Form	990
Departm	nent of the Treasury

Return of Organization Exempt From Income Tax

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

► Do not enter Social Security numbers on this form as it may be made public.

<u>OMB No. 1545-0047</u> 20**18**

Open to Public

Inter	nal Reve	nue Servi	ice		Information a	about Form	990 and its	instruction	s is at www.	.irs.gov/	'form990.		In	spection	bn
AF	or th	e 2018	8 cale	ndar year, or t	ax year begir	nning	07,	/01, 2018	8, and end	ing		06	5/30 ,20	19	
_			C Nam	e of organization							D Employer id	entifi	cation num	ber	
B c	heck if ap	plicable:	TH	E PEW CHAR	ITABLE TRU	JSTS									
	Addre chang		Doing	g Business As							56-230'	714	7		
	-	change	Num	ber and street (or	P.O. box if mail is	not delivered to	o street addres	s)	Room/suite		E Telephone n	umbe	er		
	Initial		20	05 MARKET	STREET, SU	JITE 280	00				(215) 57	5 - 9	9050		
	Termi			or town, state or p)							
_	Amen		-	ILADELPHIA	-		0				G Gross receip	ots \$	1.501.	654	397.
	return Applic	ation		e and address of p			CA W. RI	IMET.			H(a) Is this a gro			Yes	X No
	pendir	ng		05 MARKET					PA 1910	3	subordinates	s?		Yes	No
	Tox ox	empt sta		X 501(c)(3)									st. (see instruc	, i	
				PEWTRUSTS.	501(c) () ┥ (ins	sert no.)	4947(a)(1)	01 5	27					
						• • • •			1. 14		H(c) Group exem				
		<u> </u>	ization:		Trust	Association	Other 🕨		L Year	of format	ion: 2002 M	State	e of legal do	micile:	PA
P	art I		nmary												
	1			be the organizat											
JCe				NG PUBLIC	POLICY, IN	IFORMING	THE PUI	BLIC, A	ND INVI	GORAT	1NG				
naı		CIV	IC LI												
Vel			this bo		e organization d		•	•				s.			
ğ	3	Numbe	er of vo	oting members o	of the governing	body (Part V	I, line 1a)					3			13.
ŝ				dependent votin								4			12.
itie				r of individuals e								5			040.
Activities & Governance	6	Total r	number	r of volunteers (e	stimate if necess	sary)						6			205.
Ā	7a	Total u	unrelate	ed business reve	enue from Part V	III, column (C	C), line 12					7a		832	,850
	b	Net un	related	d business taxab	le income from	Form 990-T,	line 34 🔒					7b			0
											Prior Year		Curi	rent Ye	ar
e	8	Contri	butions	and grants (Par	t VIII, line 1h)					² ו	90,454,13	31.	318	,855	,082
nue	9	Progra	am serv	/ice revenue (Par	t VIII, line 2g)				Y FOR		427,51	10.		429	,446
Revenue				ncome (Part VIII,				PUBLIC I	NSPECTION		45,665,87	70.	35	,351	,339
£	11	Other	revenu	ie (Part VIII, colu	umn (A), lines 5,	6d, 8c, 9c, 1	0c, and 11e)				1,326,26	53.	1	,053	,092
				e - add lines 8 th							37,873,77	74.	355	,688	,959
				imilar amounts p							.58,052,61	L1.	136	,947	,523
				to or for membe								0.			0
s	4 5			er compensation							.29,652,12	21.	128	,269	,422
Expenses	16a			fundraising fees								0.		143	,745
bei	b	Total f	undrai	sing expenses (F	Part IX, column (I), line 25) ∎	6,	574,805	5.	•					
ŵ	17			ses (Part IX, colu							79,046,50)1.	78	,282	,133
	18	Total e	expension	es. Add lines 13	-17 (must equal	Part IX colu	imn (A) line :	25)		•	66,751,23		343	,642	,823
				s expenses. Sub							28,877,45				,136
es		1101011	40 1000					<u></u>		•	ning of Current			of Year	
Net Assets or Fund Balances	20	Total	necote (Part X, line 16)							60,502,21		1,296		
Ass Bal	21			es (Part X, line 10)						•	79,671,11				,518
und /	22			r fund balances.						•	80,831,10				,696
	rt II			e Block	Subtract line 21	110111 IIIIe 20		<u></u>		•		• • •		,	1020
				y, I declare that I i	have examined thi	is return inclu	Iding accomp	anving sched	ules and state	oments a	and to the best o	fmv	knowledge	and he	lief it is
true	e, corre	ct, and	complet	e. Declaration of p	reparer (other than	officer) is bas	sed on all infor	mation of wh	ich preparer h	nas any kr	nowledge.	i iiiy	kilowicuge		
Sig	n		Signatu	re of officer							Date				
He				CCA W. RIM	FT.			DDFCT	DENT &	CEO					
		I I .		print name and title				FREGT.							
				eparer's name	~	Preparer's si	anature		Date			.,	PTIN		
Paic	ł			-			9.10.010		Dale		Check self-employ	ויינ) 2 E E	
Pre	parer	FRAN		JIARDINI		 							P00532		
Use	Only	Firm's		-	THORNTON L								605555		
				2001 MARKE							Phone no.		5-561-4		
				is return with the				5)						es	No
For	Paper	work l	Reduct	tion Act Notice,	see the separat	e instructior	IS.						Forr	n 990	(2018)

For	m 990 (2018)	Page 2
P	art III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	
	PEW IS DRIVEN BY THE POWER OF KNOWLEDGE TO SOLVE TODAY'S MOST	
	CHALLENGING PROBLEMS. PEW APPLIES A RIGOROUS, ANALYTICAL APPROACH TO	
	IMPROVE PUBLIC POLICY, INFORM THE PUBLIC AND INVIGORATE CIVIC LIFE.	
_	Did the encoderation undertake any similificant encoder any issue during the user which were not listed on the	
2	Did the organization undertake any significant program services during the year which were not listed on the	Yes X No
	prior Form 990 or 990-EZ?	
2	Did the organization cease conducting, or make significant changes in how it conducts, any program	
3		Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as	measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations	
	the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 205,311,054. including grants of \$ 51,074,231.) (Revenue \$)
	IMPROVING PUBLIC POLICY. WE STUDY AND PROMOTE NONPARTISAN POLICY	
	SOLUTIONS FOR PRESSING AND EMERGING PROBLEMS AFFECTING THE	
	AMERICAN PUBLIC AND THE GLOBAL COMMUNITY.	
4b	(Code:) (Expenses \$50,208,000. including grants of \$42,250,000.) (Revenue \$)
	INFORMING THE PUBLIC. PEW RESEARCH CENTER, OUR WASHINGTON,	
	D.CBASED CHARITABLE SUBSIDIARY, IS HOME TO MOST OF OUR	
	INFORMATION INITIATIVES. IT USES IMPARTIAL, FACT-BASED	
	PUBLIC-OPINION POLLING AND OTHER RESEARCH TOOLS TO TRACK IMPORTANT	
	ISSUES AND TRENDS.	
-		
4C	(Code:) (Expenses \$50,030,156. including grants of \$43,623,292.) (Revenue \$ INVIGORATING CIVIC LIFE. WE SUPPORT NATIONAL INITIATIVES THAT)
	ENCOURAGE CIVIC PARTICIPATION. IN OUR HOMETOWN OF PHILADELPHIA, WE	
	SUPPORT ORGANIZATIONS THAT CREATE A THRIVING ARTS AND CULTURE COMMUNITY AND INSTITUTIONS THAT ENHANCE THE WELL-BEING OF THE	
	REGION'S NEEDIEST CITIZENS.	
	REGION 5 NEEDIESI CIIIZENS.	
4 -1	Other program services (Describe in Schedule O.) ATTACHMENT 1	
4d		
4 -	(Expenses \$ including grants of \$)(Revenue \$ 429,446.) Total program service expenses ▶ 305,549,210.	
JSA		orm 990 (2018)
	¹ 020 1.000 1211PT 700P 4/23/2020 6:41:20 PM V 18-8.2F 0166181	Orm 990 (2018) PAGE 2
		INGE Z

Form 9	90 (2018)		F	Page 3
Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		37	
•	complete Schedule A. Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	1 2	X X	
2 3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	2	А	
3	candidates for public office? If "Yes," complete Schedule C, Part I	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	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I.	6	Х	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			37
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			Х
9	<i>complete Schedule D, Part III</i> Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	8		
9	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9	x	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or 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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	Х	
b	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more	444		Х
Ь	of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i> . Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	11c		
u	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		х
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12 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
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)? <i>If "Yes," complete Schedule E</i>	13	37	X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	
d	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	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	140		
10	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	х	
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		Х
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	Х	
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		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			v
	If "Yes," complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		
ں 21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	20b		
~ 1	domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	х	
ISA				<u> </u>

JSA 8E1021 1.000 1211PT 700P 4/23/2020 6:41:20 PM V 18-8.2F 0166181

Form 990 (2018)

Part	V Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	X	
24 a	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		37	
	through 24d and complete Schedule K. If "No," go to line 25a	24a	X	x
	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 defense any tax exempt hands?	240		x
Ь	to defease any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		X
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24u		
254	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?			
		25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			х
		28a		
ŭ	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .	28b		х
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200		
U	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	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		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,		37	
	or IV, and Part V, line 1	34	X X	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Λ	
Q	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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	Х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	350		
50	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		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	
Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V.			
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and		37	
	reportable gaming (gambling) winnings to prize winners?	1c	X AQA	(2018)
JSA		r orm	330	(∠∪18)

Form	990 (2018)		F	Page 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	1.040			
b		2b	Х	
3a		3a	Х	
		3b	Х	
		4a	Х	
b				
5a		5a		Х
	2a Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax statements, filed for the calendar year ending with or within the year covered by this return. 2a 1,040 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b b If the use on lines 1a and 2a is greater than 25.0, your may be required to <i>e-file</i> (see instructions). 3a b If the organization have unrelated business gross income of \$1,000 or more during the year?. 3b b If 'ves, 'hast filed a Form Solo Tork tisy set? // N'O' to file Sb, provide an explanation in Schedule 0 3b b If 'ves, 'hast filed a Form Solo Tork tisy set? // N'O' to file Sb, provide an explanation in Schedule 0 3b b If 'ves, 'hast filed a Form Solo For this year // N'O' to file Ropt of Foreign Bark and Financial Accounts (FBAR). 3c b D da my taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 3c c If 'ves, ' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 3c b If 'ves,' idd the organization necleve a paymant in schess provided? 7d 7a c If 'ves,' idd the organization include with evens valicitation an express statement that such contributions or gifts were not tax deductible? 3c b If 'ves,' idd the organization necleve a paymont in excess of \$75 made party as a contri			Х
		5c		
	-			
		6a		Х
b	-			
		6b		
7				
а				
		7a		Х
b		7b		
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
		7c		Х
d				
		7e		Х
		7f		Х
		7g		
-		7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
		8		Х
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		X
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b				
		14a		X
b		14b		
15				
		15		X
				37
16	-	16		X
	If "Yes," complete Form 4720, Schedule O.			

Form **990** (2018)

Form 9	990 (2018) THE PEW CHARITABLE TRUSTS 56-230	7147	F	Page 6
Par				
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sect	ion A. Governing Body and Management		Yes	No
	Enter the number of voting members of the generating hady at the end of the toy year $1a$ 13	2	163	NO
1a	Enter the number of voting members of the governing body at the end of the tax year	1		
	if the governing body delegated broad authority to an executive committee or similar			
h	committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent	2		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1		
-	any other officer, director, trustee, or key employee?	2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X X
6	Did the organization have members or stockholders?	6		A
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	7a		x
h	one or more members of the governing body?	10		
a	stockholders, or persons other than the governing body?	7b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
-	the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
<u>Cast</u>	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	.) Yes	No
100	Did the ergenization have lead chapters branches or officience?	10a	X	
	Did the organization have local chapters, branches, or affiliates?			
D	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Х	
11a		11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	120	х	
4.0	describe in Schedule O how this was done	12c 13	X	
13 14	Did the organization have a written whistleblower policy?	14	X	
14	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?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	Х	
	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	4.0		X
	with a taxable entity during the year?	16a		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?	16b		
Sect	ion C. Disclosure	100		I
17	List the states with which a copy of this Form 990 is required to be filed ATTACHMENT 3			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-1	- (Sec	tion 5	01(c)
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	,		()
	X Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int	erest	policy	/, and
	financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and record LINDA BARTLETT 901 E STREET NW WASHINGTON, DC 20004 202-552-2000	s 🕨		
			990	(2018)
JSA				/

Page 7

Part VII	Compensation of Independent Contr		Directors,	Trustees,	Key	Employees,	Highest	Compensated	Employees,	and
	Check if Schedule O	contains a r	esponse or n	ote to any line	e in this	s Part VII				X
	Officers, Directors,									

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

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A)	(B)				ition			(D)	(E)	(F)
Name and Title	Average	``				e than c		Reportable	Reportable	Estimated
	hours per week (list any					is both or/trust		compensation from	compensation from related	amount of other
	hours for				-		, 	the	organizations	compensation
	related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1)ROBERT H. CAMPBELL	3.00									
DIRECTOR AND BOARD CHAIR	0.	Х		Х				18,000.	0.	0.
(2)J. HOWARD PEW II	3.00									
DIRECTOR	0.	X						17,000.	0.	0.
(3)SUSAN W. CATHERWOOD	3.00									
DIRECTOR	0.	X						18,000.	0.	0.
(4)JOSEPH N. PEW V	3.00									
DIRECTOR	0.	Х						17,000.	0.	0.
(5)MARY CATHARINE PEW, M.D.	3.00									
DIRECTOR	0.	Х						17,000.	0.	0.
(6)R. ANDERSON PEW	3.00									
DIRECTOR	0.	Х						18,000.	0.	0.
(7) SANDY FORD PEW	3.00									
DIRECTOR	0.	Х						18,000.	0.	0.
(8)ARISTIDES W. GEORGANTAS	3.00									
DIRECTOR	0.	X						18,000.	0.	0.
(9)DORIS PEW SCOTT	3.00									
DIRECTOR	0.	X						19,000.	0.	0.
(10)JAMES S. PEW	3.00	_								
DIRECTOR	0.	X						19,000.	0.	0.
(11)MARY GRAHAM	3.00	-						_	-	_
DIRECTOR (UNTIL 3/19)	0.	X						0.	0.	0.
(12)HENRY P. BECTON, JR.	3.00							10.000		
DIRECTOR	0.	X						19,000.	0.	0.
(13)CHRISTOPHER JONES	3.00	l						_	_	-
DIRECTOR	0.	X						0.	0.	0.
(14) REBECCA W. RIMEL	48.50							1 010 500		
PRESIDENT & CEO	1.50	Х		Х				1,210,703.	0.	56,720.

JSA 8E1041 1.000 Form 990 (2018)

		, y ⊏ 11				anu i	ngi	hest Compensate	• •		,
(A) Name and title	(B) Average hours per week (list any hours for	Average nours per lek (list any hours for Position Reportable compensation Reportable compensation Average nours per lek (list any hours for (do not check more than one box, unless person is both an officer and a director/trustee) Reportable compensation Reportable compensation the provide of the person of t								(F) Estimated amount of other ompensation	
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MIS		from the organization and related rganizations
5) R. JAMES G. MCMILLAN	48.00			v				416 490		0	41 05
SVP, GENERAL COUNSEL/CORP SEC 6) LINDA BARTLETT	50.00			Х				416,489.		0.	41,97
SVP, CFO & TREASURER	0.	1		x				479,169.		o.	64,03
7) SUSAN URAHN	50.00										01/00
EVP, CHIEF PROGRAM OFFICER	0.	1			X			655,524.		ο.	46,47
8) JANICE BOGASH	50.00	1									
SVP, CHIEF ADMIN OFFICER	0.				Х			463,873.		0.	58,31
9) SALLY A. O'BRIEN	48.00										
SVP INSTITUTIONAL PARTNERSHIPS	2.00				X			448,995.		0.	46,03
0) MELISSA SKOLFIELD	50.00	4									
SVP, COMMUNICATIONS	0.				X			411,838.		0.	59,21
1) JOSHUA S. REICHERT	50.00 0.	-				v		F10 460		o.	62 73
EVP, STRATEGY, DEV & PROG SUP 2) TAMERA LUZZATTO	50.00					Х		510,460.		0.	63,73
SVP, GOVERNMENT RELATIONS	0.	-				x		383,384.		o.	38,49
3) MICHAEL THOMPSON	50.00							565,501.		<u> </u>	50,15
VP & HEAD OF GOVT. PERFORMANCE	0.	1				х		313,800.		ο.	69,49
4) THOMAS DILLON	50.00										
VP & HEAD OF ENVIRONMENT	0.	1				Х		304,138.		0.	69,43
5) THOMAS WATHEN	50.00										
VP, ENVIRONMENT	0.					Х		286,818.		0.	65,26
Ib Sub-total							►	1,408,703.		0.	56,72
c Total from continuation sheets to Part VII, S	ection A		••		• •			4,881,781.		0.	676,89
d Total (add lines 1b and 1c)										0.	733,61
2 Total number of individuals (including but not reportable compensation from the organization		hose 329		d al	bove	e) who	o re	ceived more than	\$100,000 of		
											Yes
B Did the organization list any former offic employee on line 1a? If "Yes," complete Schedul										3	X
For any individual listed on line 1a, is the sorganization and related organizations grain individual.	eater than	\$15	50,0	00?	P If	"Yes	;," (complete Schedu	le J for such	4	X
 Did any person listed on line 1a receive or for services rendered to the organization? If "Ye 	accrue co	mpen	sati	on f	from	n any	uni	related organizatio	on or individual	5	
Section B. Independent Contractors	<i></i> , <i>.</i>		.500		01	54011	<u>,</u>		<u></u>	J	
Complete this table for your five highest com											ix
compensation from the organization. Report c year.											
	Iress							(B) Description of se	rvices		C) ensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ► 112

THE PEW CHARITABLE TRUSTS

-	n 990 (2018)													Page 8
Pa	rt VII Section A. Officers, Directors, Tru		y En	nplo			and H	lig	· · · · ·	ed Employe	ees (co	ontinue	ed)	
	(A) Name and title	hours per (do not check m week (list any box, unless pers hours for officer and a dire							(D) Reportable compensation from the	(E) Reportab compensation related organizatio	n from	an	(F) stimated nount c other pensat	of
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-N		fro orga and	om the anizatio d relate anizatio	e on ed
26		49.50												
	VP, FINANCE & DEPUTY TREASURER	.50	-					X	207,293.		0.		54,4	434.
			-											
			-											
		+												
		+												
		+												
		+	-											
c	Sub-total Total from continuation sheets to Part VII, S Total (add lines 1b and 1c)	-	· · ·	· ·	· ·	· ·	· · ·							
2	Total number of individuals (including but not reportable compensation from the organization		hose 329		ed a	bove	e) who	o re	eceived more than	\$100,000 of	f		-	
3	Did the organization list any former offic												Yes	No
4	employee on line 1a? If "Yes," complete Sched For any individual listed on line 1a, is the	sum of rep	oortab	ole d	com	pen	satior	n ai	nd other compens	sation from	the	3	X	
	organization and related organizations grain individual.			• •		• •					• •	4	X	
	Did any person listed on line 1a receive or for services rendered to the organization? If "Ye											5		X
Se	ction B. Independent Contractors													
1	Complete this table for your five highest com compensation from the organization. Report of year.													
	(A) Name and business add	dress							(B) Description of se	ervices	Co	(C) ompens	sation	
								+						
2	Total number of independent contractors (in more than \$100,000 in compensation from th				nite	d to	thos	ie li	isted above) who	received				

(

Par	t VII	Statement of Reven	nue					
		Check if Schedule O co	ontains a respor	nse or note to ar	y line in this Part VI	<u>"</u>		X
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts nts	1a	Federated campaigns	1a					
Gran	b	Membership dues						
Am A	с	Fundraising events						
ilar İlar	d	Related organizations	1d	280,381,148.				
ons, Sim	е	Government grants (contribu	utions) 1e					
her	f	All other contributions, gifts,	•					
đ		and similar amounts not included		38,473,934.				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included		`	318,855,082.			
	h	Total. Add lines 1a-1f	<u></u>	Business Code	310,055,002.			
Program Service Revenue	2.0	901 E ST RENTAL REVENUE		531120	381,396.	381,396.		
Rev	2a b	CONFERENCE CENTER REVENUE	E	532000	14,300.	14,300.		
/ice	c b	CONTRACT REVENUE		900099	33,750.	33,750.		
Ser	d							
me	e							
ogra	f	All other program service rev	venue					
Ĕ	g	Total. Add lines 2a-2f	<u></u>	<u></u>	429,446.			
	3	Investment income (in	cluding dividen	ds, interest,				
		and other similar amounts).			29,066,860.			29,066,860.
	4	Income from investment of			0.			
	5	Royalties	(i) Real	(ii) Personal	382.			382.
			158,076.	() r ereena.				
	6a	Gross rents	120,752.					
	b c	Less: rental expenses Rental income or (loss)	37,324.					
	d	Net rental income or (loss)			37,324.			37,324.
	7a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	1,152,129,165.					
	b	Less: cost or other basis						
		and sales expenses	1,145,844,686.					
	С	Gain or (loss)	6,284,479.					
	d	Net gain or (loss)		<u>▶</u>	6,284,479.			6,284,479.
ani	8a	Gross income from fundra	0					
ver		events (not including \$						
r R		of contributions reported on	,	0.				
Other Revenue	b	See Part IV, line 18 Image: second seco		0.				
0	c	Net income or (loss) from fu		<u></u> ▶	0.			
	9a	Gross income from gaming	activities.					
		See Part IV, line 19		0.				
	b	Less: direct expenses	b	0.				
	С	Net income or (loss) from g	gaming activities.	<u></u> ▶	0.			
	10a	Gross sales of invent						
		returns and allowances		0.				
	b c	Less: cost of goods sold Net income or (loss) from sa	b les of inventory		0.			
		Miscellaneous Revenu		Business Code				
	11a	PARKING REVENUE - MGMT CO	о С	900099	1,008,156.		832,850.	175,306.
	b	REALIZED FOREIGN CURRENCY		900099	-49,565.			-49,565.
	c	GAIN FROM INSURANCE CLAIN	M	900099	56,795.			56,795.
	d	All other revenue						
	е	Total. Add lines 11a-11d			1,015,386.			
	12	Total revenue. See instruction	ons		355,688,959.	429,446.	832,850.	35,571,581.

JSA

Form **990** (2018)

THE PEW CHARITABLE TRUSTS

Part IX Statement of Functional Expension Section 501(c)(3) and 501(c)(4) organization		All other organization	ns must complete colur	$nn(\Lambda)$
Check if Schedule O contains a	· · · · · · · · · · · · · · · · · · ·			
Do not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.		(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizati	ions		general of prices	
and domestic governments. See Part IV, line 21	105 000 000	125,808,880.		
2 Grants and other assistance to dome				
individuals. See Part IV, line 22	0.			
3 Grants and other assistance to fore	ign			
organizations, foreign governments, and fore				
individuals. See Part IV, lines 15 and 16	-	11,138,643.		
4 Benefits paid to or for members				
5 Compensation of current officers, directed trustees, and key employees		1,482,462.	2,870,107.	516,165.
6 Compensation not included above, to disqual	ified			
persons (as defined under section 4958(f)(1))	and			
persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	95,875,262.	79,701,563.	12,780,421.	3,393,278.
8 Pension plan accruals and contributions (incl		0 10 0 0	1 222	
section 401(k) and 403(b) employer contributi		8,134,050.	1,392,774.	297,869.
9 Other employee benefits		8,696,285.	1,552,829.	427,171.
10 Payroll taxes	7,024,448.	5,701,342.	1,085,178.	237,928.
11 Fees for services (non-employees):		20 141	F 014	1 1 1 /
a Management	1 110 070	29,141.	5,014.	1,114.
b Legal	200 717	440,595.	671,777. 388,717.	607
c Accounting	1 575 789	1,575,789.	300,717.	
d Lobbying	142 745	1,575,705.		143,745.
e Professional fundraising services. See Part IV, line	1 652 961		1,652,861.	115,715.
f Investment management fees	••		1,052,001.	
g Other. (If line 11g amount exceeds 10% of line 25, co	20 505 068	18,530,040.	1,756,742.	218,286.
(A) amount, list line 11g expenses on Schedule O.)12 Advertising and promotion		2,109,453.		766.
13 Office expenses	2 010 E40	3,448,772.	348,030.	115,740.
14 Information technology	10 000 070	10,993,394.	1,623,445.	304,131.
15 Royalties	•			
16 Occupancy	5,887,175.	4,937,224.	803,443.	146,508.
17 Travel	7 551 010	6,865,337.	493,537.	192,336.
18 Payments of travel or entertainment expen	ses			
for any federal, state, or local public official		72,711.		
19 Conferences, conventions, and meetings		2,580,399.	553,719.	99,816.
20 Interest		4,216,568.	725,498.	161,222.
21 Payments to affiliates		<u> </u>	1 015 510	0.60 485
22 Depreciation, depletion, and amortization		6,890,889.	1,015,712.	263,475.
23 Insurance	516,446.	129,933.	381,294.	5,219.
24 Other expenses. Itemize expenses not cove				
above (List miscellaneous expenses in line 24e				
line 24e amount exceeds 10% of line 25, colu (A) amount, list line 24e expenses on Schedule				
	375,541.	374,541.		1,000.
aHONORARIA hPMTS FOR OFFICIALS UNDER \$11		148,893.		±,000.
cDUES AND SUBSCRIPTIONS	1,662,021.	1,527,363.	86,736.	47,922.
dPARKING GARAGE	1,328,806.	_, , ,	1,328,806.	
e All other expenses	17,618.	14,943.	2,168.	507.
25 Total functional expenses. Add lines 1 through 3	242 642 002	305,549,210.	31,518,808.	6,574,805.
 26 Joint costs. Complete this line only if organization reported in column (B) joint co from a combined educational campaign 	the osts			
fundraising solicitation. Check here b	if 0			

0.

Form 990 (2018)

following SOP 98-2 (ASC 958-720)

JSA

0166181

Form 990 (2018) **Balance Sheet** Part X Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 699,401. 932,946. Cash - non-interest-bearing 1 1 5,033,560. 3,993,102. 2 2 Savings and temporary cash investments 23,935,640. 24,502,252. 3 Pledges and grants receivable, net 3 306,680. 402,601. 4 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees. key employees, and highest compensated employees. Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 0. 0. 5 6 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary 0 0. organizations (see instructions). Complete Part II of Schedule L 6 Assets 0 Ο. Notes and loans receivable, net 7 7 0. 0. 8 Inventories for sale or use 8 3,227,420. 3,357,057. Prepaid expenses and deferred charges a 9 10a Land, buildings, and equipment: cost or 261,966,292. 10a other basis. Complete Part VI of Schedule D 65,923,769. 201,694,415. **10c** 196,042,523. 1,018,642,927. 1,059,539,395. Investments - publicly traded securities 11 11 Investments - other securities. See Part IV, line 11 0. 12 0. 12 Investments - program-related. See Part IV, line 11 0. 0 13 13 0. 0. 14 14 Intangible assets 6,962,174. 7,622,338. Other assets. See Part IV, line 11 15 15 1,260,502,217. 1,296,392,214. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 15,834,262. 13,761,722. 17 Accounts payable and accrued expenses 17 158,000,583. 18 165,714,700. 18 Grants payable Ο. 101,250. 19 Deferred revenue 19 153,536,448. 148,133,155. Tax-exempt bond liabilities 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 669,623. 675,710. 21 21 22 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 0. 0. 22 0. Secured mortgages and notes payable to unrelated third parties 0. 23 23 Unsecured notes and loans payable to unrelated third parties 0. 0. 24 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 53,696,647. 25 66,522,528. of Schedule D Total liabilities. Add lines 17 through 25.... 379,671,110. 396,975,518. 26 26 Organizations that follow SFAS 117 (ASC 958), check here 🕨 🔣 and complete lines 27 through 29, and lines 33 and 34. Fund Balances Unrestricted net assets 27 826,090,363. 27 843,000,578. Temporarily restricted net assets 54,740,744. 56,416,118. 28 28 Permanently restricted net assets 29 0. 0. 29 Organizations that do not follow SFAS 117 (ASC 958), check here and P complete lines 30 through 34. Capital stock or trust principal, or current funds Assets 30 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds 32 32 Net Total net assets or fund balances 880,831,107. 899,416,696. 33 33 Total liabilities and net assets/fund balances 1,296,392,214. 1,260,502,217. 34 34

Form 990 (2018)

Form 99	90 (2018)				Pa	ge 12
Part						
	Check if Schedule O contains a response or note to any line in this Part XI					Х
1	Total revenue (must equal Part VIII, column (A), line 12)	1			88,9	
2	Total expenses (must equal Part IX, column (A), line 25)	2			42,8	
3	Revenue less expenses. Subtract line 2 from line 1	3			46,1	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			31,1	
5	Net unrealized gains (losses) on investments	5	-	17,4	34,8	
6	Donated services and use of facilities	6				0.
7	Investment expenses	7				0.
8	Prior period adjustments	8				0.
9	Other changes in net assets or fund balances (explain in Schedule O)	9		L0,8	95,3	52.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10	89	99,4	16,6	96.
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplain	in			
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?.			2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were cor	npiled	or			
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audi					
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for	oversi	ght			
	of the audit, review, or compilation of its financial statements and selection of an independent acc			2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, e					
	Schedule O.	•				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as se	t forth	in			
-	the Single Audit Act and OMB Circular A-133?			3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und	lergo t	the			-
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au	0		3b		

Form **990** (2018)

SCHEDULE A (Form 990 or 990-EZ)

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.

OMB No. 1545-0047 G

		venue Service	l	Go to www.irs.go	//Form990 for instructio	ons and t	he latest i	nformation.	Inspection
Nam	e of th	ne organization						Employer identifi	
TH	E PI	EW CHARITAN						56-23071	
Pa					organizations must c			,	
	orga		•		is: (For lines 1 through			,	
1					tion of churches desc				
2	\square				. (Attach Schedule E	-			
3	\square	-	-		rganization described				
4		hospital's nam	-	-	conjunction with a hos	spital de	scribed ir	section 170(b)(1)(A)	(III). Enter the
5			, ,,		a college or universit	y owne	d or ope	rated by a governme	ental unit described in
				complete Part II.)					
6			-	-	rnmental unit describe		-		
7	Х	-		-	-	pport fr	om a go	vernmental unit or fro	om the general public
_				(1)(A)(vi). (Compl		-			
8					b)(1)(A)(vi). (Complete	-			
9		-		-	ed in section 170(b)(1		-	-	
		university:	r a non-land-	grant college of ac	griculture (see instruct	ions). E	nter the r	name, city, and state o	r the college of
10 11		An organization receipts from support from g acquired by the	activities rela gross investm e organizatio	ted to its exempt f nent income and u n after June 30, 1	ore than 331/3 % of its unctions - subject to a nrelated business tax 975. See section 509 usively to test for publi	certain e able inco (a)(2). (0	exception ome (less Complete	s, and (2) no more tha s section 511 tax) from Part III.)	n 331/3 %of its
12		0	0	•				()()	carry out the purposes
		-	-		-	-			See section 509(a)(3).
		Check the box	in lines 12a t	hrough 12d that d	escribes the type of s	upporting	g organiz	ation and complete lin	nes 12e, 12f, and 12g.
а		Type I. A su	pporting orga	anization operated	, supervised, or contr	olled by	its supp	orted organization(s),	typically by giving
		the supporte	ed organizatio	on(s) the power to	regularly appoint or e	lect a m	ajority of	the directors or truste	es of the
	_	_ supporting c	organization.	ou must complet	e Part IV, Sections A	and B.			
b		_ Type II. A st	upporting org	anization supervise	ed or controlled in co	nnectior	n with its	supported organization	on(s), by having
		control or m	anagement c	of the supporting o	rganization vested in	the sam	e person	is that control or man	age the supported
	_	_ organization	(s). You must	complete Part IV	, Sections A and C.				
С		_ Type III fund	ctionally integ	grated. A supporti	ng organization opera	ted in c	onnectio	n with, and functional	lly integrated with,
	_		-		s). You must comple				
d			•	•	porting organization c	•			• • • • •
			-		nization generally mus			-	d an attentiveness
					omplete Part IV, Sect				
е			•		a written determinatio			••• ••	II, Type III
f	En				ionally integrated sup			ion.	
t a				0	orted organization(s).		• • • • •		•••••
<u> </u>		ame of supported of	-	(ii) EIN	(iii) Type of organization	(iv) is the	organization	(v) Amount of monetary	(vi) Amount of
	(1) 13	ame of supported t	Jiganization		(described on lines 1-10	listed in yo	ur governing	support (see	other support (see
					above (see instructions))	docu Yes	ment? No	instructions)	instructions)
						163	NO		
(A)									
(B)									
(C)									
(D)									
(E)									
Tota	al								
For	Paper	work Reduction A	ct Notice, see th	e Instructions for Form	990 or 990-EZ.			Schedule A	(Form 990 or 990-EZ) 2018

Schedule A (Form 990 or 990-EZ) 2018

Page 2

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

Sec	tion A. Public Support					1	
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	302,012,963.	694,845,000.	308,831,757.	290,454,131.	318,855,082.	1,914,998,933.
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	302,012,963.	694,845,000.	308,831,757.	290,454,131.	318,855,082.	1,914,998,933.
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)						1,449,980,400.
6	Public support. Subtract line 5 from line 4						465,018,533.
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	302,012,963.	694,845,000.	308,831,757.	290,454,131.	318,855,082.	1,914,998,933.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	14,490,032.	14,798,377.	21,407,836.	28,730,978.	29,225,318.	108,652,541.
9	Net income from unrelated business activities, whether or not the business is regularly carried on	145,424.					145,424.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) ATCH. 1	110,779.	144,710.	503,318.	314,790.	182,536.	1,256,133.
11	Total support. Add lines 7 through 10						2,025,053,031.
12	Gross receipts from related activities, etc. (s	see instructions) .				12	5,098,727.
13	First five years. If the Form 990 is f organization, check this box and stop here	<u></u>	<u></u>				
Sec	tion C. Computation of Public Sup	port Percenta	ge				
14	Public support percentage for 2018 (li	ne 6, column (f)) divided by line	11, column (f)).			22.96 %
15	Public support percentage from 2017					15	23.25 %
16a	331/3% support test - 2018. If the or	ganization did n	ot check the bo	x on line 13, ar	nd line 14 is 33	1/3 % or more, o	heck this
	box and stop here. The organization q						
b	331/3% support test - 2017. If the org						
	this box and stop here. The organizati			-			
17a	10%-facts-and-circumstances test - 2	-	•				
	10% or more, and if the organization					-	•
	Part VI how the organization meets to organization						► X
b	10%-facts-and-circumstances test - 2	•					
	15 is 10% or more, and if the orga						-
	Explain in Part VI how the organizati supported organization						▶
18	Private foundation. If the organization						
	instructions						· · · • 🗖 🖂

Schedule A (Form 990 or 990-EZ) 2018

Schedule A (Form 990 or 990-EZ) 2018

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.)

	tion A. Public Support						
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513 .						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b.						
8	Public support. (Subtract line 7c from						
	line 6.)						
Sect	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar						
h	sources						
b	section 511 taxes) from businesses						
-	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	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.)						
4.2							
13	Total support. (Add lines 9, 10c, 11,					1	
13	Total support. (Add lines 9, 10c, 11, and 12.)						
13		or the organiza	ation's first, seco	nd, third, fourth	, or fifth tax ye	ear as a section	n 501(c)(3)
	and 12.)	0					
14	and 12.)						
14	and 12.) First five years. If the Form 990 is for organization, check this box and stop here .	port Percenta	ige				
14 Sect	and 12.) First five years. If the Form 990 is for organization, check this box and stop here tion C. Computation of Public Supp	p ort Percent a , column (f), divid	ige ded by line 13, colu	mn (f))		<u></u>	▶
14 Sect 15 16	and 12.) First five years. If the Form 990 is for organization, check this box and stop here tion C. Computation of Public Supp Public support percentage for 2018 (line 8, Public support percentage from 2017 Sche	p ort Percenta , column (f), divid dule A, Part III, li	i ge ded by line 13, colu ne 15	mn (f))		. 15	▶
14 Sect 15 16	and 12.) First five years. If the Form 990 is for organization, check this box and stop here tion C. Computation of Public Supp Public support percentage for 2018 (line 8,	port Percenta , column (f), divid dule A, Part III, li t Income Per	ige ded by line 13, colu ne 15	mn (f))		. 15	· · · · ▶ □ %
14 Sect 15 16 Sect	and 12.) First five years. If the Form 990 is for organization, check this box and stop here tion C. Computation of Public Support Public support percentage for 2018 (line 8, Public support percentage from 2017 Sche tion D. Computation of Investment Investment income percentage for 2018 (line	port Percenta , column (f), divid edule A, Part III, li t Income Per ne 10c, column	led by line 13, colu ne 15 centage (f), divided by line	mn (f))	· · · · · · · · · · · · · · · · · · ·	. 15	· · · · ► □
14 15 16 Sect 17 18	and 12.) First five years. If the Form 990 is for organization, check this box and stop here tion C. Computation of Public Supp Public support percentage for 2018 (line 8, Public support percentage from 2017 Scher tion D. Computation of Investment Investment income percentage for 2018 (line Investment income percentage from 2017 Scher Scher 2018 (line)	port Percenta , column (f), divid adule A, Part III, li t Income Per me 10c, column Schedule A, Part	led by line 13, colu ne 15 centage (f), divided by line i III, line 17	mn (f))	· · · · · · · · · · · · · · · · · · ·	. 15 16 17 18	· · · · ► □ % % %
14 15 16 Sect 17 18	and 12.) First five years. If the Form 990 is for organization, check this box and stop here tion C. Computation of Public Supp Public support percentage for 2018 (line 8, Public support percentage from 2017 Sche tion D. Computation of Investment Investment income percentage for 2018 (line Investment income percentage from 2017 Sche 331/3% support tests - 2018. If the org	port Percenta , column (f), divid dule A, Part III, li t Income Per ne 10c, column Schedule A, Part ganization did n	Ige ded by line 13, colu ne 15 centage (f), divided by line III, line 17 ot check the box	mn (f)) 13, column (f))	d line 15 is mor	. 15 16 17 18 e than 331/3%, a	► % % % and line
14 15 16 Sect 17 18 19 a	and 12.) First five years. If the Form 990 is for organization, check this box and stop here tion C. Computation of Public Supp Public support percentage for 2018 (line 8, Public support percentage from 2017 Sche tion D. Computation of Investment Investment income percentage for 2018 (line 10, 10, 10, 10, 10, 10, 10, 10, 10, 10,	port Percenta column (f), divid dule A, Part III, li t Income Perc ne 10c, column Schedule A, Part ganization did n is box and sto	Inge ded by line 13, colu ne 15 centage (f), divided by line (f), divide	mn (f)) 13, column (f)) c on line 14, and anization qualifier	d line 15 is mor s as a publicly	15 16 17 18 e than 331/3 %, a supported organ	· · · · ► % % % and line ization . ►
14 15 16 Sect 17 18 19 a	and 12.) First five years. If the Form 990 is for organization, check this box and stop here tion C. Computation of Public Supp Public support percentage for 2018 (line 8, Public support percentage from 2017 Sche tion D. Computation of Investment Investment income percentage for 2018 (line Investment income percentage from 2017 Sche 331/3% support tests - 2018. If the org	port Percenta column (f), divid dule A, Part III, li t Income Perc ne 10c, column Schedule A, Part ganization did not nis box and sto nnization did not	age ded by line 13, colu ne 15 centage (f), divided by line III, line 17 ot check the box p here. The orgonic check a box on	mn (f)) 13, column (f)) (on line 14, and anization qualifie line 14 or line 19	d line 15 is mor s as a publicly 9a, and line 16 is	15 16 17 18 e than 331/3 %, is supported organics s more than 331/3	► % % % % and line ization .► 3 %, and

Yes No

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

56-2307147

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below.*
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in Part VI.*
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*
- 8 Did the organization make a loan to a 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).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in Part VI.*
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in Part VI.*
- **c** Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in Part VI.*
- **10 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 10b below.*
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

V 18-8.2F

10b Schedule A (Form 990 or 990-EZ) 2018

	THE PEW CHARITABLE TRUSTS	56-2307147		
Schedu	ıle A (Form 990 or 990-EZ) 2018		I	Page 5
Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)		
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b	-	
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Pa	art VI. 11c		
Secti	on B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during			
	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 directors or trustees were allocated among the support organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			
		1		
2	Did the organization operate for the benefit of any supported organization other than the supported) or t		
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in F VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	art		
	supervised, or controlled the supporting organization.	2		
Secti	ion C. Type II Supporting Organizations	Z		L
0000			Yes	No
4	Ware a majority of the argonization's directors or trustees during the tay year also a majority of the director	otoro		
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the director or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control of the organization's supported organization (s)?			
	or management of the supporting organization was vested in the same persons that controlled or manage			
	the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations	I		<u> </u>
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) co			
	the organization's governing documents in effect on the date of notification, to the extent not previously			
	provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the suppo			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part			
	the organization maintained a close and continuous working relationship with the supported organization(s). 2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.			
		3		
	on 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 ye	ar (see instruct	ions).	
a L	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>	antitu (aaa inatuu	(ationa)	
С	The organization supported a governmental entity. Describe in Part VI how you supported a government	entity (see instru		No
2	Activities Test. Answer (a) and (b) below.		163	NU
а	Did substantially all of the organization's activities during the tax year directly further the exempt purpos	es 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,	nod		
	how the organization was responsive to those supported organizations, and how the organization determi that these activities constituted substantially all of its activities.	1ed 2a		
-	-			
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI t			

- activities but for the organization's involvement.
 Parent of Supported Organizations. *Answer (a) and (b) below.*Did the organization have the newer to regularly expected a maiority of the office of the second se
 - **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? *Provide details in Part VI.*

reasons for the organization's position that its supported organization(s) would have engaged in these

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.

s regard. 3b Schedule A (Form 990 or 990-EZ) 2018

2b

3a

Schedule A (Form 990 or 990-EZ) 2018			Page
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ 1 Check here if the organization satisfied the Integral Part Test as a qualifying			
instructions. All other Type III non-functionally integrated supporting organization	-		,
Section 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		
Section 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		
b Average monthly cash balances	1b		
c 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 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990 or 990-EZ) 2018

Part Sect	V Type III Non-Functionally Integrated 509(a)(3) ion D - Distributions		, ,	Current Year
1	Amounts paid to supported organizations to accomplish ex	kempt purposes		
2	Amounts paid to perform activity that directly furthers exer		ed	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organiz	zations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	the organization is resp	onsive	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018			
	(reasonable cause required - explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2018			
а	From 2013			
b	From 2014			
С	From 2015			
d	From 2016			
е	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from			
	Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount			
C	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI . See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2014			
b	Excess from 2015			
C	Excess from 2016			
d	Excess from 2017			
e	Excess from 2018			

Part VISupplemental 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.)

FORM 990, SCHEDULE A, PART II, LINE 17A

FACTS AND CIRCUMSTANCES TEST

THE PEW CHARITABLE TRUSTS (PEW) IS DRIVEN BY THE POWER OF KNOWLEDGE TO SOLVE TODAY'S MOST CHALLENGING PROBLEMS. PEW APPLIES A RIGOROUS, ANALYTICAL APPROACH TO IMPROVE PUBLIC POLICY, INFORM THE PUBLIC AND INVIGORATE CIVIC LIFE. PEW QUALIFIES AS A PUBLICLY-SUPPORTED CHARITY BECAUSE IT MEETS THE 10 PERCENT PLUS FACTS AND CIRCUMSTANCES TEST UNDER TREAS. REG. 1.170A-9(F)(I)-(VI) IN THE FOLLOWING RESPECTS:

1. 10 PERCENT OF SUPPORT LIMITATION. PEW NORMALLY RECEIVES SUBSTANTIAL SUPPORT FROM A VARIETY OF PUBLIC SOURCES. PEW'S PUBLIC SUPPORT PERCENTAGE IS 22.96 PERCENT, WELL ABOVE THE 10 PERCENT THRESHOLD.

2. ATTRACTION OF PUBLIC SUPPORT. PEW IS ORGANIZED AND OPERATED TO ATTRACT NEW AND ADDITIONAL SUPPORT ON A CONTINUOUS BASIS. PEW MAINTAINS A CONTINUOUS AND BONA FIDE DEVELOPMENT PROGRAM AND CARRIES ON ACTIVITIES DESIGNED TO ATTRACT SUPPORT FROM INDIVIDUALS, FOUNDATIONS, AND OTHER CHARITABLE ORGANIZATIONS. PEW'S FULL-TIME DEVELOPMENT STAFF IS ACTIVELY INVOLVED IN SEEKING FINANCIAL SUPPORT FROM DIVERSE SOURCES ON AN ONGOING BASIS AND WORKS CONSISTENTLY TO IDENTIFY AND QUALIFY MORE PROSPECTIVE DONORS AND INCREASE OUR OUTREACH TO NEW FUNDERS VIA PHILANTHROPIC NETWORKS.

PEW'S PROGRAMS AND ACTIVITIES HAVE BROAD APPEAL TO MEMBERS OF THE PUBLIC THAT SHARE AN INTEREST IN PEW'S MANY DIFFERENT AREAS OF FOCUS. CURRENT

Part VISupplemental 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.)PROJECTSSEEK, AMONG OTHER THINGS, TO STRENGTHEN ENVIRONMENTAL

PROTECTIONS; CONSERVE OUR OCEANS AND WILD LANDS; IMPROVE HEALTH THROUGH INVESTMENTS IN PREVENTIVE CARE; INCREASE THE SAFETY OF FOODS AND DRUGS; PROVIDE CONSUMERS WITH BETTER INFORMATION ABOUT FINANCIAL PRODUCTS; AND HELP STATES INVEST IN PROGRAMS THAT PROVIDE THE STRONGEST RETURNS TO THEIR TAXPAYERS. PEW'S SUCCESS IN ATTRACTING DONORS TO SUPPORT OUR WORK IS DEMONSTRATED BY OUR CONVERTING 90 PERCENT OF PROPOSALS INTO FULLY EXECUTED GRANTS IN FISCAL YEAR 2019.

3. SOURCES OF SUPPORT. PEW IS SUPPORTED BY A DIVERSE AND REPRESENTATIVE GROUP OF DONORS. DURING FISCAL YEAR 2019, PEW RECEIVED GRANTS AND CONTRIBUTIONS FROM 47 DONORS, INCLUDING INDIVIDUALS, PUBLIC CHARITIES, PRIVATE FOUNDATIONS, AND CORPORATIONS. APPROXIMATELY 53 PERCENT OF THESE DONORS WERE NEW CONTRIBUTORS TO PEW, AND APPROXIMATELY 34 PERCENT OF THESE DONORS WERE INDIVIDUALS MAKING GIFTS OF LESS THAN \$5,000.

4. REPRESENTATIVE GOVERNING BODY. PEW'S BYLAWS REQUIRE THAT AT ALL TIMES AT LEAST ONE-THIRD OF THE TOTAL DIRECTORS WILL BE CIVIC AND COMMUNITY LEADERS. CONSISTENT WITH THIS REQUIREMENT, BOARD MEMBERS INCLUDE COMMUNITY LEADERS, CIVIC LEADERS, AND PHILANTHROPISTS WHO BRING TO PEW'S BOARD A BROAD CROSS-SECTION OF THE VIEWS AND INTERESTS OF THE COMMUNITIES WE SERVE.

5. AVAILABILITY OF PUBLIC FACILITIES OR SERVICES; PUBLIC PARTICIPATION IN PROGRAMS OR POLICIES. PEW CONDUCTS EXTENSIVE AND ONGOING PROGRAMS AND

Part VISupplemental 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.)ACTIVITIES THAT ARE DESIGNED TO INFORM THE PUBLIC, THE MEDIA, AND

POLICYMAKERS ABOUT THE SUBJECTS OF ITS RESEARCH AND ANALYSIS. PEW'S RESEARCH REPORTS ARE DISSEMINATED AT EDUCATIONAL CONFERENCES, AT SEMINARS AND OTHER PUBLIC FORUMS SPONSORED BY PEW, AND AT EVENTS SPONSORED BY OTHER ORGANIZATIONS. THESE REPORTS ARE ALSO MADE AVAILABLE TO THE GENERAL PUBLIC VIA PEW'S WEBSITE, WWW.PEWTRUSTS.ORG. DURING FISCAL YEAR 2019, PEW RELEASED 58 RESEARCH REPORTS AND SPONSORED 108 CONFERENCES AND SEMINARS ON SUBJECTS SUCH AS TRENDS IN FOOD SAFETY, FINANCIAL REFORM, OCEAN PROTECTION, AND OTHER ISSUES. PEW'S RESEARCH REPORTS RECEIVED BROAD COVERAGE IN JOURNALS, ARTICLES, NEWS REPORTS, AND OTHER FORMS OF MEDIA. THIS MEDIA COVERAGE ALLOWED PEW'S REPORTS AND OTHER EDUCATIONAL INFORMATION TO REACH AND BE USED BY AN EVEN BROADER AUDIENCE, INCLUDING PEOPLE WHO LEARNED ABOUT OR ACCESSED PEW'S REPORTS THROUGH BROADCAST, PRINT, ONLINE OR SOCIAL MEDIA; ON WEBSITES OF OTHER NONPROFITS; OR THROUGH REFERENCES IN THE RESEARCH REPORTS OF OTHER ORGANIZATIONS.

SCHEDULE A, PART II -	OTHER INCOME	C			ATTACHMENT 1	
DESCRIPTION	2014	2015	2016	2017	2018	TOTAL
DESCRIPTION	2014	2015	2010	2017	2018	IUIAL
EMPLOYEE PARKING REVENUE	110,779.	144,710.	168,049.	159,067.	175,306.	757,911.
OTHER REVENUE			134.			134.
REALIZED FOREIGN CURRENCY G/L			335,135.	155,723.	-49,565.	441,293.
GAIN FROM INSURANCE CLAIM					56,795.	56,795.
TOTALS	110,779.	144,710.	503,318.	314,790.	182,536.	1,256,133.

Schedule A (Form 990 or 990-EZ) 2018

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

8

Employer identification number

56-2307147

THE PEW CHARITABLE TRUSTS

	Organization	type	(check	one):
--	--------------	------	--------	-------

Filers of:	Section:				
Form 990 or 990-EZ	X 501(c)(3) (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

X 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 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).

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)						
Name of organization	THE	PEW	CHARITABLE	TRUSTS		

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
<u> </u>		\$73,991.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2		\$1,060,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
3		\$9,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
4		\$99,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
5		\$150,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
6		\$2,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 99	0-EZ, or	990-PF) (2018)	
Name of organization	THE	PEW	CHARITABLE	TRUSTS

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
7		\$100,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
8		\$5,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
9		\$16,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
10		\$30,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
<u>11</u>		\$60,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
<u> 12 </u>		\$220,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)						
Name of organization	THE	PEW	CHARITABLE	TRUSTS		

Part I	Contributors (see instructions). Use duplicate copie	s of Part I if additional space is ne	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$35,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
14		\$50,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$15,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
16		\$1,050,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$19,668.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$60,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)						
Name of organization	THE	PEW	CHARITABLE	TRUSTS		

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19		\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
20		\$45,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
21		\$1,458,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
22		\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
23		\$35,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ 4,600,560.	Person X Payroll Noncash (Complete Part II for

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)						
Name of organization	THE	PEW	CHARITABLE	TRUSTS		

Part I	Contributors (see instructions). Use duplicate copies o	r Part I if additional space is ne	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25		\$35,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
26		\$1,671,017.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
27		\$40,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$225,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$50,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number 56-2307147

(2)	(b)	(0)	(4)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
31		\$185,900,895.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
32		\$2,559,241.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
33		\$38,204,263.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
34		\$461,105.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
35		\$11,359,621.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
36		\$23,496,106.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Schedule B (Form 990, 99	0-EZ, or	990-PF) (2018)	
Name of organization	THE	PEW	CHARITABLE	TRUSTS

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
37		\$18,399,917.	Person X Payroll Noncash (Complete Part II for
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	noncash contributions.) (d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number 56-2307147

Part II Nonca	ash Property (see instructions). Use duplicate copies	of Part II if additional space is ne	eded.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

me of organi	ization THE PEW CHARITABLE TRUS	TS	Employer identification number
			56-2307147
(10 the co	0) that total more than \$1,000 for th	ne year from any one contribut ns completing Part III, enter the t year. (Enter this information one	described in section 501(c)(7), (8), or tor. Complete columns (a) through (e) an total of <i>exclusively</i> religious, charitable, et ce. See instructions.) ► \$
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
		(e) Transfer of gift	
		(e) Transfer of gift	
	Transferee's name, address, and		elationship of transferor to transferee
-	Transferee's name, address, and		elationship of transferor to transferee
-	Transferee's name, address, and		elationship of transferor to transferee
-	Transferee's name, address, and		elationship of transferor to transferee
from	Transferee's name, address, and		elationship of transferor to transferee (d) Description of how gift is held
(a) No. from Part I		ZIP + 4 Re	
from		ZIP + 4 Re	
from		ZIP + 4 Re	
from	(b) Purpose of gift	ZIP + 4 Re	(d) Description of how gift is held

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		· · – · · · ·	

(e) Transfer of gift

	Transferee's name, address, and ZI	ransferee's name, address, and ZIP + 4		nship of transferor to transferee
a) No. from Part I	(b) Purpose of gift	(c) Use c	f gift	(d) Description of how gift is held
_				
		(e) Transfe	r of gift	
	Transferee's name, address, and ZI	P + 4	Relation	nship of transferor to transferee
-				
		1		Schedule B (Form 990, 990-EZ, or 990-PF)

0166181

Department of the Treasu Internal Revenue Service	ry Comp	plete if the organization is described be ► Go to www.irs.gov/Form990 for		n to Form 990 or Form 990-EZ. e latest information.	Open to Public Inspection
•		' on Form 990, Part IV, line 3, or Form : Complete Parts I-A and B. Do not compl		46 (Political Campaign Activities	s), then
 Section 501(c) (c) 	other than secti	ion 501(c)(3)) organizations: Complete F	Parts I-A and C below	. Do not complete Part I-B.	
 Section 527 orga 					
If the organization an	swered "Yes,"	on Form 990, Part IV, line 4, or Form	990-EZ, Part VI, line	47 (Lobbying Activities), then	
 Section 501(c)(3) organizations	that have filed Form 5768 (election un	der section 501(h)): C	Complete Part II-A. Do not comple	ete Part II-B.
 Section 501(c)(3) organizations	that have NOT filed Form 5768 (election	on under section 501(h)): Complete Part II-B. Do not co	omplete Part II-A.
Tax) (see separate ins	structions), the	' on Form 990, Part IV, line 5 (Proxy n n ganizations: Complete Part III.	Tax) (see separate	instructions) or Form 990-EZ,	Part V, line 35c (Prox
Name of organization), (0), 01 (0) 01g			Employer identif	ication number
THE PEW CHARI	TABLE TRU	STS		56-23071	
		organization is exempt under	section 501(c) o		
		organization's direct and indirect p			
	•		onnical campaign	activities in Part IV. (see instr	
		aign activities") expenditures (see instructions)		► ¢	
		campaign activities (see instruction organization is exempt under s			
1 Enter the amo	unt of any exe	cise tax incurred by the organizatio	n under section 49	155 ► \$	
		cise tax incurred by organization m			
		a section 4955 tax, did it file Form			
					_ Yes No
b If "Yes," descri Part I-C Comp		organization is exempt under	section 501(c), e	except section 501(c)(3).	
-		expended by the filing organization	17		
activities				▶\$	
527 exempt fu	inction activiti	ng organization's funds contributed		▶\$	
		enditures. Add lines 1 and 2. En			
		le Form 1120-POL for this year?			Yes No
5 Enter the nam organization m the amount of	es, addresses ade payment political con	s and employer identification numb ts. For each organization listed, en tributions received that were prom nd or a political action committee (I	er (EIN) of all sect ter the amount pa ptly and directly o	tion 527 political organization and from the filing organization lelivered to a separate polition	ons to which the filing on's funds. Also ente cal organization, suc
(a) Nam	e	(b) Address	(c) EIN	filing organization's co funds. If none, enter -0	(e) Amount of political intributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
For Paperwork Reduc	tion Act Notic	e, see the Instructions for Form 990 o	990-EZ.	Schedule C	(Form 990 or 990-EZ) 201

OMB No. 1545-0047 2018

For Organizations Exempt From Income Tax Under section 501(c) and section 527

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

Schedule C (Form 990 of 990-EZ) 2018 TITE FE	W CHARTIADEL IROSIS	JU 2.	
Part II-A Complete if the organization section 501(h)).	on is exempt under section 501(c)(3) and	filed Form 5768 (elec	tion under
	longs to an affiliated group (and list in Part IV e nd share of excess lobbying expenditures).	ach affiliated group mem	per's name,
B Check ► if the filing organization che	ecked box A and "limited control" provisions app	oly.	
	ying Expenditures eans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
 b Total lobbying expenditures to influence c Total lobbying expenditures (add lines 1) d Other exempt purpose expenditures e Total exempt purpose expenditures (add 	public opinion (grass roots lobbying) a legislative body (direct lobbying) a and 1b) d lines 1c and 1d) e amount from the following table in both		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
Not over \$500,000	20% of the amount on line 1e.		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
Over \$17,000,000	\$1,000,000.		
g Grassroots nontaxable amount (enter 25	% of line 1f)		
h Subtract line 1g from line 1a. If zero or le	ess, enter -0-		
i Subtract line 1f from line 1c. If zero or le	ss, enter -0-		
j If there is an amount other than zero	on either line 1h or line 1i, did the organiza	tion file Form 4720	
reporting section 4911 tax for this year?	<u></u>		Yes No

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period							
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total		
2a Lobbying nontaxable amount							
b Lobbying ceiling amount (150% of line 2a, column (e))							
c Total lobbying expenditures							
d Grassroots nontaxable amount							
e Grassroots ceiling amount (150% of line 2d, column (e))							
f Grassroots lobbying expenditures							

Schedule C (Form 990 or 990-EZ) 2018

Page	3

	t II-B C (Form 990 or 990-EZ) 2018	T (").	- - -				Page 🕻
ar	t II-B Complete if the organization is exempt under section 501(c)(3) and has NO (election under section 501(h)).		a For	m 57	68		
or	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(;	a)	(b)		b)	
	cription of the lobbying activity.	Yes	No		Am	ount	
	During the year, did the filing organization attempt to influence foreign, national, state, or local						
	legislation, including any attempt to influence public opinion on a legislative matter or						
	referendum, through the use of:						
а	Volunteers?	X					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?.	X				26	2.0
С	Media advertisements?	X					,39
d	Mailings to members, legislators, or the public?	X X					,65
•	Publications, or published or broadcast statements?	X				900	,23
	Grants to other organizations for lobbying purposes?	X				900	
9	Direct contact with legislators, their staffs, government officials, or a legislative body?	X					, 34
n	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		x			0	, 54
	Other activities?		А			,484	01
	Total. Add lines 1c through 1i		x			,101	,01
l	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?						
2	If "Yes," enter the amount of any tax incurred under section 4912						
c d	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?						
	t III-A Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	ors	ectio	n		
	501(c)(6).	(•)(•)	, e. e				
						Yes	No
	Were substantially all (90% or more) dues received nondeductible by members?				1		
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				2		
	Did the organization agree to carry over lobbying and political campaign activity expenditures fro						
al	t III-B Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No,"					0 2 ie	
	answered "Yes."		ырга	II L III-7	- ,	5 3, 13	
	Dues, assessments and similar amounts from members			1			
	Section 162(e) nondeductible lobbying and political expenditures (do not include amou	ints	of				
	political expenses for which the section 527(f) tax was paid).						
9	Current year.			2a			
)	Carryover from last year.			2b			
2	Total			2c			
	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due	es		3			
	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion	n of th	ne				
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lo	obbyir	ng				
	and political expenditure next year?			4			
	Taxable amount of lobbying and political expenditures (see instructions)			5			

SEE PAGE 4

JSA

Schedule C (Form 990 or 990-EZ) 2018

Page 4

Schedule C (Form 990 or 990-EZ) 2018

Part IV Supplemental Information (continued)

SCHEDULE C, PART II-B, LINE 1

RECOGNIZING THE POWER OF PUBLIC POLICY INITIATIVES TO EFFECT CHANGE, AND CONSISTENT WITH ITS PUBLIC INTEREST MISSION, PEW ENGAGES IN LIMITED LOBBYING ACTIVITIES AT INTERNATIONAL, FEDERAL, STATE, AND LOCAL LEVELS IN CONNECTION WITH ITS WORK ON THE ENVIRONMENT, PUBLIC HEALTH, AND STATE POLICY AND PERFORMANCE. PEW'S LOBBYING EXPENDITURES ARE ATTRIBUTABLE TO DIRECT AND GRASSROOTS LOBBYING BY EMPLOYEES, CONTRACTORS, AND GRANTEES.

Schedule C (Form 990 or 990-EZ) 2018

SCHEE	DULE D
(Form	990)

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.

20

OMB No. 1545-0047

18

	ment of the Treasury	Go to www.irs.gov	► Attach to Form 990. /Form990 for instructions and the latest infor	Open to Public Inspection
-	Revenue Service		romssoror manuchons and the latest mor	Employer identification number
	PEW CHARITAE	N.F. TRUSTS		56-2307147
Part			ised Funds or Other Similar Funds o	
T art			"Yes" on Form 990, Part IV, line 6.	
	Complete		(a) Donor advised funds	(b) Funds and other accounts
1 7	Total number at o	nd of year	2.	(2)
		of contributions to (during year)	16,000,000.	
		of grants from (during year)	14,761,913.	
		at end of year	188,825,271.	
		-	advisors in writing that the assets held	t in donor advised
	-		organization's exclusive legal control?	
	-		and donor advisors in writing that grant	
	-	-	fit of the donor or donor advisor, or for	
	•			· · · · ·
Part		tion Easements.		
	Complete	e if the organization answered	"Yes" on Form 990, Part IV, line 7.	
1 F	Purpose(s) of con	servation easements held by the	organization (check all that apply).	
	Preservatio	n of land for public use (e.g., rec	reation or education) Preservatior	n of a historically important land area
	Protection of	of natural habitat	Preservation	n of a certified historic structure
	Preservatio	n of open space		
2 (Complete lines 2a	through 2d if the organization he	eld a qualified conservation contribution i	n the form of a conservation
e	easement on the l	ast day of the tax year.		Held at the End of the Tax Year
a 🗋	Total number of c	onservation easements		2a
b 7	Total acreage res	tricted by conservation easements	5	2b
			historic structure included in (a)	2c
			acquired after 7/25/06, and not on a	
				2d
3 1	Number of conse	rvation easements modified, trar	sferred, released, extinguished, or termi	inated by the organization during the
	ax year 🕨			
			rvation easement is located	
			garding the periodic monitoring, inspec	
			sements it holds?	
6 8	Staff and volunteer	hours devoted to monitoring, inspec	ting, handling of violations, and enforcing co	nservation easements during the year
- I	•			
		ses incurred in monitoring, inspec	ting, handling of violations, and enforcing o	conservation easements during the year
		unition opportunity to portune of line (2(d) above satisfy the requirements of sect	tion (170(h)(4)(P)(i))
		-		
9 I	n Part XIII descri	he how the organization reports	conservation easements in its revenue ar	
			of the footnote to the organization's finance	
		counting for conservation easeme		
			of Art, Historical Treasures, or Othe	er Similar Assets.
			"Yes" on Form 990, Part IV, line 8.	
1a	f the organizatior works of art. hist	n elected, as permitted under SF orical treasures, or other simila	FAS 116 (ASC 958), not to report in its ar assets held for public exhibition, ed potnote to its financial statements that de	revenue statement and balance shee ucation, or research in furtherance o
b l	f the organization works of art, hist	n elected, as permitted under sorical treasures, or other simila	SFAS 116 (ASC 958), to report in its ar assets held for public exhibition, ed	revenue statement and balance shee
		vide the following amounts relati	•	
	-		rt, historical treasures, or other similar	
	-		FAS 116 (ASC 958) relating to these iten	
	-			

	Revenue included on Form 990, Part VIII, line 1
For I	Paperwork Reduction Act Notice, see the Instructions for Form 990.

6:41:20 PM V 18-8.2F

▶ \$

THE DEW CHARTTABLE TRUSTS

56-2307147

			L PEW (CHARITAB.	LE IRUSI	15					50-230	/14/		_
_		orm 990) 2018										-		age 2
Ра		Organizations Maintain												
3		the organization's acquisition		ssion, and o	other recor	ds, checl	k any of	f the	follow	ing that a	are a sign	ificant u	se of	f its
		tion items (check all that app	oly):			-								
а		Public exhibition			d	-	or excha	•						
b		Scholarly research			e	Other								
С		Preservation for future gene	rations											
4	Provid	e a description of the orga	nization's	s collections	s and expla	ain how t	they furt	ther	the or	ganization'	s exempt	purpos	e in l	Part
	XIII.						-			-	-			
5	During	the year, did the organization	on solicit	or receive of	donations o	of art. hist	orical tre	easur	es. or	other simil	ar			
	-	to be sold to raise funds rati										Yes		No
Pa	rt IV	Escrow and Custodial A					<u> </u>							-
I G		Complete if the organiza			s" on For	m 990 F	Part IV I	line	9 or r	enorted a	n amoun	t on Fo	rm	
		990, Part X, line 21.				in 550, i	art iv, i		5, 01 1	cponeu a	in amoun			
10	la tha	organization an agent, truste		dian ar ath	or intermed	lion for a	ontributi	iono	or otho	r ococto no	+			
Ia												Vee	v	
	Include	ed on Form 990, Part X?						• • •	• • • •		• • • • L	Yes	X	No
b	If "Yes	s," explain the arrangement i	n Part X	III and comp	plete the fo	llowing tab	ole:							
											Amount			
С	Beginr	ning balance						1c						
d	Additio	ons during the year						1d						
е	Distrib	outions during the year					[1e						
f		g balance						1f						
2a		e organization include an am						or cus	stodial	account lia	bility?	X Yes		No
b		s," explain the arrangement i									-		x	
	rt V	Endowment Funds.											-	
. u		Complete if the organiza	ation and	swered "Ye	es" on For	m 990. F	Part IV.	line	10.					
				urrent year	(b) Prio		(c) Two			(d) Three y	ears back	(e) Four	vears h	ack
	_ .		(4) 00	arroint you.	()		(-7 -	,		(4) 11100)		(0) ! 0	,	
		ning of year balance												
b	Contri	butions												
С	Net inv	vestment earnings, gains,												
	and los	sses												
d	Grants	s or scholarships												
е	Other	expenditures for facilities												
	and pr	ograms												
f		istrative expenses												
g		f year balance												
2		le the estimated percentage		urrent vear	end balanc	e (line 1a	column	(a)) I	held as					
a		designated or quasi-endown		arrone your	%	o (iii io 19,	ooranni	(())		•				
b		anent endowment	%		_									
c		orarily restricted endowment	► /*	%										
·		ercentages on lines 2a, 2b, a	-		100%									
20		ere endowment funds not in				ation that	are hold	1 and	ladmir	nietorod for	tho			
Ja		zation by:	the pose	56331011 01 11	le organiza	ation that	are neiu		aunni		uie		/es	No
	0	,												110
		related organizations										3a(i)		
_		ated organizations										3a(ii)		
-		s" on line 3a(ii), are the relat	•					? . .				3b		
4		ibe in Part XIII the intended			tion's endo	wment fui	nds.							
Pa	rt VI	Land, Buildings, and Equ Complete if the organiz	uipment	t. swarad "V	es" on Foi	rm 000	Part IV	lino	112 (See Form	000 Pa	rt X lind	- 10	
		Description of property	ation an		other basis	1	or other bas			cumulated		Book val		
					tment)	(0	other)			eciation	,u)			
1a	Land .						00,00	_				90,00		
b	Buildir	ngs				131,8	348,89	5.	34,5	46,761.		97,30	2,1	34.
с		hold improvements				3,2	266,83	8.	1,8	26,660.		1,44	0,1	78.
d		ment				36,8	350,55	9.	29,5	50,348.		7,30	0,2	11.
e														
		ines 1a through 1e. (Columr			n 990. Part	X. colum	n (B), lini	e 10	<u>,</u>)		-	196,04	2,5	23.
			1/		, i ait	.,	<u>,</u> ,,		/		-	.,	,	

Schedule D (Form 990) 2018

Schedule D (Form 990) 2018				Page 3
Part VII					
	Complete if the organization answered (a) Description of security or category	(b) Book value	, Part	IV, IINE 11D. See Form 990, (c) Method of valuati	
	(including name of security)	(b) BOOK value		Cost or end-of-year marke	
(1) Financi	ial derivatives				
	y-held equity interests				
(A)					
(B)					
(C)					
(D) (E)					
(E) (F)					
(G)					
(U) (H)					
	nn (b) must equal Form 990, Part X, col. (B) line 12.) 🕨				
Part VIII	Investments - Program Related.				
	Complete if the organization answered	"Yes" on Form 990	, Part	IV, line 11c. See Form 990,	Part X, line 13.
	(a) Description of investment	(b) Book value		(c) Method of valuati Cost or end-of-year marke	
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
<u>(8)</u> (9)					
	nn (b) must equal Form 990, Part X, col. (B) line 13.) 🕨				
Part IX	Other Assets.				
	Complete if the organization answered	l "Yes" on Form 990	, Part	IV, line 11d. See Form 990,	Part X, line 15.
	(a) De	scription			(b) Book value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
 (8)					
(9)					
	lumn (b) must equal Form 990, Part X, col. (B) l	ine 15.)		• • • • • • • • • • • • • • •	
Part X	Other Liabilities.	/	<u></u>		
	Complete if the organization answered line 25.	I "Yes" on Form 990	, Part	IV, line 11e or 11f. See Forr	n 990, Part X,
1.	(a) Description of liability	(b) Book valu	e		
	ral income taxes				
	RRED RENT	841,			
	NT SECURITY DEPOSITS	50,2			
()	REST RATE SWAPS	29,701,4			
	RUED PENSION OBLIGATION	35,929,2	280.		
(6)					
(7)					

 (9)
 Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶
 66, 522, 528.

 2 his hills
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1
 1

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII JSA 8E1270 1.000 Schedule D (Form 9

(8)

Schedu	le D (Form 990) 2018				Page 4
Part				n.	
	Complete if the organization answered "Yes" on Form 990, Part IV	′, line	e 12a.		
1	Total revenue, gains, and other support per audited financial statements			1	376,436,369.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	17,434,805.	-	
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	4,997,320.		
е	Add lines 2a through 2d			2e	22,432,125.
3	Subtract line 2e from line 1			3	354,004,244.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1,652,861.		
b	Other (Describe in Part XIII.)	4b	31,854.		
с	Add lines 4a and 4b			4c	1,684,715.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) .			5	355,688,959.
Part				ırn.	
	Complete if the organization answered "Yes" on Form 990, Part IV	′, line	e 12a.		
1	Total expenses and losses per audited financial statements			1	400,128,527.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
с	Other losses	2c	58,853,685.		
d	Other (Describe in Part XIII.)	2d	-3,081,576.		
е	Add lines 2a through 2d			2e	55,772,109.
3	Subtract line 2e from line 1			3	344,356,418.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1,652,861.		
b	Other (Describe in Part XIII.)	4b	-2,366,456.		
с	Add lines 4a and 4b			4c	-713,595.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).		<u></u>	5	343,642,823.
	XIII Supplemental Information.				
Provid	le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; F	Part IV	/ lines 1b and 2b; Page 20	art V. I	ine 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.

SEE PAGE 5

 Schedule D (Form 990) 2018
 THE
 PEW
 CHARITABLE
 TRUSTS

 Part XIII
 Supplemental Information (continued)

SCHEDULE D, PART IV, LINE 2B EXPLANATION OF FORM 990, PART X, LINE 21 PEW ACTS AS THE CUSTODIAN OF FUNDS FOR CERTAIN CHARITABLE ORGANIZATIONS DESIGNATED BY DONORS. THE BALANCE CONSISTS OF CASH HELD FOR OTHER CHARITABLE ORGANIZATIONS THAT IS PAYABLE UPON THE OCCURRENCE OF FUTURE EVENTS AS DICTATED BY THE DONORS.

SCHEDULE D, PART XI, LINE 2DREVENUE OF CONSOLIDATED SUBSIDIARY2,496,513NET PERIODIC BENEFIT COST OTHER THAN SERVICE COST2,519,062UNREALIZED FOREIGN EXCHANGE LOSS(18,255)

TOTAL 4,997,320

SCHEDULE D, PART XI, LINE 4B	
SUB-TENANT EXPENSES (RECLASS)	(33,364)
EXPENSES RELATED TO 901 E NON-501(C)(3)/LIKE-MINDED	
TENANTS (RECLASS)	(87,388)
PARKING GARAGE SALES TAX (RECLASS)	152,606
TOTAL	31,854

Schedule D (Form 990) 2018

Schedule D (Form 990) 2018 THE PEW (CHARITABLE TRUSTS		56-2307147
Part XIII Supplemental Information (col	ntinued)		
SCHEDULE D, PART XII, LINE 2C			
CHANGE IN FAIR VALUE OF BENEFICIA	AL INTEREST IN TRUSTS	44,919,964	
CHANGE IN FAIR VALUE OF INTEREST	RATE SWAPS	8,015,526	
OTHER CHANGES IN POSTRETIREMENT H	BENEFITS	5,918,195	
	TOTAL	58,853,685	
SCHEDULE D, PART XII, LINE 2D			
EXPENSES OF CONSOLIDATED SUBSIDIA	ARY	44,172,648	
INTERCOMPANY TRANSACTIONS ELIMINA	ATED IN CONSOLIDATION	(44,318,352)	
SUB-TENANT EXPENSES (RECLASS)		33,364	
EXPENSES RELATED TO 901 E NON-503	l(C)(3)/LIKE-MINDED		
TENANTS (RECLASS)		87,388	
REVERSAL OF PRIOR YEAR GRANT EXPI	ENSE	(3,056,624)	
	TOTAL	(3,081,576)	
SCHEDULE D, PART XII, LINE 4B			
NET PERIODIC BENEFIT COST OTHER 7	THAN SERVICE COST	(2,519,062)	
PARKING GARAGE SALES TAX (RECLASS	5)	152,606	
	TOTAL	(2,366,456)	

Schedule D (Form 990) 2018

SCH	IEDULE F	Staten	nent of A	ctivities	Outside the Unit	ted States	OMB No. 1545-0047		
(For	rm 990)				"Yes" on Form 990, Part IV,		2018		
Denar	tment of the Treasury				to Form 990.	formation.	Open to Public		
Interna	al Revenue Service	G	io to www.irs.go		nstructions and the latest in		Inspection		
	of the organization						entification number		
Part	PEW CHARITAE		n Activitios	Outsido tho	United States. Compl		07147		
Fal		Part IV, line 14		Outside the	United States. Comp	ete il the organizat	ion answered res or		
1	assistance, the gra	antees' eligibili	ty for the grant	ts or assistance	substantiate the amount of e, and the selection criteri	•			
2	For grantmakers. outside the United		Part V the org	anization's pro	ocedures for monitoring	the use of its grant	s and other assistance		
3	Activities per Reg	ion. (The follov	ving Part I, line	3 table can be	e duplicated if additional sp	ace is needed.)			
	(a) Region	, ,	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (a program service, describe specific type	expenditures for and investments		
(1)	EAST ASIA AND THE	PACIFIC	0.	0.	INVESTMENTS		64,000.		
(2)	EUROPE		0.	0.	INVESTMENTS		301,000.		
(3)	CENTRAL AMERICA/C	ARIBBEAN	0.	0.	PROGRAM SERVICES	ENVIRONMENTAL MGMT	7,000.		
(4)	CENTRAL AMERICA/C	ARIBBEAN	0.	0.	PROGRAM SERVICES	PROTECTING OCEAN L	IFE 38,000.		
(5)	CENTRAL AMERICA/C	ARIBBEAN	0.	0.	PROGRAM SERVICES	SCHOLARS AND FELLO	WS 139,000.		
(6)	EAST ASIA AND THE	PACIFIC	0.	0.	PROGRAM SERVICES	ENVIRONMENTAL MGMT	395,000.		
(7)	EAST ASIA AND THE	PACIFIC	0.	0.	PROGRAM SERVICES	HEALTH CARE PRODUC	TS 1,000.		
(8)	EAST ASIA AND THE	PACIFIC	2.	6.	PROGRAM SERVICES	PROTECTING OCEAN L	IFE 1,761,000.		
(9)	EAST ASIA AND THE	PACIFIC	2.	11.	PROGRAM SERVICES	WILDERNESS PROTECT	ION 1,192,000.		
<u>(10)</u>	EUROPE		0.	0.	PROGRAM SERVICES	CONSERVATION SCIEN	CE 2,000.		
<u>(11)</u>	EUROPE		0.	0.	PROGRAM SERVICES	ENVIRONMENTAL MGMT	1,317,000.		
<u>(12)</u>	EUROPE		0.	0.	PROGRAM SERVICES	EVIDENCE INITIATIV	E 1,539,000.		
<u>(13)</u>	EUROPE		0.	0.	PROGRAM SERVICES	GOVERNMENT MANAGEM	ENT 15,000.		
<u>(14)</u>	EUROPE		0.	0.	PROGRAM SERVICES	GOVERNMENT PERFORM	ANCE 1,000.		
(15)	EUROPE		0.	0.	PROGRAM SERVICES	HEALTH PROGRAMS	200,000.		
(16)	EUROPE		0.	0.	PROGRAM SERVICES	HEALTH IMPACT	5,000.		
<u> </u>									
	EUROPE		0.	4.	PROGRAM SERVICES	PARTNERSHIPS & SUP			
3a b	Subtotal Total from	continuation	4.	21.			7,431,000.		
	sheets to Part I		4.	38.			18,393,643.		
C	Totals (add lines	s 3a and 3b)	8.	59.			25,824,643.		

For Paperwork Reduction Act Notice, see the Instructions for Form 990. JSA 8E1274 1.000 1211PT 700P 4/23/2020 6:41:20 PM V 18-8.2F

Schedule F (Form 990) 2018

	IEDULE F	Staten	nent of A	ctivities	Outside the Unit	ted States	OMB No. 1545-0047
(Foi	rm 990)	► Complete	e if the organiza	tion answered '	'Yes" on Form 990, Part IV,	line 14b, 15, or 16.	2018
	tment of the Treasury al Revenue Service	►G	io to www.irs.go		to Form 990. nstructions and the latest inf	formation.	Open to Public Inspection
	of the organization					Employer identif	cation number
-	PEW CHARITAE			Outoide the	United Ctates Ormal	56-2307	
Par		Part IV, line 14		Outside the	United States. Comple	ete if the organization	answered "Yes" on
1	-	antees' eligibili	ty for the grant	ts or assistance	substantiate the amount of e, and the selection criteri	•	X Yes No
2	For grantmakers. outside the United		Part V the org	anization's pro	ocedures for monitoring t	the use of its grants a	nd other assistance
3	Activities per Regi	ion. (The follov	ving Part I, line	3 table can be	e duplicated if additional sp	ace is needed.)	
	(a) Region		(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1)	EUROPE		0.	0.	PROGRAM SERVICES	PROGRAM DEVELOPMENT	168,000.
(2)	EUROPE		3.	32.	PROGRAM SERVICES	PROTECTING OCEAN LIFE	5,130,000.
(3)	EUROPE		0.	0.	PROGRAM SERVICES	RESULTS FIRST	42,000.
(4)	EUROPE		0.	0.	PROGRAM SERVICES	SCHOLARS AND FELLOWS	1,000.
(5)	EUROPE		0.	0.	PROGRAM SERVICES	STATE CAMPAIGNS	9,000.
(6)	MIDDLE EAST AND N	ORTH AFRICA	0.	0.	PROGRAM SERVICES	ENVIRONMENTAL MGMT	5,000.
(7)	MIDDLE EAST AND N	ORTH AFRICA	0.	0.	PROGRAM SERVICES	INFORMATION PROGRAM	3,000.
(8)	MIDDLE EAST AND N	ORTH AFRICA	0.	0.	PROGRAM SERVICES	PROTECTING OCEAN LIFE	3,000.
(9)	NORTH AMERICA		0.	0.	PROGRAM SERVICES	ENVIRONMENTAL MGMT	10,000.
<u>(10)</u>	NORTH AMERICA		0.	0.	PROGRAM SERVICES	PROTECTING OCEAN LIFE	217,000.
<u>(11)</u>	NORTH AMERICA		0.	0.	PROGRAM SERVICES	RESULTS FIRST	4,000.
<u>(12)</u>	NORTH AMERICA		0.	0.	PROGRAM SERVICES	SCHOLARS AND FELLOWS	10,000.
<u>(13)</u>	NORTH AMERICA		0.	0.	PROGRAM SERVICES	STATE CAMPAIGNS	46,000.
<u>(14)</u>	RUSSIA/INDEPENDEN	T STATES	0.	0.	PROGRAM SERVICES	PROECTING OCEAN LIFE	26,000.
<u>(15)</u>	SOUTH AMERICA		0.	0.	PROGRAM SERVICES	ENVIRONMENTAL MGMT	86,000.
<u>(16)</u>	SOUTH AMERICA		0.	0.	PROGRAM SERVICES	PROTECTING OCEAN LIFE	461,000.
<u>(17)</u>	SOUTH AMERICA		0.	0.	PROGRAM SERVICES	SCHOLARS AND FELLOWS	11,000.
3a b	Subtotal Total from sheets to Part I	continuation					

c Totals (add lines 3a and 3b) For Paperwork Reduction Act Notice, see the Instructions for Form 990. JSA 8E1274 1.000 1211PT 700P 4/23/2020 6:41:20 PM V 18-8.2F

	HEDULE F	Stater	nent of A	ctivities	Outside the Unit	ted States	OMB No. 1545-0047
(Fo	rm 990)						2018
	tment of the Treasury al Revenue Service	►œ	Go to www.irs.go			formation.	Open to Public
	of the organization					Employer identi	
		BLE TRUSTS					
Par	t I General II	Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. Attach to Form 990. Consolete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. Part IV, line 14b, 16, or 16. Part IV, line 14b,	answered "Yes" of				
	Form 990,	Part IV, line 14	b.				
1	assistance, the gra grants or assistance	antees' eligibili ce?	ity for the gran	ts or assistanc	e, and the selection criteri	ia used to award the	
2	outside the United		rait v the olg	anization's pro	ocedules for monitoring	the use of its grants a	
3	Activities per Reg	ion. (The follow	wing Part I, line	3 table can b	e duplicated if additional sp	bace is needed.)	
	(a) Region		of offices in	employees, agents, and independent contractors	region (by type) (such as, fundraising, program services, investments, grants to recipients	a program service, describe specific type of	(f) Total expenditures for and investments in the region
(1)	SOUTH AMERICA		1.	б.	PROGRAM SERVICES	WILDERNESS PROTECTION	942,000.
(2)	SOUTH ASIA		0.	0.	PROGRAM SERVICES	PROTECTING OCEAN LIFE	36,000.
(3)	SUB-SAHARAN AFRIC	CA	0.	0.	PROGRAM SERVICES	ENVIRONMENTAL MGMT	2,000.
(4)	SUB-SAHARAN AFRIC	CA	0.	0.	PROGRAM SERVICES	PROTECTING OCEAN LIFE	43,000.
(5)	EAST ASIA AND THE	PACIFIC	0.	0.	GRANTMAKING		2,990,319.
(6)	EUROPE		0.	0.	GRANTMAKING		1,000,657.
(7)	NORTH AMERICA		0.	0.	GRANTMAKING		3,675,159.
(8)	SOUTH AMERICA		0.	0.	GRANTMAKING		3,255,673.
(9)	SOUTH ASIA		0.	0.	GRANTMAKING		66,835.
<u>(10)</u>	SUB-SAHARAN AFRIC	CA	0.	0.	GRANTMAKING		150,000.
<u>(11)</u>							
<u>(12)</u>							
<u>(13)</u>							
<u>(14)</u>							
<u>(15)</u>							
<u>(</u> 16)							
<u>(17)</u>							
3a b	Subtotal Total from	continuation					

sheets to Part I c Totals (add lines 3a and 3b) For Paperwork Reduction Act Notice, see the Instructions for Form 990. JSA 8E1274 1.000 1211PT 700P 4/23/2020 6:41:20 PM V 18-8.2F Schedule F (Form 990) 2018

Part II	Grants and Other Ass Part IV, line 15, for any							ered "Yes" on	Form 990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EAST ASIA/PACIFIC	POLICY	14,521.	WIRE			
(2)			EAST ASIA/PACIFIC	POLICY	37,125.	WIRE			
(3)			EAST ASIA/PACIFIC	POLICY	42,000.	WIRE			
(4)			EAST ASIA/PACIFIC	POLICY	49,375.	WIRE			
(5)			EAST ASIA/PACIFIC	POLICY	53,197.	WIRE			
(6)			EAST ASIA/PACIFIC	POLICY	56,848.	WIRE			
(7)			EAST ASIA/PACIFIC	POLICY	76,605.	WIRE			
(8)			EAST ASIA/PACIFIC	POLICY	85,000.	WIRE			
(9)			EAST ASIA/PACIFIC	POLICY	90,110.	WIRE			
(10)			EAST ASIA/PACIFIC	POLICY	131,376.	WIRE			
<u>(11)</u>			EAST ASIA/PACIFIC	POLICY	146,529.	WIRE			
(12)			EAST ASIA/PACIFIC	POLICY	150,000.	WIRE			
(13)			EAST ASIA/PACIFIC	POLICY	150,000.	WIRE			
(14)			EAST ASIA/PACIFIC	POLICY	224,064.	WIRE			
(15)			EAST ASIA/PACIFIC	POLICY	392,987.	WIRE			
(16)			EAST ASIA/PACIFIC	POLICY	497,062.	WIRE			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt

by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

Schedule F (Form 990) 2018

56-2307147

Schedule F (Form 990) 2018

Part II	Grants and Other Assis Part IV, line 15, for any							red "Yes" on	Form 990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EAST ASIA/PACIFIC	POLICY	718,560.	WIRE			
(2)			EAST ASIA/PACIFIC	SPONSORSHIP	25,000.	WIRE			
(3)			EAST ASIA/PACIFIC	SPONSORSHIP	6,898.	WIRE			
(4)			EAST ASIA/PACIFIC	SPONSORSHIP	6,679.	WIRE			
(5)			EAST ASIA/PACIFIC	SPONSORSHIP	25,000.	WIRE			
(6)			EAST ASIA/PACIFIC	SPONSORSHIP	6,423.	WIRE			
(7)			EUROPE/ICELAND/GREENLAND	POLICY	20,029.	WIRE			
(8)			EUROPE/ICELAND/GREENLAND	POLICY	30,000.	WIRE			
(9)			EUROPE/ICELAND/GREENLAND	POLICY	48,193.	WIRE			
(10)			EUROPE/ICELAND/GREENLAND	POLICY	52,139.	WIRE			
(11)			EUROPE/ICELAND/GREENLAND	POLICY	91,432.	WIRE			
(12)			EUROPE/ICELAND/GREENLAND	POLICY	95,303.	WIRE			
(13)			EUROPE/ICELAND/GREENLAND	POLICY	98,710.	ACH			
(14)			EUROPE/ICELAND/GREENLAND	POLICY	104,248.	WIRE			
(15)			EUROPE/ICELAND/GREENLAND	POLICY	113,221.	WIRE			
(16)			EUROPE/ICELAND/GREENLAND	POLICY	117,358.	WIRE			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt

by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

Schedule F (Form 990) 2018

56-2307147

Part II

-			eived more than \$5,000. F			1			() Mathead of
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EUROPE/ICELAND/GREENLAND	POLICY	150,000.	WIRE			
(2)			EUROPE/ICELAND/GREENLAND	SPONSORSHIP	20,000.	WIRE			
(3)			EUROPE/ICELAND/GREENLAND	SPONSORSHIP	18,295.	WIRE			
(4)			EUROPE/ICELAND/GREENLAND	SPONSORSHIP	9,000.	WIRE			
(5)			EUROPE/ICELAND/GREENLAND	SPONSORSHIP	19,300.	WIRE			
(6)			EUROPE/ICELAND/GREENLAND	SPONSORSHIP	5,920.	WIRE			
(7)			EUROPE/ICELAND/GREENLAND	MATCHING GIF	5,244.	WIRE			
(8)			NORTH AMERICA	POLICY	75,005.	WIRE			
(9)			NORTH AMERICA	POLICY	96,185.	WIRE			
(10)			NORTH AMERICA	POLICY	99,715.	WIRE			
(11)			NORTH AMERICA	POLICY	120,705.	WIRE			
(12)			NORTH AMERICA	CIVIC LIFE	126,000.	WIRE			
(13)			NORTH AMERICA	POLICY	150,000.	WIRE			
(14)			NORTH AMERICA	POLICY	150,000.	WIRE			
(15)			NORTH AMERICA	CIVIC LIFE	160,000.	WIRE			
(16)			NORTH AMERICA	POLICY	266,883.	WIRE			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt

by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

Schedule F (Form 990) 2018

56-2307147

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, othe
(1)			NORTH AMERICA	POLICY	276,442.	WIRE			
(2)			NORTH AMERICA	POLICY	401,020.	WIRE			
(3)			NORTH AMERICA	POLICY	476,147.	WIRE			
(4)			NORTH AMERICA	POLICY	529,150.	WIRE			
(5)			NORTH AMERICA	CIVIC LIFE	699,000.	WIRE			
(6)			NORTH AMERICA	SPONSORSHIP	13,907.	WIRE			
(7)			NORTH AMERICA	MATCHING GIF	30,000.	CHECK			
(8)			SOUTH AMERICA	POLICY	35,000.	WIRE			
(9)			SOUTH AMERICA	POLICY	50,739.	ACH			
(10)			SOUTH AMERICA	POLICY	200,000.	WIRE			
(11)			SOUTH AMERICA	POLICY	2,962,434.	WIRE			
(12)			SOUTH AMERICA	SPONSORSHIP	7,500.	WIRE			
(13)			SOUTH ASIA	POLICY	66,835.	WIRE			
(14)			SUB-SAHARAN AFRICA	POLICY	150,000.	WIRE			
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt

	by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	. 41.
3	Enter total number of other organizations or entities	. 11.

Schedule F (Form 990) 2018

Schedule F (Form 990) 2018

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
10)							
11)							
12)							
13)							
14)							
5)							
6)							
7)							
8)							

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16

Schedule F (Form 990) 2018

JSA

THE PEW CHARITABLE TRUSTS

Page 4	

Schedu	ale F (Form 990) 2018	Page 4
Part	V Foreign Forms	
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990).	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990) Yes	X No

Schedule F (Form 990) 2018

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

FORM 990, SCHEDULE F, PART 1, LINE 2

PEW'S PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS OUTSIDE THE UNITED STATES ARE MODELED AFTER THE "EXPENDITURE RESPONSIBILITY" RULES (SEE TREAS. REG. § 53.4945-5) AND ARE DESIGNED TO FULFILL THE PURPOSES OF EXPENDITURE RESPONSIBILITY, NAMELY THAT GRANT FUNDS ARE EXPENDED SOLELY FOR THEIR INTENDED CHARITABLE PURPOSE, THAT PEW RECEIVES COMPLETE REPORTS REGARDING HOW THE FUNDS WERE SPENT, AND THAT PEW IS ABLE TO PROVIDE FULL REPORTS TO THE IRS REGARDING THE GRANTED FUNDS. FIRST, TO HELP ASSURE THAT THE GRANTEE WILL USE THE GRANT FOR PROPER PURPOSES, PEW CONDUCTS A PRE-GRANT INQUIRY INTO EACH POTENTIAL GRANTEE, WHICH INCLUDES DILIGENCE REGARDING THE GRANTEE'S PROGRAMS, EXPERIENCE, FINANCES, MANAGEMENT, AND REPUTATION; VERIFICATION OF THE GRANTEE'S CORPORATE AND TAX STATUS; AND A SEARCH OF THE U.S. TREASURY DEPARTMENT OFFICE OF FOREIGN ASSET CONTROL'S (OFAC) SANCTIONS PROGRAM LISTINGS TO CONFIRM THAT THE GRANTEE IS NEITHER A KNOWN TERRORIST NOR HAS TIES TO KNOWN TERRORISTS. SECOND, PEW ENTERS INTO A WRITTEN GRANT AGREEMENT WITH EACH GRANTEE, IN WHICH PEW SECURES THE GRANTEE'S COMMITMENTS: (I) TO USE THE GRANT FUNDS SOLELY FOR PURPOSES CONSISTENT WITH PEW'S TAX-EXEMPT STATUS UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE; (II) NOT TO USE ANY GRANT FUNDS DIRECTLY OR INDIRECTLY TO SUPPORT OR OPPOSE ANY CANDIDATE FOR PUBLIC OFFICE, TO PROVIDE A BENEFIT TO ANY POLITICAL PARTY OR CANDIDATE, OR FOR ANY OTHER NONCHARITABLE PURPOSE; (III) TO MAINTAIN RECORDS OF THE GRANTEE'S RECEIPTS AND EXPENDITURES AND MAKE ITS BOOKS AND RECORDS AVAILABLE FOR REVIEW BY PEW AT REASONABLE TIMES; (IV) TO SUBMIT COMPLETE REPORTS, ON A REASONBALE BASIS THROUGHOUT THE TERM OF THE GRANT, ON THE EXPENDITURE OF

JSA

Page 5

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

GRANT FUNDS AND PROGRESS TOWARD ACCOMPLISHING THE PURPOSES OF THE GRANT; (V) TO ALLOW PEW, AT PEW'S DISCRETION AND EXPENSE, TO CONDUCT EVALUATIONS AND AUDITS OF THE GRANTEE'S OPERATIONS, RECORDS, AND USE OF GRANT FUNDS; AND (VI) TO REPAY ANY PORTION OF THE GRANT THAT IS NOT USED FOR THE CHARITABLE PURPOSE OF THE GRANT. PEW ALSO REQUIRES EACH GRANTEE TO CERTIFY IN WRITING THAT IT DOES NOT AND WILL NOT PROMOTE OR ENGAGE IN VIOLENCE OR TERRORISM AND SHALL AT ALL TIMES COMPLY WITH THE RELEVANT LAWS PROHIBITING TRANSACTIONS WITH INDIVIDUALS AND ORGANIZATIONS ASSOCIATED WITH TERRORISM. THIRD, IN ACCORDANCE WITH THE TERMS OF THE GRANT, PEW'S GRANTEES MUST SUBMIT PERIODIC NARRATIVE AND FINANCIAL REPORTS THROUGHOUT THE TERM OF THE GRANT, AND A FINAL REPORT AT THE END OF THE GRANT TERM, DESCRIBING HOW THE GRANT FUNDS WERE SPENT AND WHAT WAS ACCOMPLISHED AND PROVIDING A REASONABLY DETAILED ACCOUNT OF THE ACTIVITIES CONDUCTED IN FURTHERANCE OF THE AGREED-UPON CHARITABLE OBJECTIVES. PEW ALSO MAY EXERCISE OVERSIGHT OVER THE GRANTEE THROUGH OTHER MEANS DESIGNED TO ENSURE ALL GRANT FUNDS ARE USED APPROPRIATELY, SUCH AS IN-PERSON SITE VISITS, MONITORING, AND EVALUATION.

FORM 990, SCHEDULE F, PART I, LINE 3, COLUMN F

NON-EMPLOYEE EXPENDITURES ARE REPORTED BASED ON THE DOMICILE OF THE VENDOR TO WHICH FUNDS ARE TRANSFERRED. EMPLOYEE EXPENDITURES ARE REPORTED BASED ON THE EMPLOYEE'S HOME LOCATION. PEW DOES NOT SEPARATELY TRACK INDIRECT EXPENDITURES TO FOREIGN ACTIVITIES. AS SUCH, PER THE IRS FORM 990 INSTRUCTIONS, THE AMOUNTS PRESENTED IN SCHEDULE F DO NOT INCLUDE AN INDIRECT ALLOCATION OF EXPENDITURES.

JSA

Page 5

Schedule F (Form 990) 2018

Part V Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

FORM 990, SCHEDULE F, PART II, LINE 1, COLUMN E

GRANTS ARE REPORTED ON THE ACCRUAL BASIS, THE SAME METHOD USED FOR THE

AUDITED FINANCIAL STATEMENTS.

Schedule F (Form 990) 2018

SCHEDULE G	Supplemental	Information Re	garding	Fundra	ising or Gamir	ng Activities	OMB No. 1545-0047
(Form 990 or 990-EZ)	Complete if t	he organization answei organization entered r	nore than \$1	5,000 on Fo	rm 990-EZ, line 6a.	9, or if the	2018
Department of the Treasury) or Form 99			Open to Public
Internal Revenue Service Name of the organization	ÞG	o to www.irs.gov/Form	99010111150	uctions and		Employer identificat	Inspection
THE PEW CHARITA						56-2307147	
	ing Activities. Con	nolete if the orga	nization	answered	"Yes" on Form		
	0-EZ filers are not	•				550, i ait iv, iiic	, .,.
	the organization rais				activities. Check a	all that apply.	
a X Mail solicita	-	e		-	non-government g		
b X Internet and	email solicitations	f			government grant		
c X Phone solic	itations	g	Spe	cial fundra	ising events		
d X In-person so	olicitations						
b If "Yes," list the	tion have a written o es listed in Form 990 10 highest paid indi least \$5,000 by the	, Part VII) or entity viduals or entities	in connec	ction with p	professional fundra	ising services?	X Yes No
						(v) Amount paid to	1
(i) Name and add or entity (fu		(ii) Activity	custody o	ndraiser have or control of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			
ATTACHMENT 1							+
3							
4							
5							+
6							
7							
8							
9							
•							
10							
Totol				L		143,745	
Total 3 List all states in	which the organiza	tion is registered o	or licensed	d to solicit	contributions or		
registration or lic	-	TT.					
KS, KY, ME, MD, MA, I			ND OH				
OK, OR, PA, RI, SC,							
		· ·					

_	edule G (Form 990 or 990-EZ) 2018 Int II Fundraising Events. Complete				
	more than \$15,000 of fundra events with gross receipts gre		tions and gross incom	e on Form 990-EZ	, lines 1 and 6b. List
		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through
Ð	-	(event type)	(event type)	(total number)	col. (c))
Revenue	1 Gross receipts				
Re					
	 2 Less: Contributions 3 Gross income (line 1 minus line 2) 				
	4 Cash prizes				
	5 Noncash prizes				
enses	6 Rent/facility costs				
Direct Expenses	7 Food and beverages				
Direc	8 Entertainment				
	9 Other direct expenses				
	 Direct expense summary. Add line Net income summary. Subtract lir 	es 4 through 9 in colu the 10 from line 3. col	umn (d) umn (d)		
Pa	rt III Gaming. Complete if the orga \$15,000 on Form 990-EZ, line	anization answered			reported more than
e	\$15,000 OII FOIII 990-EZ, III	a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
Revenue	-	(u) Dilligo	bingo/progressive bingo	(•, •	col. (a) through col. (c))
Re	1 Gross revenue				
enses	2 Cash prizes				
	3 Noncash prizes				
Direct Exp	4 Rent/facility costs				
_	5 Other direct expenses				
	6 Volunteer labor	Yes 9	%Yes% No	Yes%	,
	7 Direct expense summary. Add line	es 2 through 5 in colu	umn (d)	 	
	8 Net gaming income summary. Su	btract line 7 from line	e 1. column (d)	►	
_					1
9 1	If "No " avalaia:	duct gaming activities		es?	Yes No
10a I			spended, or terminated du		YesNo

Schedule G (Form 990 or 990-EZ) 2018

THE PEW CHARITABLE TRUST	THE	PEW	CHARITABLE	TRUSTS
--------------------------	-----	-----	------------	--------

	THE PEW CHARITABLE TRUSTS	56-230)/14/	
Sched	ule G (Form 990 or 990-EZ) 2018			Page 3
11	Does the organization conduct gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other enti			
	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			%
14	Enter the name and address of the person who prepares the organization's gaming/special events bool			/0
14	records:			
	Name			
	Address ►			
15 a	Does the organization have a contract with a third party from whom the organization receives	aamina		
15 a	revenue?			No
h	If "Yes," enter the amount of gaming revenue received by the organization > \$	and the		
N	amount of gaming revenue retained by the third party \triangleright \$			
c	If "Yes," enter name and address of the third party:			
U				
	Name 🕨			
	Name			
	Address ►			
	Address			
16	Gaming manager information:			
	Name ▶			
	Gaming manager compensation ► \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
	Is the organization required under state law to make charitable distributions from the gaming pro-	oceeds to)	
	retain the state gaming license?		Yes	No
b	Enter the amount of distributions required under state law to be distributed to other exempt org	anizations		
	or spent in the organization's own exempt activities during the tax year > \$			
Par		(iji) and	(v), and	
	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any addition			
	(see instructions).			
	· · · · ·			

Schedule G (Form 990 or 990-EZ) 2018

56-2307147

ATTACHMENT 1

990, SCHEDULE G, PART I - HIGHEST PAID FUNDRAISER

NAME AND ADDRESS OF FUNDRAISER	ACTIVITY	DID FUNDRAISER HAVE CUSTODY OR CONTROL OF CONTRIBUTIONS? YES NO	GROSS RECEIPTS FROM ACTIVITY	AMOUNT PAID TO (OR RETAINED BY FUNDRAISER	AMOUNT PAID TO (OR RETAINED BY ORGANIZATION
CORVID PARTNERS, LLC 2711 CLINTON WAY DENVER CO 80238	FUNDRAISING	X		51,874.	
GRENZEBACH GLIER AND ASSOCIATES 401 N MICHIGAN AVENUE SUITE 2800 CHICAGO IL 60611	CONSULTING	х		91,871.	

SCHEDULE I Grants and Other Assistance to Organizations,								OMB No. 1545-0047	
(Form 990)				ndividuals ii				2018	
			•	wered "Yes" on F					
			-	ttach to Form 990				Open to Public	
Department of the Treasury Internal Revenue Service		► Go	to www.irs.gov	/Form990 for the I	atest information).		Inspection	
Name of the organization							Employer identific	ation number	
THE PEW CHARITA	ABLE TRUSTS						56-23072	L47	
Part I General I	nformation on Grants ar	d Assistanc	e						
1 Does the organiz	1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and								
the selection criteria used to award the grants or assistance? No									
	IV the organization's proce								
Part II Grants ar	nd Other Assistance to I	Domestic Or	nanizations au	d Domestic Gov	ernments Com	nlete if the organiz	ration answered '	Yes" on Form 990	
	ne 21, for any recipient t		-						
				· 	•	•			
	d address of organization government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance	
(1) AARP FOUNDATION									
601 E ST NW WASHI	NGTON, DC 20049	52-0794300	501(C)(3)	200,000.				CIVIC LIFE	
(2) AFTER SCHOOL ACTI	VITIES PARTNERSHIPS								
1520 LOCUST ST PH	IILADELPHIA, PA 19102	26-3639206	501(C)(3)	200,000.				CIVIC LIFE	
(3) ALASKA ESKIMO WHA	(3) ALASKA ESKIMO WHALING COMMISSION								
PO BOX 570 BARROW	I, AK 99723	92-0081760	501(C)(3)	84,465.				POLICY	
(4) ALASKA ESKIMO WHA	LING COMMISSION								
PO BOX 570 BARROW	I, AK 99723	92-0081760	501(C)(3)	52,707.				POLICY	
(5) ALBERT EINSTEIN C	OLLEGE OF MEDICINE								
1300 MORRIS PARK	AVE BRONX, NY 10461	47-2209056	501(C)(3)	130,000.				POLICY	
(6) AMERICAN BAR ASSO	OCIATION								
321 N CLARK ST CH	IICAGO, IL 60654	36-0723150	501(C)(6)	197,779.				POLICY	
(7) AMERICAN CONSERVA	TIVE UNION FOUNDATION								
1331 H ST WASHING	TON, DC 20005	52-1294680	501(C)(3)	300,500.				POLICY	
(8) AMERICAN CONSERVA	TIVE UNION FOUNDATION	_							
1331 H ST WASHING	TON, DC 20005	52-1294680	501(C)(3)	261,858.				POLICY	
(9) AMERICANS FOR TAX	REFORM FOUNDATION								
722 12TH ST NW WA	SHINGTON, DC 20005	52-1400492	501(C)(3)	99,677.				POLICY	
(10) ARIZONA STATE UNI	VERSITY FOUNDATION								
PO BOX 876011 TEM	IPE, AZ 85278	86-6051042	501(C)(3)	257,395.				POLICY	
(11) ARIZONA WILDERNES	(11) ARIZONA WILDERNESS COALITION								
	PO BOX 40340 TUCSON, AZ 85717 20-0412328 501(C)(3) 40,135. POLICY								
(12) BARNES FOUNDATION		_							
	WY PHILADELPHIA, PA 19130	23-6000149	1	5,000,000.				CIVIC LIFE	
	per of section 501(c)(3) and	•	•					►	
For Paperwork Reduction	on Act Notice, see the Instruc	tions for Form 9	90.				S	chedule I (Form 990) (2018)	

Covernments, and Individuals in the United States Description of construction answered "yes" on Form 990, Part IV, line 21 or 22. LATER to form 990. Construction answered "yes" on Form 990. Description of the interval of the organization answered "yes" on Form 990. Construction of Construction Construc	SCHEDULE I	(Grants ar	nd Other A	Assistance t	o Organiza	tions,	L	OMB No. 1545-0047	
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 23. Name of the againization End to wurk./rs.gov/Form990 for the latest information. Part Ceneral Information on Grants and Assistance The End Ceneral Information on Grants and Assistance 10 Does the organization maintin records to substantiate the amount of the grants or assistance. The grantees' eligibility for the grants or assistance and the selection orderia used to award the grants or assistance and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. Or any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (1) Narro or services (a) Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (1) Narro or services (a) Part IV, line 21, part Part Part Part Part Part Part Part P	(Form 990)								എ പ 0	
Dependent of the Testage Interest Streams Service Copy of Public Dependent of the ageination Copy of Public Inspection Security Security Securit				•						
Internal Reveue Series Control Web Control Employee (destification number 56 - 23.07147 Part II Control Information Control Information on Offants and Assistance Social Status Yes No 2 Describe Terral Information on Offants and Assistance Image: Information on Offants and Assistance Yes No 2 Describe Terral Information on Offants and Assistance to Substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection order is used to award the grants or assistance to Domestic Organizations proceedures for monitoring the use of grant funds in the United States. Part IV (In 22.1, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (b) Purpose of grant or additional space is needed. (b) Purpose of grant or addition of grant and additional space is needed. (b) Purpose of grant or additional space is needed. (c) Purpose of grant or additional space is needed. (c) Purpose of grant or additional space is needed. (c) Purpose of grant or additional space is needed. (c) Purpose of grant or additional space is needed. (c) Purpose of grant or additional space is needed. (c) Purpose of grant or additional space is needed. (c) Purpose of grant or additional space is needed. (c) Purpose of grant or additional space is needed. (c) Purpose of grant or additional space is needed. (c) Purpose of grant or additional space is needed. (2) sto B moremarks add		Com		-					Open to Public	
THE PEN CHARTTABLE TRUSTS 56-2307147 Part Concretion criterion used to award the grants of assistance? Second the grants of maintain records to substantiate the amount of the grants or assistance, the grant second the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No 2 Describe in Part IV the organization insprecedures for monotring the use of grant funds in the United States. PartII Crants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Ves" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II Can be duplicated if additional space is needed. (a) Name and address of grants and on the ceived more than \$5,000. Part II Can be duplicated if additional space is needed. (b) Purpose of grant and the previous of grant funds in the United States. 1 (a) Name and address of grants and space is needed. (b) Part of grant and the previous of grant funds in the United States. (c) Amount area.			► Go t	to www.irs.gov	/Form990 for the I	atest information).		Inspection	
Part I General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance?. X Image: Construct State State Construct State State Construct State Construct State Construct State Construct State Construct State State State State Construct State State State State Construct State State Construct State State Construct State Sta	Name of the organization							Employer identifi	cation number	
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Image: Complete the grants or assistance and the selection criteria used to award the grants or assistance? Image: Complete the the complete the compl	THE PEW CHARITA	ABLE TRUSTS						56-2307	147	
the selection criteria used to award the grants or assistance? X Yes No 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Earth Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. 1 (a) Nume and address of organization or means the organization and duples of organization or general means the organization or means the organization of the organization of the organization and the organization of the organization of the organization and the organization and the organization and the organization of /li>	Part I General I	nformation on Grants an	d Assistance	9				1		
the selection criteria used to award the grants or assistance? X Yes No 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Earth Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. 1 (a) Nume and address of organization or means the organization and duples of organization or general means the organization or means the organization of the organization of the organization and the organization of the organization of the organization and the organization and the organization and the organization of /li>	1 Does the organiz	zation maintain records to s	ubstantiate th	e amount of the	e grants or assista	nce, the grantees	' eligibility for the grant	s or assistance, a	nd	
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part IV Crants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV. Inite 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. 1 (a) Nume and address ologonization (b) EN (c) Received more than \$5,000. Part II can be duplicated if additional space is needed. (1) ENVLOR COLLEGO or Mexicine: (b) EN (c) Received more than \$5,000. (b) Control of the organization of the orga										
Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. I (a) Nome ad address of organization or government (b) EN (b) EN (b) ENC or ELA organization (b) ENC or ELA organization (b) ENC or ELA organization (b) ENC or ELA organization (b) ENC organization organization (b) ENC organization (b) ENC organization organization (b) ENC organization (b) ENC organization (b) ENC organization (C) ENC OR OF OR ENC OR OF OR OF OR OF OR OF OR OF OR OF OR		_								
Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. I (a) Nome ad address of organization or government (b) EN (b) EN (b) EN (b) EN (b) ENC of the Distance organization grant (b) Amount of cash grant (b) Amount of non- cash assistance grant (b) Amount of non- cassistance grant (b	Part II Grants ar	nd Other Assistance to D	omestic Or	nanizations ar	d Domestic Gov	ernments Com	nlete if the organiz	ation answered	"Yes" on Form 990	
1 (a) Name and address of organization or government (b) EIN (c) IRC section (if applicable) (d) Amount of cash grant (e) Amount of non- cash assistance (f) Method of valuation oncesh assistance (g) Description of noncesh assistance (h) Purpose of grant or assistance (1) BAULOR COLLEGE OF MEDICINE ONE BAULOR PLAZE MOUTHERS INDERBEDBACKE 74-1613875 501(c)(13) 300,000. POLICY (2) BLO BOTHERS INDERBEDBACKE 23-1352034 501(c)(13) 215,000. CTVIC LIFE (3) BILLION OFTER PROJECT 23-1352034 501(c)(13) 215,000. CTVIC LIFE (3) BILLION OFTER PROJECT 23-1352034 501(c)(13) 42,957. POLICY (4) BOOT OFTER PROJECT 59-242641 501(c)(13) 42,957. POLICY (5) BOSTON CHILDRED FILADELEPHIA, PL 02115 04-2774441 501(c)(13) 300,000. POLICY (6) BOSTON CHILDRED FILADELEPHIA INC 1300(000. POLICY POLICY POLICY (6) BOSTON CHILDRED FILADELEPHIA INC 1300(000. POLICY POLICY (7) BOSTA GENER FILADELEPHIA INC 23-1966755 501(c)(13) 100,600. CTVIC LIFE (9) BEALENET FOR FILADELEPHIA INC 23-2666755 501(c)(13) 130,000.				-						
Interview Cycle Of applicable)				1	·	•	•			
ONE BAYLOR PLAZA HOUSTON, TX 77030 74-1613878 501(C)(3) 300,000. POLICY (2) Bit BROTHERS BIG SISTERS INDEFERDENCE			(b) EIN				(book, FMV, appraisal,			
(2) EIG BROTHERS EIG SISTERS INDEPENDENCE 23-1352034 501(C)(3) 215,000. CIVIC LIFE 13 S DROAD ST PHILADELPHIA, PA 19109 23-1352034 501(C)(3) 215,000. POLICY (3) EILLION OVSTER PROJECT 10 SOUTH ST NEW YORK, NY 10004 27-2918478 501(C)(3) 100,000. POLICY (4) DOND COMMUNITY HEALTH CENTER 59-2426414 501(C)(3) 42,957. 901/CY (5) BOSTON UNIVERSITY 04-2774441 501(C)(3) 300,000. 901/CY (6) BOSTON UNIVERSITY 04-2774441 501(C)(3) 107,687. 901/CY (7) BOYS & GIELS CLUBS OF PHILADELPHIA INC 23-1966756 501(C)(3) 107,687. 901/CY (6) BOSTON UNIVERSITY 04-2103552 501(C)(3) 107,687. 901/CY (7) BOYS & GIELS CLUBS OF PHILADELPHIA INC 23-1966756 501(C)(3) 100,000. CIVIC LIFE (10) BRADA STREET NINISTRY 04-2103552 501(C)(3) 300,000. POLICY 315 S BRAD ST PHILADELPHIA, PA 19107 20-2760310 501(C)(3) 20,000. CIVIC LIFE (11) CALIFER ST PHILADELPHIA, PA 19107 20-	(1) BAYLOR COLLEGE OF	MEDICINE								
123 S BROAD ST PHILADELPHIA, PA 19109 23-1352034 \$01(C)(3) 215,000. CIVIC LIFE (3) BILLION OYSTER PROJECT	ONE BAYLOR PLAZA	HOUSTON, TX 77030	74-1613878	501(C)(3)	300,000.				POLICY	
(3) BILLION OYSTER PROJECT POLICY 10 SOUTH ST NEW YORK, NY 10004 27-2918478 501(0)(3) 100,000. POLICY (4) BORD COMMUNITY HEALTH CENTER 1720 5 GADEDEN ST TALLAHASEE, FL 32301 59-2426414 501(0)(3) 42,957. POLICY (5) BOSTON CHILDREN'S HOSPITAL 300 LONGWOOD AVE BOSTON, NA 02115 04-2774441 501(0)(3) 300,000. POLICY (6) BOSTON UNIVERSITY 04-2103547 501(0)(3) 107,687. POLICY (7) BOST & GREES CLUES OF PHILADELPHIA INC 23-1966756 501(0)(3) 180,000. CIVIC LIFE (8) BRANETIS UNIVERSITY 04-2103552 501(0)(3) 180,000. CIVIC LIFE (18) BRANETIS UNIVERSITY 04-2103552 501(0)(3) 300,000. POLICY (19) BRANCTEROUCH OF GREATER PHILADELPHIA INC 94-2103552 501(0)(3) 135,000. CIVIC LIFE (10) BROAD STREET MINISTEY 23-2789601 501(0)(3) 20,000. CIVIC LIFE (10) BROAD STREET MINISTEY 23-2789601 501(0)(3) 20,000. CIVIC LIFE (11) CALIFORNIA ACADEMY OF SCIENCES 55 MISIC CONCOURSE SAN FRANCISCO. CA 941	(2) BIG BROTHERS BIG	SISTERS INDEPENDENCE								
10 SOUTH ST NEW YORK, NY 10004 27-2918478 SOL(C)(3) 100,000. POLICY (4) BOND COMMUNITY HALTH CENTRE	123 S BROAD ST PH	HILADELPHIA, PA 19109	23-1352034	501(C)(3)	215,000.				CIVIC LIFE	
(4) BOND COMMUNITY HEALTH CENTER policy 1720 S GADSDEN ST TALLAHASSEE, FL 32301 59-2426414 501(C)(3) 42,957. policy (5) BOSTON CHILDREN'S NOSPITAL	(3) BILLION OYSTER PR	ROJECT	_							
1720 S GADSDEN ST TALLAHASSEE, FL 32301 59-2426414 501(C)(3) 42,957. POLICY (5) BOSTON CHILDERN'S HOSPITAL 300 LONGWOOD AVE BOSTON, MA 02115 04-2774441 501(C)(3) 300,000. POLICY (6) BOSTON UNIVERSITY B81 COMMONREALTH AVE BOSTON, MA 02215 04-2103547 501(C)(3) 107,687. POLICY (7) BOYS & GIRLS CLUBS OF PHILADELPHIA INC 1518 WALNUT ST PHILADELPHIA, PA 19102 23-1966756 501(C)(3) 180,000. CIVIC LIFE (8) BRANDEIS UNIVERSITY 415 SOUTH ST WALITHAM, MA 02453 04-2103552 501(C)(3) 300,000. POLICY (9) BREAKTHROUGH OF GREATER PHILADELPHIA INC 34 W COULTRE ST PHILADELPHIA, PA 19142 23-2789601 501(C)(3) 135,000. CIVIC LIFE 315 S BROAD ST PHILADELPHIA, PA 19144 23-2789601 501(C)(3) 20,000. CIVIC LIFE (11) BROAD STREET MINISTRY 315 S BROAD ST PHILADELPHIA, PA 19107 20-2760310 501(C)(3) 25,000. CIVIC LIFE (11) CALIFORNIA ACADEMY OF SCIENCES 55 MUSIC CONCOURSE SAN FRANCISCO, CA 94118 94-1156258 501(C)(3) 25,000. CIVIC LIFE (12) CALIFORNIA ALDERT 68-0346784 501(C)(3) 100,000. POLICY	10 SOUTH ST NEW Y	YORK, NY 10004	27-2918478	501(C)(3)	100,000.				POLICY	
(5) BOSTON CHILDREN'S HOSPITAL 04-2774441 501(C)(3) 300,000. POLICY (6) BOSTON UNIVERSITY 04-2774441 501(C)(3) 300,000. POLICY (6) BOSTON UNIVERSITY 04-2103547 501(C)(3) 107,687. POLICY (7) BOYS & GIRLS CLUBS OF PHILADELPHIA INC 1518 WALMUT ST PHILADELPHIA, PA 19102 23-1966756 501(C)(3) 180,000. CIVIC LIFE (8) BRANDEIS UNIVERSITY 04-2103552 501(C)(3) 300,000. POLICY CIVIC LIFE (10) BREAKTHROUGH OF GREATER PHILADELPHIA INC 04-2103552 501(C)(3) 300,000. POLICY (10) BROAD STREET MINISTRY 04-2103552 501(C)(3) 135,000. CIVIC LIFE (11) CALIFORNIA ACADEMY OF SCIENCES 501(C)(3) 135,000. CIVIC LIFE (12) CALIFORNIA ACADEMY OF SCIENCES 501(C)(3) 20,000. POLICY (12) CALIFORNIA BUGGET & POLICY CENTER 68-0346784 501(C)(3) 100,000. POLICY (2< Enter total number of section 501(C)(G) and government organizations listed in the line 1 table.	(4) BOND COMMUNITY HE	CALTH CENTER	_							
300 LONGWOOD AVE BOSTON, MA 02115 04-2774441 501(C)(3) 300,000. POLICY (6) BOSTON UNIVERSITY 881 COMMONREALTH AVE BOSTON, MA 02215 04-2103547 501(C)(3) 107,687. POLICY (7) BOYS & GIRLS CLUBS OF PHILADELPHIA INC 1518 NALIVERSITY CIVIC LIFE (8) BRANDELS UNIVERSITY 23-1966756 501(C)(3) 180,000. CIVIC LIFE (9) BREAKTHROUGH OF GREATER PHILADELPHIA INC 04-2103552 501(C)(3) 300,000. POLICY (9) BREAKTHROUGH OF GREATER PHILADELPHIA INC 04-2103552 501(C)(3) 135,000. CIVIC LIFE (10) BROAD STREET MINISTRY 20-2760310 501(C)(3) 20,000. CIVIC LIFE (11) CALIFORNIA ACADEMY OF SCIENCES 01(C)(3) 20,000. CIVIC LIFE 55 MUSIC CONCOURGE SAN FRANCISCO, CA 94118 94-1156258 501(C)(3) 25,000. POLICY (12) CALIFORNIA BUDGET & POLICY CENTER 1007 9514 68-0346784 501(C)(3) 100,000. POLICY (12)	1720 S GADSDEN ST	TALLAHASSEE, FL 32301	59-2426414	501(C)(3)	42,957.				POLICY	
(6) BOSTON UNIVERSITY04-2103547501(C)(3)107,687.POLICY(7) BOYS & GIRLS CLUBS OF PHILADELPHIA INC1518 WALKUT ST PHILADELPHIA, PA 1910223-1966756501(C)(3)180,000.CIVIC LIFE(8) BRANDEIS UNIVERSITY04-2103552501(C)(3)300,000.POLICYCIVIC LIFE(9) BREAXTHROUGH OF GREATER PHILADELPHIA, PA 1914423-2789601501(C)(3)135,000.CIVIC LIFE(10) BROAD STREET MINISTRY315 S BROAD ST PHILADELPHIA, PA 1910720-2760310501(C)(3)20,000.CIVIC LIFE(11) CALIFORNIA ACADEMY OF SCIENCES501(C)(3)20,000.CIVIC LIFECIVIC LIFE55 MUSIC CONCOURSE SAN FRANCISCO, CA 9411894-1156258501(C)(3)25,000.POLICY(12) CALIFORNIA BUDGET & POLICY CENTER68-0346784501(C)(3)100,000.POLICY1007 9TH ST SACRAMENTO, CA 9551468-0346784501(C)(3)100,000.POLICY2< Enter total number of section 501(C)(3) and government organizations listed in the line 1 table	(5) BOSTON CHILDREN'S	3 HOSPITAL	_							
881 COMMONWEALTH AVE BOSTON, MA 02215 04-2103547 501(C)(3) 107,687. POLICY (7) BOYS & GIRLS CLUBS OF PHILADELPHIA INC 1518 WALNUT ST PHILADELPHIA, PA 19102 23-1966756 501(C)(3) 180,000. CIVIC LIFE (8) BRANDEIS UNIVERSITY 415 SOUTH ST WALTHAM, MA 02453 04-2103552 501(C)(3) 300,000. POLICY (9) BREAKTHROUGH OF GREATER PHILADELPHIA INC 34 W COULTER ST PHILADELPHIA, PA 19144 23-2789601 501(C)(3) 135,000. CIVIC LIFE 101 BROAD STREET MINISTRY 315 S BROAD ST PHILADELPHIA, PA 19107 20-2760310 501(C)(3) 20,000. CIVIC LIFE (11) CALIFORNIA ACADEMY OF SCIENCES 501(C)(3) 20,000. CIVIC LIFE FOLICY (12) CALIFORNIA BUDGET & POLICY CENTER 100,000. FOLICY FOLICY 1107 9TH ST SACRAMENTO, CA 95814 68-0346784 501(C)(3) 100,000. FOLICY 2 Enter total number of section 501(C)(3) and government organizations listed in the line 1 table 100,000. FOLICY			04-2774441	501(C)(3)	300,000.				POLICY	
(7) BOYS & GIRLS CLUBS OF PHILADELPHIA INC 23-1966756 501(C)(3) 180,000. CIVIC LIFE (8) BRANDEIS UNIVERSITY 415 SOUTH ST WALTHAM, MA 02453 04-2103552 501(C)(3) 300,000. POLICY (9) BREAKTHROUGH OF GREATER PHILADELPHIA INC 34 W COULTER ST PHILADELPHIA, PA 19144 23-2789601 501(C)(3) 135,000. CIVIC LIFE (10) BROAD STREET MINISTRY 23-2760310 501(C)(3) 20,000. CIVIC LIFE 315 S BROAD ST PHILADELPHIA, PA 19107 20-2760310 501(C)(3) 20,000. CIVIC LIFE (11) CALIFORNIA ACADEMY OF SCIENCES 501(C)(3) 25,000. POLICY POLICY (12) CALIFORNIA BUDGET & POLICY CENTER 68-0346784 501(C)(3) 100,000. POLICY 1107 9TH ST SACRAMENTO, CA 95814 68-0346784 501(C)(3) 100,000. POLICY 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table POLICY POLICY 3 Enter total number of other organizations listed in the line 1 table POLICY POLICY	(6) BOSTON UNIVERSITY	7	_							
1518 WALNUT ST PHILADELPHIA, PA 19102 23-1966756 501(C)(3) 180,000. CIVIC LIFE (8) BRANDELS UNIVERSITY 415 SOUTH ST WALTHAM, MA 02453 04-2103552 501(C)(3) 300,000. POLICY (9) BREAKTHROUGH OF GREATER PHILADELPHIA INC 34 W COULTER ST PHILADELPHIA, PA 19144 23-2789601 501(C)(3) 135,000. CIVIC LIFE (10) BROAD STREET MINISTRY 20-2760310 501(C)(3) 20,000. CIVIC LIFE (11) CALIFORNIA ACADEMY OF SCIENCES 510(C)(3) 20,000. CIVIC LIFE (12) CALIFORNIA ACADEMY OF SCIENCES 501(C)(3) 25,000. POLICY (12) CALIFORNIA BUDGET & POLICY CENTER 68-0346784 501(C)(3) 100,000. POLICY 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table poLicy			04-2103547	501(C)(3)	107,687.				POLICY	
(8) BRANDELS UNIVERSITY 04-2103552 501(C)(3) 300,000. POLICY (9) BREAKTHROUGH OF GREATER PHILADELPHIA INC 34 W COULTER ST PHILADELPHIA, PA 19144 23-2789601 501(C)(3) 135,000. CIVIC LIFE (10) BROAD STREET MINISTRY 315 S BROAD ST PHILADELPHIA, PA 19107 20-2760310 501(C)(3) 20,000. CIVIC LIFE (11) CALIFORNIA ACADEMY OF SCIENCES 55 MUSIC CONCOURSE SAN FRANCISCO, CA 94118 94-1156258 501(C)(3) 25,000. POLICY (12) CALIFORNIA BUDGET & POLICY CENTER 68-0346784 501(C)(3) 100,000. POLICY 2 Enter total number of section 501(C)(3) and government organizations listed in the line 1 table POLICY			_							
415 SOUTH ST WALTHAM, MA 02453 04-2103552 501(C)(3) 300,000. POLICY (9) BREAKTHROUGH OF GREATER PHILADELPHIA INC 34 W COULTER ST PHILADELPHIA, PA 19144 23-2789601 501(C)(3) 135,000. CIVIC LIFE (10) BROAD STREET MINISTRY 315 S BROAD ST PHILADELPHIA, PA 19107 20-2760310 501(C)(3) 20,000. CIVIC LIFE (11) CALIFORNIA ACADEMY OF SCIENCES 55 MUSIC CONCOURSE SAN FRANCISCO, CA 94118 94-1156258 501(C)(3) 25,000. POLICY (12) CALIFORNIA BUDGET & POLICY CENTER 68-0346784 501(C)(3) 100,000. POLICY 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 100,000. POLICY			23-1966756	501(C)(3)	180,000.				CIVIC LIFE	
(9) BREAKTHROUGH OF GREATER PHILADELPHIA INC 23-2789601 501(C)(3) 135,000. CIVIC LIFE (10) BROAD STREET MINISTRY 20-2760310 501(C)(3) 20,000. CIVIC LIFE (11) CALIFORNIA ACADEMY OF SCIENCES 0 0 CIVIC LIFE 55 MUSIC CONCOURSE SAN FRANCISCO, CA 94118 94-1156258 501(C)(3) 25,000. POLICY (12) CALIFORNIA BUDGET & POLICY CENTER 0 0 POLICY POLICY 1107 9TH ST SACRAMENTO, CA 95814 68-0346784 501(C)(3) 100,000. POLICY 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 1			_							
34 W COULTER ST PHILADELPHIA, PA 19144 23-2789601 501(C)(3) 135,000. CIVIC LIFE (10) BROAD STREET MINISTRY 20-2760310 501(C)(3) 20,000. CIVIC LIFE 315 S BROAD ST PHILADELPHIA, PA 19107 20-2760310 501(C)(3) 20,000. CIVIC LIFE (11) CALIFORNIA ACADEMY OF SCIENCES 55 MUSIC CONCOURSE SAN FRANCISCO, CA 94118 94-1156258 501(C)(3) 25,000. POLICY (12) CALIFORNIA BUDGET & POLICY CENTER 68-0346784 501(C)(3) 100,000. POLICY 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table POLICY			04-2103552	501(C)(3)	300,000.				POLICY	
(10) BROAD STREET MINISTRY 20-2760310 501(C)(3) 20,000. CIVIC LIFE 315 S BROAD ST PHILADELPHIA, PA 19107 20-2760310 501(C)(3) 20,000. CIVIC LIFE (11) CALIFORNIA ACADEMY OF SCIENCES 55 MUSIC CONCOURSE SAN FRANCISCO, CA 94118 94-1156258 501(C)(3) 25,000. POLICY (12) CALIFORNIA BUDGET & POLICY CENTER 68-0346784 501(C)(3) 100,000. POLICY 1107 9TH ST SACRAMENTO, CA 95814 68-0346784 501(C)(3) 100,000. POLICY 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Maintender Maintender Maintender 3 Enter total number of other organizations listed in the line 1 table Maintender Maintender Maintender			_							
315 S BROAD ST PHILADELPHIA, PA 19107 20-2760310 501(C)(3) 20,000. CIVIC LIFE (11) CALIFORNIA ACADEMY OF SCIENCES 55 MUSIC CONCOURSE SAN FRANCISCO, CA 94118 94-1156258 501(C)(3) 25,000. POLICY (12) CALIFORNIA BUDGET & POLICY CENTER 68-0346784 501(C)(3) 100,000. POLICY 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table policy			23-2789601	501(C)(3)	135,000.				CIVIC LIFE	
(11) CALIFORNIA ACADEMY OF SCIENCES policy 55 MUSIC CONCOURSE SAN FRANCISCO, CA 94118 94-1156258 501(C)(3) 25,000. (12) CALIFORNIA BUDGET & POLICY CENTER policy policy 1107 9TH ST SACRAMENTO, CA 95814 68-0346784 501(C)(3) 100,000. 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table policy 3 Enter total number of other organizations listed in the line 1 table policy	<u> </u>		_							
55 MUSIC CONCOURSE SAN FRANCISCO, CA 94118 94-1156258 501(C)(3) 25,000. POLICY (12) CALIFORNIA BUDGET & POLICY CENTER 68-0346784 501(C)(3) 100,000. POLICY 1107 9TH ST SACRAMENTO, CA 95814 68-0346784 501(C)(3) 100,000. POLICY 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table For the line 1 table For the line 1 table 3 Enter total number of other organizations listed in the line 1 table For the line 1 table For the line 1 table			20-2760310	501(C)(3)	20,000.				CIVIC LIFE	
(12) CALIFORNIA BUDGET & POLICY CENTER 68-0346784 501(C)(3) 100,000. POLICY 1107 9TH ST SACRAMENTO, CA 95814 68-0346784 501(C)(3) 100,000. POLICY 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table • • • 3 Enter total number of other organizations listed in the line 1 table • • •	x /									
1107 9TH ST SACRAMENTO, CA 95814 68-0346784 501(C)(3) 100,000. POLICY 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table >			94-1156258	501(C)(3)	25,000.				POLICY	
 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3 Enter total number of other organizations listed in the line 1 table 	`		-							
3 Enter total number of other organizations listed in the line 1 table									POLICY	
									P	

JSA 8E1288 1.000 1211PT 700P 4/23/2020 6:41:20 PM V 18-8.2F

SCHEDULE I Grants and Other Assistance to Organizations,								OMB No. 1545-0047
(Form 990)	Go	overnme	nts, and Ir	ndividuals ii	n the Unite	d States		2018
	Com	plete if the o	ganization ans	wered "Yes" on F	orm 990, Part IV	, line 21 or 22.		
Department of the Treasury			► A	ttach to Form 990				Open to Public
Internal Revenue Service		► Go	to www.irs.gov	/Form990 for the I	atest informatior	1.		Inspection
Name of the organization							Employer identificat	on number
THE PEW CHARITA	ABLE TRUSTS						56-230714	.7
Part I General I	nformation on Grants ar	d Assistanc	е					
1 Does the organiz	zation maintain records to s	ubstantiate th	e amount of the	e grants or assista	nce, the grantees	' eligibility for the grant	s or assistance, and	
	eria used to award the gran							X Yes No
2 Describe in Part	IV the organization's proce	dures for mor	nitoring the use	of grant funds in the	e United States.			
Part II Grants ar	nd Other Assistance to I	Domestic Or	nanizations ar	nd Domestic Gov	ernments Com	nlete if the organiz	ation answered "Y	es" on Form 990
	ne 21, for any recipient t		-					co on on on ooo,
Fantiv, iii				1		-		
	d address of organization government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) CALIFORNIA INSTIT	TUTE OF TECHNOLOGY							
1200 E CALIFORNIA	A BLVD PASADENA, CA 91125	95-1643307	501(C)(3)	300,000.				POLICY
(2) CALIFORNIA WILDER	RNESS COALITION							
PO BOX 11094 OAKL	JAND, CA 94611	51-0183228	501(C)(3)	10,001.				POLICY
(3) CAMPHILL VILLAGE	KIMBERTON HILLS							
PO BOX 1045 KIMBE	ERTON, PA 19442	23-2258345	501(C)(3)	120,000.				CIVIC LIFE
(4) CAMPHILL VILLAGE	KIMBERTON HILLS							
PO BOX 1045 KIMBE	ERTON, PA 19442	23-2258345	501(C)(3)	180,000.				CIVIC LIFE
(5) CAPE COD COMMERCI	AL FISHERMEN'S ALLIANCE							
1566 MAIN ST CHAT	гнам, ма 02633	04-3138784	501(C)(3)	209,407.				POLICY
(6) CAREER WARDROBE								
1822 SPRING GARDE	EN PHILADELPHIA, PA 19130	23-2900156	501(C)(3)	20,000.				CIVIC LIFE
(7) CDC FOUNDATION								
600 PEACHTREE ST	ATLANTA, GA 30308	58-2106707	501(C)(3)	265,095.				POLICY
(8) CENTER FOR REGION	NAL ECONOMIC COMPETITIVE							
PO BOX 100127 ARL	JINGTON, VA 22110	54-1968125	501(C)(3)	50,000.				POLICY
(9) CENTER FOR REGION	NAL ECONOMIC COMPETITIVE							
PO BOX 100127 ARL	JINGTON, VA 22110	54-1968125	501(C)(3)	175,000.				POLICY
(10) CENTER ON BUDGET	AND POLICY PRIORITIES							
820 1ST ST NE WAS	SHINGTON, DC 20002	52-1234565	501(C)(3)	99,100.				POLICY
(11) CHESTER COUNTY FU	JTURES INC							
704 HAYWOOD DR EX		31-1822506	501(C)(3)	160,000.				CIVIC LIFE
(12) CHESTER EDUCATION		_						
	419 AVENUE OF THE STATES CHESTER, PA 19013 23-2576096 501(C)(3) 170,000.							
	per of section 501(c)(3) and	•	•					
	per of other organizations lis							
For Paperwork Reduction	on Act Notice, see the Instruc	tions for Form 9	90.				Sch	edule I (Form 990) (2018)

0166181

SCHEDULE I	(Grants ar	nd Other A	Assistance t	o Organiza	tions,		OMB No. 1545-0047
(Form 990)				ndividuals in				എ പ 1 0
			•	wered "Yes" on F				2018
Description of the Transmission	••••••		-	ttach to Form 990				Open to Public
Department of the Treasury Internal Revenue Service		► Go	to www.irs.gov	/Form990 for the I	atest information	.		Inspection
Name of the organization							Employer identifica	ion number
THE PEW CHARITA	BLE TRUSTS						56-23071	17
Part I General Ir	nformation on Grants and	d Assistanc	e				·	
1 Does the organiz	ation maintain records to su	ubstantiate th	e amount of the	e grants or assista	nce, the grantees	' eligibility for the grant	ts or assistance, and	
	the selection criteria used to award the grants or assistance? No							
2 Describe in Part	IV the organization's proced	dures for mor	nitoring the use	of grant funds in the	e United States.			
	ne 21, for any recipient the		-					
					•	•		
	d address of organization government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) CHILDRENS LITERAC	Y INITIATIVE							
2314 MARKET ST PH	ILADELPHIA, PA 19103	23-2515768	501(C)(3)	225,000.				CIVIC LIFE
(2) CHILDRENS VILLAGE								
125 NORTH 8TH ST 1	PHILADELPHIA, PA 19106	23-2223552	501(C)(3)	140,000.				CIVIC LIFE
(3) CHRISTIANITY TODAY INTERNATIONAL								
465 GUNDERSEN DR (CAROL STREAM, IL 60188	52-0231554	501(C)(3)	500,000.				CIVIC LIFE
(4) CITY OF MINNEAPOL	IS	4						
250 S 4TH ST MINN	EAPOLIS, MN 55415	41-6005375	CITY-MPLS	50,000.				POLICY
(5) CITY OF TEMPE		_						
20 E SIXTH ST TEM		86-6000262	CITY-TEMPE	49,986.				POLICY
(6) COALITION FOR JUVI	ENILE JUSTICE	_						
1319 F ST WASHING	TON, DC 20004	22-2520938	501(C)(3)	20,252.				POLICY
(7) COLBY COLLEGE		_						
	WATERVILLE, ME 04901	01-0211497	501(C)(3)	150,000.				POLICY
(8) COLORADO STATE UN		-						
	ORT COLLINS, CO 80523	84-6000545	STATE OF CO	45,302.				POLICY
	TY IN THE CITY OF NEW YORK							
615 W 131ST ST NEW	· · ·	13-5598093	501(C)(3)	130,000.				POLICY
(10) COMMUNITY INITIAT:								
	RANCISCO, CA 94104	94-3255070	501(C)(3)	8,425.				POLICY
(11) COMMUNITY LEGAL SI		-						
	PHILADELPHIA, PA 19102	23-1671562	501(C)(3)	233,000.				CIVIC LIFE
(12) CONSERVATION LANDS			E01 (0) (0)					
835 E 2ND AVE DURA		20-8924520		99,017.			<u> </u>	POLICY
	er of section 501(c)(3) and	•	•				•••••	
	3 Enter total number of other organizations listed in the line 1 table							
I OF TAPELWORK REDUCTIO	m Act Notice, see the instructi	IONS ION FULLIN 9	30.				50	nedule I (Form 990) (2018)

JSA 8E1288 1.000 1211PT 700P 4/23/2020 6:41:20 PM V 18-8.2F

SCHEDULE I		OMB No. 1545-0047					
(Form 990) Go	overnme	nts, and Ir	ndividuals ii	n the Unite	d States		2018
Com	plete if the o	ganization ans	wered "Yes" on F	orm 990, Part IV	, line 21 or 22.		
Department of the Treasury		► A	ttach to Form 990				Open to Public
Internal Revenue Service	► Go	to www.irs.gov	/Form990 for the I	atest informatior	1.		Inspection
Name of the organization						Employer identificat	on number
THE PEW CHARITABLE TRUSTS						56-230714	.7
Part I General Information on Grants an	d Assistanc	e					
1 Does the organization maintain records to s	ubstantiate th	e amount of the	e grants or assista	nce, the grantees	eligibility for the grant	s or assistance, and	
the selection criteria used to award the gran							X Yes No
2 Describe in Part IV the organization's proce	dures for mor	nitoring the use	of grant funds in the	e United States.			
Part II Grants and Other Assistance to I	omestic Or	nanizations ar	nd Domestic Gov	ernments Com	nlete if the organiz	ation answered "Y	es" on Form 990
		-					es on on 550,
Part IV, line 21, for any recipient t	nat received	more man 55	,000. Part II can t		-	leeded.	1
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) CONSERVATION LAW FOUNDATION							
62 SUMMER ST BOSTON, MA 02110	04-6149986	501(C)(3)	101,083.				POLICY
(2) CONSULTATIVE GROUP ON BIOLOGICAL DIVERSITY							
PO BOX 29361 SAN FRANCISCO, CA 94129	13-3431076	501(C)(3)	135,000.				POLICY
(3) CORNELL UNIVERSITY							
341 PINE TREE RD ITHACA, NY 14850	15-0532082	501(C)(3)	2,500,000.				CIVIC LIFE
(4) CORNELL UNIVERSITY							
341 PINE TREE RD ITHACA, NY 14850	15-0532082	501(C)(3)	300,000.				POLICY
(5) COUNCIL OF STATE GOVERNMENTS							
1776 AVE OF THE STATES LEXINGTON, KY 40511	36-6000818	501(C)(3)	300,000.				POLICY
(6) COUNCIL OF STATE GOVERNMENTS							
1776 AVE OF THE STATES LEXINGTON, KY 40511	36-6000818	501(C)(3)	21,303.				POLICY
(7) COUNCIL OF STATE GOVERNMENTS							
1776 AVE OF THE STATES LEXINGTON, KY 40511	36-6000818	501(C)(3)	9,000.				POLICY
(8) CTR FOR ADVOC FOR THE RIGHTS AND INTEREST							
1500 JFK BLVD PHILADELPHIA, PA 19102	23-2075900	501(C)(3)	25,000.				CIVIC LIFE
(9) DAVID SUZUKI FOUNDATION							
1220 MONTGOMERY ST SAN FRANCISCO, CA 94133	94-3204049	501(C)(3)	96,219.				POLICY
(10) DEMOCRACY WORKS INC							
20 JAY ST BROOKLYN, NY 11201	27-2460359	501(C)(3)	500,000.				POLICY
(11) DREXEL UNIVERSITY							
3201 ARCH ST PHILADELPHIA, PA 19104	23-1352630	501(C)(3)	125,000.				CIVIC LIFE
(12) DREXEL UNIVERSITY							
3201 ARCH ST PHILADELPHIA, PA 19104	23-1352630	501(C)(3)	195,000.				CIVIC LIFE
2 Enter total number of section 501(c)(3) and	government	organizations lis	sted in the line 1 tak	ble			
3 Enter total number of other organizations lis	ted in the line	1 table	<u></u>	<u></u>	<u> </u>	<u></u>	
For Paperwork Reduction Act Notice, see the Instruct							edule I (Form 990) (2018

SCHEDULE I Grants and Other Assistance to Organizations,								OMB No. 1545-0047
(Form 990)	Go	overnmei	nts, and Ir	ndividuals ir	n the United	d States		2018
	Com	plete if the or	rganization ans	wered "Yes" on F	orm 990, Part IV	, line 21 or 22.		
Department of the Treasury	-		► At	ttach to Form 990	•			Open to Public
Internal Revenue Service		► Go	to www.irs.gov	/Form990 for the l	atest information).		Inspection
Name of the organization							Employer identifica	tion number
THE PEW CHARITA	ABLE TRUSTS						56-23071	47
Part I General I	nformation on Grants and	d Assistanc	е					
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and								
the selection crit	eria used to award the grant	s or assistanc	æ?					X Yes No
2 Describe in Part	IV the organization's proceed	dures for mor	nitoring the use	of grant funds in the	e United States.			
Part II Grants ar	nd Other Assistance to D	omestic Or	ganizations ar	nd Domestic Gov	ernments. Com	plete if the organiz	ation answered "	es" on Form 990.
	ne 21, for any recipient th		-					,
					•	(f) Method of valuation		(h) Durness of grant
	d address of organization government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) DREXEL UNIVERSITY	7							
3201 ARCH ST PHIL	LADELPHIA, PA 19104	23-1352630	501(C)(3)	150,000.				CIVIC LIFE
(2) DRUEDING CENTER								
413 W MASTER ST F	PHILADELPHIA, PA 19122	23-1532883	501(C)(3)	37,961.				CIVIC LIFE
(3) DUCKS UNLIMITED								
1 WATERFOWL WAY M	IEMPHIS, TN 38120	13-5643799	501(C)(3)	2,715,507.				POLICY
(4) DUCKS UNLIMITED								
1 WATERFOWL WAY M	IEMPHIS, TN 38120	13-5643799	501(C)(3)	9,000,153.				POLICY
(5) DUKE UNIVERSITY		_						
324 BLACKWELL ST	DURHAM, NC 22701	56-0532129	501(C)(3)	8,000.				POLICY
(6) DUKE UNIVERSITY		_						
324 BLACKWELL ST	DURHAM, NC 22701	56-0532129	501(C)(3)	130,000.				POLICY
(7) DUKE UNIVERSITY		_						
324 BLACKWELL ST	DURHAM, NC 22701	56-0532129	501(C)(3)	179,933.				POLICY
(8) DUKE UNIVERSITY		_						
324 BLACKWELL ST	DURHAM, NC 22701	56-0532129	501(C)(3)	24,250.				POLICY
(9) DUKE UNIVERSITY		_						
324 BLACKWELL ST	DURHAM, NC 22701	56-0532129	501(C)(3)	200,000.				POLICY
(10) EARTHJUSTICE		_						
	SAN FRANCISCO, CA 94111	94-1730465	501(C)(3)	88,220.				POLICY
(11) ED SNIDER YOUTH H		_						
	PHILADELPHIA, PA 19148	20-2885113	501(C)(3)	190,000.				CIVIC LIFE
_/	S-HAGLEY FOUNDATION INC	-						
PO BOX 3630 WILMI			501(C)(3)	150,000.				CIVIC LIFE
	 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3 Enter total number of other organizations listed in the line 1 table 							
						<u></u>		
For Paperwork Reduction	on Act Notice, see the Instruct	ions for Form 9	190.				Sc	hedule I (Form 990) (2018)

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. A tach to Form 990. Construction answered "Yes" on Form 990. Part IP ENE Character Information on Grants and Assistance 56 - 2307147 Second on the organization anital in records to substantiate the amount of the grants or assistance, the grant second second on the selection on the selection on the selection on the organization and construct on the use of grant funds in the United States. Second on the selection on the organization answered "Yes" on Form 990. Part IV, line 24, if on any recipient that received more than S5,000. Part II can be duplicated if additional space is needed. If the part additional space is needed. If up exception difference is additional space is needed. If up exception difference is additional space is needed. If up exception difference is additional space is needed. If up exception difference is additional space is needed. If up exception difference is additional space is needed. If up exception difference is additional space is needed. If up exception difference is additional space is needed. If up exception difference is additin additional space is needed. If up c	SCHEDULE I	Grants ar	nd Other A	Assistance t	o Organiza	tions,		OMB No. 1545-0047
Complete if the organization answord "Ves" on Form 990, Part IV, line 21 or 22. PAtach to Form 990. Patach to Form 990. Patach to Form 990. Patach to Form 990. Patach to Service 3 and 2 an	(Form 990)	Governme	nts, and Ir	ndividuals in	n the United	d States		<u> ଏ</u> ଏ ପ
Attach to Form 990.			•					
Internal Revenue Service Inspection Inspection Name of the organization Enclose Scansal and the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? No 2 Describe in Part IV the organization is proceedures for monitoring the use of grant funds in the United States. No 2 Describe in Part IV the organization of the Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. 1 (a) Name and address of organization (b) EN (c) IRC section (d) Annual of and assistance and address of organization (b) Pint (c) IRC section (d) Annual of and and address of organization answered "Yes" on Form 990, or assistance and address of organization (b) EN (c) IRC section (d) Annual of and address of organization answered "Yes" on Form 990, or assistance and address of organization (b) EN (e) IRC section (f) Annual of address of organization answered "Yes" on Form 990, or assistance and address of organization (b) EN (f) IRC section (f) Annual of address of organization (h) Partypes of prime address of organization (h) Partypes of prime address of organization answered "Yes" on Form 990, or assistance			-					Open to Public
THE PEW CHARITABLE TRUSTS 56-2307147 Part I Ceneral Information on Crants and Assistance information on Crants and Assistance? information constraints received normalitation records to substantiate the amount of the grant sor assistance, the grant easier and antibility for the grants or assistance in Part IV the organization sprocedures for monitoring the use of grant funds in the United States. Part II Crants and Cher Assistance to Domestic Corporatizations and Domestic Governments. Complete fit the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (a) Name and address of organizations (b) EN (a) Amount of easistic Governments. Complete fit the organization on swered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (b) PiN (c) PiN (Internal Revenue Service	► Go t	to www.irs.gov	/Form990 for the I	atest informatior	.		Inspection
Part I General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grants or assistance, and the selection oriteria used to award the grants or assistance? Image: Comparization and Comparization's procedures for monitoring the use of grant funds in the United States. Part IV The organization's procedures for monitoring the use of grant funds in the United States. Image: Comparization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. 1 (a) Name and address of organization or grants and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part III can be duplicated if additional space is needed. 11 (a) Name and address of organization or grant address of organization or grant developed of matrice of comparization or grant developed of matrice of comparise address of organization or address of grant developed of matrice of comparise address of grant developed of matrice of matrice of matrice of matrice of matrice of comparise address of grant developed of matrice of comparise address of grant developed of matrice of m	Name of the organization						Employer identific	ation number
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Image: Content of Content o	THE PEW CHARITABLE TRUSTS						56-2307	147
the selection criteria used to award the grants or assistance? X Yes No 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Image: Control of States and Other Assistance to Domestic Organization and Domestic Governments. Complete if the organization answered "Vess" on Form 990. Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (g) Amount of eash organization organization (graphicable) (g) Amount of eash organization organization and Domestic Governments. Complete if the organization answered "Vess" on Form 990. (1) ESPERANTA HEALTH CENTE (g) Amount of eash organization organization organization for the state (grant organization organiza	Part I General Information on Gra	nts and Assistance	e					
the selection criteria used to award the grants or assistance? X Yes No 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Image: Control of States and Other Assistance to Domestic Organization and Domestic Governments. Complete if the organization answered "Vess" on Form 990. Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (g) Amount of eash organization organization (graphicable) (g) Amount of eash organization organization and Domestic Governments. Complete if the organization answered "Vess" on Form 990. (1) ESPERANTA HEALTH CENTE (g) Amount of eash organization organization organization for the state (grant organization organiza	1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and							
PartII Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (1) Nome and address of organization or government (0) ENE (0) ENE (0) ENE (0) ENE (0) ENE (0) ENE (0) Amount of cash (0) Amou								X Yes No
Part IV, line 21, for any recipient har teceived more than \$5,000. Part II can be duplicated if additional space is needed. 1 (a) Name and address of organization (b) EN (c) IRC section (ff applicable) (a) Amount of cash grant (b) Amount of non- cash assistance (b) Method of Valuation (ff applicable) (a) Description of or assistance (b) Description of noncash assistance (c) Description of not	2 Describe in Part IV the organization's	procedures for mon	itoring the use	of grant funds in the	e United States.			
Part IV, line 21, for any recipient har teceived more than \$5,000. Part II can be duplicated if additional space is needed. 1 (a) Name and address of organization (b) EN (c) IRC section (ff applicable) (a) Amount of cash grant (b) Amount of non- cash assistance (b) Method of Valuation (ff applicable) (a) Description of or assistance (b) Description of noncash assistance (c) Description of not	Part II Grants and Other Assistance	ce to Domestic Or	nanizations ar	nd Domestic Gov	ernments. Com	plete if the organiz	ation answered	'Yes" on Form 990
1 (a) Name and address of organization (b) EIN (c) IPC section (rl applicable) (d) Amount of cash grant (e) Amount of non cash assistance (f) Method valuation (box, PM, PM, PM, PM, PM, PM, PM, PM, PM, PM			-					
Interview Or government Open with applicable				·	•	•		
4417 N 6TH ST PHILADELPHIA, PA 19140 23-2480701 501(C)(3) 185,000. CIVIC LIFE 3125 RIDGE PIKE NORRISTOWN, PA 19403 23-1352361 501(C)(3) 180,000. CIVIC LIFE 3125 RIDGE PIKE NORRISTOWN, PA 19403 23-1352361 501(C)(3) 180,000. CIVIC LIFE 3125 RIDGE PIKE NORRISTOWN, PA 19403 23-1352361 501(C)(6) 35,000. POLICY (3) FLORIDA DENTAL HYGINSTS' ASSOCIATION POLICY POLICY POLICY 15 CYPRESS DR PALM HARBOR, FL 34684 59-6139579 501(C)(6) 150,000. POLICY (5) FLORIDA STATE UNIVERSITY RESEARCH FOTN POLICY POLICY POLICY POLICY 2000 LEVY AVE TALLAHASSEE, FL 32310 59-3211153 501(C)(3) 140,993. POLICY (6) FLORIDA WILDLIFF FEDERATION POLICY POLICY POLICY POLICY (7) FLORIDA WILDLIFF FEDERATION POLICY POLICY POLICY POLICY (6) FLORIDA WILDLIFF FEDERATION POLICY POLICY POLICY POLICY (7) FLORIDA WILDLIFF FEDERATION POLICY POLICY POLICY POLICY (7) FLORIDA WILDLIFF FEDERATION POLICY POLICY<		(b) EIN				(book, FMV, appraisal,		
(2) FAMILY SERVICES OF MONTGOMERY COUNTY PA 23-1352361 501(C) (3) 180,000. CTVIC LIFE 3125 RIDGE PIKE NORRISTOWN, PA 19403 23-1352361 501(C) (3) 180,000. CTVIC LIFE (3) FLORIDA DENTAL HYGIENISTS' ASSOCIATION 15 CYPRESS DR PALM HARBOR, FL 34684 59-6139579 501(C) (6) 35,000. POLICY (4) FLORIDA DENTAL HYGIENISTS' ASSOCIATION 15 CYPRESS DR PALM HARBOR, FL 34684 59-6139579 501(C) (6) 150,000. POLICY (5) FLORIDA STATE UNIVERSITY RESEARCH PUTN 2000 LEVY AVE TALLAMASSEE, FL 32310 59-3211153 501(C) (3) 55,998. POLICY (6) FLORIDA WILDLIFE FEDERATION 59-1398265 501(C) (3) 140,993. POLICY (7) FLORIDA WILDLIFE FEDERATION 59-1398265 501(C) (3) 30,158. POLICY (8) FLORIDA WILDLIFE FEDERATION 59-1398265 501(C) (3) 250,293. POLICY (9) FOOD ANIMAL CONCERNS TRUST 36-3172605 501(C) (3) 149,417. POLICY (10) FRIENDS OF NEVADA WILDENESS 36-021763 501(C) (3) 10,000. POLICY (11) GORGE ST SPARKS, NV 89431 88-021763	(1) ESPERANZA HEALTH CENTER							
3125 RIDGE PIKE NORRISTOWN, PA 19403 23-1352361 501(C)(3) 180,000. CIVIC LIFE (3) FLORIDA DENTAL HYGIENISTS' ASSOCIATION 15 CYPRESS DR PALM HARBOR, FL 34684 59-6139579 501(C)(6) 35,000. POLICY (4) FLORIDA DENTAL HYGIENISTS' ASSOCIATION 15 CYPRESS DR PALM HARBOR, FL 34684 59-6139579 501(C)(6) 150,000. POLICY (5) FLORIDA STATE UNIVERSITY RESEARCH FDTN 2000 LEVY AVE TALLAHASSEE, FL 32310 59-3211153 501(C)(3) 55,998. POLICY (6) FLORIDA WILDLIFE FEDERATION PO BOX 6870 TALLAHASSEE, FL 32314 59-1398265 501(C)(3) 140,993. POLICY (7) FLORIDA WILDLIFE FEDERATION PO BOX 6870 TALLAHASSEE, FL 32314 59-1398265 501(C)(3) 30,158. POLICY (7) FLORIDA WILDLIFE FEDERATION PO BOX 6870 TALLAHASSEE, FL 32314 59-1398265 501(C)(3) 30,158. POLICY (9) FOOD ANIMAL CONCERNS TRUST 3525 W PETERSON AVE CHICAGO, IL 60659 36-3172605 501(C)(3) 149,417. POLICY (10) FRIENDS OF INVADA WILDENENESS 88-0211763 501(C)(3) 149,417. POLICY (11) GEORGE JUNIOR REPUBLIC 233 GEORGE JUNIOR REPUBLIC 210(C)(3) 300,000. POLICY	4417 N 6TH ST PHILADELPHIA, PA 19140	23-2480701	501(C)(3)	185,000.				CIVIC LIFE
(3) FLORIDA DENTAL HYGIENISTS' ASSOCIATION policy 15 CYPRESS DR PALM HARBOR, FL 34684 59-6139579 501(C)(6) 35,000. policy (4) FLORIDA DENTAL HYGIENISTS' ASSOCIATION 15 CYPRESS DR PALM HARBOR, FL 34684 59-6139579 501(C)(6) 150,000. policy (5) FLORIDA STATE UNIVERSITY RESEARCH FDTN 2000 LEVY AVE TALLAHASSEE, FL 32310 59-3211153 501(C)(3) 55,998. policy (6) FLORIDA WILDLIFE FEDERATION policy 59-321153 501(C)(3) 140,993. policy (7) FLORIDA WILDLIFE FEDERATION policy federation policy federation (8) FLORIDA WILDLIFE FEDERATION fold regrammed for tallahassee, FL 32314 59-1398265 501(C)(3) 30,158. policy (8) FLORIDA WILDLIFE FEDERATION fold regrammed fold regr	(2) FAMILY SERVICES OF MONTGOMERY COUNTY	PA						
15 CYPRESS DR PALM HARBOR, FL 34684 59-6139579 501(C)(6) 35,000. POLICY (4) FLORIDA DENTAL HYGIENISTS' ASSOCIATION 15 CYPRESS DR PALM HARBOR, FL 34684 59-6139579 501(C)(6) 150,000. POLICY (5) FLORIDA STATE UNIVERSITY RESEARCH FDTN 7000 LEVY AVE TALLAHASSEE, FL 32310 59-3211153 501(C)(3) 55,998. POLICY (6) FLORIDA WILDLIFF FEDERATION 7000 LEVY AVE TALLAHASSEE, FL 32314 59-1398265 501(C)(3) 140,993. POLICY (7) FLORIDA WILDLIFF FEDERATION 7000 LEVY AVE TALLAHASSEE, FL 32314 59-1398265 501(C)(3) 30,158. POLICY (7) FLORIDA WILDLIFF FEDERATION 7000 LEVY AVE TALLAHASSEE, FL 32314 59-1398265 501(C)(3) 30,158. POLICY (8) FLORIDA WILDLIFF FEDERATION 7000 LEVY AVE TALLAHASSEE, FL 32314 59-1398265 501(C)(3) 250,293. POLICY (9) FOOD ANIMAL CONCERNS TRUST 7000 LEVY AVE CHICAGO, IL 60659 501(C)(3) 149,417. POLICY (10) FRIENDS OF NEVADA WILDERNESS 701(C)(3) 100,000. POLICY POLICY (11) GEORGE JUNIOR REPUBLIC 700,000. 700,000. CUVIC LIFE 233 GEORGE JUNIOR REPUBLIC 700,000.	3125 RIDGE PIKE NORRISTOWN, PA 19403	23-1352361	501(C)(3)	180,000.				CIVIC LIFE
(4) FLORIDA DENTAL HYGIENISTS' ASSOCIATION 0<	(3) FLORIDA DENTAL HYGIENISTS' ASSOCIATION	N						
15 CYPRESS DR PALM HARBOR, FL 34684 59-6139579 501(C)(6) 150,000. POLICY (5) FLORIDA STATE UNIVERSITY RESEARCH FDTN 59-3211153 501(C)(3) 55,998. POLICY 2000 LEVY AVE TALLAHASSEE, FL 32310 59-3211153 501(C)(3) 55,998. POLICY (6) FLORIDA WILDLIFE FEDERATION 59-1398265 501(C)(3) 140,993. POLICY (7) FLORIDA WILDLIFE FEDERATION 59-1398265 501(C)(3) 30,158. POLICY (8) FLORIDA WILDLIFE FEDERATION 59-1398265 501(C)(3) 250,293. POLICY (9) FOOD ANIMAL CONCERNS TRUST 59-1398265 501(C)(3) 140,9417. POLICY (10) FRIENDS OF NEVADA WILDERNESS 36-3172605 501(C)(3) 149,417. POLICY (10) FRIENDS OF NEVADA WILDERNESS 88-0211763 501(C)(3) 10,000. POLICY (11) GEORGE JUNIOR REPUBLIC 88-0211763 501(C)(3) 10,000. POLICY 233 GEORGE JUNIOR RD GROVE CITY, PA 16127 25-1536204 501(C)(3) 300,000. CIVIC LIFE	15 CYPRESS DR PALM HARBOR, FL 34684	59-6139579	501(C)(6)	35,000.				POLICY
(5) FLORIDA STATE UNIVERSITY RESEARCH FDTN policy 2000 LEVY AVE TALLAHASSEE, FL 32310 59-3211153 501(C)(3) 55,998. policy (6) FLORIDA WILDLIFE FEDERATION policy policy policy (7) FLORIDA WILDLIFE FEDERATION policy policy (7) FLORIDA WILDLIFE FEDERATION policy policy (8) FLORIDA WILDLIFE FEDERATION policy policy (9) FOOD ANIMAL CONCERNS TRUST 59-1398265 501(C)(3) 140,993. (9) FOOD ANIMAL CONCERNS TRUST 59-1398265 501(C)(3) 250,293. (10) FRIENDS OF NEVADA WILDERNESS 36-3172605 501(C)(3) 149,417. (10) FRIENDS OF NEVADA WILDERNESS 1360 GREG ST SPARKS, NV 89431 88-0211763 501(C)(3) 10,000. (11) GEORGE JUNIOR REPUBLIC 23.3 GEORGE JUNIOR RED GROVE CITY, PA 16127 25-1536204 501(C)(3) 300,000. CIVIC LIFE	(4) FLORIDA DENTAL HYGIENISTS' ASSOCIATION	N						
2000 LEVY AVE TALLAHASSEE, FL 32310 59-3211153 501(C)(3) 55,998. POLICY (6) FLORIDA WILDLIFE FEDERATION POLICY POLICY POLICY (7) FLORIDA WILDLIFE FEDERATION POLICY POLICY POLICY (8) FLORIDA WILDLIFE FEDERATION S9-1398265 501(C)(3) 140,993. POLICY (9) FLORIDA WILDLIFE FEDERATION S9-1398265 501(C)(3) 30,158. POLICY (9) FLORIDA WILDLIFE FEDERATION S9-1398265 501(C)(3) 250,293. POLICY (9) FOOD ANIMAL CONCERNS TRUST S6-3172605 501(C)(3) 149,417. POLICY (10) FRIENDS OF NEVADA WILDERNESS S6-3172605 501(C)(3) 10,000. POLICY (11) GEORGE JUNIOR REPUBLIC S8-0211763 501(C)(3) 10,000. POLICY 233 GEORGE JUNIOR RD GROVE CITY, PA 16127 25-1536204 501(C)(3) 300,000. CIVIC LIFE	15 CYPRESS DR PALM HARBOR, FL 34684	59-6139579	501(C)(6)	150,000.				POLICY
(6) FLORIDA WILDLIFE FEDERATION POLICY PO BOX 6870 TALLAHASSEE, FL 32314 59-1398265 501(C)(3) 140,993. POLICY (7) FLORIDA WILDLIFE FEDERATION POLICY POLICY POLICY (8) FLORIDA WILDLIFE FEDERATION POLICY POLICY (9) FOOX 6870 TALLAHASSEE, FL 32314 59-1398265 501(C)(3) 30,158. POLICY (9) FOOX 6870 TALLAHASSEE, FL 32314 59-1398265 501(C)(3) 250,293. POLICY (10) FRIENDS OF NEVADA WILDERNESS 36-3172605 501(C)(3) 149,417. POLICY 1360 GREG ST SPARKS, NV 89431 88-0211763 501(C)(3) 10,000. POLICY 233 GEORGE JUNIOR REPUBLIC 25-1536204 501(C)(3) 300,000. CIVIC LIFE	(5) FLORIDA STATE UNIVERSITY RESEARCH FDT	N						
PO BOX 6870 TALLAHASSEE, FL 32314 59-1398265 501(C)(3) 140,993. POLICY (7) FLORIDA WILDLIFE FEDERATION 59-1398265 501(C)(3) 30,158. POLICY (8) FLORIDA WILDLIFE FEDERATION 59-1398265 501(C)(3) 250,293. POLICY (9) FOOD ANIMAL CONCERNS TRUST 59-1398265 501(C)(3) 149,417. POLICY 3525 W PETERSON AVE CHICAGO, IL 60659 36-3172605 501(C)(3) 149,417. POLICY (10) FRIENDS OF NEVADA WILDERNESS 88-0211763 501(C)(3) 10,000. POLICY (11) GEORGE JUNIOR REPUBLIC 25-1536204 501(C)(3) 300,000. CIVIC LIFE		59-3211153	501(C)(3)	55,998.				POLICY
(7) FLORIDA WILDLIFE FEDERATION59-1398265501(C)(3)30,158.POLICY(8) FLORIDA WILDLIFE FEDERATION59-1398265501(C)(3)250,293.POLICY(9) FOOD ANIMAL CONCERNS TRUST59-1398265501(C)(3)250,293.POLICY(10) FRIENDS OF NEVADA WILDERNESS36-3172605501(C)(3)149,417.POLICY1360 GREG ST SPARKS, NV 8943188-0211763501(C)(3)10,000.POLICY(11) GEORGE JUNIOR REPUBLIC25-1536204501(C)(3)300,000.CIVIC LIFE	(6) FLORIDA WILDLIFE FEDERATION							
PO BOX 6870 TALLAHASSEE, FL 3231459-1398265501(C)(3)30,158.POLICY(8) FLORIDA WILDLIFE FEDERATION59-1398265501(C)(3)250,293.POLICYPO BOX 6870 TALLAHASSEE, FL 3231459-1398265501(C)(3)250,293.POLICY(9) FOOD ANIMAL CONCERNS TRUST36-3172605501(C)(3)149,417.POLICY3525 W PETERSON AVE CHICAGO, IL 6065936-3172605501(C)(3)149,417.POLICY(10) FRIENDS OF NEVADA WILDERNESS88-0211763501(C)(3)10,000.POLICY1360 GREG ST SPARKS, NV 8943188-0211763501(C)(3)10,000.POLICY(11) GEORGE JUNIOR REPUBLIC25-1536204501(C)(3)300,000.CIVIC LIFE		59-1398265	501(C)(3)	140,993.				POLICY
(8) FLORIDA WILDLIFE FEDERATION59-1398265501(C)(3)250,293.POLICYPO BOX 6870 TALLAHASSEE, FL 3231459-1398265501(C)(3)250,293.POLICY(9) FOOD ANIMAL CONCERNS TRUST36-3172605501(C)(3)149,417.POLICY3525 W PETERSON AVE CHICAGO, IL 6065936-3172605501(C)(3)149,417.POLICY(10) FRIENDS OF NEVADA WILDERNESS88-0211763501(C)(3)10,000.POLICY1360 GREG ST SPARKS, NV 8943188-0211763501(C)(3)10,000.POLICY(11) GEORGE JUNIOR REPUBLIC25-1536204501(C)(3)300,000.CIVIC LIFE	(7) FLORIDA WILDLIFE FEDERATION							
PO BOX 6870 TALLAHASSEE, FL 32314 59-1398265 501(C)(3) 250,293. POLICY (9) FOOD ANIMAL CONCERNS TRUST 36-3172605 501(C)(3) 149,417. POLICY 3525 W PETERSON AVE CHICAGO, IL 60659 36-3172605 501(C)(3) 149,417. POLICY (10) FRIENDS OF NEVADA WILDERNESS 88-0211763 501(C)(3) 10,000. POLICY 1360 GREG ST SPARKS, NV 89431 88-0211763 501(C)(3) 10,000. POLICY (11) GEORGE JUNIOR REPUBLIC 25-1536204 501(C)(3) 300,000. CIVIC LIFE		59-1398265	501(C)(3)	30,158.				POLICY
(9) FOOD ANIMAL CONCERNS TRUST36-3172605501(C)(3)149,417.POLICY3525 W PETERSON AVE CHICAGO, IL 6065936-3172605501(C)(3)149,417.POLICY(10) FRIENDS OF NEVADA WILDERNESS88-0211763501(C)(3)10,000.POLICY1360 GREG ST SPARKS, NV 8943188-0211763501(C)(3)10,000.POLICY(11) GEORGE JUNIOR REPUBLIC25-1536204501(C)(3)300,000.CIVIC LIFE	$\sim i$							
3525 W PETERSON AVE CHICAGO, IL 60659 36-3172605 501(C)(3) 149,417. POLICY (10) FRIENDS OF NEVADA WILDERNESS 88-0211763 501(C)(3) 10,000. POLICY 1360 GREG ST SPARKS, NV 89431 88-0211763 501(C)(3) 10,000. POLICY (11) GEORGE JUNIOR REPUBLIC 25-1536204 501(C)(3) 300,000. CIVIC LIFE		59-1398265	501(C)(3)	250,293.				POLICY
(10) FRIENDS OF NEVADA WILDERNESS 88-0211763 501(C)(3) 10,000. POLICY (11) GEORGE JUNIOR REPUBLIC 233 GEORGE JUNIOR RD GROVE CITY, PA 16127 25-1536204 501(C)(3) 300,000. CIVIC LIFE								
1360 GREG ST SPARKS, NV 89431 88-0211763 501(C)(3) 10,000. POLICY (11) GEORGE JUNIOR REPUBLIC 233 GEORGE JUNIOR RD GROVE CITY, PA 16127 25-1536204 501(C)(3) 300,000. CIVIC LIFE		36-3172605	501(C)(3)	149,417.				POLICY
(11) GEORGE JUNIOR REPUBLIC 233 GEORGE JUNIOR RD GROVE CITY, PA 16127 25-1536204 501(C)(3) 300,000. Image: Constraint of the second secon								
233 GEORGE JUNIOR RD GROVE CITY, PA 16127 25-1536204 501(C)(3) 300,000. CIVIC LIFE		88-0211763	501(C)(3)	10,000.				POLICY
(12) GIRL SCOUTS OF EASTERN PENNSYLVANIA INC								
330 MANOR RD MIQUON, PA 19444 23-1352309 501(C)(3) 175,000. CIVIC LIFE	12		1				<u> </u>	CIVIC LIFE
 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 2 Enter total number of other organizations listed in the line 1 table 								·
3 Enter total number of other organizations listed in the line 1 table				· · · · · · · · · · · · ·		<u></u>		chodulo I (Earm 000) (2010)

SCHEDULE I	C	Grants ar	nd Other A	Assistance t	o Organiza	tions,	L	OMB No. 1545-0047
(Form 990)	Go	vernmei	nts, and Ir	ndividuals in	n the United	d States		2018
	Comr	plete if the or	ganization ans	wered "Yes" on F	orm 990. Part IV	line 21 or 22.		
Department of the Treesury			-	ttach to Form 990				Open to Public
Department of the Treasury Internal Revenue Service		► Go	to www.irs.gov	/Form990 for the I	atest information			Inspection
Name of the organization							Employer identific	ation number
THE PEW CHARITA	BLE TRUSTS						56-23071	_47
Part I General In	formation on Grants and	d Assistanc	e				÷	
1 Does the organiz	ation maintain records to su	ubstantiate th	e amount of the	e grants or assista	nce, the grantees	eligibility for the grant	s or assistance, an	d
	the selection criteria used to award the grants or assistance?							
2 Describe in Part	IV the organization's proced	dures for mor	nitoring the use	of grant funds in the	e United States.			
	d Other Assistance to D		-			olete if the organiz	ation answered '	Yes" on Form 990
	e 21, for any recipient the		-					
				·	•	(f) Method of valuation		(1) -
	l address of organization government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) GROVE CITY COLLEGE	Ξ							
100 CAMPUS DR GROV	/E CITY, PA 16127	25-1065148	501(C)(3)	2,500,000.				CIVIC LIFE
(2) HARVARD UNIVERSITY	<i>I</i>							
1033 MASSACHUSETTS	S AVE CAMBRIDGE, MA 02138	04-2013580	501(C)(3)	130,000.				POLICY
(3) HARVARD UNIVERSITY	ζ.							
1033 MASSACHUSETTS	5 AVE CAMBRIDGE, MA 02138	04-2013580	501(C)(3)	22,873.				POLICY
(4) HAVERFORD SCHOOL		_						
450 LANCASTER AVE	HAVERFORD, PA 19041	23-1352646	501(C)(3)	335,474.				CIVIC LIFE
(5) HEALTH RESEARCH IN	IC	_						
150 BROADWAY MENAN	NDS, NY 12204	14-1402155	501(C)(3)	60,000.				POLICY
(6) HORIZONS NATIONAL		_						
120 POST RD WESTPO		06-1468129	501(C)(3)	200,000.				CIVIC LIFE
(7) HUMANE SOCIETY INT	TERNATIONAL	_						
	ASHINGTON, DC 20037	52-1769464	501(C)(3)	121,800.				POLICY
(8) HUMBOLDT STATE UNI	IVERSITY SPONSORED PROGRAM	_						
1 HARPST ST ARCATA		94-6050071	501(C)(3)	139,785.				POLICY
	EDICINE AT MOUNT SINAI	-						
	Y PL NEW YORK, NY 10029	13-6171197	501(C)(3)	300,000.				POLICY
(10) INDEPENDENCE VISIT		-						
	PHILADELPHIA, PA 19106	23-2952488	501(C)(3)	500,000.				CIVIC LIFE
(11) INDIANA UNIVERSITY		-						
	BLOOMINGTON, IN 47405	35-6001673	STATE OF IN	30,000.				POLICY
(12) INTERNATIONAL CHAM		-						
140 E 45TH ST NEW		81-5481313		20,000.				POLICY
	er of section 501(c)(3) and							•
	3 Enter total number of other organizations listed in the line 1 table							
For Paperwork Reductio	IN ACT NOTICE, SEE THE INSTRUCT	ions for Form 9	90.				S	chedule I (Form 990) (2018)

SCHEDULE I Grants and Other Assistance to Organizations,								OMB No. 1545-0047
(Form 990)	Go	overnmei	nts, and Ir	ndividuals ir	n the United	d States		2018
	Com	plete if the or	ganization ans	wered "Yes" on F	orm 990, Part IV,	line 21 or 22.		
Department of the Treasury			-	ttach to Form 990				Open to Public
Internal Revenue Service		► Go	to www.irs.gov	/Form990 for the I	atest information			Inspection
Name of the organization							Employer identificat	ion number
THE PEW CHARITA	ABLE TRUSTS						56-23071	1 7
Part I General I	nformation on Grants an	d Assistanc	e					
1 Does the organiz								
the selection crit	the selection criteria used to award the grants or assistance? No							
2 Describe in Part	IV the organization's proceed	dures for mor	nitoring the use	of grant funds in the	e United States.			
Part II Grants ar	nd Other Assistance to D	omestic Or	ganizations ar	nd Domestic Gov	ernments. Com	plete if the organiz	ation answered "	/es" on Form 990.
	ne 21, for any recipient t		-					,
					•	(f) Method of valuation		
	d address of organization government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) INTERNATIONAL FUN	ID FOR ANIMAL WELFARE							
290 SUMMER ST YAR	RMOUTH PORT, MA 02675	31-1594197	501(C)(3)	27,400.				POLICY
(2) INTERNATIONAL GAM	NE FISH ASSOCIATION							
300 GULF STREAM W	WAY DANIA BEACH, FL 33004	23-7231048	501(C)(3)	15,000.				POLICY
(3) INTERNATIONAL GAM	ME FISH ASSOCIATION							
300 GULF STREAM W	WAY DANIA BEACH, FL 33004	23-7231048	501(C)(3)	70,000.				POLICY
(4) INUIT CIRCUMPOLAR	R COUNCIL - ALASKA							
3900 ARCTIC BLVD	ANCHORAGE, AK 99503	92-0091959	501(C)(3)	75,253.				POLICY
(5) ISLANDS FIRST		_						
1440 BROADWAY NEW	V YORK, NY 10018	32-0214126	501(C)(3)	157,609.				POLICY
(6) JAMES MADISON INS	STITUTE FOR PUBLIC POLICY	_						
PO BOX 10150 TALL	LAHASSEE, FL 32302	59-2811908	501(C)(3)	58,837.				POLICY
(7) JEWISH FMLY AND C	CHILDRENS SERVICE	_						
2100 ARCH ST PHIL	LADELPHIA, PA 19103	23-1352026	501(C)(3)	180,000.				CIVIC LIFE
(8) JOHNS HOPKINS UNI	VERSITY	_						
3910 KESWICK RD E	BALTIMORE, MD 21211	52-0595110	501(C)(3)	180,935.				POLICY
(9) KAWERAK		_						
PO BOX 948 NOME,	AK 99762	92-0047009	501(C)(3)	66,448.				POLICY
(10) KAWERAK		_						
PO BOX 948 NOME,	AK 99762	92-0047009	501(C)(3)	16,000.				POLICY
(11) KENCREST CENTERS		_						
	BLUE BELL, PA 19422	23-1711070	501(C)(3)	108,000.				CIVIC LIFE
(12) LA JOLLA INST FOR	R ALLERGY AND IMMUNOLOGY	_						
	9420 ATHENA CIR LA JOLLA, CA 92037 33-0328688 501(C)(3) 130,000. POLICY							
	 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3 Enter total number of other organizations listed in the line 1 table 							
				<u></u>		<u></u>		
For Paperwork Reduction	on Act Notice, see the Instruct	ions for Form 9	90.				Sc	nedule I (Form 990) (2018)

SCHEDULE I				ssistance t			<u> </u>	OMB No. 1545-0047
(Form 990)	Go	overnme	nts, and In	dividuals in	n the United	d States		2018
	Com	plete if the or	ganization ans	wered "Yes" on F	orm 990, Part IV,	line 21 or 22.		
Department of the Treasury			► At	tach to Form 990				Open to Public
Internal Revenue Service		► Go	to www.irs.gov/	<i>Form990</i> for the I	atest information			Inspection
Name of the organization							Employer identificati	on number
THE PEW CHARITA	ABLE TRUSTS						56-230714	7
Part I General I	nformation on Grants an	d Assistanc	e					
1 Does the organiz	zation maintain records to s	ubstantiate th	e amount of the	grants or assista	nce, the grantees	' eligibility for the grant	s or assistance, and	
the selection crit	eria used to award the gran	ts or assistand	e?					X Yes No
2 Describe in Part	IV the organization's proce	dures for mor	nitoring the use	of grant funds in the	e United States.			
Part II Grants ar	nd Other Assistance to I	Domestic Or	anizations an	d Domestic Gov	ernments, Com	plete if the organiz	ation answered "Y	es" on Form 990
	ne 21, for any recipient t		-					
				1	-	-		
	d address of organization government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) LEADERSHIP COUNSE	L FOR JUSTICE							
764 P ST FRESNO,	CA 93721	46-1517800	501(C)(3)	60,000.				POLICY
(2) LEGAL AID OF SOUT	HEASTERN PENNSYLVANIA							
625 SWEDE ST NORR	RISTOWN, PA 19401	23-1901014	501(C)(3)	180,000.				CIVIC LIFE
(3) LIBRARY OF CONGRE	SS							
101 INDEPENDENCE	AVE WASHINGTON, DC 20540	53-6002532	US AGENCY	75,000.				CIVIC LIFE
(4) LUTHERAN SETTLEME	NT HOUSE							
1340 FRANKFORD AV	YE PHILADELPHIA, PA 19125	23-1352365	501(C)(3)	37,878.				CIVIC LIFE
(5) MAINE COAST FISHE	RMEN'S ASSOCIATION							
PO BOX 112 TOPSHA	M, ME 04086	13-4337702	501(C)(3)	26,340.				POLICY
(6) MASSACHUSETTS INS	TITUTE OF TECHNOLOGY							
777 MASSACHUSETTS	AVE CAMBRIDGE, MA 02139	04-2103594	501(C)(3)	300,000.				POLICY
(7) MASSACHUSETTS INS	TITUTE OF TECHNOLOGY							
777 MASSACHUSETTS	AVE CAMBRIDGE, MA 02139	04-2103594	501(C)(3)	300,000.				POLICY
(8) MASSACHUSETTS INS	TITUTE OF TECHNOLOGY							
777 MASSACHUSETTS	AVE CAMBRIDGE, MA 02139	04-2103594	501(C)(3)	144,000.				POLICY
(9) MATERNAL AND CHIL	D HEALTH CONSORTIUM							
30 W BARNARD ST W	EST CHESTER, PA 19382	23-2775806	501(C)(3)	225,000.				CIVIC LIFE
(10) MAYOR AND CITY CO	UNCIL OF BALTIMORE	_						
417 E FAYETTE ST	BALTIMORE, MD 21202	52-6000769	CITY-BALTIMORE	48,253.				POLICY
(11) MEMORIAL SLOAN-KE	TTERING CANCER CENTER							
1275 YORK AVE NEW	YORK, NY 10065	13-1924236	501(C)(3)	300,000.				POLICY
(12) MIGHTY WRITERS		_						
	1501 CHRISTIAN ST PHILADELPHIA, PA 19146 01-0920922 501(C)(3) 165,000. CIVIC LIFE							
 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3 Enter total number of other organizations listed in the line 1 table 								
							<u></u>	
For Paperwork Reduction	on Act Notice, see the Instruc	tions for Form 9	90.				Sch	edule I (Form 990) (2018)

SCHEDULE I		Grants ar	nd Other A	ssistance t	o Organiza	itions,		OMB No. 1545-0047	
(Form 990)				dividuals in				<u> ୬</u> ଲ 1 ୦	
			•	wered "Yes" on F				2018	
	Com		-	tach to Form 990				Open to Public	
Department of the Treasury Internal Revenue Service		► Go	to www.irs.gov/	Form990 for the l	atest information).		Inspection	
Name of the organization							Employer identifica	tion number	
THE PEW CHARITA	ABLE TRUSTS						56-23071	47	
Part I General I	nformation on Grants an	d Assistanc	e						
1 Does the organiz	zation maintain records to s	ubstantiate th	e amount of the	grants or assista	nce, the grantees	' eligibility for the grant	s or assistance, and		
	the selection criteria used to award the grants or assistance?								
	IV the organization's proce								
	nd Other Assistance to D			<u> </u>		nlete if the organiz	ation answered "	Ves" on Form 990	
	ne 21, for any recipient t		-						
Fait IV, III				1	•	•			
	d address of organization government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance	
(1) MONTANA WILDERNES	S ASSOCIATION								
107 W LAWRENCE HE	LENA, MT 59601	51-0198932	501(C)(3)	7,500.				POLICY	
(2) MUNICIPALITY OF P	PRINCETON								
400 WITHERSPOON S	T PRINCETON, NJ 08540	30-0746654	STATE OF NJ	50,000.				POLICY	
(3) NATIONAL ASSOCIAT	(3) NATIONAL ASSOCIATION OF STATE BUDGET								
444 N CAPITOL ST	NW WASHINGTON, DC 20001	52-1625594	501(C)(3)	42,570.				POLICY	
(4) NATIONAL AUDUBON	SOCIETY								
225 VARICK ST NEW	I YORK, NY 10014	13-1624102	501(C)(3)	168,772.				POLICY	
(5) NATIONAL CENTER F	OR STATE COURTS	_							
300 NEWPORT AVE W	VILLIAMSBURG, VA 23185	52-0914250	501(C)(3)	114,846.				POLICY	
(6) NATIONAL CONFEREN	ICE OF STATE LEGISLATURES								
7700 E. FIRST PLA	CE DENVER, CO 80230	84-0772595	GOVT. INSTRMNT.	106,519.				POLICY	
(7) NATIONAL CONFEREN	ICE OF STATE LEGISLATURES								
7700 E. FIRST PLA	CE DENVER, CO 80230	84-0772595	GOVT. INSTRMNT.	1,404,221.				POLICY	
(8) NATIONAL CONSTITU	TION CENTER	_							
525 ARCH ST PHILA	DELPHIA, PA 19106	23-2434447	501(C)(3)	500,000.				CIVIC LIFE	
(9) NATIONAL GOVERNOR	S ASSOCIATION CENTER	_							
444 N CAPITOL ST	NW WASHINGTON, DC 20001	23-7391796	501(C)(3)	49,999.				POLICY	
(10) NATIONAL GOVERNOR	S ASSOCIATION CENTER	_							
444 N CAPITOL ST	444 N CAPITOL ST NW WASHINGTON, DC 20001 23-7391796 501(C)(3) 20,000. POLICY								
(11) NATIONAL INDIAN H	(11) NATIONAL INDIAN HEALTH BOARD								
	910 PENNS. AVE SE WASHINGTON, DC 20003 23-7226316 501(C)(3) 225,000. POLICY								
(12) NATIONAL OPINION		_							
	55 E MONROE CHICAGO, IL 60603 36-2167808 501(C)(3) 75,000. POLICY								
	per of section 501(c)(3) and	•	•				•		
For Paperwork Reduction	on Act Notice, see the Instruct	ions for Form 9	90.				Sc	hedule I (Form 990) (2018)	

SCHEDULE I Grants and Other Assistance to Organizations,							L	OMB No. 1545-0047
(Form 990)	Go	overnme	nts, and Ir	ndividuals ii	n the Unite	d States		2018
	Com	plete if the or	ganization ans	wered "Yes" on F	orm 990, Part IV	, line 21 or 22.		
Department of the Treasury			-	ttach to Form 990				Open to Public
Internal Revenue Service		► Go	to www.irs.gov	/Form990 for the I	atest informatior	1.		Inspection
Name of the organization							Employer identific	ation number
THE PEW CHARITA	ABLE TRUSTS						56-23071	.47
Part I General I	nformation on Grants an	d Assistanc	e					
1 Does the organiz	zation maintain records to s	ubstantiate th	e amount of the	e grants or assista	nce, the grantees	' eligibility for the grant	s or assistance, an	
the selection crit	eria used to award the gran	ts or assistand	e?					X Yes No
2 Describe in Part	IV the organization's proce	dures for mor	nitoring the use	of grant funds in the	e United States.			
Part II Grants an	nd Other Assistance to E	Domestic Or	ganizations a	nd Domestic Gov	ernments. Com	plete if the organiz	ation answered '	Yes" on Form 990
	ne 21, for any recipient t		-					
				· 	•	•		
	d address of organization government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) NATIONAL PARKS CO	NSERVATION ASSOCIATION							
777 6TH ST NW WAS	HINGTON, DC 20001	53-0225165	501(C)(3)	90,748.				POLICY
(2) NATIONAL TRUST FO	R HISTORIC PRESERVATION							
2600 VIRGINIA AVE	NW WASHINGTON, DC 20037	53-0210807	501(C)(3)	30,003.				POLICY
(3) NATIVE AMERICAN RIGHTS FUND								
1506 BROADWAY BOU	LDER, CO 80302	84-0611876	501(C)(3)	127,468.				POLICY
(4) NATURE CONSERVANC	Y							
4245 N. FAIRFAX D	R ARLINGTON, VA 22203	53-0242652	501(C)(3)	75,000.				POLICY
(5) NATURE CONSERVANC	Y							
4245 N. FAIRFAX D	R ARLINGTON, VA 22203	53-0242652	501(C)(3)	51,965.				POLICY
(6) NATURE CONSERVANC	Y	_						
4245 N. FAIRFAX D	R ARLINGTON, VA 22203	53-0242652	501(C)(3)	378,714.				POLICY
(7) NETWORK OF VICTIM	ASSISTANCE							
2370 YORK RD JAMI		23-7438387	501(C)(3)	39,700.				CIVIC LIFE
(8) NEW MEXICO WILDER		_						
PO BOX 25464 ALBU		85-0457916	501(C)(3)	7,139.				POLICY
(9) NEW YORK UNIVERSI		_						
105 E 17TH ST NEW		13-5562308	501(C)(3)	200,000.				POLICY
(10) NORTH CAROLINA CO		_						
3609 HIGHWAY 24 N		58-1494098	501(C)(3)	135,023.				POLICY
×_/	BOYS & GIRLS CLUB INC	_						
	E LANSDALE, PA 19446	23-7164617	501(C)(3)	180,000.				CIVIC LIFE
(12) NORTHWESTERN UNIV		_						
	633 CLARK ST EVANSTON, IL 60208 36-2167817 501(C)(3) 248,417. POLICY 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table • • •							
		-	-					•
For Paperwork Reduction	on Act Notice, see the Instruct	tions for Form 9	90.				S	chedule I (Form 990) (2018)

SCHEDULE I Grants and Other Assistance to Organizations, (Form 990) Governments, and Individuals in the United States							20 18 No. 1545-0047		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.								
► Attach to Form 990								Open to Public	
Department of the Treasury Control of the Internal Revenue Service Service Service Service Inspection Control of the Internal Revenue Service Inspection Control of the Internal Revenue Service Servi								Inspection	
Name of the organization			-					Employer identification number	
THE PEW CHARITA						56-2307147			
Part I General Information on Grants and Assistance									
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and									
								X Yes No	
 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 									
Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990,									
Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.									
1 (a) Name and address of organization or government		(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance	
(1) NOTAH BEGAY III FOUNDATION									
290 PRAIRIE STAR RD SANTA ANA PUE, NM 87004		20-1870330	501(C)(3)	175,000.				POLICY	
(2) NYNJ BAYKEEPER									
30 WASHINGTON ST MATAWAN, NJ 07747		22-3617000	501(C)(3)	40,000.				POLICY	
(3) PACIFIC UNIVERSITY									
2043 COLLEGE WAY FOREST GROVE, OR 97116		93-0386892	501(C)(3)	150,000.				POLICY	
(4) PARLIAMENTARIANS FOR GLOBAL ACTION									
132 NASSAU ST NEW YORK, NY 10038		52-1168289	501(C)(3)	199,980.				POLICY	
(5) PEW RESEARCH CENTER									
1615 L ST NW WASHINGTON, DC 20036		20-0881724	501(C)(3)	250,000.				INFORMATION	
(6) PEW RESEARCH CENTER									
1615 L ST NW WASHINGTON, DC 20036		20-0881724	501(C)(3)	42,000,000.				INFORMATION	
(7) PFLEGER INSTITUTE OF ENVIRONMENTAL RESEARCH									
2549 EASTBLUFF DR NEWPORT BEACH, CA 92660		33-0735400	501(C)(3)	97,248.				POLICY	
(8) PFLEGER INSTITUTE OF ENVIRONMENTAL RESEARCH									
2549 EASTBLUFF DR NEWPORT BEACH, CA 92660		33-0735400	501(C)(3)	20,735.				POLICY	
(9) PHILADELPHIA CHILDRENS ALLIANCE									
300 E HUNTING PARK PHILADELPHIA, PA 19124		23-2526605	501(C)(3)	250,000.				CIVIC LIFE	
(10) PHILADELPHIA FREEDOM VALLEY YMCA									
400 FAYETTE ST CONSHOHOCKEN, PA 19428		23-1243965	501(C)(3)	205,000.				CIVIC LIFE	
(11) PHILADELPHIA FUTURES									
230 SOUTH BROAD ST PHILADELPHIA, PA 19102		23-1365983	501(C)(3)	300,000.				CIVIC LIFE	
(12) PHILADELPHIA MURAL ARTS ADVOCATES									
1727 MOUNT VERNON ST PHILADELPHIA, PA 19130		23-2876470	501(C)(3)	225,000.				CIVIC LIFE	
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table									
3 Enter total numb	per of other organizations list	ted in the line	1 table	<u></u>		<u> </u>	<u></u>		
For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule I (Form 990) (2018)									

SCHEDULE I		Grants ar	nd Other A	Assistance t	o Organiza	itions,		OMB No. 1545-0047
(Form 990)	Go	vernmei	nts, and Ir	ndividuals in	n the United	d States		2018
				wered "Yes" on F				
Department of the Treesury	•••••		-	ttach to Form 990		,		Open to Public
Department of the Treasury Internal Revenue Service		► Go t	to www.irs.gov	/Form990 for the I	atest information).		Inspection
Name of the organization							Employer identificat	ion number
THE PEW CHARITA	ABLE TRUSTS						56-230714	17
Part I General I	nformation on Grants and	d Assistanc	e				·	
1 Does the organiz	zation maintain records to su	ubstantiate th	e amount of the	e grants or assista	nce, the grantees	eligibility for the grant	s or assistance, and	
	eria used to award the grant							X Yes No
2 Describe in Part	IV the organization's proceed	dures for mor	nitoring the use	of grant funds in the	e United States.			
Part II Grants ar	nd Other Assistance to D	omestic Or	anizations ar	nd Domestic Gov	ernments. Com	plete if the organiz	ation answered "Y	es" on Form 990
	ne 21, for any recipient the		-					
					•	•		
	d address of organization government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) PHILADELPHIA MURA	L ARTS ADVOCATES							
1727 MOUNT VERNON	I ST PHILADELPHIA, PA 19130	23-2876470	501(C)(3)	35,000.				CIVIC LIFE
(2) PHILADELPHIA ORCH	ESTRA ASSOCIATION							
ONE S BROAD ST PH	IILADELPHIA, PA 19107	23-1352289	501(C)(3)	500,000.				CIVIC LIFE
(3) PHILADELPHIA YOUT	'H BASKETBALL INC	_						
1735 MARKET ST PH	IILADELPHIA, PA 19103	47-3758442	501(C)(3)	200,000.				CIVIC LIFE
(4) PRINCETON UNIVERS	ITY							
701 CARNEGIE CENT	CER PRINCETON, NJ 08540	21-0634501	501(C)(3)	35,000.				POLICY
(5) PRISON FELLOWSHIP	MINISTRIES	_						
44180 RIVERSIDE P	YKWY LANSDOWNE, VA 20176	62-0988294	501(C)(3)	135,241.				POLICY
(6) PROJECT HOME		_						
1515 FAIRMOUNT AV	YE PHILADELPHIA, PA 19130	23-2555950	501(C)(3)	186,000.				CIVIC LIFE
(7) PUBLIC CITIZENS F	OR CHILDREN AND YOUTH	_						
1709 BEN FRANK PK	WY PHILADELPHIA, PA 19103	23-2137461	501(C)(3)	270,000.				CIVIC LIFE
(8) R STREET INSTITUT	`E	_						
	ASHINGTON, DC 20036	26-3477125	501(C)(3)	110,570.				POLICY
(9) RESOLVE INC		_						
	ASHINGTON, DC 20037	52-1841035	501(C)(3)	59,760.				POLICY
(10) RESOLVE INC		_						
	ASHINGTON, DC 20037	52-1841035	501(C)(3)	91,998.				POLICY
(11) RESOURCES LEGACY		_						
	ST SACRAMENTO, CA 95814	95-4703838	501(C)(3)	59,140.				POLICY
(12) ROCKEFELLER PHILA		-						
6 WEST 48TH ST NE		13-3615533		150,000.				POLICY
	per of section 501(c)(3) and	•	•					
	3 Enter total number of other organizations listed in the line 1 table							
FOR PADELWORK REQUCTION	ON ACTINOTICE, SEE THE INSTRUCT	ions for Form 9	30.				SCI	nedule I (Form 990) (2018)

SCHEDULE I Grants and Other Assistance to Organizations, (Form 990) Governments, and Individuals in the United States								OMB No. 1545-0047
(Form 990)	Go	overnmei	nts, and Ir	ndividuals i	n the United	d States		2018
	Com	plete if the or	ganization ans	wered "Yes" on F	orm 990, Part IV	, line 21 or 22.		
Department of the Treasury			► A	ttach to Form 990				Open to Public
Internal Revenue Service		► Go	to www.irs.gov	/Form990 for the I	atest information			Inspection
Name of the organization							Employer identificati	on number
THE PEW CHARITA	BLE TRUSTS						56-230714	7
Part I General Ir	nformation on Grants an	d Assistanc	e					
1 Does the organiz	ation maintain records to s	ubstantiate th	e amount of the	e grants or assista	nce, the grantees	eligibility for the grant	s or assistance, and	
	eria used to award the gran							X Yes No
	IV the organization's proce							
	d Other Assistance to D					nlete if the organiz	ation answered "V	es" on Form 990
			-					es on rom 330,
Part IV, III	e 21, for any recipient t	natreceived	more man 55	,000. Part II can t		additional space is r		1
	address of organization government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) ROCKEFELLER UNIVER	RSITY							
1230 YORK AVE NEW	YORK, NY 10065	13-1624158	501(C)(3)	300,000.				POLICY
(2) ROCKEFELLER UNIVER	RSITY							
1230 YORK AVE NEW		13-1624158	501(C)(3)	300,000.				POLICY
(3) RSVP OF MONTGOMERY	Y COUNTY							
	G OF PRUSSIA, PA 19406	23-2121691	501(C)(3)	30,000.				CIVIC LIFE
(4) RUTGERS UNIVERSITY	Y FOUNDATION							
335 GEORGE ST NEW	BRUNSWICK, NJ 08901	23-7318742	501(C)(3)	95,926.				POLICY
(5) RUTGERS UNIVERSITY	Y FOUNDATION							
335 GEORGE ST NEW	BRUNSWICK, NJ 08901	23-7318742	501(C)(3)	299,825.				POLICY
(6) SALK INSTITUTE FOR	R BIOLOGICAL STUDIES							
10010 N TORREY PIN	NES RD LA JOLLA, CA 92037	95-2160097	501(C)(3)	300,000.				POLICY
(7) SOUTH CAROLINA STA	ATE ELECTION COMMISSION							
1122 LADY ST COLUN	MBIA, SC 29201	57-6000286	STATE OF SC	177,000.				POLICY
(8) SOUTHEAST ASIAN MA	AA COALITION INC							
1711 S BROAD ST PH	HILADELPHIA, PA 19148	22-2541120	501(C)(3)	142,000.				CIVIC LIFE
(9) SPRINGBOARD COLLAR	BORATIVE							
1500 JFK BLVD PHII	LADELPHIA, PA 19102	45-3719806	501(C)(3)	200,000.				CIVIC LIFE
(10) SQUASH SMARTS INC								
3890 N 10TH ST PH	ILADELPHIA, PA 19140	23-3060172	501(C)(3)	115,000.				CIVIC LIFE
(11) SR3 SEALIFE RESPON	NSE REHABILITATION							
2255 HARBOR AVE SW	W SEATTLE, WA 98126	45-1491069	501(C)(3)	37,300.				POLICY
(12) STANFORD UNIVERSIT	ГҮ							
3145 PORTER DR PAI	LO ALTO, CA 94304	94-1156365	501(C)(3)	25,517.				POLICY
2 Enter total number	er of section 501(c)(3) and	government o	organizations lis	sted in the line 1 tak	ole			
3 Enter total number	er of other organizations lis	ted in the line	1 table	<u></u> .	<u></u>	<u> </u>	<u></u>	
For Paperwork Reduction	on Act Notice, see the Instruct	tions for Form 9	90.				Sch	edule I (Form 990) (2018)

SCHEDULE I (Form 990)				Assistance t ndividuals in				OMB No. 1545-0047
· · ·			•	wered "Yes" on F				2018
	Com	piete il the of	-	ttach to Form 990		, iine 21 01 22.		Open to Public
Department of the Treasury Internal Revenue Service		► Go		/Form990 for the I		L		Inspection
Name of the organization							Employer identificati	
THE PEW CHARITA	BLE TRUSTS						56-230714	
	nformation on Grants an	d Assistanc	e				00 200723	
	zation maintain records to s			arante or accieta	non the grantage	' oligibility for the grapt	c or occiptonco, and	
-	eria used to award the grant			-	-		s of assistance, and	X Yes No
	IV the organization's proce							
	.							
	d Other Assistance to D		-					es" on Form 990,
Part IV, Iir	ne 21, for any recipient t	hat received	more than \$5	,000. Part II can b	be duplicated if a	additional space is r	needed.	
	d address of organization government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) STANFORD UNIVERSI	ТҮ							
3145 PORTER DR PA		94-1156365	501(C)(3)	105,193.				POLICY
(2) STANFORD UNIVERSI				,				
3145 PORTER DR PA		94-1156365	501(C)(3)	200,000.				POLICY
(3) STATE OF IOWA				,				
321 E 12TH ST DES	MOINES, IA 50319	42-6004567	STATE OF IA	60,000.				POLICY
(4) STONE GARAGE INC								
PO BOX 1158 KENNE	TT SQ, PA 19348	10-0007967	501(C)(3)	135,000.				CIVIC LIFE
(5) STONE GARAGE INC								
PO BOX 1158 KENNE	TT SQ, PA 19348	10-0007967	501(C)(3)	19,948.				CIVIC LIFE
(6) SUFFOLK UNIVERSIT	Y							
8 ASHBURTON PL BO		04-2133255	501(C)(3)	206,324.				POLICY
(7) SUPPORT CENTER FO	R CHILD ADVOCATES							
1617 JFK BLVD PHI	LADELPHIA, PA 19103	23-2048664	501(C)(3)	250,000.				CIVIC LIFE
(8) SUPPORTIVE OLDER	WOMEN'S NETWORK							
4100 MAIN ST PHIL	ADELPHIA, PA 19127	22-2629856	501(C)(3)	22,000.				CIVIC LIFE
(9) SURFRIDER FOUNDAT	ION							
PO BOX 73550 SAN	CLEMENTE, CA 92673	95-3941826	501(C)(3)	145,744.				POLICY
(10) TANANA CHIEFS CON	FERENCE							
122 FIRST AVE FAI	RBANKS, AK 99701	92-0040308	501(C)(3)	53,875.				POLICY
(11) TEMPLE UNIVERSITY								
1805 N BROAD ST P	HILADELPHIA, PA 19122	23-1365971	501(C)(3)	225,000.				CIVIC LIFE
(12) TEMPLE UNIVERSITY								
1805 N BROAD ST P	HILADELPHIA, PA 19122	23-1365971	501(C)(3)	201,000.				CIVIC LIFE
	er of section 501(c)(3) and	•	•					
3 Enter total numb	er of other organizations lis	ted in the line	1 table	<u></u>		<u> </u>	<u></u>	
For Paperwork Reduction	on Act Notice, see the Instruct	ions for Form 9	90.				Sch	edule I (Form 990) (2018)

SCHEDULE I		Grants a	nd Other A	Assistance t	o Organiza	itions,		OMB No. 1545-0047
(Form 990)	G	overnme	nts, and Ir	ndividuals i	n the United	d States		2018
	Com	plete if the o	, ganization ans	wered "Yes" on F	orm 990. Part IV	. line 21 or 22.		
Dependence of the Treesury			-	ttach to Form 990		,		Open to Public
Department of the Treasury Internal Revenue Service		► Go	to www.irs.gov	/Form990 for the I	atest informatior	1.		Inspection
Name of the organization							Employer identificat	ion number
THE PEW CHARITA	ABLE TRUSTS						56-230714	17
Part I General I	nformation on Grants ar	nd Assistanc	e				•	
1 Does the organiz	zation maintain records to s	substantiate th	e amount of the	e grants or assista	nce, the grantees	' eligibility for the grant	ts or assistance, and	
	eria used to award the grar							X Yes No
2 Describe in Part	IV the organization's proce	dures for mor	nitoring the use	of grant funds in the	e United States.			
Part II Grants ar	nd Other Assistance to I	Domestic Or	anizations ar	nd Domestic Gov	ernments. Com	plete if the organiz	ration answered "	es" on Form 990
	ne 21, for any recipient		-					
				·				
	d address of organization government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) TEXAS PUBLIC POLI	CY FOUNDATION							
901 CONGRESS AVE	AUSTIN, TX 78701	74-2524057	501(C)(3)	140,813.				POLICY
(2) THE BELL FOUNDATI	ION INC							
60 CLAYTON ST DOR	CHESTER, MA 02122	04-3182053	501(C)(3)	180,000.				CIVIC LIFE
(3) THE CHILDRENS HOS	SP OF PHILADELPHIA FDTN							
3401 CIVIC CENTER	R PHILADELPHIA, PA 19104	23-2237932	501(C)(3)	150,000.				CIVIC LIFE
(4) THE CHILDRENS HOS	SP OF PHILADELPHIA FDTN							
3401 CIVIC CENTER	R PHILADELPHIA, PA 19104	23-2237932	501(C)(3)	183,000.				CIVIC LIFE
(5) THE HENRY L. STIM	ISON CENTER	_						
	NW WASHINGTON, DC 20036	52-1640938	501(C)(3)	50,000.				POLICY
(6) THE JOINT COMMISS	SION	_						
	BROOK TERRACE, IL 60181	36-2229255	501(C)(3)	245,746.				POLICY
(7) THE OCEAN FOUNDAT	TION	_						
	ASHINGTON, DC 20036	71-0863908	501(C)(3)	56,783.				POLICY
(8) THE OCEAN FOUNDAT		_						
	WASHINGTON, DC 20036	71-0863908	501(C)(3)	557,008.				POLICY
(9) THE OCEAN FOUNDAT		_						
	IASHINGTON, DC 20036	71-0863908	501(C)(3)	237,789.				POLICY
(10) THE OCEAN FOUNDAT		_						
	IASHINGTON, DC 20036	71-0863908	501(C)(3)	1,427,382.				POLICY
(11) THE PARENT-CHILD		_						
	MINEOLA, NY 11501	11-2495601	501(C)(3)	185,000.				CIVIC LIFE
(12) THEVILLAGE SERVIC		_						
	ROSEMONT, PA 19010	23-1353287		185,000.				CIVIC LIFE
	per of section 501(c)(3) and	•	•					
	per of other organizations lis					<u></u>		· · · / · · · · · · · ·
For Paperwork Reduction	on Act Notice, see the Instruc	tions for Form 9	90.				Sc	nedule I (Form 990) (2018)

SCHEDULE I			Assistance t			L	OMB No. 1545-0047		
(Form 990)	Governme	nts, and Ir	ndividuals ii	n the United	d States		2018		
	Complete if the or	ganization ans	wered "Yes" on F	orm 990, Part IV	, line 21 or 22.				
Department of the Treasury		► A	ttach to Form 990				Open to Public		
Internal Revenue Service	► Go t	to www.irs.gov	/Form990 for the I	atest information	.		Inspection		
Name of the organization						Employer identifie	ation number		
THE PEW CHARITABLE TRUSTS						56-2307	147		
Part I General Information on Gran	ts and Assistance	e							
1 Does the organization maintain record	s to substantiate th	e amount of the	e grants or assista	nce, the grantees	' eligibility for the grant	ts or assistance, ar	ıd		
the selection criteria used to award the			-	-			X Yes No		
2 Describe in Part IV the organization's									
Part II Grants and Other Assistance			<u> </u>		nloto if the organiz	vation answored	"Ves" on Form 000		
		-					165 011 0111 990,		
Part IV, line 21, for any recip	ent that received	more than \$5	,000. Part II can t	be duplicated if a	additional space is r				
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance		
(1) TRUST FOR CONSERVATION INNOVATION									
405 14TH ST OAKLAND, CA 94612	91-2166435	501(C)(3)	56,865.				POLICY		
(2) TRUST FOR CONSERVATION INNOVATION									
405 14TH ST OAKLAND, CA 94612	91-2166435	501(C)(3)	165,735.				POLICY		
(3) UNIVERSITY OF ALASKA									
PO BOX 755140 FAIRBANKS, AK 99775	92-6000147	STATE OF AK	15,000.				POLICY		
(4) UNIVERSITY OF CALIFORNIA, BERKELEY									
200 CALIFORNIA HALL BERKELEY, CA 94720	94-6002123	STATE OF CA	130,000.				POLICY		
(5) UNIVERSITY OF CALIFORNIA, DAVIS									
1 SHIELDS AVE DAVIS, CA 95616	94-6036494	STATE OF CA	303,792.				POLICY		
(6) UNIVERSITY OF CALIFORNIA, DAVIS									
1 SHIELDS AVE DAVIS, CA 95616	94-6036494	STATE OF CA	300,000.				POLICY		
(7) UNIVERSITY OF CALIFORNIA, LOS ANGELES									
10920 WILSHIRE BLVD LOS ANGELES, CA 900	95-6006143	STATE OF CA	300,000.				POLICY		
(8) UNIVERSITY OF CALIFORNIA, LOS ANGELES									
10920 WILSHIRE BLVD LOS ANGELES, CA 900	95-6006143	STATE OF CA	300,000.				POLICY		
(9) UNIVERSITY OF CALIFORNIA, MERCED									
5200 N LAKE RD MERCED, CA 95343	27-0093858	STATE OF CA	300,000.				POLICY		
(10) UNIVERSITY OF CALIFORNIA, SAN DIEGO									
9500 GILMAN DR LA JOLLA, CA 92093	95-6006144	STATE OF CA	300,000.				POLICY		
(11) UNIVERSITY OF CALIFORNIA, SAN DIEGO	(11) UNIVERSITY OF CALIFORNIA, SAN DIEGO								
9500 GILMAN DR LA JOLLA, CA 92093	9500 GILMAN DR LA JOLLA, CA 92093 95-6006144 STATE OF CA 300,000. POLICY								
(12) UNIVERSITY OF CALIFORNIA, SAN DIEGO									
9500 GILMAN DR LA JOLLA, CA 92093	95-6006144	STATE OF CA	130,000.				POLICY		
2 Enter total number of section 501(c)(3) and government o	organizations lis	sted in the line 1 tak	ole			•		
3 Enter total number of other organization	ons listed in the line	1 table	<u></u>	<u></u>	<u> </u>	<u></u> .			
For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule I (Form 990) (2018)									

SCHEDULE I		Grants ar	nd Other A	Assistance t	o Organiza	tions,	Ļ	OMB No. 1545-0047	
(Form 990)	Go	overnmei	nts, and Ir	ndividuals ir	n the United	d States		2018	
	Com	plete if the or	ganization ans	wered "Yes" on F	orm 990. Part IV	line 21 or 22.			
Department of the Treasury			-	ttach to Form 990				Open to Public	
Internal Revenue Service		► Go t	to www.irs.gov	/Form990 for the I	atest information			Inspection	
Name of the organization							Employer identifica	tion number	
THE PEW CHARITA	ABLE TRUSTS						56-23071	47	
Part I General I	nformation on Grants an	d Assistance	e						
1 Does the organiz	zation maintain records to s	ubstantiate th	e amount of the	e grants or assista	nce, the grantees	eligibility for the grant	s or assistance, and	1	
the selection crit	eria used to award the gran	ts or assistanc	e?	- 				X Yes No	
2 Describe in Part	IV the organization's proce	dures for mor	nitoring the use	of grant funds in the	e United States.				
Part II Grants an	nd Other Assistance to D	omestic Or	anizations ar	nd Domestic Gov	ernments. Com	plete if the organiz	ation answered "	Yes" on Form 990	
	ne 21, for any recipient t		-						
· · · · · ·				·	•	•			
	d address of organization government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance	
(1) UNIVERSITY OF CAL	IFORNIA, SAN DIEGO								
9500 GILMAN DR LA	JOLLA, CA 92093	95-6006144	STATE OF CA	130,000.				POLICY	
(2) UNIVERSITY OF CAL	JIFORNIA, SAN FRANCISCO								
550 16TH ST SAN F	RANCISCO, CA 94143	94-6036493	STATE OF CA	300,000.				POLICY	
(3) UNIVERSITY OF CAL	JIFORNIA, SANTA BARBARA								
3227 CHEADLE HALL	SANTA BARBARA, CA 93106	95-6006145	STATE OF CA	250,020.				POLICY	
(4) UNIVERSITY OF CAL	IFORNIA, SANTA BARBARA								
3227 CHEADLE HALL	SANTA BARBARA, CA 93106	95-6006145	STATE OF CA	21,120.				POLICY	
(5) UNIVERSITY OF CAL	IFORNIA, SANTA BARBARA								
3227 CHEADLE HALL	SANTA BARBARA, CA 93106	95-6006145	STATE OF CA	65,714.				POLICY	
(6) UNIVERSITY OF CAL	JIFORNIA, SANTA CRUZ	_							
1156 HIGH ST SANT	A CRUZ, CA 95064	94-1539563	STATE OF CA	300,000.				POLICY	
(7) UNIVERSITY OF HAW	IAII	_							
2440 CAMPUS RD HO	NOLULU, HI 96822	99-6000354	STATE OF HI	62,259.				POLICY	
(8) UNIVERSITY OF MAR	YLAND	_							
2020 HORNS POINT	RD CAMBRIDGE, MD 21613	52-6002033	STATE OF MD	61,026.				POLICY	
(9) UNIVERSITY OF NEB	BRASKA	_							
3835 HOLDREGE ST	LINCOLN, NE 68503	47-0049123	501(C)(3)	19,319.				POLICY	
(10) UNIVERSITY OF NOR	TH CAROLINA AT CHAPEL	_							
104 AIRPORT DR CH	IAPEL HILL, NC 27599	56-6001393	501(C)(3)	190,397.				POLICY	
(11) UNIVERSITY OF NOR	TH CAROLINA AT CHAPEL	_							
	IAPEL HILL, NC 27599	56-6001393	501(C)(3)	300,000.				POLICY	
• •	(12) UNIVERSITY OF TEXAS SW MEDICAL CENTER								
	BLVD DALLAS, TX 75390		STATE OF TX	300,000.				POLICY	
	per of section 501(c)(3) and	-	-					•	
	er of other organizations lis			<u></u>		<u></u>	<u></u>	•	
For Paperwork Reduction	on Act Notice, see the Instruct	ions for Form 9	90.				Se	hedule I (Form 990) (2018):	

SCHEDULE I		Grants a	nd Other A	Assistance t	o Organiza	itions,	L	OMB No. 1545-0047
(Form 990)			•	ndividuals i				2018
	Com	plete if the or	-	wered "Yes" on F		, line 21 or 22.		
Department of the Treasury				ttach to Form 990				Open to Public
Internal Revenue Service		► Go	to www.irs.gov	/Form990 for the I	atest information	l.		Inspection
Name of the organization							Employer identifie	
THE PEW CHARITA							56-2307	147
Part I General I	nformation on Grants and	d Assistanc	е					
 Does the organized 	zation maintain records to su	ubstantiate th	e amount of the	e grants or assista	nce, the grantees	eligibility for the grant	s or assistance, ar	
the selection crit	eria used to award the grant	s or assistanc	e?					X Yes No
2 Describe in Part	IV the organization's proceed	dures for mor	nitoring the use	of grant funds in the	e United States.			
Part II Grants an	nd Other Assistance to D	omestic Or	ganizations ar	nd Domestic Gov	vernments. Com	plete if the organiz	ation answered	"Yes" on Form 990,
	ne 21, for any recipient th		-					,
				1	-	(f) Method of valuation		(h) Durnana of grant
	d address of organization government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(book, FMV, appraisal, other)	(g) Description of noncash assistance	e (h) Purpose of grant or assistance
(1) UNIVERSITY OF THE	ARTS							
320 S BROAD ST PH	ILADELPHIA, PA 19102	23-1639911	501(C)(3)	11,765,000.				CIVIC LIFE
(2) UNIVERSITY OF UTA	Н							
	R SALT LAKE CITY, UT 84112	87-6000525	STATE OF UT	300,000.				POLICY
(3) UNIVERSITY OF UTA	Н							
201 PRESIDENTS CI	R SALT LAKE CITY, UT 84112	87-6000525	STATE OF UT	104,350.				POLICY
(4) UNIVERSITY OF WAS	HINGTON							
PO BOX 359505 SEA	TTLE, WA 98195	91-6001537	501(C)(3)	319,891.				POLICY
(5) UNIVERSITY OF WIS	CONSIN-MADISON							
500 LINCOLN DR MA	DISON, WI 53706	39-6006492	STATE OF WI	200,000.				POLICY
(6) URBAN INSTITUTE								
2100 M ST NW WASH	INGTON, DC 20037	52-0880375	501(C)(3)	135,025.				POLICY
(7) VANDERBILT UNIVER	SITY MEDICAL CENTER							
1161 21ST AVE S N	ASHVILLE, TN 37232	35-2528741	501(C)(3)	300,000.				POLICY
(8) VIRGIN UNITE USA								
65 BLEECKER ST NE	W YORK, NY 10012	20-3963486	501(C)(3)	115,000.				POLICY
(9) WASHINGTON UNIVER	SITY IN ST. LOUIS	_						
700 ROSEDALE AVE	ST LOUIS, MO 63112	43-0653611	501(C)(3)	300,000.				POLICY
(10) WASHINGTON WILD		_						
305 N 83RD ST SEA	TTLE, WA 98103	91-1102692	501(C)(3)	12,004.				POLICY
(11) WETA		_						
3939 CAMPBELL AVE	ARLINGTON, VA 22206	53-0242992	501(C)(3)	1,500,000.				CIVIC LIFE
(12) WGBH EDUCATIONAL	FOUNDATION	4						
1 GUEST ST BOSTON		04-2104397	501(C)(3)	250,000.				CIVIC LIFE
	per of section 501(c)(3) and							•
	er of other organizations list							
For Paperwork Reduction	on Act Notice, see the Instruct	ions for Form 9	90.				5	Schedule I (Form 990) (2018)

SCHEDULE I		OMB No. 1545-0047					
(Form 990) GC	vernme	nts, and Ir	ndividuals ir	n the United	d States		2018
Com	olete if the o	ganization ans	wered "Yes" on F	orm 990, Part IV,	line 21 or 22.		
Department of the Treasury		-	ttach to Form 990				Open to Public
Internal Revenue Service	► Go	to www.irs.gov	/Form990 for the l	atest information			Inspection
Name of the organization						Employer identificat	ion number
THE PEW CHARITABLE TRUSTS						56-230714	17
Part I General Information on Grants and	d Assistanc	e					
1 Does the organization maintain records to s	ubstantiate th	e amount of the	e grants or assista	nce, the grantees	' eligibility for the grant	s or assistance, and	
the selection criteria used to award the grant	s or assistanc	e?					X Yes No
2 Describe in Part IV the organization's proceed	dures for mor	nitoring the use	of grant funds in the	United States.			
Part II Grants and Other Assistance to D	omestic Or	anizations ar	nd Domestic Gov	ernments. Com	plete if the organiz	ation answered "	'es" on Form 990.
Part IV, line 21, for any recipient the		-					,
			-	•	(f) Method of valuation		(1) D ()
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) WIDENER UNIVERSITY							
1 UNIVERSITY PL CHESTER, PA 19013	23-1386178	501(C)(3)	175,000.				CIVIC LIFE
(2) WILDERNESS SOCIETY							
1615 M ST NW WASHINGTON, DC 20036	53-0167933	501(C)(3)	53,672.				POLICY
(3) WOMEN AGAINST ABUSE							
100 S BROAD ST PHILADELPHIA, PA 19101	23-1984838	501(C)(3)	212,000.				CIVIC LIFE
(4) WOMEN AGAINST ABUSE	_						
100 S BROAD ST PHILADELPHIA, PA 19101	23-1984838	501(C)(3)	35,000.				CIVIC LIFE
(5) WOODROW WILSON INTERNATIONAL CENTER	_						
1300 PENNS. AVE NW WASHINGTON, DC 20004	52-1067541	501(C)(3)	202,837.				POLICY
(6) WORLD WILDLIFE FUND	_						
1250 24TH ST NW WASHINGTON, DC 20037	52-1693387	501(C)(3)	996,771.				POLICY
(7) WORLD WILDLIFE FUND	_						
1250 24TH ST NW WASHINGTON, DC 20037	52-1693387	501(C)(3)	97,766.				POLICY
(8) WYOMING WILDERNESS ASSOCIATION	_						
PO BOX 6588 SHERIDAN, WY 82801	38-3667856	501(C)(3)	14,000.				POLICY
(9) WYOMING WILDLIFE FEDERATION	-						
PO BOX 1312 LANDER, WY 82520	23-7002578	501(C)(3)	12,000.				POLICY
(10) YALE UNIVERSITY							
105 WALL ST NEW HAVEN, CA 06520	06-0646973	501(C)(3)	130,000.				POLICY
(11) YALE UNIVERSITY		501 (7) (0)					
105 WALL ST NEW HAVEN, CA 06520	06-0646973	501(C)(3)	130,000.				POLICY
(12) YALE UNIVERSITY		F01 (0) (2)	200.000				DOLTON
105 WALL ST NEW HAVEN, CA 06520		501(C)(3)	300,000.			L	POLICY
 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3 Enter total number of other organizations listed in the line 1 table 							
3 Enter total number of other organizations lis For Paperwork Reduction Act Notice, see the Instruct						<u></u>	nedule I (Form 990) (2018)

SCHEDULE I Grants and Other Assistance to Organizations, (Form 990) Governments, and Individuals in the United States								OMB No. 1545-0047
(Form 990)	Go	overnme	nts, and Ir	ndividuals ii	n the Unite	d States		2018
	Com	plete if the or	ganization ans	wered "Yes" on F	orm 990, Part IV	, line 21 or 22.		
Department of the Treasury			► A	ttach to Form 990				Open to Public
Internal Revenue Service		► Go	to www.irs.gov	/Form990 for the I	atest informatior).		Inspection
Name of the organization							Employer identificat	on number
THE PEW CHARITA	ABLE TRUSTS						56-230714	.7
Part I General I	nformation on Grants an	d Assistanc	e					
1 Does the organiz	zation maintain records to s	ubstantiate th	e amount of the	e grants or assista	nce, the grantees	eligibility for the grant	s or assistance, and	
the selection crit	eria used to award the gran	ts or assistand	e?					X Yes No
2 Describe in Part	IV the organization's proce	dures for mor	nitoring the use	of grant funds in the	e United States.			
Part II Grants an	nd Other Assistance to E	omestic Or	nanizations ar	nd Domestic Gov	ernments Com	nlete if the organiz	ation answered "Y	es" on Form 990
	ne 21, for any recipient t		-					
Faitiv, iii				· 	•			
	d address of organization government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) YALE UNIVERSITY								
105 WALL ST NEW H	AVEN, CA 06520	06-0646973	501(C)(3)	300,000.				POLICY
(2) YALE UNIVERSITY								
105 WALL ST NEW H	AVEN, CA 06520	06-0646973	501(C)(3)	200,000.				POLICY
(3) YUKON RIVER DRAIN	AGE FISHERIES ASSOCIATION							
PO BOX 100498 ANC	HORAGE, AK 99510	92-0135445	501(C)(3)	41,135.				POLICY
(4) CUBAN AMERICAN YO	WTH ORCHESTRA							
3544 44TH AVE S M	IINNEAPOLIS, MN 55406	81-3196433	501(C)(3)	161,180.				DAF GRANT
(5) GOLD STAR TEEN AD	VENTURES							
3350 FOOTBRIDGE L	N FAYETTEVILLE, NC 28306	90-0998030	501(C)(3)	100,000.				DAF GRANT
(6) HUMANE SOCIETY OF	THE UNITED STATES							
1255 23RD ST NW W	ASHINGTON, DC 20037	53-0225390	501(C)(3)	100,000.				DAF GRANT
(7) NATURAL RESOURCES	DEFENSE COUNCIL							
40 W 20TH ST NEW	YORK, NY 10011	13-2654926	501(C)(3)	1,000,000.				DAF GRANT
(8) NO GREATER SACRIF	ICE FOUNDATION							
1101 PENNS. AVE N	W WASHINGTON, DC 20004	26-1572599	501(C)(3)	100,000.				DAF GRANT
(9) PEW RESEARCH CENT	ER							
1615 L ST NW WASH	INGTON, DC 20036	20-0881724	501(C)(3)	2,068,352.				DAF GRANT
(10) PRO PUBLICA INC								
155 AVE OF THE AM	ERICAS NEW YORK, NY 10013	14-2007220	501(C)(3)	2,001,825.				DAF GRANT
(11) ALBERT AND MARY L	ASKER FOUNDATION INC							
405 LEXINGTON AVE	NEW YORK, NY 10174	13-1680062	501(C)(3)	11,764.				MATCHING GIFT
(12) ALL SAINTS' CHURC	Ή	_						
	OODBRIDGE, VA 22192	54-1043724		6,450.				MATCHING GIFT
	per of section 501(c)(3) and	0	0					
3 Enter total numb	er of other organizations lis	ted in the line	1 table				<u></u>	
For Paperwork Reduction	on Act Notice, see the Instruct	ions for Form 9	90.				Sch	edule I (Form 990) (2018

SCHEDULE I (Form 990)	Go		20 18 No. 1545-0047					
	Com	plete if the or	ganization ans	wered "Yes" on F	orm 990, Part IV	, line 21 or 22.		
Department of the Treasury		•	-	ttach to Form 990		, ,		Open to Public
Internal Revenue Service		► Go	to www.irs.gov	/Form990 for the I	atest informatior	۱.		Inspection
Name of the organization							Employer identificati	on number
THE PEW CHARITA	ABLE TRUSTS						56-230714	.7
Part I General I	nformation on Grants an	d Assistanc	e					
1 Does the organiz	zation maintain records to s	ubstantiate th	e amount of the	e grants or assista	nce, the grantees	' eligibility for the grant	s or assistance, and	
•	eria used to award the gran			•		• • •		X Yes No
	IV the organization's proce							
	nd Other Assistance to D					plete if the organiz	ation answered "Y	es" on Form 990,
Part IV, lir	ne 21, for any recipient t	hat received	more than \$5	,000. Part II can b	be duplicated if a	additional space is r	needed.	
	d address of organization government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) ALZHEIMERS DISEAS	E AND RELATED DISORDERS							
	NEW YORK, NY 10017	13-3277408	501(C)(3)	6,250.				MATCHING GIFT
(2) AMARA								
	SEATTLE, WA 98118	91-0577487	501(C)(3)	15,000.				MATCHING GIFT
(3) AMERICAN UNIVERSI	TY - WAMU 88.5							
	W WASHINGTON, DC 20016	53-0196549	501(C)(3)	5,158.				MATCHING GIFT
(4) ASHA-JYOTHI								
PO BOX 2613 FRISC	O, TX 75034	26-3537756	501(C)(3)	21,700.				MATCHING GIFT
(5) BEST RUNNERS USA								
44790 MAYNARD SQ	ASHBURN, VA 20147	47-4196907	501(C)(3)	7,800.				MATCHING GIFT
(6) BLOOMFIELD COLLEG	E							
467 FRANKLIN ST B	BLOOMFIELD, NJ 07003	22-1494428	501(C)(3)	7,500.				MATCHING GIFT
(7) BREARLEY SCHOOL								
610 E 83RD ST NEW	YORK, NY 10028	13-1623915	501(C)(3)	6,000.				MATCHING GIFT
(8) CAPITAL AREA FOOD	BANK							
4900 PUERTO RICO	AVE WASHINGTON, DC 20017	52-1167581	501(C)(3)	5,220.				MATCHING GIFT
(9) CAREVIEW COMMUNIT	Y CHURCH							
77 S UNION AVE LA	NSDOWNE, PA 19050	23-2836510	501(C)(3)	11,361.				MATCHING GIFT
(10) CATALOGUE FOR PHI	LANTHROPY							
1899 L ST NW WASH	INGTON, DC 20036	20-5494704	501(C)(3)	14,800.				MATCHING GIFT
(11) CHARLESTON GAILLA	RD MANAGEMENT CORP							
95 CALHOUN ST CHA	RLESTON, SC 29401	46-3018925	501(C)(3)	7,500.				MATCHING GIFT
(12) CHEVY CHASE PRESE	YTERIAN CHURCH							
1 CHEVY CHASE CIR	NW WASHINGTON, DC 20015	23-6393377	501(C)(3)	6,000.				MATCHING GIFT
	per of section 501(c)(3) and	-	-					
3 Enter total numb	er of other organizations lis	ted in the line	1 table	<u></u>		<u></u>	<u></u>	
For Paperwork Reduction	on Act Notice, see the Instruct	tions for Form 9	90.				Sch	edule I (Form 990) (2018)

SCHEDULE I Grants and Other Assistance to Organizations,								OMB No. 1545-0047
(Form 990)	Go	vernmei	nts, and Ir	ndividuals in	n the United	d States		2018
	Comp	olete if the or	ganization ans	wered "Yes" on F	orm 990, Part IV,	line 21 or 22.		
Department of the Treasury			-	ttach to Form 990				Open to Public
Internal Revenue Service		► Go t	to www.irs.gov	/Form990 for the I	atest information			Inspection
Name of the organization							Employer identificat	ion number
THE PEW CHARITA	BLE TRUSTS						56-230714	ł7
Part I General I	nformation on Grants and	d Assistanc	e				·	
1 Does the organiz	zation maintain records to su	ubstantiate th	e amount of the	e grants or assista	nce, the grantees	' eligibility for the grant	s or assistance, and	
-	eria used to award the grant			-	-			X Yes No
2 Describe in Part	IV the organization's proced	dures for mor	itoring the use	of grant funds in the	United States.			
Part II Grants an	d Other Assistance to D	omestic Or	anizations ar	nd Domestic Gov	ernments, Com	plete if the organiz	ation answered "Y	es" on Form 990
	ne 21, for any recipient the		-					
		1	1		-	-		
	d address of organization government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) CHRISTIAN LIFE CE	NTER							
PO BOX 1938 CLARK	SBURG, MD 20871	43-0679185	501(C)(3)	7,820.				MATCHING GIFT
(2) CHURCH OF JESUS C	HRIST OF LATTER-DAY SAINTS							
50 E NORTH TEMPLE	SALT LAKE CITY, UT 84150	87-0381731	501(C)(3)	27,532.				MATCHING GIFT
(3) CORONADO HOSPITAL	FOUNDATION							
8695 SPECTRUM CEN	TER SAN DIEGO, CA 92123	95-3273985	501(C)(3)	35,000.				MATCHING GIFT
(4) DC METRO CHURCH								
1100 N FAYETTE ST	ALEXANDRIA, VA 22314	20-8686558	501(C)(3)	19,800.				MATCHING GIFT
(5) DELAWARE VALLEY T	ORAH INSTITUTE	1						
31 MAPLE AVE CHER	RY HILL, NJ 08002	22-3689784	501(C)(3)	10,240.				MATCHING GIFT
(6) DOCTORS WITHOUT B	ORDERS USA	1						
333 7TH AVE NEW Y	ORK, NY 10001	13-3433452	501(C)(3)	47,300.				MATCHING GIFT
(7) EARTHJUSTICE		1						
50 CALIFORNIA ST	SAN FRANCISCO, CA 94111	94-1730465	501(C)(3)	9,550.				MATCHING GIFT
(8) EASTER SEALS OF S	OUTHEASTERN PENNSYLVANIA	4						
3975 CONSHO. AVE	PHILADELPHIA, PA 19131	23-1352293	501(C)(3)	5,080.				MATCHING GIFT
(9) FAIRFAX YOUTH INC		4						
10021 BLUE COAT D	R FAIRFAX, VA 22030	45-2851348	501(C)(3)	22,400.				MATCHING GIFT
(10) FAMILY JUSTICE CE	NTER OF GEORGETOWN	4						
PO BOX 366 GEORGE	TOWN, SC 29442	30-0420199	501(C)(3)	9,000.				MATCHING GIFT
<pre>(11) FEDERAL CITY PERF</pre>	ORMING ARTS ASSOCIATION	4						
1140 3RD ST NE WA	SHINGTON, DC 20002	52-1245241	501(C)(3)	7,500.				MATCHING GIFT
(12) FIDELITY INVESTME	NTS CHARITABLE GIFT FUND	4						
200 SEAPORT BLVD		11-0303001	1	10,000.				MATCHING GIFT
	er of section 501(c)(3) and	•	•					
	3 Enter total number of other organizations listed in the line 1 table							
For Paperwork Reduction	on Act Notice, see the Instructi	ons for Form 9	90.				Sch	nedule I (Form 990) (2018)

JSA 8E1288 1.000 1211PT 700P 4/23/2020

SCHEDULE I				Assistance t				OMB No. 1545-0047	
(Form 990)	Go	overnme	nts, and Ir	ndividuals ii	n the United	d States		2018	
	Com	plete if the o	rganization ans	wered "Yes" on F	orm 990. Part IV	line 21 or 22.			
			-	ttach to Form 990				Open to Public	
Department of the Treasury Internal Revenue Service		► Go	to www.irs.gov	/Form990 for the I	atest information).		Inspection	
Name of the organization							Employer identificati	on number	
THE PEW CHARITA	ABLE TRUSTS						56-230714	7	
Part I General I	nformation on Grants an	d Assistanc	е						
1 Does the organiz	zation maintain records to s	ubstantiate th	e amount of the	e grants or assista	nce, the grantees	' eligibility for the grant	s or assistance, and		
	teria used to award the gran			-	-			X Yes No	
	IV the organization's proce								
	nd Other Assistance to D			<u> </u>		ploto if the organiz	ation answard "V	os" on Form 000	
			-					es on Form 990,	
Part IV, III	ne 21, for any recipient t	nat received	more than \$5	,000. Part II can t	be duplicated if a	additional space is r		1	
	d address of organization government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance	
(1) FOUNDATION FOR SI	TUDENTS RISING ABOVE								
PO BOX 29174 SAN	FRANCISCO, CA 94129	81-0615887	501(C)(3)	7,500.				MATCHING GIFT	
(2) FOUNDRY UNITED ME	THODIST CHURCH								
1500 16 ST NW WAS	SHINGTON, DC 20036	53-0204685	501(C)(3)	7,800.				MATCHING GIFT	
(3) FRIENDS SELECT SC	CHOOL								
17TH BEN FRANK PK	KWY PHILADELPHIA, PA 19103	23-0604370	501(C)(3)	10,972.				MATCHING GIFT	
(4) GIVEDIRECTLY INC									
PO BOX 3221 NEW Y	YORK, NY 10008	27-1661997	501(C)(3)	6,750.				MATCHING GIFT	
(5) GRACE EPISCOPAL C	CHURCH								
19 KINGS HWY E HA	ADDONFIELD, NJ 08033	21-0634592	501(C)(3)	7,780.				MATCHING GIFT	
(6) HADDONFIELD FRIEN	NDS SCHOOL								
47 N HADDON AVE H	HADDONFIELD, NJ 08033	23-1352146	501(C)(3)	7,500.				MATCHING GIFT	
(7) HOLY TRINITY GEOR	RGETOWN PIKE INC								
850 BALLS HILL RD	D MCLEAN, VA 22101	27-4084592	501(C)(3)	6,000.				MATCHING GIFT	
(8) INSTITUTE FOR ADV	/ANCED STUDY								
1 EINSTEIN DR PRI	INCETON, NJ 08540	21-0634988	501(C)(3)	7,500.				MATCHING GIFT	
(9) INTERNATIONAL RES	SCUE COMMITTEE	_							
122 E 42ND ST NEW	V YORK, NY 10168	13-5660870	501(C)(3)	9,736.				MATCHING GIFT	
(10) KANSAS UNIVERSITY	ENDOWMENT ASSOCIATION	_							
PO BOX 928 LAWREN	NCE, KS 66044	48-0547734	501(C)(3)	10,100.				MATCHING GIFT	
(11) LOST DOG RESCUE F	FOUNDATION	_							
1301 N TUCKAHOE S	1301 N TUCKAHOE ST FALLS CHURCH, VA 22046 31-1789600 501(C)(3) 10,966. MATCHING GIFT								
(12) MCLEAN PRESBYTERI	IAN CHURCH	_							
	RD MCLEAN, VA 22101	23-7366967	501(C)(3)	18,000.				MATCHING GIFT	
	per of section 501(c)(3) and	•	•						
	per of other organizations lis						<u></u>		
For Paperwork Reduction	on Act Notice, see the Instruct	ions for Form 9	990.				Sch	edule I (Form 990) (2018)	

JSA 8E1288 1.000 1211PT 700P 4/23/2020 6:41:20 PM V 18-8.2F

SCHEDULE I	(Grants a	nd Other A	Assistance t	o Organiza	tions,		OMB No. 1545-0047
(Form 990)	Go	overnmei	nts, and Ir	ndividuals ir	n the United	d States		2018
	Com	olete if the or	ganization ans	wered "Yes" on F	orm 990. Part IV	line 21 or 22.		
Dependent of the Treesury			-	ttach to Form 990				Open to Public
Department of the Treasury Internal Revenue Service		► Go	to www.irs.gov	/Form990 for the I	atest information			Inspection
Name of the organization							Employer identificat	ion number
THE PEW CHARITAB	BLE TRUSTS						56-230714	17
Part I General Inf	formation on Grants and	d Assistanc	e					
1 Does the organiza	ation maintain records to su	ubstantiate th	e amount of the	e grants or assista	nce, the grantees	' eligibility for the grant	ts or assistance, and	
-	ria used to award the grant			-	-			X Yes No
	V the organization's proced							
	I Other Assistance to D					plata if the organiz	ration anowarad "M	
			-					es on Form 990,
Part IV, line	e 21, for any recipient the	hat received	more than \$5	,000. Part II can t	be duplicated if a	additional space is r		-
	address of organization	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) MIRACLE CITY CHURCH	H							
~/	VE BALTIMORE, MD 21229	75-3225617	501(C)(3)	19,924.				MATCHING GIFT
(2) NATIONAL SOCIETY OF	F THE COLONIAL DAMES							
2715 Q ST NW WASHIN		53-0224364	501(C)(3)	10,023.				MATCHING GIFT
(3) NURSE FAMILY PARTNE	ERSHIP							
1900 GRANT ST DENVE	ER, CO 80203	20-0234163	501(C)(3)	8,720.				MATCHING GIFT
(4) OCEANA INC								
1025 CONN. AVE NW W	WASHINGTON, DC 20036	51-0401308	501(C)(3)	8,570.				MATCHING GIFT
(5) OREGON LEAGUE OF CO	ONSERVATION VOTERS							
321 SW 4TH AVE PORT	ILAND, OR 97204	93-1177957	501(C)(3)	8,000.				MATCHING GIFT
(6) OUR LADY QUEEN OF F	PEACE CHURCH							
2700 19TH ST S ARLI	INGTON, VA 22204	54-0800050	501(C)(3)	10,980.				MATCHING GIFT
(7) PHILADELPHIA OUTWAR	RD BOUND CENTER							
3250 W SEDGELY DR E	PHILADELPHIA, PA 19130	56-2472884	501(C)(3)	5,500.				MATCHING GIFT
(8) PLANNED PARENTHOOD	ASSCN OF METRO WASH DC							
1201 NEW YORK AVE W	WASHINGTON, DC 20036	53-0204621	501(C)(3)	19,320.				MATCHING GIFT
(9) PLANNED PARENTHOOD	OF NORTH CENT & SOUTH NJ	_						
196 SPEEDWELL AVE M	MORRISTOWN, NJ 07960	22-1643997	501(C)(3)	7,500.				MATCHING GIFT
(10) PRAGATHI USA		_						
13619 BECKINGHAM DF	R HERNDON, VA 20171	47-4069454	501(C)(3)	6,700.				MATCHING GIFT
(11) PRINCETON UNIVERSIT	ГҮ	_						
701 CARNEGIE CTR PF	RINCETON, NJ 08540	21-0634501	501(C)(3)	5,200.				MATCHING GIFT
(12) PTA OREGON CONGRESS	S	4						
4506 SE BELMONT POF		93-0391598		6,392.				MATCHING GIFT
	r of section 501(c)(3) and	•	•					
	r of other organizations list						<u></u>	
For Paperwork Reduction	Act Notice, see the Instruct	ions for Form 9	90.				Sch	edule I (Form 990) (2018)

JSA 8E1288 1.000 1211PT 700P 4/23/2020 6:41:20 PM V 18-8.2F

SCHEDULE I				Assistance t				OMB No. 1545-0047
(Form 990)	Go	vernmei	nts, and Ir	ndividuals ir	n the United	d States		2018
	Comr	plete if the or	ganization ans	wered "Yes" on F	orm 990. Part IV	line 21 or 22.		
	•		-	ttach to Form 990				Open to Public
Department of the Treasury Internal Revenue Service		► Go	to www.irs.gov	/Form990 for the I	atest information			Inspection
Name of the organization							Employer identificat	ion number
THE PEW CHARITA	BLE TRUSTS						56-230714	17
Part I General Ir	nformation on Grants and	d Assistanc	e					
1 Does the organiz	ation maintain records to su	ubstantiate th	e amount of the	e grants or assista	nce, the grantees	' eligibility for the grant	s or assistance, and	
	eria used to award the grant			-	-			X Yes No
	IV the organization's proced							
	d Other Assistance to D					plata if the organiz	ation answard "V	ac" on Form 000
			-					es on Fonn 990,
Part IV, IIr	ne 21, for any recipient the	hat received	more than \$5	,000. Part II can t	be duplicated if a	additional space is r		
	d address of organization government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) RECTOR WARDENS VE	STRYMEN TRINITY CHURCH							
33 MERCER ST PRIN		21-0647707	501(C)(3)	10,500.				MATCHING GIFT
(2) SAINTS CONSTANTIN	E AND HELEN GREEK ORTHODOX							
	LVER SPRING, MD 20905	53-0204595	501(C)(3)	14,000.				MATCHING GIFT
(3) SAVE OUR WILD SAL	MON COALITION							
811 1ST AVE SEATT	LE, WA 98104	91-1673170	501(C)(3)	6,100.				MATCHING GIFT
(4) SEXUAL MINORITY Y	OUTH ASSISTANCE LEAGUE							
410 7TH ST SE WAS	HINGTON, DC 20003	52-1394900	501(C)(3)	19,000.				MATCHING GIFT
(5) SHERIDAN SCHOOL								
4400 36TH ST NW W	ASHINGTON, DC 20008	53-6019409	501(C)(3)	15,405.				MATCHING GIFT
(6) ST. MARY'S EPISCO	PAL CHURCH							
36 ARDMORE AVE AR	DMORE, PA 19003	23-1352469	501(C)(3)	12,000.				MATCHING GIFT
(7) THE BEMENT SCHOOL								
PO BOX 8 DEERFIEL	D, MA 01342	04-2234135	501(C)(3)	17,973.				MATCHING GIFT
(8) THE CHILDRENS HOSE	P. OF PHILADELPHIA FOUNDAT							
3401 CIVIC CENTER	PHILADELPHIA, PA 19104	23-2237932	501(C)(3)	5,075.				MATCHING GIFT
(9) THE STUDIO THEATR	E INC	1						
1510 14TH ST NW W	ASHINGTON, DC 20005	52-1136132	501(C)(3)	5,240.				MATCHING GIFT
(10) THE WHITEMARSH FOR	UNDATION	4						
548 FLOURTOWN AVE	LAFAYETTE HILL, PA 19444	02-0545031	501(C)(3)	7,500.				MATCHING GIFT
(11) TOMPKINS CONSERVA	TION	4						
1606 UNION ST SAN	FRANCISCO, CA 94123	68-0245471	501(C)(3)	50,000.				MATCHING GIFT
(12) TRINITY UNIVERSIT		4						
1 TRINITY PL SAN 2		74-1109633		10,500.				MATCHING GIFT
	er of section 501(c)(3) and	0	0					
	er of other organizations list						<u></u>	
For Paperwork Reduction	on Act Notice, see the Instructi	ons for Form 9	90.				Sch	edule I (Form 990) (2018)

JSA 8E1288 1.000 1211PT 700P 4/23/2020 6:41:20 PM V 18-8.2F

SCHEDULE I	Grants	and Other	Assistance t	o Organiza	itions,		OMB No. 1545-0047
(Form 990)		•	ndividuals i				2018
	Complete if the	-	swered "Yes" on F		, line 21 or 22.		
Department of the Treasury			Attach to Form 990				Open to Public
Internal Revenue Service	►G	o to www.irs.go	v/Form990 for the	atest information).		Inspection
Name of the organization						Employer identifica	
THE PEW CHARITABLE TRUS						56-23071	47
Part I General Information	on Grants and Assista	nce					
1 Does the organization mainta	ain records to substantiate	the amount of the	ne grants or assista	nce, the grantees	' eligibility for the grant	ts or assistance, and	
the selection criteria used to	award the grants or assista	ince?					X Yes No
2 Describe in Part IV the organ	ization's procedures for m	onitoring the use	e of grant funds in the	e United States.			
Part II Grants and Other As	ssistance to Domestic (Droanizations a	Ind Domestic Gov	vernments. Com	plete if the organiz	ation answered "	Yes" on Form 990.
	ny recipient that receive	-			•		,
· · · · ·					•		(1) D ()
1 (a) Name and address of orga or government	anization (b) EIN	(if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) UNITED WAY OF GREATER PHILADE	LPHIA						
1709 BEN FRANK PKWY PHILADELP	HIA, PA 19103 23-155604	5 501(C)(3)	18,750.				MATCHING GIFT
(2) UNITED WAY OF KENT COUNTY							
PO BOX 594 CHESTERTOWN, MD 210	620 52-601493	5 501(C)(3)	18,750.				MATCHING GIFT
(3) UNIVERSITY OF PENNSYLVANIA							
3451 WALNUT ST PHILADELPHIA, 1	PA 19104 23-135268	5 501(C)(3)	21,764.				MATCHING GIFT
(4) VILLAGE REPERTORY COMPANY							
34 WOOLFE ST CHARLESTON, SC 2	9403 30-013728	4 501(C)(3)	7,500.				MATCHING GIFT
(5) WASHINGTON BACH CONSORT							
1010 VERMONT AVE WASHINGTON, 1	DC 20005 52-110794	8 501(C)(3)	6,000.				MATCHING GIFT
(6) WASHINGTON COLLEGE							
300 WASHINGTON AVE CHESTERTOW	N, MD 21620 52-059169	1 501(C)(3)	6,000.				MATCHING GIFT
(7) WETLANDS INSTITUTE							
1075 STONE HARBOR STONE HARBO	R, NJ 08247 23-704678	3 501(C)(3)	6,000.				MATCHING GIFT
(8) WGBH EDUCATIONAL FOUNDATION							
ONE GUEST ST BOSTON, MA 02135	04-210439	7 501(C)(3)	7,899.				MATCHING GIFT
(9) WILLOWELL FOUNDATION INC							
PO BOX 314 BRISTOL, VT 05443	03-036636	3 501(C)(3)	19,500.				MATCHING GIFT
(10) WOODMERE ART MUSEUM							
9201 GERMANTOWN AVE PHILADELPH	HIA, PA 19118 23-138145	9 501(C)(3)	30,375.				MATCHING GIFT
(11) YOUTH SENTENCING & REENTRY PRO	OJECT INC						
1528 WALNUT ST PHILADELPHIA, 1	PA 19102 47-115359	5 501(C)(3)	6,000.				MATCHING GIFT
(12) AMERICAN PROBATION & PAROLE AS	SSOCIATION						
1776 AVE OF THE STATES LEXING		8 501(C)(3)	10,000.				SPONSORSHIP
2 Enter total number of section		•					
3 Enter total number of other o	rganizations listed in the li	ne 1 table	<u></u>		<u></u>	<u></u>	
For Paperwork Reduction Act Notice,	see the Instructions for Forr	n 990.				Sc	hedule I (Form 990) (2018)

SCHEDULE I		Grants ar	nd Other A	ssistance t	o Organiza	itions,	L	OMB No. 1545-0047
(Form 990)	Go	overnmei	nts, and In	dividuals in	n the United	d States		2018
	Com	plete if the or	ganization ans	wered "Yes" on F	orm 990. Part IV.	line 21 or 22.		
Department of the Treesury			-	tach to Form 990				Open to Public
Department of the Treasury Internal Revenue Service		► Go	to www.irs.gov/	<i>Form990</i> for the I	atest information).		Inspection
Name of the organization							Employer identific	ation number
THE PEW CHARITA	ABLE TRUSTS						56-23071	L47
Part I General Ir	nformation on Grants an	d Assistanc	e				÷	
1 Does the organiz	zation maintain records to s	ubstantiate th	e amount of the	grants or assista	nce, the grantees	' eligibility for the grant	s or assistance, an	d
-	eria used to award the grant			-	-			X Yes No
2 Describe in Part	IV the organization's proceed	dures for mor	nitoring the use of	of grant funds in the	United States.			
	d Other Assistance to D					plete if the organiz	ation answered '	Yes" on Form 990
	ne 21, for any recipient the		-			•		
			1	1		-		
	d address of organization government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) CONSUMER FEDERATI	ON OF AMERICA INC							
1620 I ST NW WASH	INGTON, DC 20006	52-0880625	501(C)(3)	10,000.				SPONSORSHIP
(2) COUNCIL OF STATE	CHAMBERS OF COMMERCE							
515 KING ST ALEXA	NDRIA, VA 22314	35-0827885	501(C)(6)	25,000.				SPONSORSHIP
(3) COUNCIL ON FOUNDA	TIONS INC							
2121 CRYSTAL DR A	RLINGTON, VA 22202	13-6068327	501(C)(3)	25,000.				SPONSORSHIP
(4) GRANTMAKERS FOR E	FFECTIVE ORGANIZATIONS							
1725 DESALES ST N	W WASHINGTON, DC 20036	01-0669150	501(C)(3)	15,000.				SPONSORSHIP
(5) GRANTMAKERS IN HE	ALTH	_						
	NW WASHINGTON, DC 20036	13-3206571	501(C)(3)	5,750.				SPONSORSHIP
(6) INDEPENDENT SECTO	R	_						
1602 L ST NW WASH	INGTON, DC 20036	52-1081024	501(C)(3)	17,500.				SPONSORSHIP
(7) INSTITUTE FOR GOV	& SUSTAINABLE DEV	_						
2300 WISCONSIN AV	E NW WASHINGTON, DC 20007	81-0616238	501(C)(3)	35,000.				SPONSORSHIP
(8) JOHN JAY COLLEGE	FOUNDATION	_						
524 W 59TH ST NEW	YORK, NY 10019	13-3683676	501(C)(3)	7,500.				SPONSORSHIP
(9) NATIONAL ASSOCIAT	ION OF COUNTIES	_						
660 N CAPITOL ST	WASHINGTON, DC 20001	53-0190321	501(C)(4)	20,000.				SPONSORSHIP
(10) NATIONAL CENTER F	OR ACCESS TO JUSTICE	_						
150 WEST 62ND ST	NEW YORK, NY 10023	27-4250853	501(C)(3)	9,000.				SPONSORSHIP
(11) NATIONAL CONFEREN	CE OF STATE LEGISLATURES	_						
	CE DENVER, CO 80230	84-0772595	GOVT. INSTRMNT.	10,000.				SPONSORSHIP
(12) NATIONAL FOUNDATI	ON FOR WOMEN LEGISLATORS	4						
1727 KING ST ALEX		52-1480785	1	40,000.				SPONSORSHIP
	er of section 501(c)(3) and							•
	er of other organizations lis					<u></u>		•
For Paperwork Reduction	on Act Notice, see the Instruct	tions for Form 9	90.				S	chedule I (Form 990) (2018)

SCHEDULE I				Assistance t				OMB No. 1545-0047
(Form 990)			•	ndividuals in				2018
	Com	plete if the o	-	wered "Yes" on F		, line 21 or 22.		Open to Public
Department of the Treasury			-	ttach to Form 990				Inspection
Internal Revenue Service		► Go	to www.irs.gov	/Form990 for the I	atest information	l.		
Name of the organization							Employer identifica	
THE PEW CHARITZ							56-23071	47
	nformation on Grants and							
-	zation maintain records to s			-	-			
	eria used to award the grant							X Yes No
2 Describe in Part	IV the organization's proceed	dures for mor	nitoring the use	of grant funds in the	e United States.			
Part II Grants ar	nd Other Assistance to D	omestic Or	ganizations ar	nd Domestic Gov	vernments. Com	plete if the organiz	ation answered "	Yes" on Form 990,
	ne 21, for any recipient tl		-			• •		
				1	-			(h) Durn and of grant
	d address of organization government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) NATIONAL LIEUTENA	ANT GOVERNORS ASSOCIATION							
71 CAVALIER BLVD	FORT WRIGHT, KY 41011	61-1227811	501(C)(3)	10,000.				SPONSORSHIP
(2) NATIONAL MARINE S	SANCTUARY FOUNDATION							
8601 GEORGIA AVE	SILVER SPRING, MD 20910	94-3370994	501(C)(3)	6,100.				SPONSORSHIP
(3) NCSL FOUNDATION F	FOR STATE LEGISLATURES							
7700 E 1ST PL DEN	IVER, CO 80230	74-2232576	501(C)(3)	22,500.				SPONSORSHIP
(4) UNIVERSITY OF ORE	GON FOUNDATION							
1720 E 13TH AVE E	UGENE, OR 97403	93-6015767	501(C)(3)	7,500.				SPONSORSHIP
(5) VOLCKER ALLIANCE	INC							
560 LEXINGTON AVE	NEW YORK, NY 10022	45-4585989	501(C)(3)	15,000.				SPONSORSHIP
(6)								
(7)		_						
(8)		_						
(9)								
(10)		_						
(11)								
()								
(12)		_						
2 Enter total numb	per of section 501(c)(3) and	dovernment (I pragnizations lie	ted in the line 1 tot			<u> </u>	286.
	per of other organizations lis	0	0					4.
	on Act Notice, see the Instruct					<u></u>		hedule I (Form 990) (2018)

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. (a) Type of grant or assistance (b) Number of (c) Amount of (d) Amount of (e) Method of valuation (hook (f) Description of non-cash if

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance								
1													
2													
3													
4													
5													
6													
7 Port V. Supplemental Information Dravide the information required in Dart II in 2. Dart III, column (b), and any other additional													
information.	Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional												
FORM 990, SCHEDULE I, PART I, LINE 2 A	ND PART II												
PEW'S PROCEDURES FOR MONITORING THE US	E OF GRANT	FUNDS INSID	E THE UNITEI)									
STATES BY UNRELATED ORGANIZATIONS ARE	MODELED AF	TER THE "EXPI	ENDITURE										
RESPONSIBILITY" RULES (SEE TREAS. REG.	§ 53.4945	-5) AND ARE 1	DESIGNED TO										
FULFILL THE PURPOSES OF EXPENDITURE RE	SPONSIBILI	FY, NAMELY T	HAT GRANT										
FUNDS ARE EXPENDED SOLELY FOR THEIR IN	TENDED CHAI	RITABLE PURPO	OSE, THAT PE	EW									
RECEIVES COMPLETE REPORTS REGARDING HO	W THE FUND:	S WERE SPENT	, AND THAT										
PEW IS ABLE TO PROVIDE FULL REPORTS TO	THE IRS R	EGARDING THE	GRANTED										
FUNDS. FIRST, TO HELP ASSURE THAT THE	GRANTEE WI	LL USE THE G	RANT FOR										

PROPER PURPOSES, PEW CONDUCTS A PRE-GRANT INQUIRY INTO EACH POTENTIAL

Schedule I (Form 990) (2018)

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
2					
3					
4					
5					
6					
7					
Part IV Supplemental Information. Provide th information.	e information re	equired in Part I,	line 2, Part III, o	column (b); and any oth	ner additional
RANTEE, WHICH INCLUDES DILIGENCE REC	GARDING THE (GRANTEE'S PR	OGRAMS ,		
XPERIENCE, FINANCES, MANAGEMENT, ANI	O REPUTATION	; VERIFICATI	ON OF THE		
GRANTEE'S CORPORATE AND TAX STATUS; A	AND A SEARCH	OF THE U.S.	TREASURY		
DEPARTMENT OFFICE OF FOREIGN ASSET CO	ONTROL'S (OF	AC) SANCTION	S PROGRAM		
LISTINGS TO CONFIRM THAT THE GRANTEE	IS NEITHER A	A KNOWN TERR	ORIST NOR HA	AS	
TIES TO KNOWN TERRORISTS. SECOND, PEV	N ENTERS INT	O A WRITTEN	GRANT		
AGREEMENT WITH EACH GRANTEE, IN WHICH	H PEW SECURE:	S THE GRANTE	E'S		
COMMITMENTS: (I) TO USE THE GRANT FUN	NDS SOLELY F	OR PURPOSES	CONSISTENT		

WITH PEW'S TAX-EXEMPT STATUS UNDER SECTION 501(C)(3) OF THE INTERNAL

REVENUE CODE; (II) NOT TO USE ANY GRANT FUNDS DIRECTLY OR INDIRECTLY TO

6

7

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III Part III can be duplicated if additional space is needed. (a) Type of grant or assistance (b) Number of (c) Amount of (d) Amount of (e) Method of valuation (book, (f) Description of non-cash assistance recipients , cash grant non-cash assistance FMV, appraisal, other) 1 2 3 4 5

Part IV	Supplemental Information. Provide the i	information re	equired in Part I,	line 2, Part III, o	column (b); and any c	other additional
	information.					

SUPPORT OR OPPOSE ANY CANDIDATE FOR PUBLIC OFFICE, TO PROVIDE A BENEFIT

TO ANY POLITICAL PARTY OR CANDIDATE, OR FOR ANY OTHER NONCHARITABLE

PURPOSE; (III) TO MAINTAIN RECORDS OF THE GRANTEE'S RECEIPTS AND

EXPENDITURES AND MAKE ITS BOOKS AND RECORDS AVAILABLE FOR REVIEW BY PEW

AT REASONABLE TIMES; (IV) TO SUBMIT COMPLETE REPORTS, AT LEAST ONE PER

YEAR, ON THE EXPENDITURE OF GRANT FUNDS AND PROGRESS TOWARD ACCOMPLISHING

THE PURPOSES OF THE GRANT; (V) TO ALLOW PEW, AT PEW'S DISCRETION AND

EXPENSE, TO CONDUCT EVALUATIONS AND AUDITS OF THE GRANTEE'S OPERATIONS,

RECORDS, AND USE OF GRANT FUNDS; AND (VI) TO REPAY ANY PORTION OF THE

GRANT THAT IS NOT USED FOR THE CHARITABLE PURPOSE OF THE GRANT. PEW ALSO

Schedule I (Form 990) (2018)

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
2					
3					
4					
5					
6					
7					
art IV Supplemental Information information.	n. Provide the information re	equired in Part I,	line 2, Part III, o	column (b); and any c	other additional

PROMOTE OR ENGAGE IN VIOLENCE OR TERRORISM AND SHALL AT ALL TIMES COMPLY

WITH THE RELEVANT LAWS PROHIBITING TRANSACTIONS WITH INDIVIDUALS AND

ORGANIZATIONS ASSOCIATED WITH TERRORISM. THIRD, IN ACCORDANCE WITH THE

TERMS OF THE GRANT, PEW'S GRANTEES MUST SUBMIT NARRATIVE AND FINANCIAL

REPORTS AT LEAST ONCE PER YEAR, AND A FINAL REPORT AT THE END OF THE

GRANT TERM, DESCRIBING HOW THE GRANT FUNDS WERE SPENT AND WHAT WAS

ACCOMPLISHED AND PROVIDING A REASONABLY DETAILED ACCOUNT OF THE

ACTIVITIES CONDUCTED IN FURTHERANCE OF THE AGREED-UPON CHARITABLE

OBJECTIVES. PEW MAY ALSO EXERCISE OVERSIGHT OVER THE GRANTEE THROUGH

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
2					
3					
4					
5					
6					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

OTHER MEANS DESIGNED TO ENSURE ALL GRANT FUNDS ARE USED APPROPRIATELY,

SUCH AS IN-PERSON SITE VISITS, MONITORING, AND EVALUATION.

PEW MAKES VARIOUS MATCHING GIFTS THROUGHOUT THE YEAR. MATCHING GIFTS TO

ORGANIZATIONS IN EXCESS OF \$5,000 ARE REPORTED ON SCHEDULE I, PART II.

MATCHING GIFTS ARE ADMINISTERED BY A THIRD PARTY THAT ENSURES GIFTS ARE

MADE ONLY TO SECTION 501(C)(3) ORGANIZATIONS (EXCEPT FOR PRIVATE

NONOPERATING FOUNDATIONS). PEW DOES NOT REQUIRE RECIPIENTS OF MATCHING

GIFTS TO REPORT ON THE USE OF THESE FUNDS.

JSA

Page 2

	EDULE J	Compen	sa	tion Information	L	OMB No	. 1545-(0047
(Fori	m 990)			, Trustees, Key Employees, and Highest		ରାଜ	10	
				sated Employees swered "Yes" on Form 990, Part IV, line 2	3.)
	nent of the Treasury	· · · · • •	Attac	ch to Form 990.		Open		
	Revenue Service of the organization	Go to www.irs.gov/Forms	990 fC	or instructions and the latest information.	Employer identifica		pectic	n
	0	TABLE TRUSTS			56-23071			
Part		is Regarding Compensation			50 25071	-17		
T art	Quoonon						Yes	No
1a		propriate box(es) if the organization pro Section A, line 1a. Complete Part III to j				rm		
	X First-cla	ss or charter travel		Housing allowance or residence for	personal use			
	Travel fo	or companions		Payments for business use of persor				
	Tax inde	emnification and gross-up payments		Health or social club dues or initiation	n fees			
	Discretio	onary spending account	Х	Personal services (such as maid, cha	auffeur, chef)			
b	or reimburse	boxes on line 1a are checked, did th ment or provision of all of the ex	pens	ses described above? If "No," com	plete Part III	ent to 1b	x	
2		anization require substantiation prior				-		
-	•	stees, and officers, including the CEC		.	•			
						. 2	X	
3	organization's	n, if any, of the following the filing organ CEO/Executive Director. Check all that ization to establish compensation of the	at ap	ply. Do not check any boxes for metho	ds used by a			
		isation committee	X	Written employment contract				
	· · ·	dent compensation consultant	X	Compensation survey or study				
	· · ·	00 of other organizations	Х	Approval by the board or compensa	tion committee			
4		ar, did any person listed on Form 990, or a related organization:	Part	VII, Section A, line 1a, with respect to	the filing			
а	•	verance payment or change-of-control pa	ayme	ent?		. 4a		Х
b	Participate in,	or receive payment from, a suppleme	ntal	nonqualified retirement plan?		. 4b	X	
С	Participate in	, or receive payment from, an equity-ba	sed	compensation arrangement?		. 40		Х
	If "Yes" to an	y of lines 4a-c, list the persons and pr	rovid	e the applicable amounts for each it	em in Part III.			
	-	501(c)(3), 501(c)(4), and 501(c)(29) or	-	-				
5		isted on Form 990, Part VII, Section A,	line	1a, did the organization pay or accrue	any			
_	•	n contingent on the revenues of:				5.		X
a k							-	X
b	•	rganization? e 5a or 5b, describe in Part III.	• •			. 5b		
6		isted on Form 990, Part VII, Section A,	line	1a did the organization pay or accrue	anv			
5		n contingent on the net earnings of:	mic	ra, and the organization pay of about				
а	•	ion?				. 6a		X
b	-	rganization?					-	Х
		e 6a or 6b, describe in Part III.	-					
7		listed on Form 990, Part VII, Sectio described on lines 5 and 6? If "Yes," do						x
8		ounts reported on Form 990, Part VII,				· +	-	
5	-	contract exception described in I	-	-		be		
			-					Х
9		ine 8, did the organization also foll						
		ection 53.4958-6(c)?						

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

Schedule J (Form 990) 2018

Schedule J (Form 990) 2018

Page **2**

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown o	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
REBECCA W. RIMEL	(i)	952,450.	0.	258,253.	33,000.	23,720.	1,267,423.	0.
1 PRESIDENT & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
R. JAMES G. MCMILLAN	(i)	390,280.	0.	26,209.	33,000.	8,978.	458,467.	0.
2 ^{SVP, GENERAL COUNSEL/CORP SEC}	(ii)	0.	0.	0.	0.	0.	0.	0.
LINDA BARTLETT	(i)	450,665.	0.	28,504.	33,000.	31,033.	543,202.	0.
3 ^{SVP, CFO & TREASURER}	(ii)	0.	0.	0.	0.	0.	0.	0.
SUSAN URAHN	(i)	618,498.	0.	37,026.	33,000.	13,472.	701,996.	0.
EVP, CHIEF PROGRAM OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
JANICE BOGASH	(i)	435,869.	0.	28,004.	33,000.	25,311.	522,184.	0.
5 ^{SVP, CHIEF ADMIN OFFICER}	(ii)	0.	0.	0.	0.	0.	0.	0.
SALLY A. O'BRIEN	(i)	423,303.	0.	25,692.	33,000.	13,039.	495,034.	0.
SVP INSTITUTIONAL PARTNERSHIPS	(ii)	0.	0.	0.	0.	0.	0.	0.
MELISSA SKOLFIELD	(i)	383,710.	0.	28,128.	33,000.	26,212.	471,050.	0.
7 ^{SVP, COMMUNICATIONS}	(ii)	0.	0.	0.	0.	0.	0.	0.
JOSHUA S. REICHERT	(i)	481,923.	0.	28,537.	33,000.	30,733.	574,193.	0.
8 EVP, STRATEGY, DEV & PROG SUP	(ii)	0.	0.	0.	0.	0.	0.	0.
TAMERA LUZZATTO	(i)	355,055.	0.	28,329.	33,000.	5,499.	421,883.	0.
9 SVP, GOVERNMENT RELATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
MICHAEL THOMPSON	(i)	283,832.	0.	29,968.	33,000.	36,494.	383,294.	0.
10 ^{VP & HEAD OF GOVT. PERFORMANCE}	(ii)	0.	0.	0.	0.	0.	0.	0.
THOMAS DILLON	(i)	296,897.	0.	7,241.	33,000.	36,431.	373,569.	0.
11 ^{VP & HEAD OF ENVIRONMENT}	(ii)	0.	0.	0.	0.	0.	0.	0.
THOMAS WATHEN	(i)	259,903.	0.	26,915.	33,000.	32,260.	352,078.	0.
12 ^{VP, ENVIRONMENT}	(ii)	0.	0.	0.	0.	0.	0.	0.
SARAH SENNO	(i)	187,036.	0.	20,257.	25,494.	28,940.	261,727.	0.
13 ^{VP, FINANCE & DEPUTY TREASURER}	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
14	(ii)							
	(i)							
15	(ii)							
	(i)							
16	(ii)							

Schedule J (Form 990) 2018

JSA

Page 3

Schedule J (Form 990) 2018

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

FORM 990, SCHEDULE J, PART I, LINE 1A

AS PART OF HER EMPLOYMENT CONTRACT NEGOTIATED WITH THE BOARD OF

DIRECTORS, THE CEO WAS REIMBURSED \$1,003 FOR A CAR SERVICE. THIS BENEFIT

WAS TREATED AS TAXABLE COMPENSATION TO THE CEO AND INCLUDED IN HER FORM

W-2.

AS A GENERAL MATTER, PEW DOES NOT PROVIDE FIRST-CLASS TRAVEL FOR ITS DIRECTORS, OFFICERS, OR STAFF. IN THE CASE OF AIR TRAVEL FOR PEW BUSINESS, PEW PROVIDES COACH CLASS ACCOMMODATIONS IF THE TOTAL FLIGHT TIME OF ALL TRAVEL SEGMENTS IS LESS THAN SIX HOURS. IF TOTAL FLIGHT TIME EXCEEDS SIX HOURS FOR AIR TRAVEL FOR PEW BUSINESS, PEW PROVIDES ITS BOARD MEMBERS WITH INTERMEDIATE/BUSINESS CLASS FLIGHT ACCOMMODATIONS. IF BUSINESS CLASS IS NOT AVAILABLE FOR ANY SEGMENT OF A TRIP FOR WHICH TOTAL FLIGHT TIME EXCEEDS SIX HOURS, PEW PROVIDES FIRST CLASS ACCOMMODATIONS AND DOES NOT TREAT THE COST OF THE UPGRADE AS TAXABLE INCOME. DURING THE CALENDAR YEAR, TWO DIRECTORS WERE PROVIDED WITH FIRST CLASS AIR TRAVEL FOR PEW BUSINESS TRIPS BECAUSE BUSINESS CLASS ACCOMMODATIONS WERE NOT AVAILABLE. Schedule J (Form 990) 2018

Page 3

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

FORM 990, SCHEDULE J, PART I, LINE 4B AND PART II

PEW'S COMPENSATION COMMITTEE PREVIOUSLY ESTABLISHED A NONQUALIFIED

DEFERRED COMPENSATION PLAN UNDER SECTION 457(F) OF THE INTERNAL REVENUE

CODE FOR THE CEO, WHO VESTED IN THE PLAN BENEFIT IN 2012. THE ANNUAL

ACCRUAL (\$224,850) WAS INCLUDED ON HER 2018 FORM W-2.

PEW CHARITABLE TRUSTS

SCHEDULE K

(Form 990)

Supplemental Information on Tax-Exempt Bonds

Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

► Attach to Form 990.

Department of the Treasury Internal Revenue Service

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

Name of the organization

THE PEW CHARITABLE TRUSTS

Part I Bond Issues												
(a) Issuer name		(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
							Yes	No	Yes	No	Yes	No
A DISTRICT OF COLUMBIA		536001131	2548392M4	03/26/2008	180,000,000.	SEE PART VI		х		х		x
В												
с												
D												

U	
Part II	Proceeds

	A			В	c	;	C)
1 Amount of bonds retired								
2 Amount of bonds legally defeased								
3 Total proceeds of issue	180,43	36,751.						
4 Gross proceeds in reserve funds								
5 Capitalized interest from proceeds								
6 Proceeds in refunding escrows								
7 Issuance costs from proceeds								
8 Credit enhancement from proceeds								
9 Working capital expenditures from proceeds	9	00,000.						
10 Capital expenditures from proceeds	179,53	36,751.						
11 Other spent proceeds								
12 Other unspent proceeds								
13 Year of substantial completion	2009)						
	Yes	No	Yes	No	Yes	No	Yes	No
14 Were the bonds issued as part of a refunding issue of tax-exempt bonds (or,								1
if issued prior to 2018, a current refunding issue)?		Х						l
15 Were the bonds issued as part of a refunding issue of taxable bonds (or, if								1
issued prior to 2018, an advance refunding issue)?		Х						l
16 Has the final allocation of proceeds been made?		Х						l
17 Does the organization maintain adequate books and records to support the								
final allocation of proceeds?		Х						l

0166181

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

Schedule K (Form 990) 2018

JSA



Employer identification number

56-2307147

THE PEW CHARITABLE TRUSTS

Part	PE PE	Page Z PEW CHARITABLE TRUSTS								
			Α		В	(2	I	D	
	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?	Yes	No X	Yes	No	Yes	No	Yes	No	
	Are there any lease arrangements that may result in private business use of bond-financed property?	x								
	Are there any management or service contracts that may result in private business use of bond-financed property?	x								
(If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?	x								
I	Are there any research agreements that may result in private business use of bond-financed property?		X							
(If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?									
0	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		%		%		%		%	
1	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		%		%		%		%	
6	Total of lines 4 and 5		%		%		%		%	
7	Does the bond issue meet the private security or payment test?		Х							
	Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		x							
	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of		%		%		%		9	
	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?									
I	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?		x							
Part	V Arbitrage	1							L	
		Α			B	C	2		D	
	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?	Yes	No X	Yes	No	Yes	No	Yes	No	
	If "No" to line 1, did the following apply?									
а	Rebate not due yet?									
	Exception to rebate?	Х								
C	No rebate due?									
I	If "Yes" to line 2c, provide in Part VI the date the rebate computation was									
	performed									
3	Is the bond issue a variable rate issue?	Х								

Schedule K (Form 990) 2018

JSA

Page **2**

56-2307147

THE PEW CHARITABLE TRUSTS

		•		_		^		、 、
		A		B		C		-
Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	N
hedge with respect to the bond issue?		X						
Name of provider								
Term of hedge		1		1		1		
Was the hedge superintegrated?								
Was the hedge terminated?								
Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х						
Name of provider								
Term of GIC								
Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
Were any gross proceeds invested beyond an available temporary period?		Х						
Has the organization established written procedures to monitor the								
requirements of section 148?		Х						
V Procedures To Undertake Corrective Action								
		Α		В	(с	[)
Has the organization established written procedures to ensure that violations	Yes	No	Yes	No	Yes	No	Yes	N
of federal tax requirements are timely identified and corrected through the								
voluntary closing agreement program if self-remediation isn't available under								
applicable regulations? VI Supplemental Information. Provide additional information for responses		x						

THE PEW CHARITABLE TRUSTS

56-2307147

Page 4

Schedule K (Form 990) 2018

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions) (Continued)

FORM 990, SCHEDULE K, PART I, LINE A AND PART II, LINE 3

THE BONDS WERE ISSUED TO PURCHASE AND RENOVATE THE BUILDING AT 901 E

STREET. TOTAL PROCEEDS OF ISSUE REFLECT THE ISSUE PRICE OF \$180,000,000

PLUS \$436,751 OF ACCRUED INTEREST.

FORM 990, SCHEDULE K, PART II, LINE 16 AND 17

PEW, AS ALLOWED BY THE IRS, CHOSE TO NOT FILE A FINAL ALLOCATION.

ALTHOUGH A FINAL ALLOCATION WAS NEVER FILED, PEW STILL ALLOCATED THE

PROJECT COSTS IN A MANNER CONSISTENT WITH THE FINAL ALLOCATION GUIDELINES

AND MAINTAINS BOOKS AND RECORDS TO SUPPORT HOW THE FUNDS WERE USED.

FORM 990, SCHEDULE K, PART III, LINE 3A DURING THE TAX YEAR, THERE WERE MANAGEMENT CONTRACTS IN EFFECT FOR THE FINANCED PROPERTY. THESE CONTRACTS MET, AND CONTINUE TO MEET, THE REQUIREMENTS SET FORTH IN THE APPLICABLE REVENUE PROCEDURE. ACCORDINGLY, THE MANAGEMENT CONTRACTS DID NOT AND WILL NOT RESULT IN ANY PRIVATE BUSINESS USE.

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.



 Department of the Treasury Internal Revenue Service
 Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

 Name of the organization
 Employer ide

 THE PEW CHARITABLE TRUSTS
 56-230

Employer identification number 56-2307147

FORM 990, PART IV, LINES 12A AND 12B THE PEW CHARITABLE TRUSTS AND ITS SUBSIDIARY, PEW RESEARCH CENTER (TOGETHER "THE ORGANIZATION") MEET THE U.S. GENERALLY ACCEPTED ACCOUNTING PRINCIPLES REQUIREMENTS FOR CONSOLIDATION. THE ORGANIZATION RECEIVED AN UNQUALIFIED AUDIT OPINION ON ITS CONSOLIDATED FINANCIAL STATEMENTS FOR

THE FISCAL YEAR.

FORM 990, PART VI, SECTION A, LINE 2

A FAMILY RELATIONSHIP EXISTS BETWEEN SANDY FORD PEW AND R. ANDERSON PEW. A FAMILY RELATIONSHIP EXISTS BETWEEN JAMES S. PEW, MARY CATHARINE PEW, M.D., DORIS PEW SCOTT, AND J. HOWARD PEW II. A BUSINESS RELATIONSHIP EXISTS BETWEEN SUSAN W. CATHERWOOD, ARISTIDES W. GEORGANTAS, J. HOWARD PEW II, JOSEPH N. PEW V, R. ANDERSON PEW, SANDY FORD PEW, AND JAMES S. PEW. A BUSINESS RELATIONSHIP EXISTS BETWEEN REBECCA. W. RIMEL AND HENRY P. BECTON, JR. A BUSINESS RELATIONSHIP EXISTS BETWEEN REBECCA. W. RIMEL AND CHRISTOPHER JONES.

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

PEW'S FORM 990 IS THOROUGHLY PREPARED AND RIGOROUSLY REVIEWED BEFORE IT IS FILED WITH THE IRS. AFTER THE FORM 990 IS INTERNALLY PREPARED BY FINANCE DEPARTMENT STAFF MEMBERS, THE RETURN IS REVIEWED BY SENIOR MANAGEMENT, INCLUDING THE SENIOR VICE PRESIDENT, CHIEF FINANCIAL OFFICER AND TREASURER; SENIOR VICE PRESIDENT, GENERAL COUNSEL AND CORPORATE SECRETARY; AND THE PRESIDENT AND CEO; AS WELL AS OUTSIDE INDEPENDENT

Schedule O (Form 990 or 990-EZ) 2018					
Name of the organization	Employer identification number				
THE PEW CHARITABLE TRUSTS	56-2307147				

CERTIFIED PUBLIC ACCOUNTANTS AND OUTSIDE LEGAL COUNSEL. FOLLOWING THIS REVIEW, THE DRAFT FORM 990 IS PROVIDED TO THE AUDIT COMMITTEE OF THE PEW BOARD OF DIRECTORS FOR A PRE-FILING REVIEW. A TELEPHONIC CONFERENCE CALL IS THEN HELD WITH THE AUDIT COMMITTEE TO DISCUSS THE DRAFT FORM 990 AND SIGNIFICANT CHANGES OR DIFFERENCES FROM THE PRIOR YEAR'S FORM 990, AND TO RESPOND TO QUESTIONS FROM THE AUDIT COMMITTEE REGARDING THE RETURN. PARTICIPATING IN THE CALL WITH THE AUDIT COMMITTEE ARE: THE INDEPENDENT CERTIFIED PUBLIC ACCOUNTANTS; THE SENIOR VICE PRESIDENT, CHIEF FINANCIAL OFFICER AND TREASURER; THE SENIOR VICE PRESIDENT, GENERAL COUNSEL AND CORPORATE SECRETARY; THE PRESIDENT AND CEO; AND OTHER MEMBERS OF THE FINANCE DEPARTMENT. AFTER THE FORM 990 HAS BEEN REVIEWED BY AND DISCUSSED WITH THE AUDIT COMMITTEE, AND THEIR FEEDBACK HAS BEEN INCORPORATED, THE RETURN IS DISTRIBUTED TO ALL MEMBERS OF THE PEW BOARD OF DIRECTORS FOR REVIEW BEFORE THE RETURN IS FILED WITH THE IRS. BOARD MEMBERS ARE ENCOURAGED TO CONTACT THE SENIOR VICE PRESIDENT, CHIEF FINANCIAL OFFICER AND TREASURER WITH ANY QUESTIONS.

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

PEW REGULARLY AND CONSISTENTLY MONITORS AND ENFORCES COMPLIANCE WITH ITS CONFLICT OF INTEREST POLICIES FOR OFFICERS, DIRECTORS, AND STAFF. ON AN ANNUAL BASIS, ALL OFFICERS, DIRECTORS, AND EMPLOYEES CERTIFY THAT THEY HAVE READ AND WILL CONTINUE TO FOLLOW THE APPLICABLE CONFLICT OF INTEREST POLICY AND COMPLETE A FORM DISCLOSING THEIR POTENTIAL CONFLICTS. AS PART OF THIS PROCESS, ALL PEW EMPLOYEES ARE REQUIRED TO COMPLETE AN ANNUAL CONFLICT OF INTEREST DISCLOSURE. PEW'S BOARD AND OFFICER CONFLICT OF INTEREST POLICY REQUIRES THE FOLLOWING OF ALL DIRECTORS AND OFFICERS:

JSA

Schedule O (Form 990 or 990-EZ) 2018								
Name of the organization	Employer identification number							
THE PEW CHARITABLE TRUSTS	56-2307147							

(1)IMPARTIAL FULFILLMENT OF THEIR ROLES IN PEW'S AFFAIRS; (2)DISCLOSURE
OF POTENTIAL FINANCIAL OR OTHER CONFLICTS OF INTEREST INVOLVING PEW;
(3)REVIEW OF ALL AFFILIATIONS; AND (4)RECUSAL AND ABSTENTION IN ALL
SITUATIONS OF ACTUAL, POTENTIAL, OR PERCEIVED CONFLICT OF INTEREST. PEW'S
STAFF CONFLICT OF INTEREST POLICY REQUIRES THE FOLLOWING OF ALL
EMPLOYEES: (1)IMPARTIAL FULFILLMENT OF THEIR ROLES IN PEW'S AFFAIRS;
(2)AVOIDANCE OF IMPROPRIETY OR THE APPEARANCE OF IMPROPRIETY;
(3)DISCLOSURE OF POTENTIAL FINANCIAL OR OTHER CONFLICTS OF INTEREST
INVOLVING PEW; (4)REVIEW AND APPROVAL BY MANAGEMENT OF AFFILIATIONS WITH
OUTSIDE ORGANIZATIONS, WITH SUBSEQUENT BOARD REVIEW AS APPROPRIATE; AND
(5)RECUSAL AND ABSTENTION IN ALL SITUATIONS OF ACTUAL OR PERCEIVED
CONFLICT OF INTEREST. THESE AND OTHER REQUIREMENTS ARE MONITORED,
REVIEWED AND RESOLVED ON AN ONGOING BASIS PURSUANT TO THE APPLICABLE
CONFLICT OF INTEREST POLICY.

FORM 990, PART VI, SECTION B, LINES 15A AND 15B ANNUALLY, THE COMPENSATION COMMITTEE OF THE BOARD OF PEW ENGAGES AN INDEPENDENT COMPENSATION CONSULTANT TO CONDUCT A COMPENSATION ANALYSIS FOR THE ORGANIZATION'S OFFICERS AND KEY EMPLOYEES, AND A SEPARATE COMPENSATION ANALYSIS FOR THE ORGANIZATION'S CEO. AS PART OF THESE ANALYSES, THE INDEPENDENT COMPENSATION CONSULTANT IDENTIFIES, GATHERS, AND ANALYZES APPROPRIATE COMPARABLITY DATA UPON WHICH THE COMMITTEE AND THE FULL BOARD WILL RELY TO ASSESS THE REASONABLENESS OF THE TOTAL PROPOSED COMPENSATION (INCLUDING BENEFITS) OF THE OFFICERS, THE KEY EMPLOYEES, AND THE CEO. ONCE THE COMPENSATION ANALYSES ARE COMPLETE AND DOCUMENTED IN REPORTS, THE REPORTS ARE PROVIDED TO PEW'S BOARD FOR REVIEW

JSA

Page 2

Schedule O (Form 990 or 990-EZ) 2018					
Name of the organization	Employer identification number				
THE PEW CHARITABLE TRUSTS	56-2307147				

AND CONSIDERATION, TOGETHER WITH WRITTEN OPINIONS FROM THE COMPENSATION CONSULTANT THAT THE PROPOSED COMPENSATION ARRANGEMENTS FOR THE OFFICERS, KEY EMPLOYEES, AND CEO ARE "REASONABLE" WITHIN THE MEANING OF TREAS. REG. 53.4958-4(B)(1)(II)(A). WITH INPUT FROM THE COMPENSATION COMMITTEE, THE FULL BOARD MAKES ANNUAL DECISIONS WITH RESPECT TO COMPENSATION FOR OFFICERS AND KEY EMPLOYEES BASED UPON THE DATA IN THE RELEVANT REPORT AND THE OPINION OF THE COMPENSATION CONSULTANT THAT THE PROPOSED COMPENSATION IS REASONABLE. THESE DECISIONS, AND THE BASES FOR THESE DECISIONS, ARE CONTEMPORANEOUSLY DOCUMENTED IN THE MINUTES. THE BOARD ALSO MAKES ANNUAL DECISIONS REGARDING THE PROPOSED COMPENSATION INCREASE AND RESULTING TOTAL COMPENSATION FOR THE CEO BASED ON THE BOARD'S ASSESSMENT OF THE CEO'S PERFORMANCE, THE DATA IN THE CEO COMPENSATION REPORT, AND THE OPINION OF THE COMPENSATION CONSULTANT THAT THE PROPOSED CEO COMPENSATION IS REASONABLE. THE BOARD'S DECISION REGARDING THE CEO'S COMPENSATION, AND THE BASIS FOR ITS DECISION, ARE DOCUMENTED IN THE MINUTES. THE BOARD MEMBERS WHO VOTE ON COMPENSATION FOR OFFICERS, KEY EMPLOYEES, AND THE CEO DO NOT HAVE A CONFLICT OF INTEREST WITH RESPECT TO THESE COMPENSATION ARRANGEMENTS.

FORM 990, PART VI, SECTION C, LINES 18 AND 19 IN ACCORDANCE WITH TREAS. REG. 301.6104(D)-2, PEW'S FORM 1023 IS MADE AVAILABLE TO THE PUBLIC ON PEW'S WEBSITE, TOGETHER WITH COPIES OF PEW'S MOST RECENTLY-FILED FORMS 990 AND 990-T. PEW'S AUDITED FINANCIAL STATEMENTS AND STAFF CONFLICT OF INTEREST POLICY ARE ALSO AVAILABLE ON THE ORGANIZATION'S WEBSITE. THE ORGANIZATION DOES NOT NORMALLY MAKE ITS GOVERNING DOCUMENTS AVAILABLE TO THE PUBLIC. IN ACCORDANCE WITH TREAS.

JSA

REG. 301.6104(D)-1(A) AND IRS NOTICE 2007-45, COPIES OF PEW'S THREE MOST RECENT FORMS 990 AND 990-T ARE MADE AVAILABLE FOR INSPECTION BY THE PUBLIC DURING REGULAR BUSINESS HOURS AT PEW'S OFFICES IN PHILADELPHIA AND WASHINGTON, DC.

FORM 990, PART VII, SECTION A, LINE 1A SARAH SENNO, CURRENT VICE PRESIDENT, FINANCE AND DEPUTY TREASURER, SERVED AS INTERIM TREASURER DURING FEBRUARY AND MARCH 2016.

FORM 990, PART VIII, LINE 2A

AS PART OF ITS CHARITABLE MISSION, PEW RENTS CERTAIN OFFICE SPACE IN 901 E STREET, NW, WASHINGTON, DC TO AN ENTITY WHICH IS EXEMPT FROM FEDERAL INCOME TAX UNDER IRC SECTION 501(C)(3) AND HAS EXEMPT PURPOSES RELATED TO PEW'S MISSION. INCLUDED IN THE RENTAL AGREEMENT'S TERMS IS THE RIGHT TO USE THE BUILDING'S CONFERENCE CENTER SPACE AT NO ADDITIONAL CHARGE. PEW TREATS SUCH RENTS AS RELATED INCOME SINCE THE TENANT'S ACTIVITIES ARE SUBSTANTIALLY RELATED TO PEW'S EXEMPT PURPOSES. ACCORDINGLY, PEW HAS REPORTED SUCH RENTS ON THE FORM 990, PART VIII, LINE 2A, COLUMN (B). THE EXPENSES RELATED TO THE RENTAL ACTIVITY ARE INCLUDED IN VARIOUS LINE ITEMS IN PART IX, FUNCTIONAL EXPENSES.

FORM 990, PART VIII, LINE 2B

AS PART OF ITS CHARITABLE MISSION, PEW RENTS CERTAIN CONFERENCE CENTER SPACE IN 901 E STREET NW, WASHINGTON, DC TO ORGANIZATIONS THAT ARE EXEMPT FROM FEDERAL INCOME TAX UNDER IRC SECTION 501(C)(3) AND DO NOT RENT OFFICE SPACE FROM PEW. PEW TREATS SUCH REVENUE AS RELATED INCOME SINCE

Schedule O (Form 990 or 990-EZ) 2018

JSA

THE ACTIVITY IS SUBSTANTIALLY RELATED TO PEW'S EXEMPT PURPOSES. ACCORDINGLY, PEW HAS REPORTED SUCH INCOME ON THE FORM 990, PART VIII, LINE 2B, COLUMN (B). THE EXPENSES RELATED TO THE ACTIVITY ARE INCLUDED IN VARIOUS LINE ITEMS IN PART IX, FUNCTIONAL EXPENSES.

```
FORM 990, PART VIII, LINE 6D, COLUMN D
```

PEW LEASES CERTAIN SPACE AT 901 E STREET NW, WASHINGTON, DC TO AN ENTITY THAT IS NOT EXEMPT FROM FEDERAL INCOME TAXES UNDER IRC SECTION 501(C)(3). HOWEVER, LESS THAN 15 PERCENT OF THE BUILDING IS LEASED TO THIS TENANT. THEREFORE, AS ALLOWED UNDER IRC SECTION 512(B) AND TREAS. REG. 1.514(B)-1(B)(1)(II), THIS REVENUE, NET OF RELATED EXPENSES, IS EXCLUDED FROM UNRELATED BUSINESS INCOME, AND PEW HAS REPORTED THE NET RENTAL INCOME ON FORM 990, PART VIII, LINE 6D, COLUMN (D). IN ADDITION, PEW SUBLEASES SPACE TO AN ENTITY IN OFFICE SPACE THAT IT RENTS AT ANOTHER LOCATION. THE SPACE IS SUBLEASED AT PEW'S COST. INCLUDED IN THE SUBLEASE AGREEMENT TERMS IS THE TENANT'S RIGHT TO USE FURNISHINGS OWNED BY PEW. PEW CONSIDERS THE NET VALUE OF THE PERSONAL PROPERTY TO BE LESS THAN 10 PERCENT OF THE TOTAL RENTS UNDER THE LEASE. THEREFORE, AS ALLOWED UNDER IRC SECTION 512(B) AND TREAS. REG. 1.514(B)-1(B)(1)(II), THIS REVENUE, NET OF RELATED EXPENSES, IS EXCLUDED FROM UNRELATED BUSINESS INCOME, AND PEW HAS REPORTED THE NET RENTAL INCOME ON FORM 990, PART VIII, LINE 6D, COLUMN (D).

FORM 990, PART IX, LINE 11A

JSA

PEW HAS INCLUDED ON PART IX, LINE 11A, COLUMNS B AND C FEES PAID TO THE ORGANIZATION THAT PROVIDES STAFFING AND OTHER SERVICES FOR THE CONFERENCE

Employer identification number 56-2307147

CENTER AT 901 E STREET NW, WASHINGTON, DC AS WELL AS FEES PAID BY THAT ORGANIZATION ON BEHALF OF PEW (AS PEW'S AGENT) TO THE ORGANIZATION THAT PROVIDES CATERING SERVICES FOR THE CONFERENCE CENTER.

FORM 990, PART IX, LINES 18 AND 24B AS PART OF ITS PROGRAM SERVICES, PEW HOSTS MANY EDUCATIONAL CONFERENCES THAT ARE WIDELY ATTENDED BY MEMBERS OF THE GENERAL PUBLIC AND BY INTERESTED PARTIES, INCLUDING REPRESENTATIVES FROM GRANTEES, MISSION-ALIGNED NONPROFIT ORGANIZATIONS, AND GOVERNMENTAL BODIES. PERIODICALLY PEW PAYS FOR TRAVEL, LODGING, AND FOOD FOR CONFERENCE PARTICIPANTS, INCLUDING GOVERNMENT OFFICIALS. PEW HAS IMPLEMENTED ROBUST POLICIES AND PROCESSES TO ENSURE THAT EXPENSES PAID BY PEW THAT ARE ATTRIBUTABLE TO ATTENDEES, INCLUDING GOVERNMENT OFFICIALS, COMPLY WITH APPLICABLE GIFTS AND ETHICS LAWS AND THE IRS ACCOUNTABLE PLAN RULES.

FORM 990, PART XI, LINE 9 OTHER CHANGES IN NET ASSETS IS COMPRISED OF THE FOLLOWING: UNREALIZED FOREIGN EXCHANGE LOSS (18,255) CHANGE IN FAIR VALUE OF INTEREST RATE SWAPS (8,015,526) OTHER CHANGES IN POSTRETIREMENT BENEFITS (5,918,195) REVERSAL OF PRIOR YEAR GRANT EXPENSE 3,056,624 ------

TOTAL

JSA

(10, 895, 352)

Schedule O (Form 990 or 990-EZ) 2018		Page 2
Name of the organization	Employer identification number	
THE PEW CHARITABLE TRUSTS	56-2307147	

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES		ATTACHMENT 1	
DESCRIPTION	GRANTS	EXPENSES	REVENUE
901 E ST RENTAL REVENUE			381,396.
CONFERENCE CENTER REVENUE			14,300.
CONTRACT REVENUE			33,750.
TOTALS			429,446.

ATTACHMENT 2

FORM 990, PART V, LINE 4B - FOREIGN COUNTRIES

- AUSTRALIA
- BELGIUM
- UNITED KINGDOM

FRENCH POLYNESIA

CHILE

FORM 990, PART VI, LINE 17 - STATES

AL, AR, CA, CT,

FL,GA,HI,IL,KS,KY,ME,MD,MA,MI,

MN,MS,NH,NJ,NM,NY,NC,OK,OR,PA,

RI,SC,TN,UT,VA,WV,WI,

ATTACHMENT 3

JSA 8E1228 1.000 1211PT 700P 4/23/2020 6:41:20 PM V 18-8.2F Schedule O (Form 990 or 990-EZ) 2018

0166181

Schedule O (Form 990 or 990-EZ) 2018		Page 2
Name of the organization	Employer i	dentification number
THE PEW CHARITABLE TRUSTS	56-2	2307147
	ATTACHMI	ent 4
990, PART VII- COMPENSATION OF THE FIVE HIGHE	EST PAID IND. CONTRACTORS	
NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
M&R STRATEGIC SERVICES 1101 CONNECTICUT AVE NW WASHINGTON, DC 20036	CONSULTING	2,455,183.
GRASSROOTS SOLUTIONS 861 EAST HENNEPIN AVE, SUITE 350 MINNEAPOLIS, MN 55414	CONSULTING	1,195,144.
COLLABORATIVE DRUG DISCOVERY, INC	SOFTWARE SERVICES	1,134,423.

1633 BAYSHORE HWY, SUITE 342

THE ECONOMIST GROUP LIMITED

BURLINGAME, CA 94010

UNITED KINGDOM E14 4QW

ARAMARK CORPORATION 2400 MARKET STREET PHILADELPHIA, PA 19103

20 CABOT SQUARE

LONDON

1,077,172.

876,924.

PROGRAM DEVELOPMENT

OFFICE SERVICES

OMB No. 1545-0047

Open to Public

Inspection

Employer identification number

56-2307147

8

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

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

Department of the Treasury Internal Revenue Service Name of the organization

THE PEW CHARITABLE TRUSTS

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
_(1)					
(0)					
_(2)					
(3)					
_(4)					
(5)					
(6)					

Part II

Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5 cont	g) 512(b)(13) trolled tity?
							Yes	No
(1) PEW RESEARCH CENTER	20-0881724							
1615 L STREET NW	WASHINGTON, DC 20036	RESEARCH	PA	501(C)(3)	7	PEW	Х	
(2) THE PEW MEMORIAL TRUST	23-6234669							
C/O GLENMEDE, 1650 MARKET ST	PHILADELPHIA, PA 19103	SUPPORT PEW	PA	501(C)(3)	12D-III-O	PEW	X	
(3) MARY ANDERSON TRUST	23-6234670							
C/O GLENMEDE, 1650 MARKET ST	PHILADELPHIA, PA 19103	SUPPORT PEW	PA	501(C)(3)	12D-III-O	PEW	X	
(4) J. HOWARD PEW FREEDOM TRUST	23-6234671							
C/O GLENMEDE, 1650 MARKET ST	PHILADELPHIA, PA 19103	SUPPORT PEW	PA	501(C)(3)	12D-III-O	PEW	X	
(5) J.N. PEW, JR. CHARITABLE TRUST	23-6299309							
C/O GLENMEDE, 1650 MARKET ST	PHILADELPHIA, PA 19103	SUPPORT PEW	PA	501(C)(3)	12D-III-O	PEW	X	
(6) THE KNOLLBROOK TRUST	23-6407577							
C/O GLENMEDE, 1650 MARKET ST	PHILADELPHIA, PA 19103	SUPPORT PEW	PA	501(C)(3)	12D-III-O	PEW	x	
(7) MEDICAL TRUST	23-2131641							<u> </u>
C/O GLENMEDE, 1650 MARKET ST	PHILADELPHIA, PA 19103	SUPPORT PEW	PA	501(C)(3)	12D-III-O	PEW	Х	

0166181

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

Schedule R (Form 990) 2018

OMB No. 1545-0047

Open to Public

Inspection

8

2

Employer identification number

56-2307147

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

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

Department of the Treasury Internal Revenue Service Name of the organization

THE PEW CHARITABLE TRUSTS

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

Part II

Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	conti	g) 512(b)(13) rolled ity?
						Yes	No
(1) MABEL PEW MYRIN TRUST 23-6234666							
C/O GLENMEDE, 1650 MARKET ST PHILADELPHIA, PA 19103	SUPPORT PEW	PA	501(C)(3)	12D-III-O	PEW	X	ĺ
(2)							
							ĺ
(3)							
							ĺ
(4)							
							ĺ
(5)							
							ĺ
(6)							
							ĺ
(7)							

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

Schedule R (Form 990) 2018

JSA

Page **2**

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

		Janizador		aranoromp daring an	o lax your.							
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512 - 514)	(f) Share of total income	(g) Share of end-of- year assets	Disprop	h) portionate ations?	(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man	j) eral or aging ther?	(k) Percentage ownership
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13 controlled entity?
(1)								Yes No
(2)								
(3)								
(4)								

Schedule R (Form 990) 2018

THE	PEW	CHARITABLE	TRUSTS
-----	-----	------------	--------

art V	Transactions With Related Organizations. Complete if the organization answ					
	omplete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Y	/es
	ring the tax year, did the organization engage in any of the following transactions with one					
	ceipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				a	37
	t, grant, or capital contribution to related organization(s)			· · · · · ⊢	b	X X
	t, grant, or capital contribution from related organization(s)			· · · ·	C	
d Loa	ans or loan guarantees to or for related organization(s)			· · · · · ⊢	d	-+
e Loa	ans or loan guarantees by related organization(s)				e	
f Divi	idends from related organization(s)			1	If	
g Sale	e of assets to related organization(s)			1	g	
	chase of assets from related organization(s)				h	
i Exc	change of assets with related organization(s).				1i	
j Lea	ase of facilities, equipment, or other assets to related organization(s)				IJ	_
k lea	ase of facilities, equipment, or other assets from related organization(s)			1	k	
	formance of services or membership or fundraising solicitations for related organization(s)				11	Х
	formance of services or membership or fundraising solicitations by related organization(s).			· · · · · ⊢	m	
n Sha	aring of facilities, equipment, mailing lists, or other assets with related organization(s)			1	n	Х
	aring of paid employees with related organization(s)					Х
• • • • •						
p Reir	mbursement paid to related organization(s) for expenses.			1	p	Х
-	mbursement paid by related organization(s) for expenses					Х
•						
r Oth	er transfer of cash or property to related organization(s)			1	r	Х
s Oth	her transfer of cash or property from related organization(s)		<u> </u>	1	s	
! If th	ne answer to any of the above is "Yes," see the instructions for information on who must ((a)	complete this line, including cov	vered relationships and trans	action thresh		
	(a) Name of related organization	Transaction	Amount involved	Method of o	deterr	
		type (a-s)		amount	involv	/ed
) PEI	W RESEARCH CENTER	в	44,318,352.	FAIR VA	LUE	
THI	E PEW MEMORIAL TRUST	С	185,900,895.	FAIR VA	LUE	I
MAI	RY ANDERSON TRUST	с	2,559,241.	FAIR VA	LUE	
J.	HOWARD PEW FREEDOM TRUST	С	38,204,263.	FAIR VA	LUE	
) THI	E KNOLLBROOK TRUST	С	461,105.	FAIR VA	LUE	1
) MEI	DICAL TRUST	С	11,359,621.	FAIR VA	LUE	
<u>,</u>		I	Sc	hedule R (For	rm 99	90
1.000			50		111 3	,

81

56-2307147

Page 3

THE	PEW	CHARITABLE	TRUSTS
-----	-----	------------	--------

Part	V Transactions With Related Organizations. Complete if the organization answere	d "Yes" on Form 990, Par	t IV, line 34, 35b, or 36.		
Note	e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Yes No
1	During the tax year, did the organization engage in any of the following transactions with one or r	nore related organizations lis	ted in Parts II-IV?		
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity.			1a	1
	Gift, grant, or capital contribution to related organization(s)				
	Gift, grant, or capital contribution from related organization(s)				
	Loans or loan guarantees to or for related organization(s)				
е	Loans or loan guarantees by related organization(s)			1e)
				44	
t	Dividends from related organization(s)			1f	
	Sale of assets to related organization(s)				
	Purchase of assets from related organization(s)			· · · · · ⊢	
	Exchange of assets with related organization(s)			· · · · · -	
J	Lease of facilities, equipment, or other assets to related organization(s)				
k	Lease of facilities, equipment, or other assets from related organization(s)			16	(
	Performance of services or membership or fundraising solicitations for related organization(s)			· · · · · -	
	Performance of services or membership or fundraising solicitations by related organization(s)				
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				
	Sharing of paid employees with related organization(s)				
•					
p	Reimbursement paid to related organization(s) for expenses.			1p	
	Reimbursement paid by related organization(s) for expenses				
•					
r	Other transfer of cash or property to related organization(s)			1r	
s	Other transfer of cash or property from related organization(s).			1s	5
2	If the answer to any of the above is "Yes," see the instructions for information on who must comp	plete this line, including cove	red relationships and trans	action thresho	lds.
	(a) Name of related organization	(b) Transaction	(c) Amount involved	(d) Method of de	
	Name of related organization	type (a-s)	Amount involved	amount ir	
			22 406 106		
(1)	MABEL PEW MYRIN TRUST	C	23,496,106.	FAIR VAL	UE
(2)	J.N. PEW, JR. CHARITABLE TRUST	С	18,399,917.	FAIR VAL	IIF
(2)	U.N. FEW, UK. CHARTIABLE IRUST		10,300,017.	FAIR VAL	
(3)	PEW RESEARCH CENTER	L, N, O		NO CHARG	F
(3)					
(4)	PEW RESEARCH CENTER	Q	6,263,551.	FAIR VAL	UE
()		~	-,,		
(5)	PEW RESEARCH CENTER	R	3,235,406.	FAIR VAL	UE
x-7			· ·	1	
(6)					
JSA			Sc	hedule R (Forr	n 990) 2018
00 1 000					

Page 3

Page 4

Schedule R (Form 990) 2018

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(state or foreign in country) unre fr		income (related, section tota unrelated, excluded 501(c)(3) from tax under organizations?			(1) Share of total income				(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	partner?		(k) Percentage ownership
		sections 512-514)	Yes	No			Yes	No		Yes	No	<u> </u>
_												
							_					
												<u> </u>
												<u> </u>
												<u> </u>
	Primary activity	Primary activity Legal domicile (state or foreign country)	Primary activity Legal domicile (state or foreign country) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Primary activity Legal domicile (state or foreign country) Predominant income (related, sections 512-514) Are all sec 501 Yes	Primary activity Legal domicile (state or foreign country) Predominant income (related, unrelated, excluded from tax under sections 512-514) Are all partners section 501(c)(3) organizations?	Primary activity Legal domicile (state or foreign country) Predominant income (related, unrelated, excluded from tax under sections 512-514) Are all patners sections 7 Yes Share of total income	Primary activity Legal domicile (state or foreign country) Predominant income (related, unrelated, excluded from tax under sections 512-514) Are all partners section form tax under sections Share of total income Share of end-of-year assets	Primary activity Legal domicile (state or foreign country) Predominant income (related, unrelated, excluded from tax under sections 512-514) Are all partners section 501(c)(3) organizations? Share of total income Share of end-of-year assets Disprogration alloc	Primary activity Legal domicile (state or foreign country) Predominant income (related, unrelated, excluded from tax under sections 512-514) Are all partners sections? Share of total income Share of end-of-year assets Disproportionate allocations?	Primary activity Legal domicile (state or foreign country) Predominant income (related, unrelated, excluded from tax under sections 512-514) Are all partners section 501(c)(3) organizations? Share of total income Disproportionate allocations? Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	Primary activity Legal domicile (state or foreign country) Predominant income (related, vortilated, excluded from tax under sections 512-514) Areal partners sections 501(c)(3) organizations? Share of total income total income Share of end-of-year assets Disproportional allocations? Code V - UBI amount in box 0 of Schedule K-1 (Form 1065) Gene may appre- total income	Primary activity Legal dominate (state or foreign country) Predominant income (related, country) Are all patients section sections 512-514) Share of total income Share of total income Share of end-of-year assets Disproportionate allocations? Code V - UBI allocations? General or managing patient? - <

Schedule R (Form 990) 2018

JSA

Schedule R (Form 990) 2018	Page 5
Part VII Supplemental Information Provide additional information for responses to questions on Schedule R. See instructions.	
FORM 990, SCHEDULE R, PART V, LINE 2	
PEW EMPLOYEES PROVIDE ADMINISTRATIVE SUPPORT SERVICES, INCLUDING	
FUNDRAISING, ACCOUNTING, HUMAN RESOURCES, FACILITIES MANAGEMENT, AND	

TECHNOLOGY SERVICES TO PEW RESEARCH CENTER AT NO CHARGE.

Form 9	90-т	Ex	empt Organiz (and pr			siness Inc der section			rn	OMB No. 1545-0687
		For caler	dar year 2018 or other ta	ax year begin	ning	07/01,2018	, and endi	ng06/30,	2019.	୭12
Department	of the Treasury		► Go to www.irs.gov/Form990T for instructions and the latest information.							
Internal Reve		► Do	► Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).							
	Check box if ddress changed		Name of organization (Check bo	ox if nar	me changed and see	e instruction	ıs.)		oyer identification number oyees' trust, see instructions.)
						ma			(2pre	
	under section	Print	THE PEW CHAR						56-2	307147
408((C)(3)	or	Number, street, and toon	II OF SUILE HO. I	Ta P.O	. box, see instruction	15.			ated business activity code
408		Туре	2005 MARKET	STREET,	SUI	TE 2800				istructions.)
529(City or town, state or pro				code		-	
	lue of all assets		PHILADELPHIA			0 1			8129	30
at end of	f year	F Gro	up exemption number (See instruct	ions.)	•			1	
129	6392214.	G Che	ck organization type	▶ X 501	(c) co	rporation	501(c) trust	401(a)	trust Other trust
			nization's unrelated trad			▶ <u>1</u>		Describ	e the only	(or first) unrelated
trade o	or business her	e ÞUNR	ELATED GARAGE	REVENUE	2	If	only one,	complete Parts	I-V. If more	e than one, describe the
first in	the blank spa	ce at the	end of the previous se	entence, cor	nplete	Parts I and II, co	mplete a S	Schedule M for ea	ach addition	nal
	or business, the	· · ·								
-			corporation a subsidiar	-	-		ubsidiary	controlled group?		. ▶ Yes X No
	,		identifying number of th	he parent co	rporatio	on. 🕨				
			NDA BARTLETT			(1) (1)	-	ne number > 20		
			or Business Incom	e	1	(A) Incor	ne	(B) Expe	nses	(C) Net
	oss receipts or s		832,850.	b		0.27	2,850.			
	s returns and allowa			c Balance ►		0.52	.,050.			
	-		ule A, line 7)		2 3	833	2,850.			832,850.
			2 from line 1c		3 4a	0.52	.,050.			052,050.
			ttach Schedule D) Part II, line 17) (attach For		4a 4b					
	• • • •		rusts		40 4c					
			an S corporation (attach stater		5					
					6					
			come (Schedule E)		7					
			nts from a controlled organizati		8					
			1(c)(7), (9), or (17) organizatio	,	9					
10 Exp	ploited exempt	activity in	ncome (Schedule I)		10					
			ule J)		11					
			tions; attach schedule)		12					
<u>13 Tot</u>			ough 12				2,850.			832,850.
Part II			Taken Elsewhere	•				, ,	Except f	for contributions,
			be directly connect							
			directors, and trustees (
										64,588.
			see instructions)							426,077.
			la instructions for limit							420,077.
			See instructions for limit 4562)					132,939		
			on Schedule A and else					102770.	22b	132,939.
										102,7007.
			compensation plans							
			, Schedule I)							
			chedule J)							
			chedule)							474,390.
			s 14 through 28							1,097,994.
			le income before net							-265,144.
			g loss arising in tax ye							
			e income. Subtract line		30 .	<u></u> .	<u></u>	<u></u> .	32	-265,144.
			lotice, see instructions.					0166105		Form 990-T (2018)
0.	XUXENT TOUN	LA 5/1	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	'II¥ DM	17 1	8-8 4F		0166181		DACE

8803FN D04A 5/20/2020 1:33:03 PM V 18-8.4F PAGE 1

THE	PEW	CHARITABLE	TRUSTS

56-230714	17

-	990-T (2018)		Pa	age 2
Par	t III Total Unrelated Business Taxable Income			
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see			
	instructions).	33 -	265,1	44.
34	Amounts paid for disallowed fringes	34		
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see			
	instructions)	35		
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum			
	of lines 33 and 34	36 -	265,1	44.
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	37	1,0	00.
38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36,			
	enter the smaller of zero or line 36	38		0.
Par	t IV Tax Computation			
39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21)	39		
40	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on			
	the amount on line 38 from: Tax rate schedule or Schedule D (Form 1041).	40		
41	Proxy tax. See instructions	41		
42	Alternative minimum tax (trusts only).	42		
43	Tax on Noncompliant Facility Income. See instructions	43		
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies			
Par	t V Tax and Payments			
	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 45a			
	Other credits (see instructions).			
	General business credit. Attach Form 3800 (see instructions)			
	Credit for prior year minimum tax (attach Form 8801 or 8827).			
	Total credits. Add lines 45a through 45d	45e		
46	Subtract line 45e from line 44	46		
47	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)	47		
48	Total tax. Add lines 46 and 47 (see instructions)	48		0.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2.	49		
	Payments: A 2017 overpayment credited to 2018			
	2018 estimated tax payments			
c	Tax deposited with Form 8868. 50c			
	Foreign organizations: Tax paid or withheld at source (see instructions)			
	Backup withholding (see instructions)			
f	Credit for small employer health insurance premiums (attach Form 8941)			
	Other credits, adjustments, and payments: Form 2439			
9	Form 4136 Other Total ► 50g			
51	Total payments. Add lines 50a through 50g	51	35,0	00.
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached	52		
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	53		
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	54	35,0	00.
55	Enter the amount of line 54 you want: Credited to 2019 estimated tax	55	35,0	
	t VI Statements Regarding Certain Activities and Other Information (see instructions			
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature or		Yes	No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization ma			
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the	•		
	here ▶UK, AU, BE, PF, CL	, s	x	
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a forei	an truct?		Х
57	If "Yes," see instructions for other forms the organization may have to file.	gir trust:		
58	Enter the amount of tax-exempt interest received or accrued during the tax year > \$			
<u></u>	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the b	est of my knowledge	and belie	f, it is
Sig	true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.			
Her	IVIA IVIA	y the IRS discuss		
		h the preparer s		No No
	Print/Type preparer's name Preparer's signature Date	PTIN		
Paid	Check		532355	5
Prep		mployed P005 EIN► 36-605		-
Use		eno. 215-561-		
			90-T (2	20101
JSA		Found 3	JU-1 (2	-010)

8X2741 1.000 8803FN D04A 5/20/2020 1:33:03 PM V 18-8.4F

Form 990-T (2018)									I	Page 3
Schedule A - Cost of Go		iter methoc								
1 Inventory at beginning of y						ar	6			
2 Purchases					-	Id. Subtract line				
3 Cost of labor	3					ter here and in				
4a Additional section 263A co			Part I,	line	2		7			
(attach schedule)	4a		8 Do t	he	rules of	section 263A (v	vith re	espect to	Yes	No
b Other costs (attach schedu	le) 4b					or acquired for				
5 Total. Add lines 1 through			to the	orga	anization?	<u></u>				
Schedule C - Rent Income	e (From Real P	roperty an	nd Personal Prope	erty	Leased V	Vith Real Prope	rty)			
(see instructions)										
1. Description of property										
(1)										
(2)										
(3)										
(4)										
	2. Rent recei	ved or accrue	ed							
for personal property is more than 10% but not percentage of rent			v 1 1	d personal property (if the or personal property exceeds s based on profit or income) 3(a) Deductions directly connected with th in columns 2(a) and 2(b) (attach sched						ome
(1)										
(2)										
(3)										
(4)										
Total		Total								
(c) Total income. Add totals of conhere and on page 1, Part I, line 6	()	,				(b) Total deduction Enter here and or Part I, line 6, colu	n page 1			
Schedule E - Unrelated De			e instructions)							
		`	2. Gross income from	or	3. [Deductions directly con			e to	
1. Description of deb	ot-financed property		allocable to debt-finance	ed	(a) Straigh	debt-finance nt line depreciation		b) Other dedu	ctions	
			property			ch schedule)	``	(attach sched		
(1)										
(2)										
(3)										
(4)										
 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) 	5. Average adjust of or alloca debt-financed (attach sche	ble to property	6. Column 4 divided by column 5			income reportable n 2 x column 6)		Allocable ded Imn 6 x total o 3(a) and 3(b	f colum	
(1)				%						
(2)				%						
(3)				%						
(4)				%						
					Enter her Part I, lin	e and on page 1, ie 7, column (A).	Ente Part	r here and o t I, line 7, colu	n page umn (E	e 1, 3).
Totals						_				
Total dividends-received deduct	ions included in Co					<u> </u>				

Form 990-T (2018)

Form	990-T	(2018)
------	-------	--------

Schedule F-Interest, Ann	uities, Royalties	, and Rer	nts Fro	om Contro	lled Or	ganizati	i ons (see	e instructio	ons)		
				ntrolled Or							
1. Name of controlled organization	2. Employer identification number			ated income nstructions)		of specified ints made	included	f column 4 t in the contr ion's gross ir	olling	6. Deductions directly connected with income in column 5	
(1)											
(2)											
(3)											
(4)											
Nonexempt Controlled Organi	zations										
7. Taxable Income	8. Net unrelated in (loss) (see instruct			Total of specific ayments made		includ	rt of column ed in the co ation's gros	ntrolling		 Deductions directly innected with income in column 10 	
(1)											
(2)											
(3)											
(4)											
Totals Schedule G-Investment Ir	ncome of a Sec	tion 501(<u>(c)(7)</u>	(9). or (17) Orga	Enter Part I	columns 5 a here and on , line 8, colu	page 1, mn (A).	Ent	dd columns 6 and 11. ter here and on page 1, rt I, line 8, column (B).	
1. Description of income	2. Amount of			3. Deduc directly cor (attach sch	tions		4. Se	t-asides schedule)		5. Total deductions and set-asides (col. 3 plus col. 4)	
(1)											
(2)											
(3)											
(4)											
	Enter here and o Part I, line 9, co									Enter here and on page 1 Part I, line 9, column (B).	
Totals											
Schedule I-Exploited Exe	empt Activity Ind	come, Otł	her Th	an Advert	ising Ir	ncome (s	see instru	ictions)			
1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expen direct connected productio unrelat business ir	ly d with on of ed	from unrelat or business 2 minus col If a gain, co	ncome (loss) related trade ess (column 3). is column 3).		able to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).			
(1)											
(2)											
(3)											
(4)											
Totals	Enter here and on page 1, Part I, line 10, col. (A).	Enter here a page 1, P line 10, co	Part I,					1		Enter here and on page 1, Part II, line 26.	
Schedule J-Advertising In	Icome (see instru	uctions)									
Part I Income From Per			onsol	idated Bas	sis						
			5								
1. Name of periodical	2. Gross advertising income	3. Dire advertising		4. Adver gain or (los 2 minus co a gain, co cols. 5 thre	ss) (col. ol. 3). If mpute		culation ome	6. Read cos		7. Excess readership costs (column 6 minus column 5, but not more than column 4).	
(1)											
(2)											
(3)											
(4)											
Totals (carry to Part II, line (5))											

Form 990-T (2018)

Form 990-1 (2018)	INE PEW	CHARITABLE I	RUSIS		50-230	
Part II Income From Per 2 through 7 on a l			rate Basis (For e	each periodica	listed in Part II	, fill in columns
1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	 Advertising gain or (loss) (col. minus col. 3). If a gain, compute cols. 5 through 7. 	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals from Part I.						
	Enter here and on page 1, Part I, line 11, col (A).	Enter here and on page 1, Part I, line 11, col (B).				Enter here and on page 1, Part II, line 27.
Totals, Part II (lines 1-5)						
Schedule K - Compensatio	n of Officers, D	irectors, and Tr	ustees (see instr	uctions)		
1. Name		2	Title	3. Percent of time devoted to business	4. Compensation unrelated l	
(1)				%		
(2)				%		
(3)				%		
(4)				%		

Total. Enter here and on page 1, Part II, line 14 ►

Form **990-T** (2018)

ATTACHMENT 1

FORM 990T - PART II - LINE 28 - TOTAL OTHER DEDUCTIONS

MANAGEMENT COMPANY FEES	205,283.
MISCELLANEOUS EXPENSE	269,107.

PART	ΙI	-	LINE	28	-	OTHER	DEDUCTIONS	474,390.
------	----	---	------	----	---	-------	------------	----------

THE PEW CHARITABLE TRUSTS 56-2307147 6/30/2019

FORM 990-T, NET OPERATING LOSS (NOL) SCHEDULES

NOL GENERATED IN TAX YEARS BEGINNING PRIOR TO 1/1/18

						Ν	OL AVAILABLE
N		IOL UTILIZED IN	N	OL UTILIZED IN	FOR FUTURE		
TAX YEAR END	NOL GENERATED		PRIOR YEARS	С	URRENT YEAR		YEARS
6/30/2009	\$ (2,891,778)	\$	210,666	\$	-	\$	(2,681,112)
6/30/2010	(468,104)						(468,104)
6/30/2011	(82,982)						(82,982)
6/30/2012	(15,107)						(15,107)
6/30/2016	(68,777)						(68,777)
6/30/2017	(46,870)						(46,870)
6/30/2018	(90,460)						(90,460)
TOTAL AVAILAB	LE FOR FUTURE YEA		\$	(3,453,412)			

NOL GENERATED IN TAX YEARS BEGINNING ON OR AFTER 1/1/18

						NOL A	VAILABLE
		NO	L UTILIZED IN	NOL UTILIZEI) IN	FOR	FUTURE
TAX YEAR END	NOL GENERATED	P	RIOR YEARS	CURRENT YE	EAR	У	ZEARS
6/30/2019	\$ (265,144) \$	-	\$	-	\$	(265,144)
TOTAL AVAILAB	LE FOR FUTURE YE	ARS				\$	(265,144)

THESE NET OPERATING LOSS SCHEDULES REFLECT THE REPEAL OF INTERNAL REVENUE CODE (IRC) SECTION 512(A)(7), WHICH INCREASED UNRELATED BUSINESS TAXABLE INCOME BY AMOUNTS PAID OR INCURRED FOR QUALIFIED TRANSPORTATION. THE NOL CLAIMED ON THE PRIOR YEAR RETURN HAS BEEN RECAPTURED BY REDUCING THE REPORTED NOL UTILIZED IN PRIOR YEARS BY \$274,844 AND AN NOL OF \$90,460 THAT WOULD HAVE BEEN RECOGNIZED IN THE ABSENCE OF SECTION 512(A)(7) HAS BEEN CLAIMED FOR THE TAX YEAR ENDING 6/30/2019.

Form	4562	•	
	nent of the Treasury Revenue Service	(99)	

Name(s) shown on return

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 20 18 Attachment Sequence No. **179** Identifying number 56-2307147

THE	PEW	CHARITABLE	TRUSTS
Ducinana		to unbigh this forms relates	

	ess or activity to which this form relates								
-	ENERAL DEPRECIATIO								
Par	t I Election To Expense Note: If you have any				e you comp	lete Part I.			
1	Maximum amount (see instructions))						1	
2	Total cost of section 179 property	placed in service (see in	structions)					2	
	Threshold cost of section 179 prop							3	
4	Reduction in limitation. Subtract lin	ne 3 from line 2. If zero o	or less, enter -	0-				4	
5	Dollar limitation for tax year. Subtract line 4 fr separately, see instructions	rom line 1. If zero or less, enter	-0 If married filing					5	
6	(a) Description				usiness use only				
						_			-
	Listed property. Enter the amount f								-
	Total elected cost of section 179 p							8	
9	Tentative deduction. Enter the sma	ller of line 5 or line 8						9	
	Carryover of disallowed deduction							10	
	Business income limitation. Enter t				,			11	
	Section 179 expense deduction. A							12	
	Carryover of disallowed deduction				▶ 13				
	Don't use Part II or Part III below								
Par			•	•				e inst	ructions.)
	Special depreciation allowance								
	during the tax year. See instructions							14	
	Property subject to section 168(f)(1							15	
16	Other depreciation (including ACRS	5) <u></u>	<u></u>	<u>••••</u>	<u></u>			16	5,844
Par	t III MACRS Depreciation	(Don't include listed		ee instruc tion A	tions.)				
47	MACRS deductions for assets place	ad in convice in tax yes						17	
	MACRS deductions for assets plac If you are electing to group any								
	asset accounts, check here	•	-	•			a		
		ts Placed in Service					reciat	tion S	vstem
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for (business/inv only - see in	depreciation estment use	(d) Recoverv	(e) Convention		ethod	(g) Depreciation deduction
19a	3-year property	361 1100	Unity - See ii	istructions)					
	5-year property								
	7-year property								
d	10-year property								
е	15-year property								
-	20-year property								
g	25-year property				25 yrs.		S	/L	
	Residential rental				27.5 yrs.	MM	S	/L	
	property				27.5 yrs.	MM	S	/L	
	Nonresidential real				39 yrs.	MM	S	/L	127,095.
	property					MM	S	/L	
	Section C - Assets	Placed in Service D	During 2018	Tax Year	Using the A	Alternative De	preci	ation	System
20a	Class life						Ť	/L	
b	12-year				12 yrs.		S	/L	
	30-year				30 yrs.	MM	S	/L	
d	40-year				40 yrs.	MM	S	/L	
Par	t IV Summary (See instruct	ctions.)					•		
	Listed property. Enter amount from	,						21	
22	Total. Add amounts from line 12	2, lines 14 through 1	7, lines 19 a	nd 20 in	column (g),	and line 21. E	nter		
	here and on the appropriate lines of	-						22	132,939

23

Form	n 4562 (2	2018)											56	-2307	147	Page 2
	rt V	,	operty (Include	automob	iles,	certair	n ot	her v	ehicle	s, cert	ain air	craft,	and	proper	ty us	ed for
I G			ent, recreation, o						0	0, 0011		o,		p. op o.	.,	
		Note: For an 24b, column	ny vehicle for whi s (a) through (c) of	ich you are Section A, a	using all of S	the steetion l	tanda B, and	rd mile I Sectio	age ra	ite or de applicable	ducting	lease (expense	e, comp	olete or	nly 24a
		Section A -	Depreciation and	Other Infor	matior	n (Cauti	on: S	ee the	instruc	tions for	imits for	passe	nger au	Itomobil	es.)	
24a	Do you	u have evidenc	e to support the bus	iness/investme	ent use	claimed	?	Yes	No	24b If "	Yes," is t	he evide	ence writt	en?	Yes	No
		(a)	(b)	(c)		<i>(</i>)		(e	e)	(f)	(g)	((h)		(i)
		property (list cles first)	Date placed in service	Business/ investment use percentage	Cost	(d) or other ba		Basis for d business/i use d	nvestment	Recovery		hod/	Depre	eciation uction	Elected s	section 179 ost
25			on allowance for ed more than 50%									_ 25				
26			e than 50% in a qu										1			
-		· , · · · · ·		%	1	-										
				%	-											
				%	-											
27	Prope	erty used 50%	or less in a qualifi		-											
	1.000			%	1						S/L -					
				%	-						S/L -				-	
				9	-						S/L -				-	
20	Add o	mounto in oo	lump (b) lines 25 (-	horo or		line 21	0000	1					-	
			lumn (h), lines 25 t lumn (i), line 26. E													
29	Auu a													. 29		
_				Section												
			r vehicles used by												rovided	vehicles
	ouremp	bloyees, first and	swer the questions in	I Section C to	-		anex	-		-	1		1			-
						a) Ide 1		(b) ehicle 2		(c) /ehicle 3		d) icle 4		(e) nicle 5		f) icle 6
30		Total business/investment miles driven during the year (don't include commuting miles)			Vehicle 1			venicie z v			ven	Vehicle 4 V				
21	-	-	iles driven during	· · · · -												
	Total	•	•	mmuting)												
32			`	•,												
~~																
33			n during the ye													
		-	2		Mara 1		X		X		X		X		X	
34			e available for		Yes	No	Yes	No) Ye	s No	Yes	No	Yes	No	Yes	No
			hours?					_								
35			used primarily by													
	than 5	5% owner or r	elated person?					_								
36	ls ar	nother vehicl	le available for	personal												
	use?.															
		Se	ction C - Questic	ons for Emp	ploye	rs Who	o Pro	vide V	ehicle	s for Us	e by Th	eir Em	ployee	es		
Ans	swer th	ese question	s to determine if	you meet a	n exce	eption t		npletin	g Sect	ion B for	vehicles	s used	by em	ployees	who a	ren't
moi	re than	5% owners o	or related persons.	See instructi	ions.	•			•							
37	Do vo	ou maintain a	a written policy s	statement th	at pro	phibits	all pe	ersonal	use o	f vehicle:	s. incluc	lina co	mmutir	na. bv	Yes	No
•••		employees?			-		-							.9, ~,		
38			a written policy s	statement th	nat pro	ohibits	perso	nal us	e of v	ehicles, d	except c	ommu	ting, by	y your		
			e instructions for v													
39	-		e of vehicles by em		-											
			nore than five vel					tain in	ormati	on from	vour er	nplove	es abo	ut the		
			and retain the info				,				,	. ,				
41			equirements conce				e dem	onstra	tion use	? See in	struction	 S				
			er to 37, 38, 39, 4													1
Pa		Amortizati		,	-, •		1.5									
		/		<i>(</i> 1)								(e	.)			
		(a)		(b) Date amortiz	vation			c)		(d		Amorti			(f)	
		Description o	of costs	bate anoniz begins		Am	nortizal	ole amou	nt	Code s	ection	peric perce		Amortiza	ation for t	his year
42	Amor	tization of cos	sts that begins duri	ng your 201	8 tax	vear (se	e inc	ruction	s).			Perce	mage			
72	7 1101		no mai begino dun		Jian	your (30	/0 113									
12	Amor	tization of acc	sts that began befo		8 toy	(0.0r										
			ts in column (f). Se				are to	report	• • • •				43			
	· orai.				5.013			. opon					44			

Form **4562** (2018)

JSA