLEY RD ELMER NJ 08318	NONE	PC	GIFT MATCHING PROGRAM	20,000
FELLOWSHIP LIFE FOUNDATION 8000 FELLOWSHIP ROAD BASKING RIDGE NJ 07920	NONE	PC	GIFT MATCHING PROGRAM	20,000
Total			3b	40,000

Part XIV Supplementary Information *(continued)*

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a <i>Paid during the year</i> MEALS ON WHEELS 90 MARKET ST SALEM NJ 08079	NONE	PC GIFT MATCHING PROGRAM		3,000
PENNS GROVE COMMUNITY HOUSING AUTHO 40 SOUTH BROADWAY PENNS GROVE NJ 08069	NONE	PC SUMMER BASKETBALL CAMP		3,000
RANCH HOPE PO BOX 325 ALLOWAY NJ 08001	NONE	PC GIFT MATCHING PROGRAM		20,000
REVIVE SOUTH JERSEY 31 WEST COMMERCE ST BRIDGETON NJ 08302	NONE	PC GIFT MATCHING PROGRAM		20,000
SALEM COMMUNITY COLLEGE 460 HOLLYWOOD AVE CARNEYS POINT NJ 08069	NONE	GOV NURSING SCHOLARSHIPS		50,000
SALEM COUNTY SHERIFF'S DEPARTMENT 94 MARKET STREET SALEM COUNTY NJ 08079	NONE	PC SITUATION EXERCISE TRAINING		3,000
SHADW EQUESTRIAN 1907 MONROEVILLE RD MONROEVILLE NJ 08343	NONE	PC GIFT MATCHING PROGRAM		20,000
SOUTHERN NEW JERSEY PERINATAL COOPE 2500 MCCLELLAN AVE #250 PENNSAUKEN TOWNSHIP NJ 08	NONE	PC SUPPORT CHILDREN & FAMILIES	INITIATI	125,000
Total			3a	
b <i>Approved for future payment</i> N/A				
Total			3b	

Federal Statements**Statement 1 - Form 990-PF, Part I, Line 11 - Other Income**

<u>Description</u>	<u>Revenue per Books</u>	<u>Net Investment Income</u>	<u>Adjusted Net Income</u>
INTEREST INCOME - CHA PARTNER	\$ 180,005	\$ 180,005	\$
Total	<u>\$ 180,005</u>	<u>\$ 180,005</u>	<u>\$ 0</u>

Statement 2 - Form 990-PF, Part I, Line 16a - Legal Fees

<u>Description</u>	<u>Total</u>	<u>Net Investment</u>	<u>Adjusted Net</u>	<u>Charitable Purpose</u>
Indirect Legal Fees	\$ 110,363	\$ 2,207	\$	\$ 108,948
Total	<u>\$ 110,363</u>	<u>\$ 2,207</u>	<u>\$ 0</u>	<u>\$ 108,948</u>

Statement 3 - Form 990-PF, Part I, Line 16b - Accounting Fees

<u>Description</u>	<u>Total</u>	<u>Net Investment</u>	<u>Adjusted Net</u>	<u>Charitable Purpose</u>
Indirect Accounting Fees	\$ 30,990	\$ 12,396	\$	\$ 15,495
Total	<u>\$ 30,990</u>	<u>\$ 12,396</u>	<u>\$ 0</u>	<u>\$ 15,495</u>

Statement 4 - Form 990-PF, Part I, Line 16c - Other Professional Fees

<u>Description</u>	<u>Total</u>	<u>Net Investment</u>	<u>Adjusted Net</u>	<u>Charitable Purpose</u>
CONSULTING FEES	\$ 7,127	\$	\$	\$ 7,127
INVESTMENT MGMT FEES	105,069	105,069	\$	\$
Total	<u>\$ 112,196</u>	<u>\$ 105,069</u>	<u>\$ 0</u>	<u>\$ 7,127</u>

Federal Statements

Statement 5 - Form 990-PF, Part I, Line 18 - Taxes

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
FEDERAL EXCISE TAX	\$ 33,682	\$	\$	\$
Total	<u>\$ 33,682</u>	<u>\$ 0</u>	<u>\$ 0</u>	<u>\$ 0</u>

Statement 6 - Form 990-PF, Part I, Line 19 - Depreciation

Description		Date Acquired	Cost Basis	Prior Year Depreciation	Method	Life	Current Year Depreciation	Net Investment Income	Adjusted Net Income
Depreciation			\$	\$			\$ 4,974	\$	\$
Total			<u>\$ 0</u>	<u>\$ 0</u>			<u>\$ 4,974</u>	<u>\$ 0</u>	<u>\$ 0</u>

Federal Statements**Statement 7 - Form 990-PF, Part I, Line 23 - Other Expenses**

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
	\$	\$	\$	\$
Expenses				
COMMUNICATIONS	3,968			3,968
DUES AND MEMBERSHIPS	3,397			3,397
Equipment maintenance	1,081			1,081
INSURANCE	3,295			5,471
INTERNET ACCESS FEES	3,051			3,051
MARKETING	500			500
MISCELLANEOUS	1,091			1,141
OFFICE EXPENSE	11,194			11,194
OCCUPANCY	14,400			14,400
STATE FILING FEES	45			45
SUBSCRIPTIONS	372			372
Telephone	791			791
WEBSITE HOSTING	9,013			11,849
Total	\$ <u>52,198</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>57,260</u>

Statement 8 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
DOMESTIC EQUITIES	\$ 8,046,121	\$ 9,705,014		\$ 9,705,014
INTERNATIONAL EQUITIES	5,103,762	5,966,265		5,966,265
Total	\$ <u>13,149,883</u>	\$ <u>15,671,279</u>		\$ <u>15,671,279</u>

Federal Statements**Statement 9 - Form 990-PF, Part II, Line 10c - Corporate Bond Investments**

Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
FIXED INCOME	\$ 8,878,897	\$ 9,022,842		\$ 9,022,842
Total	\$ 8,878,897	\$ 9,022,842		\$ 9,022,842

Statement 10 - Form 990-PF, Part II, Line 14 - Land, Building, and Equipment

Description	Beginning Net Book	End Cost / Basis	End Accumulated Depreciation	Net FMV
FURNITURE AND FIXTURES	\$	\$ 15,735	\$ 15,735	\$
MACHINERY AND EQUIPMENT	10,652	35,188	27,091	
IMPROVEMENTS	32,576	42,350	12,191	
Total	\$ 43,228	\$ 93,273	\$ 55,017	\$ 0

Federal Statements**Statement 11 - Form 990-PF, Part II, Line 15 - Other Assets**

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>	<u>Fair Market Value</u>
BENEFICIAL INTERETS	\$ 10,769,881	\$ 11,259,029	\$ 11,847,272
INTEREST INCOME RECEIVABLE	187,890	367,890	367,890
INVESTMENT INCOME RECEIVABLE	27,345	26,786	26,786
MISCELANEOUS RECEIVABLE			
NOTES REVEIVABLE	<u>3,000,000</u>	<u>3,000,000</u>	<u>3,000,000</u>
Total	<u>\$ 13,985,116</u>	<u>\$ 14,653,705</u>	<u>\$ 15,241,948</u>

Statement 12 - Form 990-PF, Part III, Line 3 - Other Increases

<u>Description</u>	<u>Amount</u>
CHANGE IN VALUE OF TRUSTS	\$ 467,874
UNREALIZED GAIN INVESTMENTS	<u>359,009</u>
Total	<u>\$ 826,883</u>

01-0625542

Federal Statements

FYE: 12/31/2024

Statement 13 - Form 990-PF, Part VII, Line 1 - List of Officers, Directors, Trustees, Etc.

<u>Name and Address</u>	<u>Title</u>	<u>Average Hours</u>	<u>Compensation</u>	<u>Benefits</u>	<u>Expenses</u>
SAMANTHA AUDIA 1826 ADDISON STREET PHILADELPHIA PA 19146	TRUSTEE	0.00	0	0	0
DANIEL DELANEY 37 S. LOCUST AVE SALEM NJ 08079	SECRETARY	0.00	0	0	0
ANN MARIE HEALY 67 E. LAKE RD WOODSTOWN NJ 08098	CHAIR	0.00	0	0	0
STEVE HINDMAN 40 BIRCH LANE PILES GROVE NJ 08098	TRUSTEE	0.00	0	0	0
JEANETTE JACKSON 13 DIXIE DR PENNS GROVE NJ 08069	SECRETARY	0.00	0	0	0
INA JETTER 230 QUINTON MALBORO ROAD SALEM NJ 08079	TRUSTEE	0.00	0	0	0
KATHLEEN LOCKBAUM 58 PENNSVILLE PEDRICKTOWN RD PEDRICKTOWN NJ 08067	TREASURER	0.00	0	0	0
BRITTANY SMITH 17 DAVIS AVE SALEM NJ 08079	TRUSTEE	0.00	0	0	0
PEGGY WHITE 340 HUSTED STATION RD PITTS GROVE NJ 08318	TRUSTEE	0.00	0	0	0
PAUL S. DILORENZO	EXECUTIVE DI	40.00	167,201	8,360	0

Federal Statements

**Statement 13 - Form 990-PF, Part VII, Line 1 - List of Officers, Directors, Trustees,
Etc. (continued)**

<u>Name and Address</u>	<u>Title</u>	<u>Average Hours</u>	<u>Compensation</u>	<u>Benefits</u>	<u>Expenses</u>
91 S. VIRGINIA AVE. CARNEYS POINT NJ 08069					

Federal Statements**Statement 14 - Form 990-PF, Part VIII-A, Line 2 - Summary of Direct Charitable Activities**Description

PREVENTATIVE CARE GRANTS:

1. ARC of Salem County	\$45,000
2. Meals on Wheels	\$ 3,000
3. Southern New Jersey Perinatal Co-op	\$ 3,000

Statement 15 - Form 990-PF, Part VIII-A, Line 3 - Summary of Direct Charitable ActivitiesDescription

MATCHING GIFT PROGRAM - THE SALEM HEALTH AND WELLNESS FOUNDATION PROVIDES GENERAL OPERATING SUPPORT TO SALEM COUNTY 501(C)(3) NON-PROFIT ORGANIZATIONS OFFERING SERVICES THAT FALL WITHIN THE FOUNDATION'S CHARITABLE PURPOSES, VIA THE MATCHING GIFT PROGRAM.

1. Appel Farms	\$20,000
2. ARC of Salem County	\$20,000
3. City of Salem	\$20,000
4. Cornerstone Women's resource center	\$20,000
5. Fellowshiplife foundation	\$20,000
6. Habitat for Humanity of Salem county	\$20,000
7. Ranch Hope	\$20,000
8. Revive South Jersey	\$20,000
9. SHADOW Equestrian	\$20,000

Schedule B
(Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Name of the organization

**SALEM HEALTH AND WELLNESS
FOUNDATION INC**

Employer identification number

01-0625542

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)() (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), 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), 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).

Name of organization

SALEM HEALTH AND WELLNESS

Employer identification number

01-0625542

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ALBERT M. PARVIN TRUST PNC, PO BOX 91309 CLEVELAND OH 44101	\$ 12,043	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	ELEANOR RUMSEY CHARITABLE TRUST PO BOX 95021 HENDERSON NV 89009-5021	\$ 9,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	ESTATE OF J. EVAN HITCHNER PO BOX 95021 HENDERSON NV 89009-5021	\$ 350,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	MORRIS FOX CHARITABLE TRUST PO BOX 95021 HENDERSON NV 89009-5021	\$ 30,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Form **4562**

Department of the Treasury
Internal Revenue Service

Depreciation and Amortization (Including Information on Listed Property)

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172

2024

Attachment Sequence No. **179**

Name(s) shown on return **SALEM HEALTH AND WELLNESS FOUNDATION INC** Identifying number **01-0625542**

Business or activity to which this form relates

Indirect Depreciation

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	1,220,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	3,050,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2023 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2025. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2024	17	4,125
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B—Assets Placed in Service During 2024 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property					
b	5-year property					
c	7-year property					
d	10-year property					
e	15-year property					
f	20-year property					
g	25-year property		25 yrs.		S/L	
h	Residential rental property		27.5 yrs.	MM	S/L	
i	Nonresidential real property		39 yrs.	MM	S/L	

Section C—Assets Placed in Service During 2024 Tax Year Using the Alternative Depreciation System

20a	Class life				S/L	
b	12-year		12 yrs.		S/L	
c	30-year		30 yrs.	MM	S/L	
d	40-year		40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	4,125
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2024)

01-0625542

Federal Asset Report

FYE: 12/31/2024

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv	Meth	Prior	Current
Prior MACRS:											
4	MICROWAVE OVEN	11/08/03	40			X	20	5	HY 200DB	40	0
10	HP SERVER, MONITOR, ETC	6/30/05	4,205				4,205	5	HY 200DB	4,205	0
11	160 GB SERIAL HARDWARE	7/12/05	230				230	5	HY 200DB	230	0
12	SERVER INSTALLATION	9/23/05	4,275				4,275	5	HY 200DB	4,275	0
13	SWITCH & CABLE	3/26/06	46				46	5	HY 200DB	46	0
15	SMITH CORONA TYPEWRITER	7/12/06	130				130	5	HY 200DB	130	0
16	PANASONIC SPEAKERPHONE	2/27/07	500				500	5	HY 200DB	500	0
17	HP DESKTOP COMPUTER	10/14/07	495				495	5	HY 200DB	495	0
18	NEW UPS UNIT	8/15/08	302			X	151	5	HY 200DB	302	0
19	22" LCD MONITOR	2/23/09	160			X	80	5	HY 200DB	160	0
20	2 PANASONIC PHONES	2/23/09	181			X	90	5	HY 200DB	181	0
21	FELLOWES SHREDDER	4/09/09	131			X	65	5	HY 200DB	131	0
22	COMPUTER EQUIPMENT	6/25/09	340			X	170	5	HY 200DB	340	0
25	OFFICE FURN-EXECUTIVE	3/20/03	6,450			X	4,515	10	HY 200DB	6,450	0
26	SAFECO WORKSTATION	9/20/05	230				230	10	HY 200DB	230	0
27	STORAGE CABINET 18X36	7/28/08	320			X	160	10	HY 200DB	320	0
28	4 SHELF CORNER BOOKCASE	4/09/10	220			X	110	10	HY 200DB	220	0
29	15' CONFERENCE TABLE	1/25/11	3,537			X	0	10	HY 200DB	3,537	0
30	20 CONFERENCE CHAIRS	1/25/11	4,738			X	0	10	HY 200DB	4,738	0
31	PHONE & COMPUTER LINES	8/01/06	975				975	10	HY 200DB	975	0
32	CONSTR-NEW OFFICE	8/01/06	10,090				10,090	39	MMS/L	4,510	258
33	BATHROOM FAUCET	4/10/09	47			X	23	5	HY 200DB	47	0
34	2 BASEBOARD HEATERS	4/22/09	650			X	325	10	HY 200DB	650	0
35	3 PHONE SYSTEM	2/07/13	1,480			X	740	5	HY 200DB	1,480	0
36	DELL OPTIPLEX 7010	2/20/13	1,354			X	677	5	HY 200DB	1,354	0
37	VARIOUS OFFICE EQUIP	2/20/13	204			X	102	5	HY 200DB	204	0
38	EXTERIOR SIGN ABOVE DOOR	6/05/13	675			X	337	10	HY 200DB	675	0
39	XEROX PHASER LASER PRINTR	3/14/14	280			X	140	5	HY 200DB	280	0
40	EPSON SVGA PROJECTOR	1/14/15	405			X	202	5	HY 200DB	405	0
41	HP 3500 DESKTOP PC	2/03/15	550			X	275	5	HY 200DB	550	0
42	HP ELITE DESKTOP PC	9/29/15	630			X	315	5	HY 200DB	630	0
43	LG 22" LCD MONITOR	2/19/16	199			X	99	5	HY 200DB	199	0
44	5 APPLE IPAD MINI'S	4/04/16	1,162			X	581	5	HY 200DB	1,162	0
45	1 APPLE IPAD MINI	5/11/16	243			X	121	5	HY 200DB	243	0
46	LENOVA THINKPAD LAPTOP	9/13/16	529			X	264	5	HY 200DB	529	0
47	GRANT CAMERA/PROJECTOR	10/14/16	793			X	396	5	HY 200DB	793	0
48	31 LED LIGHT FIXTURES	7/19/17	3,565			X	1,782	10	HY 200DB	2,296	363
49	HIGH BACK DESK CHAIR	1/16/18	240			X	0	5	HY 200DB	240	0
50	ZOOM EQUIPMENT	8/17/20	1,600			X	512	5	HY 200DB	1,088	341
51	REFRIG 18 CF - LOWES	4/29/21	629			X	419	10	HY 200DB	210	84
52	HP PC	9/09/21	1,172			X	516	5	HY 200DB	656	206
53	XEROX COPIER	12/21/21	8,923			X	5,463	7	HY 200DB	3,460	1,561
54	3 LENOVO LAPTOPS	12/28/22	3,325			X	1,995	5	HY 200DB	1,330	798
55	Paint Walls	4/10/23	3,264			X	653	15	HY 150DB	2,644	62
56	Carpet Replacement	4/10/23	17,400			X	3,480	15	HY 150DB	14,094	331
57	Drywall Repair	7/25/23	850			X	170	15	HY 150DB	689	16
58	Carpet Repair	5/08/23	4,098			X	820	15	HY 150DB	3,319	78
59	New Toiler and Sink Faucet	4/20/23	1,411			X	282	15	HY 150DB	1,143	27
			<u>93,273</u>				<u>47,226</u>			<u>72,385</u>	<u>4,125</u>
	Grand Totals		93,273				47,226			72,385	4,125
	Less: Dispositions and Transfers		0				0			0	0
	Less: Start-up/Org Expense		0				0			0	0
	Net Grand Totals		<u>93,273</u>				<u>47,226</u>			<u>72,385</u>	<u>4,125</u>

01-0625542

NJ Asset Report

FYE: 12/31/2024

Form 990, Page 1

Asset	Description	Date In Service	Cost	Basis for Depr	NJ Prior	NJ Current	Federal Current	Difference Fed - NJ
Prior MACRS:								
4	MICROWAVE OVEN	11/08/03	40	40	40	0	0	0
10	HP SERVER, MONITOR, ETC	6/30/05	4,205	4,205	4,205	0	0	0
11	160 GB SERIAL HARDWARE	7/12/05	230	230	230	0	0	0
12	SERVER INSTALLATION	9/23/05	4,275	4,275	4,275	0	0	0
13	SWITCH & CABLE	3/26/06	46	46	46	0	0	0
15	SMITH CORONA TYPEWRITER	7/12/06	130	130	130	0	0	0
16	PANASONIC SPEAKERPHONE	2/27/07	500	500	500	0	0	0
17	HP DESKTOP COMPUTER	10/14/07	495	495	495	0	0	0
18	NEW UPS UNIT	8/15/08	302	302	302	0	0	0
19	22" LCD MONITOR	2/23/09	160	160	160	0	0	0
20	2 PANASONIC PHONES	2/23/09	181	181	181	0	0	0
21	FELLOWES SHREDDER	4/09/09	131	131	131	0	0	0
22	COMPUTER EQUIPMENT	6/25/09	340	340	340	0	0	0
25	OFFICE FURN-EXECUTIVE	3/20/03	6,450	6,450	0	0	0	0
26	SAFECO WORKSTATION	9/20/05	230	230	230	0	0	0
27	STORAGE CABINET 18X36	7/28/08	320	320	320	0	0	0
28	4 SHELF CORNER BOOKCASE	4/09/10	220	220	220	0	0	0
29	15' CONFERENCE TABLE	1/25/11	3,537	3,537	3,537	0	0	0
30	20 CONFERENCE CHAIRS	1/25/11	4,738	4,738	4,738	0	0	0
31	PHONE & COMPUTER LINES	8/01/06	975	975	975	0	0	0
32	CONSTR-NEW OFFICE	8/01/06	10,090	10,090	4,510	258	258	0
33	BATHROOM FAUCET	4/10/09	47	47	47	0	0	0
34	2 BASEBOARD HEATERS	4/22/09	650	650	650	0	0	0
35	3 PHONE SYSTEM	2/07/13	1,480	1,480	1,480	0	0	0
36	DELL OPTIPLEX 7010	2/20/13	1,354	1,354	1,354	0	0	0
37	VARIOUS OFFICE EQUIP	2/20/13	204	204	204	0	0	0
38	EXTERIOR SIGN ABOVE DOOR	6/05/13	675	675	675	0	0	0
39	XEROX PHASER LASER PRINTR	3/14/14	280	280	280	0	0	0
40	EPSON SVGA PROJECTOR	1/14/15	405	405	405	0	0	0
41	HP 3500 DESKTOP PC	2/03/15	550	550	550	0	0	0
42	HP ELITE DESKTOP PC	9/29/15	630	630	630	0	0	0
43	LG 22" LCD MONITOR	2/19/16	199	199	199	0	0	0
44	5 APPLE IPAD MINI'S	4/04/16	1,162	1,162	1,162	0	0	0
45	1 APPLE IPAD MINI	5/11/16	243	243	243	0	0	0
46	LENOVA THINKPAD LAPTOP	9/13/16	529	529	529	0	0	0
47	GRANT CAMERA/PROJECTOR	10/14/16	793	793	793	0	0	0
48	31 LED LIGHT FIXTURES	7/19/17	3,565	3,565	2,296	363	363	0
49	HIGH BACK DESK CHAIR	1/16/18	240	240	240	0	0	0
50	ZOOM EQUIPMENT	8/17/20	1,600	1,600	1,088	341	341	0
51	REFRIG 18 CF - LOWES	4/29/21	629	629	210	84	84	0
52	HP PC	9/09/21	1,172	1,172	656	206	206	0
53	XEROX COPIER	12/21/21	8,923	8,923	3,460	1,561	1,561	0
54	3 LENOVO LAPTOPS	12/28/22	3,325	3,325	1,330	798	798	0
55	Paint Walls	4/10/23	3,264	3,264	163	310	62	-248
56	Carpet Replacement	4/10/23	17,400	17,400	870	1,653	331	-1,322
57	Drywall Repair	7/25/23	850	850	43	80	16	-64
58	Carpet Repair	5/08/23	4,098	4,098	205	389	78	-311
59	New Toiler and Sink Faucet	4/20/23	1,411	1,411	71	134	27	-107
			<u>93,273</u>	<u>93,273</u>	<u>45,398</u>	<u>6,177</u>	<u>4,125</u>	<u>-2,052</u>
	Grand Totals		93,273	93,273	45,398	6,177	4,125	-2,052
	Less: Dispositions		0	0	0	0	0	0
	Less: Start-up/Org Expense		0	0	0	0	0	0
	Net Grand Totals		<u>93,273</u>	<u>93,273</u>	<u>45,398</u>	<u>6,177</u>	<u>4,125</u>	<u>-2,052</u>

01-0625542

AMT Asset Report

FYE: 12/31/2024

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv	Meth	Prior	Current
Prior MACRS:											
4	MICROWAVE OVEN	11/08/03	40			X	20	5	HY 200DB	40	0
10	HP SERVER, MONITOR, ETC	6/30/05	4,205				4,205	5	HY 150DB	4,205	0
11	160 GB SERIAL HARDWARE	7/12/05	230				230	5	HY 150DB	230	0
12	SERVER INSTALLATION	9/23/05	4,275				4,275	5	HY 200DB	4,275	0
13	SWITCH & CABLE	3/26/06	46				46	5	HY 150DB	46	0
15	SMITH CORONA TYPEWRITER	7/12/06	130				130	5	HY 150DB	130	0
16	PANASONIC SPEAKERPHONE	2/27/07	500				500	5	HY 150DB	500	0
17	HP DESKTOP COMPUTER	10/14/07	495				495	5	HY 150DB	495	0
18	NEW UPS UNIT	8/15/08	302			X	151	5	HY 200DB	302	0
19	22" LCD MONITOR	2/23/09	160			X	80	5	HY 200DB	160	0
20	2 PANASONIC PHONES	2/23/09	181			X	90	5	HY 200DB	181	0
21	FELLOWES SHREDDER	4/09/09	131			X	65	5	HY 200DB	131	0
22	COMPUTER EQUIPMENT	6/25/09	340			X	170	5	HY 200DB	340	0
25	OFFICE FURN-EXECUTIVE	3/20/03	6,450			X	4,515	10	HY 200DB	6,450	0
26	SAFECO WORKSTATION	9/20/05	230				230	10	HY 150DB	230	0
27	STORAGE CABINET 18X36	7/28/08	320			X	160	10	HY 200DB	320	0
28	4 SHELF CORNER BOOKCASE	4/09/10	220			X	110	10	HY 200DB	220	0
29	15' CONFERENCE TABLE	1/25/11	3,537			X	0	10	HY 200DB	3,537	0
30	20 CONFERENCE CHAIRS	1/25/11	4,738			X	0	10	HY 200DB	4,738	0
31	PHONE & COMPUTER LINES	8/01/06	975				975	10	HY 150DB	975	0
32	CONSTR-NEW OFFICE	8/01/06	10,090				10,090	39	MMS/L	4,495	259
33	BATHROOM FAUCET	4/10/09	47			X	23	5	HY 200DB	47	0
34	2 BASEBOARD HEATERS	4/22/09	650			X	325	10	HY 200DB	650	0
35	3 PHONE SYSTEM	2/07/13	1,480			X	740	5	HY 200DB	1,480	0
36	DELL OPTIPLEX 7010	2/20/13	1,354			X	677	5	HY 200DB	1,354	0
37	VARIOUS OFFICE EQUIP	2/20/13	204			X	102	5	HY 200DB	204	0
38	EXTERIOR SIGN ABOVE DOOR	6/05/13	675			X	337	10	HY 200DB	675	0
39	XEROX PHASER LASER PRINTR	3/14/14	280			X	140	5	HY 200DB	280	0
40	EPSON SVGA PROJECTOR	1/14/15	405			X	202	5	HY 200DB	405	0
41	HP 3500 DESKTOP PC	2/03/15	550			X	275	5	HY 200DB	550	0
42	HP ELITE DESKTOP PC	9/29/15	630			X	315	5	HY 200DB	630	0
43	LG 22" LCD MONITOR	2/19/16	199			X	99	5	HY 200DB	199	0
44	5 APPLE IPAD MINI'S	4/04/16	1,162			X	581	5	HY 200DB	1,162	0
45	1 APPLE IPAD MINI	5/11/16	243			X	121	5	HY 200DB	243	0
46	LENOVA THINKPAD LAPTOP	9/13/16	529			X	264	5	HY 200DB	529	0
47	GRANT CAMERA/PROJECTOR	10/14/16	793			X	396	5	HY 200DB	793	0
48	31 LED LIGHT FIXTURES	7/19/17	3,565			X	1,782	10	HY 200DB	3,156	117
49	HIGH BACK DESK CHAIR	1/16/18	240			X	0	5	HY 200DB	240	0
50	ZOOM EQUIPMENT	8/17/20	1,600			X	0	5	HY 200DB	1,600	0
51	REFRIG 18 CF - LOWES	4/29/21	629			X	0	10	HY 200DB	629	0
52	HP PC	9/09/21	1,172			X	0	5	HY 200DB	1,172	0
53	XEROX COPIER	12/21/21	8,923			X	0	7	HY 200DB	8,923	0
54	3 LENOVO LAPTOPS	12/28/22	3,325			X	1,995	5	HY 200DB	1,330	798
55	Paint Walls	4/10/23	3,264			X	653	15	HY 150DB	2,644	62
56	Carpet Replacement	4/10/23	17,400			X	3,480	15	HY 150DB	14,094	331
57	Drywall Repair	7/25/23	850			X	170	15	HY 150DB	689	16
58	Carpet Repair	5/08/23	4,098			X	820	15	HY 150DB	3,319	78
59	New Toiler and Sink Faucet	4/20/23	1,411			X	282	15	HY 150DB	1,143	27
			<u>93,273</u>				<u>40,316</u>			<u>80,140</u>	<u>1,688</u>
	Grand Totals		93,273				40,316			80,140	1,688
	Less: Dispositions and Transfers		<u>0</u>				<u>0</u>			<u>0</u>	<u>0</u>
	Net Grand Totals		<u>93,273</u>				<u>40,316</u>			<u>80,140</u>	<u>1,688</u>

01-0625542

Bonus Depreciation Report

FYE: 12/31/2024

Form 990, Page 1

Asset	Property Description	Date In Service	Tax Cost	Bus Pct	Tax Sec 179 Exp	Current Bonus	Prior Bonus	Tax - Basis for Depr
4	MICROWAVE OVEN	11/08/03	40		0	0	20	20
18	NEW UPS UNIT	8/15/08	302		0	0	151	151
19	22" LCD MONITOR	2/23/09	160		0	0	80	80
20	2 PANASONIC PHONES	2/23/09	181		0	0	91	90
21	FELLOWES SHREDDER	4/09/09	131		0	0	66	65
22	COMPUTER EQUIPMENT	6/25/09	340		0	0	170	170
25	OFFICE FURN-EXECUTIVE	3/20/03	6,450		0	0	1,935	4,515
27	STORAGE CABINET 18X36	7/28/08	320		0	0	160	160
28	4 SHELF CORNER BOOKCASE	4/09/10	220		0	0	110	110
29	15' CONFERENCE TABLE	1/25/11	3,537		0	0	3,537	0
30	20 CONFERENCE CHAIRS	1/25/11	4,738		0	0	4,738	0
33	BATHROOM FAUCET	4/10/09	47		0	0	24	23
34	2 BASEBOARD HEATERS	4/22/09	650		0	0	325	325
35	3 PHONE SYSTEM	2/07/13	1,480		0	0	740	740
36	DELL OPTIPLEX 7010	2/20/13	1,354		0	0	677	677
37	VARIOUS OFFICE EQUIP	2/20/13	204		0	0	102	102
38	EXTERIOR SIGN ABOVE DOOR	6/05/13	675		0	0	338	337
39	XEROX PHASER LASER PRINTR	3/14/14	280		0	0	140	140
40	EPSON SVGA PROJECTOR	1/14/15	405		0	0	203	202
41	HP 3500 DESKTOP PC	2/03/15	550		0	0	275	275
42	HP ELITE DESKTOP PC	9/29/15	630		0	0	315	315
43	LG 22" LCD MONITOR	2/19/16	199		0	0	100	99
44	5 APPLE IPAD MINI'S	4/04/16	1,162		0	0	581	581
45	1 APPLE IPAD MINI	5/11/16	243		0	0	122	121
46	LENOVA THINKPAD LAPTOP	9/13/16	529		0	0	265	264
47	GRANT CAMERA/PROJECTOR	10/14/16	793		0	0	397	396
48	31 LED LIGHT FIXTURES	7/19/17	3,565		0	0	1,783	1,782
49	HIGH BACK DESK CHAIR	1/16/18	240		0	0	240	0
50	ZOOM EQUIPMENT	8/17/20	1,600		0	0	1,088	512
51	REFRIG 18 CF - LOWES	4/29/21	629		0	0	210	419
52	HP PC	9/09/21	1,172		0	0	656	516
53	XEROX COPIER	12/21/21	8,923		0	0	3,460	5,463
54	3 LENOVO LAPTOPS	12/28/22	3,325		0	0	1,330	1,995
55	Paint Walls	4/10/23	3,264		0	0	2,611	653
56	Carpet Replacement	4/10/23	17,400		0	0	13,920	3,480
57	Drywall Repair	7/25/23	850		0	0	680	170
58	Carpet Repair	5/08/23	4,098		0	0	3,278	820
59	New Toiler and Sink Faucet	4/20/23	1,411		0	0	1,129	282
Grand Total			<u>72,097</u>		<u>0</u>	<u>0</u>	<u>46,047</u>	<u>26,050</u>

01-0625542

Depreciation Adjustment Report

FYE: 12/31/2024

All Business Activities

Form	Unit	Asset	Description	Tax	AMT	AMT Adjustments/ Preferences
MACRS Adjustments:						
Page 1	1	4	MICROWAVE OVEN	0	0	0
Page 1	1	10	HP SERVER, MONITOR, ETC	0	0	0
Page 1	1	11	160 GB SERIAL HARDWARE	0	0	0
Page 1	1	12	SERVER INSTALLATION	0	0	0
Page 1	1	13	SWITCH & CABLE	0	0	0
Page 1	1	15	SMITH CORONA TYPEWRITER	0	0	0
Page 1	1	16	PANASONIC SPEAKERPHONE	0	0	0
Page 1	1	17	HP DESKTOP COMPUTER	0	0	0
Page 1	1	18	NEW UPS UNIT	0	0	0
Page 1	1	19	22" LCD MONITOR	0	0	0
Page 1	1	20	2 PANASONIC PHONES	0	0	0
Page 1	1	21	FELLOWES SHREDDER	0	0	0
Page 1	1	22	COMPUTER EQUIPMENT	0	0	0
Page 1	1	25	OFFICE FURN-EXECUTIVE	0	0	0
Page 1	1	26	SAFECO WORKSTATION	0	0	0
Page 1	1	27	STORAGE CABINET 18X36	0	0	0
Page 1	1	28	4 SHELF CORNER BOOKCASE	0	0	0
Page 1	1	29	15' CONFERENCE TABLE	0	0	0
Page 1	1	30	20 CONFERENCE CHAIRS	0	0	0
Page 1	1	31	PHONE & COMPUTER LINES	0	0	0
Page 1	1	32	CONSTR-NEW OFFICE	258	259	-1
Page 1	1	33	BATHROOM FAUCET	0	0	0
Page 1	1	34	2 BASEBOARD HEATERS	0	0	0
Page 1	1	35	3 PHONE SYSTEM	0	0	0
Page 1	1	36	DELL OPTIPLEX 7010	0	0	0
Page 1	1	37	VARIOUS OFFICE EQUIP	0	0	0
Page 1	1	38	EXTERIOR SIGN ABOVE DOOR	0	0	0
Page 1	1	39	XEROX PHASER LASER PRINTR	0	0	0
Page 1	1	40	EPSON SVGA PROJECTOR	0	0	0
Page 1	1	41	HP 3500 DESKTOP PC	0	0	0
Page 1	1	42	HP ELITE DESKTOP PC	0	0	0
Page 1	1	43	LG 22" LCD MONITOR	0	0	0
Page 1	1	44	5 APPLE IPAD MINIS	0	0	0
Page 1	1	45	1 APPLE IPAD MINI	0	0	0
Page 1	1	46	LENOVA THINKPAD LAPTOP	0	0	0
Page 1	1	47	GRANT CAMERA/PROJECTOR	0	0	0
Page 1	1	48	31 LED LIGHT FIXTURES	363	117	246
Page 1	1	49	HIGH BACK DESK CHAIR	0	0	0
Page 1	1	50	ZOOM EQUIPMENT	341	0	341
Page 1	1	51	REFRIG 18 CF - LOWES	84	0	84
Page 1	1	52	HP PC	206	0	206
Page 1	1	53	XEROX COPIER	1,561	0	1,561
Page 1	1	54	3 LENOVO LAPTOPS	798	798	0
Page 1	1	55	Paint Walls	62	62	0
Page 1	1	56	Carpet Replacement	331	331	0
Page 1	1	57	Drywall Repair	16	16	0
Page 1	1	58	Carpet Repair	78	78	0
Page 1	1	59	New Toiler and Sink Faucet	27	27	0
				<u>4,125</u>	<u>1,688</u>	<u>2,437</u>

01-0625542

Future Depreciation Report**FYE: 12/31/25**

FYE: 12/31/2024

Form 990, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
Prior MACRS:					
4	MICROWAVE OVEN	11/08/03	40	0	0
10	HP SERVER, MONITOR, ETC	6/30/05	4,205	0	0
11	160 GB SERIAL HARDWARE	7/12/05	230	0	0
12	SERVER INSTALLATION	9/23/05	4,275	0	0
13	SWITCH & CABLE	3/26/06	46	0	0
15	SMITH CORONA TYPEWRITER	7/12/06	130	0	0
16	PANASONIC SPEAKERPHONE	2/27/07	500	0	0
17	HP DESKTOP COMPUTER	10/14/07	495	0	0
18	NEW UPS UNIT	8/15/08	302	0	0
19	22" LCD MONITOR	2/23/09	160	0	0
20	2 PANASONIC PHONES	2/23/09	181	0	0
21	FELLOWES SHREDDER	4/09/09	131	0	0
22	COMPUTER EQUIPMENT	6/25/09	340	0	0
25	OFFICE FURN-EXECUTIVE	3/20/03	6,450	0	0
26	SAFECO WORKSTATION	9/20/05	230	0	0
27	STORAGE CABINET 18X36	7/28/08	320	0	0
28	4 SHELF CORNER BOOKCASE	4/09/10	220	0	0
29	15' CONFERENCE TABLE	1/25/11	3,537	0	0
30	20 CONFERENCE CHAIRS	1/25/11	4,738	0	0
31	PHONE & COMPUTER LINES	8/01/06	975	0	0
32	CONSTR-NEW OFFICE	8/01/06	10,090	259	259
33	BATHROOM FAUCET	4/10/09	47	0	0
34	2 BASEBOARD HEATERS	4/22/09	650	0	0
35	3 PHONE SYSTEM	2/07/13	1,480	0	0
36	DELL OPTIPLEX 7010	2/20/13	1,354	0	0
37	VARIOUS OFFICE EQUIP	2/20/13	204	0	0
38	EXTERIOR SIGN ABOVE DOOR	6/05/13	675	0	0
39	XEROX PHASER LASER PRINTR	3/14/14	280	0	0
40	EPSON SVGA PROJECTOR	1/14/15	405	0	0
41	HP 3500 DESKTOP PC	2/03/15	550	0	0
42	HP ELITE DESKTOP PC	9/29/15	630	0	0
43	LG 22" LCD MONITOR	2/19/16	199	0	0
44	5 APPLE IPAD MINI'S	4/04/16	1,162	0	0
45	1 APPLE IPAD MINI	5/11/16	243	0	0
46	LENOVA THINKPAD LAPTOP	9/13/16	529	0	0
47	GRANT CAMERA/PROJECTOR	10/14/16	793	0	0
48	31 LED LIGHT FIXTURES	7/19/17	3,565	362	117
49	HIGH BACK DESK CHAIR	1/16/18	240	0	0
50	ZOOM EQUIPMENT	8/17/20	1,600	171	0
51	REFRIG 18 CF - LOWES	4/29/21	629	67	0
52	HP PC	9/09/21	1,172	207	0
53	XEROX COPIER	12/21/21	8,923	1,115	0
54	3 LENOVO LAPTOPS	12/28/22	3,325	479	479
55	Paint Walls	4/10/23	3,264	56	56
56	Carpet Replacement	4/10/23	17,400	297	297
57	Drywall Repair	7/25/23	850	14	14
58	Carpet Repair	5/08/23	4,098	70	70
59	New Toiler and Sink Faucet	4/20/23	1,411	24	24
			<u>93,273</u>	<u>3,121</u>	<u>1,316</u>
	Grand Totals		<u>93,273</u>	<u>3,121</u>	<u>1,316</u>

Asset	Description	Date In Service	Cost	NJ	NJ AMT
Prior MACRS:					
4	MICROWAVE OVEN	11/08/03	40	0	0
10	HP SERVER, MONITOR, ETC	6/30/05	4,205	0	0
11	160 GB SERIAL HARDWARE	7/12/05	230	0	0
12	SERVER INSTALLATION	9/23/05	4,275	0	0
13	SWITCH & CABLE	3/26/06	46	0	0
15	SMITH CORONA TYPEWRITER	7/12/06	130	0	0
16	PANASONIC SPEAKERPHONE	2/27/07	500	0	0
17	HP DESKTOP COMPUTER	10/14/07	495	0	0
18	NEW UPS UNIT	8/15/08	302	0	0
19	22" LCD MONITOR	2/23/09	160	0	0
20	2 PANASONIC PHONES	2/23/09	181	0	0
21	FELLOWES SHREDDER	4/09/09	131	0	0
22	COMPUTER EQUIPMENT	6/25/09	340	0	0
25	OFFICE FURN-EXECUTIVE	3/20/03	6,450	0	0
26	SAFECO WORKSTATION	9/20/05	230	0	0
27	STORAGE CABINET 18X36	7/28/08	320	0	0
28	4 SHELF CORNER BOOKCASE	4/09/10	220	0	0
29	15' CONFERENCE TABLE	1/25/11	3,537	0	0
30	20 CONFERENCE CHAIRS	1/25/11	4,738	0	0
31	PHONE & COMPUTER LINES	8/01/06	975	0	0
32	CONSTR-NEW OFFICE	8/01/06	10,090	259	259
33	BATHROOM FAUCET	4/10/09	47	0	0
34	2 BASEBOARD HEATERS	4/22/09	650	0	0
35	3 PHONE SYSTEM	2/07/13	1,480	0	0
36	DELL OPTIPLEX 7010	2/20/13	1,354	0	0
37	VARIOUS OFFICE EQUIP	2/20/13	204	0	0
38	EXTERIOR SIGN ABOVE DOOR	6/05/13	675	0	0
39	XEROX PHASER LASER PRINTR	3/14/14	280	0	0
40	EPSON SVGA PROJECTOR	1/14/15	405	0	0
41	HP 3500 DESKTOP PC	2/03/15	550	0	0
42	HP ELITE DESKTOP PC	9/29/15	630	0	0
43	LG 22" LCD MONITOR	2/19/16	199	0	0
44	5 APPLE IPAD MINI'S	4/04/16	1,162	0	0
45	1 APPLE IPAD MINI	5/11/16	243	0	0
46	LENOVA THINKPAD LAPTOP	9/13/16	529	0	0
47	GRANT CAMERA/PROJECTOR	10/14/16	793	0	0
48	31 LED LIGHT FIXTURES	7/19/17	3,565	362	312
49	HIGH BACK DESK CHAIR	1/16/18	240	0	0
50	ZOOM EQUIPMENT	8/17/20	1,600	171	133
51	REFRIG 18 CF - LOWES	4/29/21	629	67	55
52	HP PC	9/09/21	1,172	207	195
53	XEROX COPIER	12/21/21	8,923	1,115	1,093
54	3 LENOVO LAPTOPS	12/28/22	3,325	479	651
55	Paint Walls	4/10/23	3,264	279	279
56	Carpet Replacement	4/10/23	17,400	1,488	1,488
57	Drywall Repair	7/25/23	850	73	73
58	Carpet Repair	5/08/23	4,098	351	351
59	New Toiler and Sink Faucet	4/20/23	1,411	120	120
			<u>93,273</u>	<u>4,971</u>	<u>5,009</u>
	Grand Totals		<u>93,273</u>	<u>4,971</u>	<u>5,009</u>

**SALEM HEALTH AND WELLNESS
FOUNDATION INC**

01-0625542 Form 990-PF Estimates

Form **990-W**
(Worksheet)
Department of the Treasury
Internal Revenue Service

**Estimated Tax on Unrelated Business Taxable
Income for Tax-Exempt Organizations**
(and on Investment Income for Private Foundations)

OMB No. 1545-0047

Go to www.irs.gov/Form990W for instructions and the latest information.
Keep for your records. Do not send to the Internal Revenue Service.

2024

1	Unrelated business taxable income expected in the tax year	1	
2	Tax on the amount on line 1. See instructions for tax computation	2	
3	Alternative minimum tax for trusts. See instructions	3	
4	Total. Add lines 2 and 3	4	
5	Estimated tax credits. See instructions	5	
6	Subtract line 5 from line 4	6	
7	Other taxes. See instructions	7	
8	Total. Add lines 6 and 7	8	
9	Credit for federal tax paid on fuels. See instructions	9	
10a	Subtract line 9 from line 8. Note: If less than \$500, the organization is not required to make estimated tax payments. Private foundations, see instructions	10a	33,682
b	Enter the tax shown on the 2023 return. See instructions. Caution: If zero or the tax year was for less than 12 months, skip this line and enter the amount from line 10a on line 10c	10b	33,682
c	2024 Estimated Tax. Enter the smaller of line 10a or line 10b. If the organization is required to skip line 10b, enter the amount from line 10a on line 10c	10c	33,682

		(a)	(b)	(c)	(d)	
11	Installment due dates. See instructions	11	05/15/25	06/16/25	09/15/25	12/15/25
12	Required installments. Enter 25% of line 10c in columns (a) through (d). But see instructions if the organization uses the annualized income installment method, the adjusted seasonal installment method, or is a "large organization."	12	8,421	8,421	8,421	8,421
13	2023 Overpayment. See instructions	13	8,421	6,099		
14	Payment due (Subtract line 13 from line 12)	14		2,322	8,421	8,421

For Paperwork Reduction Act Notice, see instructions.

Form **990-W** (2022)

Form 990-PF	Underdistribution and Excess Distributions for Part XII	2024
For calendar year 2024, or tax year beginning _____, ending _____		
Name SALEM HEALTH AND WELLNESS FOUNDATION INC		Employer Identification Number 01-0625542

Undistributed Income Carryovers

Form 990-PF, Part XII

Tax Year	Prior Undistributed Income			Current Year Decreases	Next Year Carryover	
	Nontaxable or Previously Taxed	Taxable in 2024	Total per Year		Nontaxable or Previously Taxed	Taxable in 2025
Years prior						
20 20						
20 21						
20 22						
2023						
2024			1,200,273	1,200,273		
Total Carryover to Next Year						0

* Carryover amount includes 4942(a) amounts

Excess Distribution Carryovers

Form 990-PF, Part XII

	Current Year	Next Year
	Decreases	Carryover
2019	21,319,657	
2020	14,374,244	14,374,244
2021		
2022		
2023		
Current Year Excess Distribution Generated (2024)		0
Total Carryover to Next Year		14,374,244

Electronic Funds Withdrawal - Estimates

Form **990-PF**

2025

For calendar year 2025 or tax year beginning _____, ending _____

Name
**SALEM HEALTH AND WELLNESS
 FOUNDATION INC**

Employer Identification Number
01-0625542

Form Payment Record

This record is included with the IRS electronic file for taxpayers who elect to pay their estimated taxes by electronic funds withdrawal

Quarter	<u>2</u>
Routing Transit Number	<u>031201085</u>
Bank Account Number	<u>327913</u>
Type of Account	<u>checking</u>
Taxpayer Phone Number	<u>856-299-4460</u>
Requested Payment Date	<u>06/16/25</u>
Amount of Estimated Tax Payment	<u>2,322</u>

DO NOT SUBMIT THIS DOCUMENT TO THE IRS

Electronic Funds Withdrawal - Estimates

Form **990-PF**

2025

For calendar year 2025 or tax year beginning _____, ending _____

Name
**SALEM HEALTH AND WELLNESS
 FOUNDATION INC**

Employer Identification Number
01-0625542

Form Payment Record

This record is included with the IRS electronic file for taxpayers who elect to pay their estimated taxes by electronic funds withdrawal

Quarter	<u>3</u>
Routing Transit Number	<u>031201085</u>
Bank Account Number	<u>327913</u>
Type of Account	<u>checking</u>
Taxpayer Phone Number	<u>856-299-4460</u>
Requested Payment Date	<u>09/15/25</u>
Amount of Estimated Tax Payment	<u>8,421</u>

DO NOT SUBMIT THIS DOCUMENT TO THE IRS

Electronic Funds Withdrawal - Estimates

Form **990-PF**

2025

For calendar year 2025 or tax year beginning _____, ending _____

Name
**SALEM HEALTH AND WELLNESS
 FOUNDATION INC**

Employer Identification Number
01-0625542

Form Payment Record

This record is included with the IRS electronic file for taxpayers who elect to pay their estimated taxes by electronic funds withdrawal

Quarter	<u>4</u>
Routing Transit Number	<u>031201085</u>
Bank Account Number	<u>327913</u>
Type of Account	<u>checking</u>
Taxpayer Phone Number	<u>856-299-4460</u>
Requested Payment Date	<u>12/15/25</u>
Amount of Estimated Tax Payment	<u>8,421</u>

DO NOT SUBMIT THIS DOCUMENT TO THE IRS

Form 990PF	Two Year Comparison Report	2023 & 2024
For calendar year 2024, or tax year beginning _____, ending _____		

Name **SALEM HEALTH AND WELLNESS FOUNDATION INC** Taxpayer Identification Number **01-0625542**

		2023		2024		Differences		
		Revenue and expenses per books	Net investment income	Revenue and expenses per books	Net investment income	Revenue and expenses per books	Net investment income	
Revenue	1. Contributions, gifts, grants, and similar amounts received	1. 554,316		422,113		-132,203		
	2. Interest on savings and temporary cash investments	2.						
	3. Dividends and interest from securities	3. 692,263	692,263	933,794	933,794	241,531	241,531	
	4. Gross rents	4.						
	5. Net gain or (loss) from sale of assets	5. 488,593		1,444,311		955,718		
	6. Capital gain net income	6.		488,593	1,444,311		955,718	
	7. Gross profit or (loss)	7.						
	8. Other income	8. 180,000	180,000	180,005	180,005	5	5	
	9. Total. Add lines 1 through 8	9.	1,915,172	1,360,856	2,980,223	2,558,110	1,065,051	1,197,254
Expenses & Deductions	10. Compensation of officers, directors, trustees, etc.	10. 152,980	7,649	167,201	8,360	14,221	711	
	11. Other employee salaries and wages	11. 85,479	4,274	104,492	5,224	19,013	950	
	12. Pension plans, employee benefits	12. 35,483	1,774	34,202	1,710	-1,281	-64	
	13. Professional fees	13. 227,923	105,092	253,549	119,672	25,626	14,580	
	14. Interest	14.						
	15. Taxes	15. 14,457		33,682		19,225		
	16. Depreciation and depletion	16. 4,502		4,974		472		
	17. Occupancy	17.						
	18. Other expenses	18. 91,477		68,075		-23,402		
	19. Contributions, gifts, grants paid	19. 328,310		497,779		169,469		
	20. Total expenses and disbursements. Add lines 10 through 19	20.	940,611	118,789	1,163,954	134,966	223,343	16,177
21. Net income (if negative investment activity, enter -0-)	21.	974,561	1,242,067	1,816,269	2,423,144	841,708	1,181,077	
Taxes	22. Excise Tax	22.	17,265		33,682		16,417	
	23. Section 511 Tax	23.						
	24. Subtitle A income tax	24.						
	25. Total Taxes	25.		17,265		33,682		16,417
	26. Estimates and overpayments credited	26.		65,467		48,202		-17,265
Due / Refund	27. Foreign tax withheld	27.						
	28. Other Payments	28.						
	29. Total payments and credits	29.		65,467		48,202		-17,265
	30. Balance due / (Overpayment)	30.		-48,202		-14,520		33,682
	31. Overpayment credited to next year	31.		48,202		14,520		-33,682
	32. Penalty	32.						
	33. Net due / (Refund)	33.		0		0		
Other	34. Total assets	34. 37,625,698		40,281,418		2,655,720		
	35. Total liabilities	35. 90,013		102,581		12,568		
	36. Net assets	36. 37,535,685		40,178,837		2,643,152		

Federal Statements**Taxable Dividends from Securities**

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>US Obs (\$ or %)</u>
	\$ 933,794		14		
Total	\$ 933,794				

Other Investment Income

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business</u>	<u>Exclusion Code</u>	<u>Postal Code</u>
INTEREST INCOME - CHA PARTNER	\$ 180,005		14	
Total	\$ 180,005			